

---

# Financial statements of Southlake Regional Health Centre

March 31, 2019

---

---

Independent Auditor's Report	1-2
Statement of operations and changes in net assets	3
Statement of re-measurement gains and losses	4
Statement of financial position	5
Statement of cash flows	6
Notes to the financial statements	7-20

---

## Independent Auditor's Report

To the Board of Directors of  
Southlake Regional Health Centre

### Opinion

We have audited the financial statements of Southlake Regional Health Centre (the "Hospital"), which comprise the statement of financial position as at March 31, 2019, and the statements of operations and changes in net assets, re-measurement gains and losses and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Hospital as at March 31, 2019, 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.

### Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards ("Canadian GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Hospital in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

### Responsibilities of Management and those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Hospital's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Hospital or to cease operations, or has no realistic alternative but to do so.

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

### Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian GAAS will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian GAAS, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Hospital's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Hospital to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

*Deloitte LLP*

Chartered Professional Accountants  
Licensed Public Accountants  
June 13, 2019

## Southlake Regional Health Centre

### Statement of operations and changes in net assets

Year ended March 31, 2019

(In thousands of dollars)

	2019	2018
	\$	\$
<b>Revenue</b>		
Ontario Ministry of Health and Long-Term Care and Central Local Health Integration Network	<b>331,750</b>	317,297
Cancer Care Ontario	<b>31,066</b>	27,955
Preferred accommodation and other	<b>25,752</b>	24,239
Patient care	<b>25,170</b>	23,795
Specified programs	<b>5,693</b>	4,302
Amortization of deferred equipment grants and donations	<b>4,644</b>	5,308
Gain on disposal of capital assets	<b>461</b>	112
	<b>424,536</b>	403,008
<b>Expenses</b>		
Salaries, wages and employee benefits	<b>280,171</b>	271,738
Supplies and other	<b>60,169</b>	54,615
Medical and surgical supplies	<b>42,153</b>	42,086
Drugs	<b>21,234</b>	17,539
Specified programs	<b>5,703</b>	4,319
Amortization of furniture and equipment	<b>9,865</b>	7,889
	<b>419,295</b>	398,186
Excess of revenue over expenses		
per Hospital Service Accountability Agreement	<b>5,241</b>	4,822
Amortization of deferred building grants and donations	<b>6,248</b>	6,412
Amortization of buildings and land improvements	<b>(9,713)</b>	(9,439)
Interest expense	<b>(1,619)</b>	(1,499)
Excess of revenue over expenses	<b>157</b>	296
Net assets, beginning of year	<b>22,217</b>	21,921
<b>Net assets, end of year</b>	<b>22,374</b>	22,217

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

**Southlake Regional Health Centre**  
**Statement of re-measurement gains and losses**

Year ended March 31, 2019  
(In thousands of dollars)

	<b>2019</b>	2018
	<b>\$</b>	\$
Accumulated re-measurement losses at beginning of year	<b>(2,812)</b>	(4,510)
Unrealized gains attributable to derivatives - interest rate swap	<b>487</b>	1,788
Unrealized losses attributable to foreign exchange	<b>(54)</b>	(90)
Accumulated re-measurement losses at end of year	<b>(2,379)</b>	(2,812)

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

# Southlake Regional Health Centre

## Statement of financial position

As at March 31, 2019

(In thousands of dollars)

	Notes	2019 \$	2018 \$
<b>Assets</b>			
Current assets			
Cash		21,538	12,743
Accounts receivable	4	27,997	21,561
Inventories		2,551	2,570
Prepaid expenses		5,211	5,057
		<b>57,297</b>	41,931
Restricted cash	5	177	3,693
Investment in joint venture	7	613	321
Capital assets	8	287,635	285,631
		<b>345,722</b>	331,576
<b>Liabilities</b>			
Current liabilities			
Accounts payable and accrued liabilities	12	85,531	92,819
Short-term borrowing	3	28,000	—
Current portion of long-term debt	9	3,802	3,604
		<b>117,333</b>	96,423
Long-term liabilities			
Deferred capital grants and donations	10	172,039	176,601
Long-term debt	9	17,294	21,097
Derivative liabilities	9(d)	2,325	2,722
Accrued post-retirement benefits	11	16,736	15,328
		<b>325,727</b>	312,171
Contingent liabilities	15		
<b>Net assets</b>		<b>22,374</b>	22,217
Accumulated re-measurement losses		(2,379)	(2,812)
		<b>19,995</b>	19,405
		<b>345,722</b>	331,576

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

Approved by the Board



\_\_\_\_\_, Board Chair



\_\_\_\_\_, Treasurer

## Southlake Regional Health Centre

### Statement of cash flows

Year ended March 31, 2019

(In thousands of dollars)

	2019	2018
	\$	\$
Notes		
<b>Operating activities</b>		
Excess of revenue over expenses for the year	157	296
Add (deduct) items not affecting cash		
Amortization of capital assets	19,578	17,328
Amortization of deferred capital grants and donations	(10,892)	(11,720)
Post-retirement benefits	2,508	2,405
Gain on disposal of capital assets	(461)	(112)
Unrealized currency translation losses	36	(90)
	<b>10,926</b>	8,107
Net change in non-cash working capital balances related to operations		
Accounts receivable	(6,436)	1,570
Inventories	19	(306)
Prepaid expenses	(154)	(1,412)
Accounts payable and accrued liabilities	(6,076)	8,608
	<b>(1,721)</b>	16,567
<b>Investing activity</b>		
Investment in Joint Venture	(292)	(105)
<b>Capital activities</b>		
Net capital contributions received from		
Southlake Regional Health Centre Foundation	3,581	9,589
Ontario Ministry of Health and Long-Term Care/Other	2,227	1,373
Cancer Care Ontario	522	1,118
Purchase of capital assets, net of accounts payable and accrued liabilities related to capital (\$1,212 million in 2019; \$1,586 million in 2018)	(22,493)	(46,593)
Restricted cash received for capital	3,516	2,949
Proceeds from sale of capital assets	160	114
	<b>(12,487)</b>	(31,450)
<b>Financing activities</b>		
Proceeds from short-term borrowing	28,000	—
Repayments of long-term debt	(3,605)	(3,416)
Post-retirement payments	(1,100)	(967)
	<b>23,295</b>	(4,383)
Net increase (decrease) in cash during the year	8,795	(19,371)
Cash, beginning of year	12,743	32,114
<b>Cash, end of year</b>	<b>21,538</b>	12,743
<b>Other information</b>		
Total interest paid	1,619	1,499

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

# Southlake Regional Health Centre

## Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

---

### 1. Status and nature of activities

Southlake Regional Health Centre (the "Hospital"), incorporated without share capital under the laws of the Province of Ontario, operates a public hospital pursuant to The Public Hospitals Act. The Hospital receives the majority of its operating revenue from the Ontario Ministry of Health and Long-Term Care (the "Ministry") in amounts determined by the Ministry's annual review and approval process. The Hospital is a registered charity under the Income Tax Act (Canada) and, as such, is exempt from income taxes.

### 2. Significant accounting policies

#### *Basis of presentation*

The financial statements of the Hospital have been prepared by management in accordance with Canadian public sector accounting standards including the 4200 series of standards for government not-for-profit organizations, as issued by the Public Sector Accounting Board. These financial statements do not include the activities of the Southlake Residential Care Village (the "Village"), nor the Southlake Regional Health Centre Foundation (the "Foundation"), as the respective organizations maintain their own accounts and report separately from the Hospital to their own governing bodies.

The significant accounting policies are as follows:

#### *Financial instruments*

All financial instruments reported on the statement of financial position of the Hospital are classified as follows:

Financial instrument	Classification
Cash	Amortized cost
Accounts receivable	Amortized cost
Accounts payable and accrued liabilities	Amortized cost
Short-term borrowing	Amortized cost
Long-term debt	Amortized cost
Derivative liabilities	Fair value

Financial instruments measured at fair value are initially recognized at cost and subsequently carried at fair value. Unrealized changes in fair value are recognized in the statement of re-measurement gains and losses until they are realized, when they are transferred to the statement of operations and changes in net assets. Transaction costs related to financial instruments in the fair value category are expensed as incurred.

Where a decline in fair value is determined to be other than temporary, the amount of the loss is removed from accumulated re-measurement gains and losses, and recognized into the statement of operations and changes in net assets. On sale or disposal, the amount held in accumulated re-measurement gains and losses associated with that instrument is removed from accumulated re-measurement losses and recognized in the statement of operations and changes in net assets.

Financial instruments measured at amortized cost are initially recognized at cost, and subsequently carried at amortized cost using the effective interest rate method, less any impairment losses on financial assets. Transaction costs related to financial instruments in the amortized cost category are added to the carrying value of the instrument.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

---

## 2. Significant accounting policies (continued)

### *Financial instruments (continued)*

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

### *Revenue recognition*

The Hospital follows the deferral method of accounting for contributions, which include donations and grants. 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 recognized. Grants and donations received for capital purposes are included in deferred capital grants and donations and are amortized on the same basis as the related depreciable capital assets.

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 (the "Ministry"). Operating funding is recorded as revenue in the period to which it relates. 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 extent to which the Ministry funding has been received, with the stipulated requirement that the Hospital provides specific services, and these services have not yet been provided, the funding is deferred until such time as the services are performed and the monies spent. Some Ministry revenue is tied to patient volume and activity. Revenue is, therefore, based on actual patient volumes.

### *Inventories*

Inventories are valued at the lower of cost (on a weighted average cost basis) and replacement cost.

### *Investment in joint venture*

Investments in jointly controlled entities are accounted for using the modified equity method, whereby the investment is initially recorded at cost and adjusted thereafter to recognize the Hospital's share of the jointly controlled entity's net surplus or deficit for its fiscal year ending within the Hospital's fiscal year. Any distributions received are accounted for as a reduction in the investment.

### *Capital assets*

Purchased capital assets are recorded at historical cost less accumulated amortization.

Contributed capital assets are recorded at fair value at the date of the contribution.

Amortization is provided on a straight-line basis at rates based on the estimated service lives of the assets at the following annual rates:

Land improvements	5%
Buildings	2% to 2.5%
Leasehold improvements	lease term
Furniture and equipment	5% to 33.3%

Projects in process comprise of direct construction and development costs. Interest costs, net of related interest income, are capitalized during the construction period.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

---

## 2. Significant accounting policies (continued)

### *Capital assets (continued)*

Amortization is not recorded until construction is substantially complete and the assets are ready for productive use.

### *Employee benefits plans*

The Hospital provides defined retirement and post-employment benefits. The Hospital has adopted the following policies with respect to accounting for these employee benefits:

#### *(a) Multi-employer plan*

Employees of the Hospital are eligible to be members of the Healthcare of Ontario Pension Plan ("HOOPP"), which is a multi-employer best five consecutive year average pay defined benefit pension plan. The multi-employer plan is accounted for as a deferred contribution plan as there is not sufficient information to apply defined benefit plan accounting. Contributions to the multi-employer defined benefit plan are expensed when due. The most recent actuarial valuation of the plan as at December 31, 2018 indicates the plan is fully funded.

#### *(b) Accrued post-retirement benefits*

The Hospital accrues its obligations under non-pension employee benefits as full-time employees render services. The cost of non-pension post-retirement benefits earned by employees is actuarially determined using the projected benefit method pro-rated on service and management's best estimate assumptions of retirement ages of employees and expected health care costs. Actuarial gains or losses are amortized over the average remaining service period of the active employees. The average remaining service period of active employees is 15.9 years. Future cost escalation affects the amount of employee future benefits. The accrued benefit obligation related to employee benefits is discounted using current interest rates based on the Hospital's cost of borrowing.

Adjustments arising from plan amendments are recognized in the year that the plan amendments occur.

### *Contributed materials and services*

Southlake Regional Health Centre has other individuals and organizations that volunteer numerous valuable hours to assist the Hospital in carrying out certain aspects of its service delivery activities. The fair value of these contributed services is not readily determinable and, as such, is not reflected in these financial statements. Contributed materials are also not recognized in these financial statements.

### *Use of estimates*

The preparation of financial statements in conformity with Canadian public sector accounting standards 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 amounts could differ from those estimates. Accounts involving significant estimates include accounts receivable, amortization of capital assets, deferred capital grants, accrued liabilities, accrued post-retirement benefits and derivatives.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

---

## 2. Significant accounting policies (continued)

### *Use of estimates (continued)*

Revenue recognized from the Ministry has a number of estimates. The Hospital has entered into a Hospital Service Accountability Agreement ("HSAA") that sets out the rights and obligations of the two parties with respect to funding provided to the Hospital by the Ministry for fiscal 2008/09 and 2009/10, amended to include 2010/11 through 2019/20. The HSAA sets out certain performance standards and obligations that establish acceptable results for the Hospital's performance in a number of areas.

If the Hospital does not meet its performance standards or obligations, the Ministry has the right to adjust funding received by the Hospital. The Ministry is not required to communicate certain funding adjustments until after the submission of year-end data. Since this data is not submitted until after the completion of the financial statements, the amount of Ministry funding received during the year may be increased or decreased subsequent to year-end. The amount of revenue recognized in these financial statements represents management's best estimates of amounts that have been earned during the year.

## 3. Cash and short-term borrowing

The Hospital has an operating line of credit to a maximum of \$15 million, available by overdraft, fixed rate operating advances or standby letters of credit. This Credit Facility bears interest at the bank's prime rate plus 50 basis points. As at March 31, 2019, there was nil (nil in 2018) in borrowings under this Credit Facility. In addition, the Hospital has two standby letters of credit in the amounts of \$100 thousand and \$500 thousand outstanding. As at March 31, 2019, there were nil amounts (nil in 2018) applied against these letters of credit.

The Hospital secured a Credit Facility in the amount of \$10 million to ensure availability of funds if required under the Capital Fund Sharing Agreement. Effective January 1, 2019 the authorized amount was reduced to \$712 thousand. As at March 31, 2019, there was nil (nil in 2018) in borrowings under this credit facility. The stand-by fee of 35 basis points was waived this year.

The Hospital has secured a Credit Facility in the amount of \$40 million, referred to as the HIS Project Development Loan to assist with infrastructure investments, installation and implementation of the new Hospital Information System ("HIS"). This is a Demand Non Revolving Loan available for a period of twelve months following the initial advance. Floating Rate Canadian dollars are advanced by way of Banker's Acceptances in minimum drawdowns with terms of 30 to 90 days, for a maximum of 15 draws. The Arrangement Fee on the Face Value of the HIS Project Take-Out Loan is 10 basis points. As at March 31, 2019 there was \$28 million (nil in 2018) in borrowings under this Credit Facility.

The Hospital secured a Credit Facility in the amount of \$40 million, referred to as the HIS Project Take-Out Loan to repay the HIS Project Development Loan and provide long-term financing for the HIS Project. This Facility is a Committed Non Revolving Loan and will be advanced in one lump sum. Amortization is up to 12 years with blended payments of Principal plus Interest. As at March 31, 2019 there was nil (nil in 2018) in borrowings under this Credit Facility.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

#### 4. Accounts receivable

Accounts receivable consist of the following:

	<b>2019</b>	2018
	<b>\$</b>	\$
Ontario Ministry of Health and Long-Term Care and Central Local Health Integration Network	<b>2,466</b>	2,649
Cancer Care Ontario	<b>767</b>	2,096
OHIP	<b>2,874</b>	2,053
Vendor rebates	<b>12,628</b>	5,686
Foundation	<b>2,215</b>	2,185
Insurers, patients and other	<b>7,779</b>	7,463
	<b>28,729</b>	22,132
Less: allowance for doubtful accounts	<b>732</b>	571
	<b>27,997</b>	21,561

#### 5. Southlake Regional Health Centre Foundation

The Foundation, an independent organization, raises funds and holds resources primarily for the benefit of the Hospital. Amounts received from the Foundation are externally restricted.

Accordingly, capital grants and donations are deferred and are recognized when the related expenses are recognized. During the year ended March 31, 2019, the Foundation authorized grants to the Hospital of \$3.8 million (\$8 million in 2018) substantially for capital projects and equipment. In addition, the Foundation authorized grants of \$182 thousand (\$212 thousand in 2018) toward Hospital operations and \$3.5 million was applied as a draw down on the \$8.2 million advanced from prior years by the Foundation for diagnostic imaging equipment.

#### 6. Southlake Residential Care Village

Southlake Residential Care Village runs a long-term care facility of 192 beds which the Hospital helps manage. The Village is a registered charity under the Income Tax Act and, as such, is exempt from income taxes.

The Hospital provided the Village with a long-term loan of \$4.5 million effective February 26, 2002 with interest payable monthly at prime minus 2.5%. \$475 thousand bears interest at the bank's prime rate plus 0.5% until the Village obtains permanent financing. In 2018/19 \$150 thousand (\$150 thousand in 2018) was paid toward the long-term loan.

In addition, to assist with the Village's capital financing arrangement, the Hospital has secured a revolving six month standby letter of credit in favour of its lender for \$500 thousand. All direct costs and financing fees related to the letter of credit are the responsibility of the Village.

The Hospital entered into a 40-year Ground Lease Agreement with the Village, commencing August 1, 2003, to accommodate the construction of a new long-term care facility on the Hospital's property. The annual lease payment shall be no less than \$75 thousand which compensates the Hospital for parking revenue lost or rendered unusable as a result of the new facility. Pursuant to an agreement between the Village and its lender, the Hospital has agreed to defer rental payments on the land lease effective January 2005 until such time that the additional advance to the Village is repaid in full and the debt to service coverage ratio of the Village reached 1.20 to 1.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

#### 6. Southlake Residential Care Village (continued)

The Hospital also entered into a sublease with the Village, effective November 21, 2003 for 40 years for the first and fifth floors (approximately 35,500 sq. ft.) of the Village facility for hospital use. Annual lease payments are \$718 thousand.

#### 7. Investment in joint venture

The Hospital has a 50% interest in Southlake ProResp Inc, a joint venture with ProResp Inc. Southlake ProResp is a supplier of home oxygen and other respiratory care products. Net investment income of \$104 thousand (\$105 thousand in 2018) has been included in the statement of operations and changes in net assets.

#### 8. Capital assets

Capital assets consist of the following:

	<b>Cost</b>	<b>Accumulated amortization</b>	<b>2019 Net book value</b>	<b>2018 Net book value</b>
	\$	\$	\$	\$
Land	7,215	—	7,215	7,215
Land improvements	4,412	3,921	491	674
Buildings	327,300	126,184	201,116	204,194
Leasehold improvements	12,074	5,813	6,261	6,654
Furniture and equipment	231,309	161,005	70,304	30,261
Projects in process	2,248	—	2,248	36,633
	<b>584,558</b>	<b>296,923</b>	<b>287,635</b>	<b>285,631</b>

#### 9. Long-term debt

Summary

	<b>2019</b>	<b>2018</b>
	\$	\$
Redevelopment bank loan (a)	1,750	1,652
Parking garage bank loan (b)	1,882	1,790
Building bank loan (c)	170	162
Current portion	<b>3,802</b>	<b>3,604</b>
Redevelopment bank loan (a)	10,246	11,997
Parking garage bank loan (b)	4,235	6,117
Building bank loan (c)	2,813	2,983
Long-term portion	<b>17,294</b>	<b>21,097</b>

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

#### 9. Long-term debt (continued)

##### *Principal repayments summary*

	Redevelopment Phase I	Redevelopment Phase II	Parking garage Bank loan	Building Bank loan	Total
	\$	\$	\$	\$	\$
2020 Current portion	990	760	1,882	170	3,802
2021	1,056	799	1,978	179	4,012
2022	1,127	840	2,079	188	4,234
2023	1,203	882	178	198	2,461
2024	1,284	926	—	208	2,418
2025-2032	222	1,907	—	2,040	4,169
	5,882	6,114	6,117	2,983	21,096

##### *(a) Redevelopment bank loan*

The Hospital has a non-revolving loan of \$5.9 million (\$6.8 million in 2018) for Phase I Redevelopment and has entered into a swap agreement related to this loan whereby the floating rate debt is swapped against the fixed rate debt with an interest rate of 6.52% and settled on a net basis. This agreement expires with the maturity of the loan on June 1, 2024.

The Hospital has a non-revolving loan of \$6.1 million (\$6.8 million in 2018) for Phase II Redevelopment and has entered into a swap agreement related to this loan whereby the floating rate debt is swapped against the fixed rate debt with the interest rate of 4.92% and settled on a net basis. This agreement expires with the maturity of the loan on March 2, 2026.

##### *(b) Parking garage bank loan*

The Hospital has a non-revolving reducing term loan for \$6.1 million (\$7.9 million in 2018) for the construction of the parking garage. Interest on the loan is at the bank's prime rate and repayments are to be made in equal monthly installments of principal plus interest, with the final installment due May 1, 2022.

The Hospital has entered into a swap agreement related to this loan whereby the floating rate debt (prime plus 25 basis points) is swapped against the fixed rate debt with an interest rate of 5.00% and settled on a net basis. This agreement expires with the maturity of the loan on May 1, 2022.

##### *(c) Building bank loan*

The Hospital has a non-revolving or fixed rate term loan for \$3.0 million (\$3.1 million in 2018) for the acquisition of a building. Interest on the loan is at the bank's prime rate and repayments are to be made in equal monthly installments of principal plus interest, with the final installment due February 2, 2032.

The Hospital has entered into a swap agreement related to this loan whereby the floating rate debt (prime plus 25 basis points) is swapped against the fixed rate debt with an interest rate of 4.98% and settled on a net basis. This agreement expires with the maturity of the loan on February 2, 2032.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

---

#### 9. Long-term debt (continued)

(d) The Hospital enters into interest rate swaps in order to reduce the impact of fluctuating interest rates on its long-term debt. These swap agreements require periodic exchange of payments without the exchange of the notional principal amount on which the payments are based.

The Hospital has entered into interest rate swap contracts with banks in order to hedge its variability in future interest payments relating to its long-term debt. These swaps effectively lock-in the interest rate applicable on the long-term debt.

Notional amount represents the contract amounts to which interest rates are applied to calculate the cash flows to be exchanged. The notional amount of the Hospital's interest rate swaps as of March 31, 2019 is \$21.1 million (\$24.7 million in 2018).

Fair value of the interest rate swaps was calculated using the discounted cash flow method. Fair value as of March 31, 2019 of these interest rate swaps is \$2.3 million (\$2.7 million in 2018) and is reflected as a liability on the statement of financial position.

#### 10. Deferred grants and donations

Deferred grants and donations represent the unamortized balance of contributions received for the purchase of capital assets in the amount of \$172 million (\$176.5 million in 2018) and emergency preparedness inventory of nil(\$0.09 million in 2018).

Changes in the deferred grants and donations balance are as follows:

	2019 \$	2018 \$
Balance, beginning of year	176,601	176,241
Net contributions received during the year		
Southlake Regional Health Centre Foundation	3,581	9,589
Ontario Ministry of Health and Long-Term Care/Other	2,227	1,373
Cancer Care Ontario	522	1,118
	182,931	188,321
Amortization of deferred grants and donations	(10,892)	(11,720)
Balance, end of year	172,039	176,601

#### 11. Pension and other post-retirement benefit plans

The Hospital is a member of the Healthcare of Ontario Pension Plan (the "Plan"), which is a multi-employer defined benefit pension plan available to all eligible employees of the participating member of the Ontario Hospital Association. Plan members will receive benefits based on the length of service and on the average of annualized earnings during the five consecutive years prior to retirement, termination or death that provide the highest earnings.

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

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

#### 11. Pension and other post-retirement benefit plans (continued)

Pension expense is based on Plan management's best estimates, in consultation with its actuaries, of the amount, together with the 6.9% of salary contributed by employees (9.2% of salary above the years maximum pensionable earnings), 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 employee's contributions. The employer currently contributes 126% of the employee's contribution.

Variances between actuarial funding estimates and actual experience may be material and any differences are generally to be funded by the participating members. Contributions to the Plan made during the year by the Hospital on behalf of its employees amounted to \$17.7 million (\$16.3 million in 2018) and are included in salaries, wages and employee benefits expense in the statement of operations and change in net assets.

The Hospital's non-pension post-retirement benefit plans are comprised of medical, dental and life insurance coverage for certain groups of full-time employees who have retired from the Hospital and are between the ages of 55 and 65. Spouses of eligible retirees are covered by the plans. The most recent actuarial valuation of post-retirement benefits was March 31, 2019.

Information for the Hospital's non-pension post-retirement benefit plans, and reconciliation to the accrued benefit liability, is as follows:

##### *Post-retirement benefit liability*

	<b>2019</b>	2018
	<b>\$</b>	\$
Accrued benefit obligation, beginning of year	<b>20,730</b>	19,425
Current period benefit cost	<b>1,405</b>	1,341
Interest on accrued benefits	<b>691</b>	669
Benefit payments	<b>(1,100)</b>	(967)
Actuarial (losses) / gains	<b>(2,885)</b>	262
Accrued benefit obligation, end of year	<b>18,841</b>	20,730
Accrued post-retirement benefit obligation, end of year	<b>18,841</b>	20,730
Less: unamortized actuarial (losses)	<b>(2,105)</b>	(5,402)
	<b>16,736</b>	15,328

Included in the statement of operations and changes in net assets is an amount of \$2.5 million (\$2.4 million in 2018) regarding employee future benefits. This amount is comprised of:

	<b>2019</b>	2018
	<b>\$</b>	\$
Total benefit cost recognized		
Current period benefit cost	<b>1,405</b>	1,341
Amortization of actuarial losses	<b>412</b>	395
Retirement benefit interest expense	<b>691</b>	669
	<b>2,508</b>	2,405

Employer contributions for these plans were \$1.1 million (\$0.967 million in 2018).

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

#### 11. Pension and other post-retirement benefit plans (continued)

##### *Post-retirement benefit liability (continued)*

The significant actuarial assumptions adopted in estimating the Hospital's accrued benefit obligations are as follows:

	2019 \$	2018 \$
Discount rate to determine accrued post-retirement benefit obligation	3.20%	3.30%
Extended healthcare cost escalations, decreasing by 4% per annum over 20 years per annum thereafter	6.00%	6.25%
Dental cost increases	4.00%	3.00%
Expected average remaining service life of employees	14.7	15.9

#### 12. Accounts payable and accrued liabilities

Accounts payable and accrued liabilities consist of the following:

	2019 \$	2018 \$
Vendor payables and accruals	28,098	38,519
Accrued liability - salaries/wages & vacation earned	40,122	41,196
Employee/employer remittances payable	8,413	6,134
Deferred operating revenue	8,215	5,752
Other	683	1,218
	<b>85,531</b>	<b>92,819</b>

#### 13. Commitments

- (a) The Hospital has entered into a 30-year lease for a Medical Arts Building for use in part by the Hospital, a family health team, physician offices and retail. The lease provides for delivery of the building on a "turn-key" basis and includes three five-year renewal options. On completion of each ten-year term, the rent will be adjusted by increments equal to the Consumer Price Index.
- (b) The Hospital has entered into a sale leaseback agreement with landlord of the Medical Arts Building relating to the respective leasehold improvements. The lease commenced on December 21, 2010. The term of the lease is co-terminus with the lease in the Medical Arts Building.

#### 14. Contingent liabilities

- (a) The nature of the Hospital's activities is such that there is usually litigation pending or in progress at any one time. With respect to claims as at March 31, 2019, it is management's position that the Hospital has valid defenses and appropriate insurance coverage in place. In the event any claims are successful, management believes such claims are not expected to have a material effect on the Hospital's financial position.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

---

#### 14. Contingent liabilities (continued)

- (b) A group of healthcare institutions, including the Hospital, are members 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 were members. As at March 31, 2019, no assessments have been received.

#### 15. Guarantees

In the normal course of business, the Hospital has entered into agreements that meet the definition of a guarantee and may include indemnities in favor of third parties. The Hospital's primary guarantees are as follows:

- (a) Indemnity has been provided to all directors and officers of the Hospital for various items including, but not limited to, all costs to settle suits or actions due to association with the Hospital, subject to certain restrictions. The Hospital has purchased directors' and officers' liability insurance to mitigate the cost of any potential future suits or actions. The term of indemnification is not explicitly defined, but is limited to the period over which the indemnified party served as a director or officer of the Hospital. The maximum amount of any potential future payment cannot be reasonably estimated.
- (b) In the normal course of business, the Hospital has entered into agreements that include indemnities in favour of third parties. These indemnification agreements may require the Hospital to compensate counterparties for losses incurred by the counterparties as a result of breaches in representation and regulations or as a result of litigation claims or statutory sanctions that may be suffered by the counterparty as a consequence of the transaction.

The nature of these indemnification agreements prevents the Hospital from making a reasonable estimate of the maximum exposure due to the difficulties in assessing the amount of liability which stems from the unpredictability of future events and the unlimited coverage offered to counterparties. Historically, the Hospital has not made any significant payments under such or similar indemnification agreements and, therefore, no amount has been accrued in the statement of financial position with respect to these agreements.

#### 16. Financial instruments and risk management policy

The Hospital is exposed to various risks through its financial instruments. The following analysis provides a measure of the risks at the Hospital.

##### *Credit risk*

Credit risk relates to the potential that one party to a financial instrument will fail to discharge an obligation and incur a financial loss. The Hospital is exposed to credit risk on its accounts receivable. For patient accounts receivable, the Hospital maintains an allowance for doubtful accounts, which reduces the receivable to its estimated realizable value. The receivable is adjusted on a monthly basis. The loan receivable from the village is reviewed regularly to determine if impairment exists and a provision is required. There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

---

#### 16. Financial instruments and risk management policy (continued)

##### *Currency risk*

Currency risk relates to the Hospital operating in different currencies and converting non-Canadian monies at different points in time when adverse changes in foreign currency rates occur. The Hospital does not have any material transactions of financial instruments denominated in foreign currencies. There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

##### *Fair values*

The fair value of cash, accounts receivable, accounts payable and accrued liabilities approximates their carrying values due to their short-term maturity. The fair value of long-term debt approximates its carrying value due to interest rate swaps which have been entered into for each debt instrument that account for the change in market values related to fixed rates.

The fair value of guarantees and letters of credit are based on fees currently charged for similar agreements or on the estimated cost to terminate them or otherwise settle the obligations with the counterparties at the reported borrowing date. In situations in which there is no market for these guarantees and they were issued without explicit costs, it is not practicable to determine their fair value with sufficient reliability. Unless otherwise noted, it is management's opinion that the Hospital is not subject to significant interest or currency risk arising from these instruments.

The fair values of the interest rate swaps are determined using the discounted cash flow method.

##### *Fair value hierarchy*

The following table provides an analysis of financial instruments that are measured subsequent to initial recognition at fair value, grouped into Levels 1 to 3 based on the degree to which the fair value is observable:

- Level 1 fair value measurements are those derived from quoted prices (unadjusted) in active markets for identical assets or liabilities;
- Level 2 fair value measurements are those derived from inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly (i.e. as prices) or indirectly (i.e. derived from prices); and,
- Level 3 fair value measurements are those derived from valuation techniques that include inputs for the asset or liability that are not based on observable market data (unobservable inputs).

The fair value hierarchy requires the use of observable market inputs whenever such inputs exist. A financial instrument is classified to the lowest level of the hierarchy for which a significant input has been considered in measuring fair value.

## Southlake Regional Health Centre

### Notes to the financial statements

March 31, 2019

(Tabular amounts in thousands of dollars)

#### 16. Financial instruments and risk management policy (continued)

##### *Fair value hierarchy (continued)*

The following table presents the financial instruments recorded at fair value in the statement of financial position, classified using the fair value hierarchy described above:

Financial liabilities at fair value as at:

	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>2019</b>
	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>Total</b>
				<b>\$</b>
Derivative liabilities	—	<b>2,325</b>	—	<b>2,325</b>

  

	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>2018</b>
	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>Total</b>
				<b>\$</b>
Derivative liabilities	—	<b>2,722</b>	—	<b>2,722</b>

There have been no movements between levels for the year ended March 31, 2019.

For fair value measurements in Level 2 of the fair value hierarchy, a reconciliation from the beginning balances to the ending balances, disclosing changes during the period has been provided in the table below:

	<b>2019</b>	2018
	<b>\$</b>	<b>\$</b>
Derivative liabilities		
Balance, beginning of year	<b>2,722</b>	4,510
Changes during the period		
Gain for the period recognized in the statement of re-measurement gains and losses	<b>(397)</b>	(1,788)
Balance, end of year	<b>2,325</b>	<b>2,722</b>

Interest rate risk is the potential for financial loss caused by fluctuations in fair value or future cash flows of financial instruments because of changes in market interest rates. The Hospital is exposed to interest rate risk on its short-term borrowing, long-term debt and bank indebtedness. For its long term debt, the Hospital has entered into interest rate swap agreements in order to manage the impact of fluctuating interest rates. The Hospital's policy is not to utilize derivative instruments for trading or speculative purposes. Therefore, fluctuations in market interest rates would not impact future cash flows and operations relating to the long term debt.

Interest rate risk related to the short-term borrowing is mitigated given the short time to maturity of the debt. Furthermore, the Hospital has the option of converting this debt to long-term at its convenience.

As at March 31, 2019 the bank indebtedness was nil (nil in 2018) and is monitored on a daily basis.

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

## **Southlake Regional Health Centre**

### **Notes to the financial statements**

March 31, 2019

(Tabular amounts in thousands of dollars)

---

#### **17. Related party transactions**

The related parties and the nature of their transactions are identified in (Note 5) Southlake Regional Health Centre Foundation, (Note 6) Southlake Residential Care Village, (Note 7) Southlake ProResp Inc., and (Note 14) Commitments. All the transactions were monetary in nature and recorded at the exchange value.