

Financial Statements of

**BOARD OF HEALTH FOR THE  
SADBURY & DISTRICT  
HEALTH UNIT**

**(OPERATING AS PUBLIC HEALTH SADBURY  
& DISTRICTS)**

And Independent Auditor's Report thereon

Year ended December 31, 2024



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## **INDEPENDENT AUDITOR'S REPORT**

To the Board Members of the Board of Health for the Sudbury & District Health Unit (operating as Public Health Sudbury & Districts), Members of Council, Inhabitants and Ratepayers of the Participating Municipalities of the Board of Health for the Sudbury & District Health Unit

### ***Opinion***

We have audited the accompanying financial statements of The Board of Health for the Sudbury & District Health Unit operating as Public Health Sudbury & Districts (the Entity), which comprise:

- the statement of financial position as at December 31, 2024
- the statement of operations and accumulated surplus for the year then ended
- the statement of changes in net financial assets for the year then ended
- the statement of cash flows for the year then ended
- and notes to the financial statements, including a summary of significant accounting policy information

(Hereinafter referred to as the “financial statements”)

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Entity as at December 31, 2024, and its results of operations, its changes in net financial 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. 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 Entity 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 Entity'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 Entity or to cease operations, or has no realistic alternative but to do so.

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

## ***Auditor's Responsibility for the Audit of the Financial Statements***

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion.

Reasonable assurance is a high level of assurance but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit.

We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion.

The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Entity's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.



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- 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 Entity'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 Entity 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 represents the underlying transactions and events in a manner that achieves fair presentation.
- 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.

A handwritten signature in black ink that reads 'KPMG LLP'. The signature is written in a cursive, slightly slanted style. Below the signature is a horizontal line that starts under the 'K' and extends to the right, ending under the 'P'.

Chartered Professional Accountants, Licensed Public Accountants

Sudbury, Canada

June 30, 2025

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Statement of Financial Position

December 31, 2024, with comparative information for 2023

	2024	2023
<b>Financial assets</b>		
Cash and cash equivalents	\$ 14,806,939	\$ 10,027,872
Accounts receivable	315,050	529,551
Receivable from the Province of Ontario	51,765	34,220
	15,173,754	10,591,643
<b>Financial liabilities</b>		
Accounts payable and accrued liabilities	2,602,045	2,769,256
Deferred revenue	168,876	356,652
Payable to the Province of Ontario	4,112,197	1,024,127
Employee benefit obligations (note 3)	3,668,805	3,770,170
	10,551,923	7,920,205
Net financial assets	4,621,831	2,671,438
<b>Non-financial assets:</b>		
Tangible capital assets (note 4)	14,671,650	15,208,514
Prepaid expenses	458,156	459,492
	15,129,806	15,668,006
Commitments and contingencies (note 5)		
Accumulated surplus (note 6)	\$ 19,751,637	\$ 18,339,444

See accompanying notes to financial statements.

On behalf of the Board:



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Board Member

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Statement of Operations and Accumulated Surplus

Year ended December 31, 2024, with comparative information for 2023

	2024 Budget (note 11)	2024 Actual	2023 Actual
Revenue (note 10):			
Provincial grants	\$ 22,736,085	\$ 24,077,037	\$ 27,390,098
Per capita revenue from municipalities (note 8)	10,548,731	10,548,731	9,418,510
Other:			
Plumbing inspections and licenses	317,000	251,127	357,806
Interest	160,000	568,649	546,275
Other	489,252	377,251	442,571
	34,251,068	35,822,795	38,155,260
Expenses (note 10):			
Salaries and wages	21,386,319	21,712,110	24,816,191
Benefits (note 7)	7,249,268	6,636,188	6,771,029
Administration (note 9)	2,850,412	2,941,588	2,920,027
Supplies and materials	1,089,181	935,158	1,141,367
Amortization of tangible capital assets (note 4)	1,144,542	1,111,478	1,144,542
Small operational equipment	1,370,781	838,150	930,947
Transportation	305,107	235,930	291,271
	35,395,610	34,410,602	38,015,374
Annual surplus (deficit)	(1,144,542)	1,412,193	139,886
Accumulated surplus, beginning of year	18,339,444	18,339,444	18,199,558
Accumulated surplus, end of year	\$ 17,194,902	\$ 19,751,637	\$ 18,339,444

See accompanying notes to financial statements.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Statement of Changes in Net Financial Assets

Year ended December 31, 2024, with comparative information for 2023

	2024	2023
Annual surplus	\$ 1,412,193	\$ 139,886
Purchase of tangible capital assets	(574,614)	(1,199,108)
Amortization of tangible capital assets	1,111,478	1,144,542
Change in prepaid expenses	1,336	(39,332)
Change in net financial assets	1,950,393	45,988
Net financial assets, beginning of year	2,671,438	2,625,450
Net financial assets, end of year	\$ 4,621,831	\$ 2,671,438

See accompanying notes to financial statements.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Statement of Cash Flows

Year ended December 31, 2024, with comparative information for 2023

	2024	2023
Cash provided by (used in):		
Cash flows from operating activities:		
Annual surplus	\$ 1,412,193	\$ 139,886
Adjustments for:		
Amortization of tangible capital assets	1,111,478	1,144,542
Change in employee benefit obligations	(101,365)	(164,712)
	<u>2,422,306</u>	<u>1,119,716</u>
Changes in non-cash working capital:		
Decrease in accounts receivable	214,501	1,276,254
Decrease (increase) in receivable from the Province of Ontario	(17,545)	953,553
Decrease in accounts payable and accrued liabilities	(167,211)	(1,064,087)
Decrease in deferred revenue	(187,776)	(1,115,634)
Increase (decrease) in payable to the Province of Ontario	3,088,070	(4,619,755)
Decrease (increase) in prepaid expenses	1,336	(39,332)
	<u>5,353,681</u>	<u>(3,489,285)</u>
Cash flows from investing activity:		
Purchase of tangible capital assets	(574,614)	(1,199,108)
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Increase (decrease) in cash and cash equivalents	4,779,067	(4,688,393)
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Cash and cash equivalents, beginning of year	10,027,872	14,716,265
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Cash and cash equivalents, end of year	\$ 14,806,939	\$ 10,027,872

See accompanying notes to financial statements.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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The Board of Health for the Sudbury & District Health Unit, (operating as Public Health Sudbury & Districts), (the "Health Unit") was established in 1956, and is a progressive, accredited public health agency committed to improving health and reducing social inequities in health through evidence informed practice. The Health Unit is funded through a combination of Ministry grants and through levies that are paid by the municipalities to whom the Health Unit provides public health services. The Health Unit works locally with individuals, families and community and partner agencies to promote and protect health and to prevent disease. Public health programs and services are geared toward people of all ages and delivered in a variety of settings including workplaces, daycare and educational settings, homes, health-care settings and community spaces.

The Health Unit is a not-for-profit public health agency and is therefore exempt from income taxes under the Income Tax Act (Canada).

## 1. Summary of significant accounting policies:

These financial statements are prepared by management in accordance with Canadian public sector accounting standards established by the Public Sector Accounting Board. The principal accounting policies applied in the preparation of these financial statements are set out below.

### (a) Basis of accounting:

The financial statements are prepared using the accrual basis of accounting.

The accrual basis of accounting recognizes revenues as they are earned. Expenses are recognized as they are incurred and measurable as a result of receipt of goods or services and the creation of a legal obligation to pay.

### (b) Cash and cash equivalents:

Cash and cash equivalents include guaranteed investment certificates that are readily convertible into known amounts of cash and subject to insignificant risk of change in value.

Guaranteed investment certificates generally have a maturity of one year or less at acquisition and are held for the purpose of meeting future cash commitments.

Guaranteed investment certificates amounted to \$2,594,788 as at December 31, 2024 (2023 - \$2,495,545) and these can be redeemed for cash on demand.

### (c) Employee benefit obligations:

The Health Unit accounts for its participation in the Ontario Municipal Employee Retirement Fund ("OMERS"), a multi-employer public sector pension fund, as a defined contribution plan.

Vacation and other compensated absence entitlements are accrued for as entitlements are earned.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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## 1. Summary of significant accounting policies (continued):

### (c) Employee benefit obligations (continued):

Other post-employment benefits are accrued in accordance with the projected benefit method prorated on service and management's best estimate of salary escalation and retirement ages of employees. The discount rate used to determine the accrued benefit obligation was determined with reference to the Health Unit's cost of borrowing at the measurement date taking into account cash flows that match the timing and amount of expected benefit payments.

Actuarial gains (losses) on the accrued benefit obligation arise from the difference between actual and expected experiences and from changes in actuarial assumptions used to determine the accrued benefit obligation. These gains (losses) are amortized over the average remaining service period of active employees.

### (d) Non-financial assets:

Tangible capital assets and prepaid expenses are accounted for as non-financial assets by the Health Unit. Non-financial assets are not available to discharge liabilities and are held for use in the provision of services. They have useful lives extending beyond the current year and are not intended for sale in the ordinary course of operations.

### (e) Tangible capital assets:

Tangible capital assets are recorded at cost, and include amounts that are directly related to the acquisition of the assets. The Health Unit provides for amortization using the straight-line method designed to amortize the cost, less any residual value, of the tangible capital assets over their estimated useful lives. The annual amortization periods are as follows:

Asset	Basis	Rate
Building	Straight-line	2.5%
Land improvements	Straight-line	10%
Leasehold improvements	Straight-line	10%
Computer hardware	Straight-line	30%
Computer software	Straight-line	100%
Website design	Straight-line	20%
Vehicles and equipment	Straight-line	10%
Equipment – vaccine refrigerators	Straight-line	20%

### (f) Prepaid expenses:

Prepaid expenses are charged to expenses over the periods expected to benefit from them.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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## 1. Summary of significant accounting policies (continued):

### (g) Accumulated surplus:

Certain amounts, as approved by the Board of Directors, are set aside in accumulated surplus for future operating and capital purposes. Transfers to/from funds and reserves are an adjustment to the respective fund when approved.

The accumulated surplus consists of the following surplus accounts:

- Invested in tangible capital assets:

This represents the net book value of the tangible capital assets the Health Unit has on hand.

- Unfunded employee benefit obligations:

This represents the unfunded future employee benefit obligations comprised of the accumulated sick leave benefits, other post-employment benefits and vacation pay and other compensated absences.

The accumulated surplus consists of the following reserves:

- Working capital reserve:

This reserve is not restricted and is utilized for the operating activities of the Health Unit.

- Public health initiatives:

This reserve is restricted and can only be used for public health initiatives.

- Corporate contingencies:

This reserve is restricted and can only be used for corporate contingencies.

- Facility and equipment repairs and maintenance:

This reserve is restricted and can only be used for facility and equipment repairs and maintenance.

- Sick leave and vacation:

This reserve is restricted and can only be used for future sick leave and vacation obligations.

- Research and development:

This reserve is restricted and can only be used for research and development activities.

### (h) Revenue recognition:

Revenue from government grants and from municipalities is recognized in the period in which the events giving rise to the government transfer have occurred as long as: the transfer is authorized; the eligibility criteria, if any, have been met except when and to the extent that the transfer gives rise to an obligation that meets the definition of a liability for the recipient government; and the amount can reasonably be estimated. Funding received under a funding arrangement, which relates to a subsequent fiscal period and the unexpended portions of contributions received for specific purposes, is reflected as deferred revenue in the year of receipt and is recognized as revenue in the period in which all the recognition criteria have been met.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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## 1. Summary of significant accounting policies (continued):

### (h) Revenue recognition:

Fees and other revenue from transactions with performance obligations, are recognized as the Health Unit satisfies a performance obligation by providing the promised goods or services to the payor. Fees and other revenue from transactions with no performance obligations, are recognized as the Health Unit has the authority to claim or retain an inflow of economic resources and when a past transaction or event is an asset. Amounts received prior to the end of the year that will be recognized in subsequent fiscal year are deferred and reported as a liability.

### (i) Budget information:

Budget figures have been provided for comparison purposes and have been derived from the budget approved by the Board of Directors. The budget figures are unaudited.

### (j) 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 certain assets and liabilities at the date of the financial statements and the reported amounts of certain revenues and expenses during the reporting period. By their nature, these estimates are subject to measurement uncertainty. The effect of changes in such estimates on the financial statements in future periods could be significant. Accounts specifically affected by estimates in these financial statements are estimated amounts for uncollectible accounts receivable, employee benefit obligations and the estimated useful lives and residual values of tangible capital assets. 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.

### (k) Financial instruments:

Financial instruments are classified into three categories: fair value, amortized cost or cost. The following chart shows the measurement method for each type of financial instrument:

Financial instrument	Measurement method
Cash and cash equivalents	Cost
Accounts receivable	Amortized cost
Receivable from the Province of Ontario	Amortized cost
Accounts payable and accrued liabilities	Amortized cost
Payable to the Province of Ontario	Amortized cost

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# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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## 1. Summary of significant accounting policies (continued):

### (k) Financial instruments (continued):

#### Amortized cost

Amounts are measured using the effective interest rate method. The effective interest method is a method of calculating the amortized cost of a financial asset or financial liability (or a group of financial assets or financial liabilities) and of allocating the interest income or interest expense over the relevant period, based on the effective interest rate. It is applied to financial assets or financial liabilities that are not in the fair value category and is now the method that must be used to calculate amortized cost.

#### Cost

Amounts are measured at cost less any amount for valuation allowance. Valuation allowances are made when collection is in doubt.

#### Fair value

The Health Unit manages and reports performance for groups of financial assets on a fair-value basis. Investments traded in an active market are reflected at fair value as at the reporting date. Sales and purchases of investments are recorded on the trade date. Transaction costs related to the acquisition of investments are recorded as an expense. Unrealized gains and losses on financial assets are recognized in the Statement of Remeasurement Gains and Losses until such time that the financial asset is derecognized due to disposal or impairment.

At the time of derecognition, the related realized gains and losses are recognized in the Statement of Operations and Accumulated Surplus and related balances reversed from the Statement of Remeasurement Gains and Losses. A statement of remeasurement gains and losses has not been included as there are no matters to report therein.

#### Establishing fair value

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 (if applicable).

#### Fair value hierarchy

The following 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 fair value is observable:

Level 1 – fair value measurements are those derived from quoted prices (unadjusted) in active markets for identical assets or liabilities.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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## 1. Summary of significant accounting policies (continued):

### (k) Financial instruments (continued):

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.

### (l) Asset retirement obligation:

An asset retirement obligation is recognized when, as at the financial reporting date, all of the following criteria are met:

- (i) There is a legal obligation to incur retirement costs in relation to a tangible capital asset;
- (ii) The past transaction or event giving rise to the liability has occurred;
- (iii) It is expected that the future economic benefits will be given up; and
- (iv) A reasonable estimate of the amount can be made.

A liability for asset retirement obligations has not been recorded in these financial statements. Given the nature of the assets, the age of the facilities and the remediation work completed to date it was determined there is no further legal obligation on the part of the Health Unit to complete remediation efforts.

## 2. Change in accounting policies:

The Health Unit adopted the following standards concurrently beginning January 1, 2024 retroactively: PS 3160 Public Private Partnerships and adopted PS 3400 Revenue and PSG-8 Purchased Intangibles prospectively.

PS 3400 Revenue establishes standards on how to account for and report on revenue, specifically differentiating between transactions that include performance obligations (i.e. the payor expects a good or service from the public sector entity), referred to as exchange transactions, and transactions that do not have performance obligations, referred to as non-exchange transactions. For exchange transactions, revenue is recognized when a performance obligation is satisfied. For non-exchange transactions, revenue is recognized when there is authority to retain an inflow of economic resources and a past event that gave rise to an asset has occurred.

PSG-8 Purchased Intangibles provides guidance on the accounting and reporting for purchased intangible assets that are acquired through arm's length exchange transactions between knowledgeable, willing parties that are under no compulsion to act.

PS 3160 Public Private Partnerships (P3s) provides specific guidance on the accounting and reporting for P3s between public and private sector entities where the public sector entity procures infrastructure using a private sector partner.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

### 3. Employee benefit obligations:

An actuarial estimate of future liabilities has been completed using the most recent actuarial valuation dated December 31, 2021 and forms the basis for the estimated liability reported in these financial statements. The valuation of the plan is updated from a walk forward of the December 31, 2021 results. The next full valuation of the plan will be as of December 31, 2024.

	2024	2023
Accumulated sick leave benefits	\$ 533,958	\$ 563,488
Other post-employment benefits	1,978,109	1,826,848
	2,512,067	2,390,336
Vacation pay and other compensated absence	1,156,738	1,379,834
	\$ 3,668,805	\$ 3,770,170

The significant actuarial assumptions adopted in measuring the Health Unit's accumulated sick leave benefits and other post-employment benefits are as follows:

	2024	2023
Discount	4.00%	4.00%
Health-care trend rate		
Initial	5.08%	5.42%
Ultimate	3.75%	3.75%
Salary escalation factor	2.75%	2.75%

The Health Unit has established reserves in the amount of \$2,639,119 (2023 - \$675,447) to mitigate the future impact of these obligations. The accrued benefit obligations as at December 31, 2024 are \$2,976,939 (2023 - \$2,891,129).

	2024	2023
Benefit plan expenses:		
Current service costs	\$ 211,182	\$ 201,023
Interest	115,061	112,252
Amortization of actuarial loss	35,912	35,912
	\$ 362,155	\$ 349,187

Benefits paid during the year were \$240,432 (2023 - \$255,904). The net unamortized actuarial loss of \$464,872 (2023 - \$500,793) will be amortized over the expected average remaining service period.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

## 4. Tangible capital assets:

Cost:

		Land	Building	Leasehold improvements	Computer hardware	Computer software	Website design	Furniture and equipment	Parking lot resurfacing	2024 Total
Balance, January 1, 2024	\$	26,938	15,029,052	3,490,251	3,757,242	423,933	69,845	4,205,265	252,346	27,254,872
Additions		-	38,036	127,280	10,888	-	-	398,410	-	574,614
Balance, December 31, 2024	\$	26,938	15,067,088	3,617,531	3,768,130	423,933	69,845	4,603,675	252,346	27,829,486

Accumulated amortization:

		Land	Building	Leasehold improvements	Computer hardware	Computer software	Website design	Furniture and equipment	Parking lot resurfacing	Total
Balance, January 1, 2024	\$	-	4,187,968	906,876	3,422,077	423,933	69,845	2,794,413	241,246	12,046,358
Amortization		-	376,203	274,641	250,494	-	-	205,665	4,475	1,111,478
Balance, December 31, 2024	\$	-	4,564,171	1,181,517	3,672,571	423,933	69,845	3,000,078	245,721	13,157,836

Net book value:

		Land	Building	Leasehold improvements	Computer hardware	Computer software	Website design	Furniture and equipment	Parking lot resurfacing	Total
At December 31, 2023	\$	26,938	10,841,084	2,583,375	335,165	-	-	1,410,852	11,100	15,208,514
At December 31, 2024		26,938	10,502,917	2,436,014	95,559	-	-	1,603,597	6,625	14,671,650

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

## 4. Tangible capital assets (continued):

Cost:

	Land	Building	Leasehold improvements	Computer hardware	Computer software	Website design	Furniture and equipment	Parking lot resurfacing	2023 Total
Balance, January 1, 2023	\$ 26,938	14,966,096	2,699,586	3,677,404	423,933	69,845	3,939,616	252,346	26,055,764
Additions	-	62,956	790,665	79,838	-	-	265,649	-	1,199,108
Balance, December 31, 2023	\$ 26,938	15,029,052	3,490,251	3,757,242	423,933	69,845	4,205,265	252,346	27,254,872

Accumulated amortization:

	Land	Building	Leasehold improvements	Computer hardware	Computer software	Website design	Furniture and equipment	Parking lot resurfacing	Total
Balance, January 1, 2023	\$ -	3,813,029	679,729	3,086,623	423,933	69,845	2,602,262	226,395	10,901,816
Amortization	-	374,939	227,147	335,454	-	-	192,151	14,851	1,144,542
Balance, December 31, 2023	\$ -	4,187,968	906,876	3,422,077	423,933	69,845	2,794,413	241,246	12,046,358

Net book value:

	Land	Building	Leasehold improvements	Computer hardware	Computer software	Website design	Furniture and equipment	Parking lot resurfacing	Total
At December 31, 2022	\$ 26,938	11,153,067	2,019,857	590,781	-	-	1,337,354	25,951	15,153,948
At December 31, 2023	26,938	10,841,084	2,583,375	335,165	-	-	1,410,852	11,100	15,208,514

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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## 5. Commitments and contingencies:

(a) Line of credit:

The Health Unit has available an operating line of credit of \$500,000 (2023 - \$500,000). There is \$Nil balance outstanding on the line of credit at year end (2023 - \$Nil).

(b) Lease commitments:

The Health Unit enters into operating leases in the ordinary course of business, primarily for lease of premises and equipment. Payments for these leases are contractual obligations as scheduled per each agreement. Commitments for minimum lease payments in relation to non-cancellable operating leases at December 31, 2024 are as follows:

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No later than one year	\$ 263,728
Later than one year and no later than 5 years	760,844
Later than five years	880,183
	<hr/>
	\$ 1,904,755

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(c) Contingencies:

The Health Unit 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. Management is of the opinion that these matters are mitigated by adequate insurance coverage.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

## 6. Accumulated surplus:

The accumulated surplus consists of individual fund surplus accounts and reserves as follows:

	Balance, beginning of year	Annual surplus (deficit)	Purchase of tangible capital assets	Capital Infrastructure Project	Balance, end of year
Invested in tangible capital assets	\$ 15,208,514	(1,111,478)	574,614	-	\$ 14,671,650
Unfunded employee benefit obligation	(3,770,170)	101,365	-	-	(3,668,805)
Working capital reserve	2,210,810	2,422,306	(574,614)	38,039	4,096,541
Public health initiatives	500,000	-	-	-	500,000
Corporate contingencies	500,000	-	-	-	500,000
Facility and equipment repairs and maintenance	994,311	-	-	(38,039)	956,272
Sick leave and vacation	2,639,119	-	-	-	2,639,119
Research and development	56,860	-	-	-	56,860
	\$ 18,339,444	1,412,193	-	-	\$ 19,751,637

## 7. Pension agreements:

The Health Unit makes contributions to OMERS, which is a multi-employer plan, on behalf of its members. The plan is a defined contribution plan, which specifies the amount of the retirement benefit to be received by the employees based on the length of service and rates of pay.

The amount contributed to OMERS for 2024 was \$2,036,224 (2023 - \$2,157,752) for current service and is included within benefits expense on the statement of operations and accumulated surplus.

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

## 8. Per capita revenue from municipalities:

	2024	2023
City of Greater Sudbury	\$ 9,022,585	\$ 8,055,880
Town of Espanola	280,950	250,848
Township of Sable and Spanish River	183,439	163,784
Municipality of French River	157,065	140,236
Municipality of Markstay-Warren	159,224	142,165
Township of Northeastern Manitoulin & The Islands	137,235	122,532
Township of Chapleau	127,877	114,176
Township of Central Manitoulin	109,945	98,165
Municipality of St. Charles	80,823	72,163
Township of Assiginack	51,308	45,811
Town of Gore Bay	49,475	44,174
Township of Baldwin	32,591	29,099
Township of Billings (and part of Allan)	34,358	30,677
Township of Gordon (and part of Allan)	30,170	26,937
Township of Nairn & Hyman	26,701	23,840
Township of Tehkummah	24,738	22,087
Municipality of Killarney	23,886	21,328
Township of Burpee	16,034	14,316
Township of Cockburn Island	327	292
	\$ 10,548,731	\$ 9,418,510

## 9. Administration expenses:

	2024 Budget	2024 Actual	2023 Actual
Professional fees	\$ 742,678	\$ 983,441	\$ 1,102,188
Building maintenance	696,966	628,249	471,170
Advertising	131,265	76,077	93,713
Telephone	69,821	202,777	161,173
Rent	481,377	421,000	548,513
Utilities	245,020	176,320	181,087
Liability insurance	208,850	200,694	185,311
Staff education	136,701	113,453	47,255
Postage	90,100	86,022	84,509
Memberships and subscriptions	47,634	52,992	45,108
Strategic Planning	-	563	-
	\$ 2,850,412	\$ 2,941,588	\$ 2,920,027

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

## 10. Revenues and expenses by funding sources:

	OLHA	UIIP	Men C	HPV	Unorganized Territories	Ontario Sr. Dental Care Program	MOH/AMOH	MCCSS: HBHC & PPNP	HIV-Aids Anonymous Testing	Non-Ministry	Sub-Total
<b>Revenue:</b>											
Provincial grants											
Operation	\$ 18,538,386	-	-	-	-	1,060,713	3,948	1,726,780	64,272	-	21,394,099
Unorganized territories	-	-	-	-	1,092,500	-	-	-	-	-	1,092,500
Municipalities	10,548,731	-	-	-	-	-	-	-	-	-	10,548,731
Plumbing and inspections	251,127	-	-	-	-	-	-	-	-	-	251,127
Interest	469,406	-	-	-	-	-	-	-	-	99,243	568,649
Other	238,303	7,225	16,278	28,263	-	5,865	-	-	-	81,317	377,251
	30,045,953	7,225	16,278	28,263	1,092,500	1,066,578	3,948	1,726,780	64,272	180,560	34,232,357
<b>Expenses:</b>											
Salaries and wages	18,122,897	5,953	13,435	23,505	697,581	343,648	3,948	1,306,446	51,282	57,905	20,626,600
Benefits	5,724,631	1,272	2,843	4,758	219,349	85,406	-	380,232	12,990	10,150	6,441,631
Transportation	119,918	-	-	-	90,306	33	-	20,531	-	-	230,788
Administration (note 9)	2,188,994	-	-	-	26,076	516,847	-	6,873	-	189	2,738,979
Supplies and materials	710,153	-	-	-	59,188	108,043	-	5,872	-	13,072	896,328
Small operational equipment	837,440	-	-	-	-	710	-	-	-	-	838,150
Amortization of tangible capital assets	1,111,478	-	-	-	-	-	-	-	-	-	1,111,478
	28,815,511	7,225	16,278	28,263	1,092,500	1,054,687	3,948	1,719,954	64,272	81,316	32,883,954
Annual surplus	1,230,442	-	-	-	-	11,891	-	6,826	-	99,244	1,348,403
Capital expenditures	454,068	-	-	-	-	11,891	-	6,826	-	38,039	510,824
Annual surplus net of capital expenditures	\$ 776,374	-	-	-	-	-	-	-	-	61,205	837,579

OLHA - MOH Mandatory Cost-Shared

UIIP - Universal Influenza Immunization Program

Men C - Meningococcal Vaccine Program

HPV - Human Papilloma Virus

MOH/AMOH - Ministry of Health/Associate Medical Officer of Health

MCCSS - Ministry of Children, Community and Social Services: Health Babies Healthy Children/Prenatal Postnatal Nurse Practitioner

Non-Ministry - Non-Ministry Funded Initiatives

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

## 10. Revenues and expenses by funding sources (continued):

	2023-24 One-time Funding											Total
	Sub-Total	COVID-19 Infection Prevention and Control Hub	COVID-19 Extraordinary Vaccine	PHI Practicum	MOH - ISPA Vaccination Clinic Catch up	Merger Planning	RSV	Vaccine Refridgerator	Capital	COVID-19 Infection Prevention and Control Hub	PHI Practicum	
<b>Revenue:</b>												
Provincial grants												
Operation	\$ 21,394,099	-	-	-	-	-	-	-	-	-	-	21,394,099
One-time	-	274,895	225,000	10,804	19,871	268,611	71,500	38,830	24,960	642,975	12,992	1,590,438
Unorganized territories	1,092,500	-	-	-	-	-	-	-	-	-	-	1,092,500
Municipalities	10,548,731	-	-	-	-	-	-	-	-	-	-	10,548,731
Plumbing and inspections	251,127	-	-	-	-	-	-	-	-	-	-	251,127
Interest	568,649	-	-	-	-	-	-	-	-	-	-	568,649
Other	377,251	-	-	-	-	-	-	-	-	-	-	377,251
	34,232,357	274,895	225,000	10,804	19,871	268,611	71,500	38,830	24,960	642,975	12,992	35,822,795
<b>Expenses:</b>												
Salaries and wages	20,626,600	205,683	186,742	9,110	15,211	61,288	61,561	-	-	534,176	11,739	21,712,110
Benefits	6,441,631	39,052	37,827	1,694	4,660	7,956	9,939	-	-	92,176	1,253	6,636,188
Transportation	230,788	375	-	-	-	1,907	-	-	-	2,860	-	235,930
Administration (note 9)	2,738,979	1,688	401	-	-	197,082	-	-	-	3,438	-	2,941,588
Supplies and materials	896,328	28,097	30	-	-	378	-	-	-	10,325	-	935,158
Small operational equipment	838,150	-	-	-	-	-	-	-	-	-	-	838,150
Amortization of tangible capital assets	1,111,478	-	-	-	-	-	-	-	-	-	-	1,111,478
	32,883,954	274,895	225,000	10,804	19,871	268,611	71,500	-	-	642,975	12,992	34,410,602
Annual surplus	1,348,403	-	-	-	-	-	-	38,830	24,960	-	-	1,412,193
Capital expenditures	510,824	-	-	-	-	-	-	38,830	24,960	-	-	574,614
Annual surplus net of capital expenditures	\$ 837,579	-	-	-	-	-	-	-	-	-	-	837,579

OLHA - MOH Mandatory Cost-Shared

UIIP - Universal Influenza Immunization Program

Men C - Meningococcal Vaccine Program

MOH/AMOH - Ministry of Health/Associate Medical Officer of Health

MCCSS - Ministry of Children, Community and Social Services: Health Babies Healthy Children/Prenatal Postnatal Nurse Practitioner

Non-Ministry - Non-Ministry Funded Initiatives

# BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2024

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## 11. Budget information:

The Budget adopted by the Board of Directors on November 16, 2023, was not prepared on a basis consistent with that used to report actual results (Public Sector Accounting Standards). The budget did not include amortization of tangible capital assets. As a result, the budget figures presented in the statement of operations and accumulated surplus represent the Budget adopted by the Board of Directors on November 16, 2023 including subsequent budget amendments, with adjustments as follows:

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Budget surplus for the year	\$	–
Less: amortization		1,144,542
<b>Budget deficit per the statement of operations and accumulated surplus</b>	<b>\$</b>	<b>(1,144,542)</b>

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## 12. Comparative information:

The financial statements have been reclassified, where applicable, to conform to the presentation used in the current year. The changes do not affect the prior year surplus.