

Financial Statements of

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

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

And Independent Auditors' Report thereon

Year ended December 31, 2019



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INDEPENDENT AUDITORS' 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, 2019
- 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 policies

(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, 2019, 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 "*Auditors' 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 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.

Auditors' 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 auditors' 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.



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- 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 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 auditors' 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 auditors' 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.

KPMG LLP

Chartered Professional Accountants, Licensed Public Accountants

Sudbury, Canada

June 18, 2020

BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Statement of Financial Position

December 31, 2019, with comparative information for 2018

	2019	2018
Financial assets		
Cash and cash equivalents	\$ 16,710,305	\$ 14,762,030
Accounts receivable	358,227	532,377
Receivable from the Province of Ontario	286,617	176,059
	<u>17,355,149</u>	<u>15,470,466</u>
Financial liabilities		
Accounts payable and accrued liabilities	1,807,946	1,325,291
Deferred revenue	362,121	314,736
Payable to the Province of Ontario	532,065	496,461
Employee benefit obligations (note 2)	2,956,463	2,905,078
	<u>5,658,595</u>	<u>5,041,566</u>
Net financial assets	11,696,554	10,428,900
Non-financial assets:		
Tangible capital assets (note 3)	5,097,476	5,241,436
Prepaid expenses	325,038	312,561
	<u>5,422,514</u>	<u>5,553,997</u>
Commitments and contingencies (note 4)		
Subsequent event (note 11)		
Accumulated surplus (note 5)	<u>\$ 17,119,068</u>	<u>\$ 15,982,897</u>

See accompanying notes to financial statements.

On behalf of the Board:

_____ Board Member

_____ 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, 2019, with comparative information for 2018

	Budget	Total	Total
	2019	2019	2018
	(unaudited)		
Revenue (note 9):			
Provincial grants	\$ 21,218,505	\$ 20,934,817	\$ 21,129,320
Per capita revenue from municipalities (note 7)	7,345,618	7,345,618	7,133,674
Other:			
Plumbing inspections and licenses	317,000	290,514	302,316
Interest	105,000	300,985	216,090
Other	1,095,489	883,397	819,733
	30,081,612	29,755,331	29,601,133
Expenses (note 9):			
Salaries and wages	19,785,169	18,295,647	18,230,108
Benefits (note 6)	5,414,309	5,041,211	5,140,502
Administration (note 8)	2,290,327	2,287,486	2,016,169
Supplies and materials	1,602,073	1,532,008	1,637,528
Amortization of tangible capital assets (note 3)	-	691,091	627,567
Small operational equipment	603,910	464,669	454,933
Transportation	385,824	307,048	309,907
	30,081,612	28,619,160	28,416,714
Annual surplus	-	1,136,171	1,184,419
Accumulated surplus, beginning of year	15,982,897	15,982,897	14,798,478
Accumulated surplus, end of year	\$ 15,982,897	\$ 17,119,068	\$ 15,982,897

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, 2019, with comparative information for 2018

	2019	2018
Annual surplus	\$ 1,136,171	\$ 1,184,419
Purchase of tangible capital assets	(547,131)	(494,391)
Amortization of tangible capital assets	691,091	627,567
Change in prepaid expenses	(12,477)	123,472
Change in net financial assets	1,267,654	1,441,067
Net financial assets, beginning of year	10,428,900	8,987,833
Net financial assets, end of year	\$ 11,696,554	\$ 10,428,900

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, 2019, with comparative information for 2018

	2019	2018
Cash provided by (used in):		
Cash flows from operating activities:		
Annual surplus	\$ 1,136,171	\$ 1,184,419
Adjustments for:		
Amortization of tangible capital assets	691,091	627,567
Employee benefit obligations	51,385	148,799
	<u>1,878,647</u>	<u>1,960,785</u>
Changes in non-cash working capital:		
Decrease in accounts receivable	174,150	256,307
Increase (decrease) in receivable from the Province of Ontario	(110,558)	188,976
Increase in accounts payable and accrued liabilities	482,655	35,595
Increase (decrease) in deferred revenue	47,385	(53,628)
Increase (decrease) in payable to the Province of Ontario	35,604	(197,538)
Increase (decrease) in prepaid expenses	(12,477)	123,472
	<u>2,495,406</u>	<u>2,313,969</u>
Cash flows from investing activity:		
Purchase of tangible capital assets	(547,131)	(494,391)
	<u>1,948,275</u>	<u>1,819,578</u>
Increase in cash	1,948,275	1,819,578
Cash and cash equivalents, beginning of year	14,762,030	12,942,452
Cash and cash equivalents, end of year	<u>\$ 16,710,305</u>	<u>\$ 14,762,030</u>

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, 2019

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 \$2,303,303 as at December 31, 2019 (2018 - \$2,258,052) 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.

Sick leave benefits are accrued where they are vested and subject to pay out when an employee leaves the Health Unit's employ.

BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2019

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 pro-rated 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%
Computer hardware	Straight-line	30%
Leasehold improvements	Straight-line	10%
Website design	Straight-line	20%
Vehicles and equipment	Straight-line	10%
Equipment – vaccine refrigerators	Straight-line	20%
Computer software	Straight-line	100%

(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, 2019

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.

BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2019

1. Summary of significant accounting policies (continued):

(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.

Other revenues including certain user fees, rents and interest are recorded on the accrual basis, when earned and when the amounts can be reasonably estimated and collection is reasonably assured.

(i) Budget figures:

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.

BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2019

2. Employee benefit obligations:

An actuarial estimate of future liabilities has been completed using the most recent actuarial valuation dated December 31, 2017 and forms the basis for the estimated liability reported in these financial statements. The next full valuation of the plan will be as of December 31, 2020.

	2019	2018
Accumulated sick leave benefits	\$ 710,365	\$ 753,705
Other post-employment benefits	1,348,868	1,234,500
	2,059,233	1,988,205
Vacation pay and other compensated absence	897,230	916,873
	\$ 2,956,463	\$ 2,905,078

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

	2019	2018
Discount	4.00%	4.00%
Health-care trend rate:		
Initial	6.42%	6.42%
Ultimate	3.75%	3.75%
Salary escalation factor	2.75%	2.75%

The Health Unit has established reserves in the amount of \$675,447 (2018 - \$675,447) to mitigate the future impact of these obligations. The accrued benefit obligations as at December 31, 2019 are \$2,112,718 (2018 - \$2,035,409).

	2019	2018
Benefit plan expenses:		
Current service costs	\$ 169,489	\$ 162,089
Interest	81,336	78,323
Amortization of actuarial loss	(6,282)	(4,819)
	\$ 244,543	\$ 235,593

Benefits paid during the year were \$173,515 (2018 - \$164,052). The net unamortized actuarial loss of \$53,485 (2018 - \$47,203) 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, 2019

3. Tangible capital assets:

Cost:

	Land	Building	Leasehold Improvements	Computer Hardware	Computer Software	Website Design	Furniture and Equipment	Parking Lot Resurfacing	2019 Total
Balance, January 1, 2019	\$ 26,939	7,068,782	396,739	2,363,856	374,825	69,845	2,486,251	242,596	13,029,833
Additions	-	85,053	-	322,585	35,777	-	93,966	9,750	547,131
Balance, December 31, 2019	\$ 26,939	7,153,835	396,739	2,686,441	410,602	69,845	2,580,217	252,346	13,576,964

Accumulated amortization:

	Land	Building	Leasehold Improvements	Computer Hardware	Computer Software	Website Design	Furniture and Equipment	Parking Lot Resurfacing	Total
Balance, January 1, 2019	\$ -	2,932,343	396,739	1,788,440	374,825	69,845	2,099,775	126,430	7,788,397
Amortization	-	176,720	-	334,391	35,777	-	119,943	24,260	691,091
Balance, December 31, 2019	\$ -	3,109,063	396,739	2,122,831	410,602	69,845	2,219,718	150,690	8,479,488

Net book value

	Land	Building	Leasehold Improvements	Computer Hardware	Computer Software	Website Design	Furniture and Equipment	Parking Lot Resurfacing	Total
At December 31, 2018	\$ 26,939	4,136,439	-	575,416	-	-	386,476	116,166	5,241,436
At December 31, 2019	26,939	4,044,772	-	563,610	-	-	360,499	101,656	5,097,476

BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2019

3. Tangible capital assets (continued):

Cost:

	Land	Building	Leasehold Improvements	Computer Hardware	Computer Software	Website Design	Furniture and Equipment	Parking Lot Resurfacing	2018 Total
Balance, January 1, 2018	\$ 26,939	7,068,782	396,739	1,993,435	357,579	69,845	2,379,527	242,596	12,535,442
Additions	-	-	-	370,421	17,246	-	106,724	-	494,391
Balance, December 31, 2018	\$ 26,939	7,068,782	396,739	2,363,856	374,825	69,845	2,486,251	242,596	13,029,833

Accumulated amortization:

	Land	Building	Leasehold Improvements	Computer Hardware	Computer Software	Website Design	Furniture and Equipment	Parking Lot Resurfacing	Total
Balance, January 1, 2018	\$ -	2,755,623	394,660	1,497,616	357,579	62,861	1,990,321	102,170	7,160,830
Amortization	-	176,720	2,079	290,824	17,246	6,984	109,454	24,260	627,567
Balance, December 31, 2018	\$ -	2,932,343	396,739	1,788,440	374,825	69,845	2,099,775	126,430	7,788,397

Net book value

	Land	Building	Leasehold Improvements	Computer Hardware	Computer Software	Website Design	Furniture and Equipment	Parking Lot Resurfacing	Total
At December 31, 2017	\$ 26,939	4,313,159	2,079	495,819	-	6,984	389,206	140,426	5,374,612
At December 31, 2018	26,939	4,136,439	-	575,416	-	-	386,476	116,166	5,241,436

BOARD OF HEALTH FOR THE SUDBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUDBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2019

4. Commitments and contingencies:

(a) Line of credit:

The Health Unit has available an operating line of credit of \$500,000 (2018 - \$500,000). There is \$Nil balance outstanding on the line of credit at year end (2018 - \$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, 2019 are as follows:

No later than one year	\$	231,301
Later than one year and no later than 5 years		403,556
Later than five years		505,680
	\$	1,140,537

(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, 2019

5. Accumulated surplus:

	Balance, Beginning of year	Annual Surplus (Deficit)	Purchase of Tangible Capital Assets	Transfer to (from) Reserves	Balance, end of year
Invested in tangible capital assets	\$ 5,241,434	(691,089)	547,131	–	\$ 5,097,476
Unfunded employee benefit obligation	(2,905,078)	(51,385)	–	–	(2,956,463)
Working capital reserve	8,032,668	1,878,645	(547,131)	(3,618,434)	5,745,748
Public health initiatives	1,521,119	–	–	978,881	2,500,000
Corporate contingencies	500,000	–	–	–	500,000
Facility and equipment repairs and maintenance	2,860,447	–	–	2,639,553	5,500,000
Sick leave and vacation	675,447	–	–	–	675,447
Research and development	56,860	–	–	–	56,860
	\$ 15,982,897	1,136,171	–	–	\$ 17,119,068

6. 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 2019 was \$1,766,045 (2018 - \$1,771,788) 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, 2019

7. Per capita revenue from municipalities:

	2019	2018
City of Greater Sudbury	\$ 6,317,974	\$ 6,135,677
Township of Espanola	195,030	189,406
Township of Sables and Spanish River	119,811	116,354
Municipality of French River	106,148	103,085
Municipality of Markstay-Warren	104,091	101,088
Township of Northeastern Manitoulin & The Islands	95,203	92,456
Township of Chapleau	85,654	83,182
Township of Central Manitoulin	76,545	74,337
Municipality of St. Charles	51,717	50,225
Township of Assignack	33,720	32,747
Town of Gore Bay	33,059	32,105
Township of Baldwin	22,555	21,904
Township of Billings (and part of Allan)	22,408	21,762
Township of Gordon (and part of Allan)	20,057	19,479
Township of Nairn & Hyman	17,707	17,196
Township of Tehkummah	16,238	15,769
Municipality of Killarney	15,503	15,056
Township of Burpee	12,198	11,846
	\$ 7,345,618	7,133,674

8. Administration expenses:

	Budget 2019 (unaudited)	2019	2018
Professional fees	\$ 746,543	\$ 527,202	\$ 346,853
Building maintenance	366,785	525,514	426,730
Rent	259,105	262,925	262,386
Advertising	140,695	231,679	161,676
Telephone	198,936	188,322	192,055
Utilities	214,325	181,854	190,190
Staff education	130,226	167,605	224,873
Liability insurance	115,636	109,903	99,833
Postage	69,322	59,469	64,635
Memberships and subscriptions	44,754	32,980	42,607
Strategic planning	4,000	33	4,331
	\$ 2,290,327	\$ 2,287,486	\$ 2,016,169

BOARD OF HEALTH FOR THE SUBBURY & DISTRICT HEALTH UNIT

(OPERATING AS PUBLIC HEALTH SUBBURY & DISTRICTS)

Notes to Financial Statements

Year ended December 31, 2019

9. Revenues and expenses by funding sources:

	OLHA	UIIP	Men C	HPV	Unorganized Territories	NFVP	Enhanced Safe Water	Ontario Sr. Dental Care Program	Nursing Initiatives	Diabetes Prevention	SFO	Enhanced Safe Food	Harm Reduction Enhancement	HSO	Indigenous Communities Indigenous Partnership	Sub-Total
Revenue:																
Provincial grants	\$ 15,298,700	18,572	15,657	28,271	-	145,447	16,200	90,598	392,100	155,770	790,997	36,500	129,322	557,442	47,182	17,722,758
Provincial grants - one-time	-	-	-	-	-	8,796	-	-	-	-	-	-	-	-	-	8,796
Unorganized territories	-	-	-	-	826,000	-	-	-	-	-	-	-	-	-	-	826,000
Municipalities	7,345,618	-	-	-	-	-	-	-	-	-	-	-	-	-	-	7,345,618
Plumbing and inspections	290,514	-	-	-	-	-	-	-	-	-	-	-	-	-	-	290,514
Interest	300,985	-	-	-	-	-	-	-	-	-	-	-	-	-	-	300,985
Other	497,323	-	-	-	-	-	-	-	-	-	-	-	-	-	-	497,323
	23,733,140	18,572	15,657	28,271	826,000	154,243	16,200	90,598	392,100	155,770	790,997	36,500	129,322	557,442	47,182	26,991,994
Expenses:																
Salaries and wages	14,296,372	16,065	13,709	24,454	501,053	77,153	12,150	36,148	312,400	79,068	465,608	9,146	81,816	405,929	36,845	16,367,916
Benefits	4,023,480	1,596	1,370	2,437	133,368	19,306	4,050	9,795	79,700	21,691	133,698	2,561	25,293	115,252	9,971	4,583,568
Transportation	103,942	-	-	-	118,259	413	-	-	-	2,345	26,785	-	4	2,524	366	254,638
Administration (note 8)	2,104,088	-	-	-	-	392	-	(1,555)	-	34,684	16,054	583	21,440	397	-	2,176,083
Supplies and materials	943,342	911	578	1,380	73,320	56,979	-	40,995	-	17,982	148,852	24,210	769	33,340	-	1,342,658
Small operational equipment	434,654	-	-	-	-	-	-	5,215	-	-	-	-	-	-	-	439,869
Amortization of tangible capital assets	691,091	-	-	-	-	-	-	-	-	-	-	-	-	-	-	691,091
	22,596,969	18,572	15,657	28,271	826,000	154,243	16,200	90,598	392,100	155,770	790,997	36,500	129,322	557,442	47,182	25,855,823
Annual surplus	\$ 1,136,171	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1,136,171

OLHA - MOH Mandatory Cost-Shared

UIIP - Universal Influenza Immunization Program

Men C - Meningococcal Vaccine Program

HPV - Human Papilloma Virus

Nursing Initiatives - Chief Nursing Officer, Infection Prevention and Control Nurses, Social Determinants of Health PHN

HSO - Healthy Smiles Ontario

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

SFO - Smoke Free Ontario

NFVP - Northern Fruit and Vegetable Program

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, 2019

9. Revenues and expenses by funding sources (continued):

	2018-19 One-time Funding								
	Infectious Diseases Control	MOH/AMOH	Needle Exchange	MCCSS: HBHC & PPNP	HIV-Aids Anonymous Testing	Mandatory Built Environment	Needle Exchange Program	Vaccine Fridge	Sub-Total
Revenue:									
Provincial grants	\$ 389,000	110,681	87,100	1,593,529	60,198	-	-	-	2,240,508
Provincial grants - one-time	-	-	-	-	-	11,984	37,282	24,800	74,066
Unorganized territories	-	-	-	-	-	-	-	-	-
Municipalities	-	-	-	-	-	-	-	-	-
Plumbing and inspections	-	-	-	-	-	-	-	-	-
Interest	-	-	-	-	-	-	-	-	-
Other	-	-	-	-	-	-	-	-	-
	389,000	110,681	87,100	1,593,529	60,198	11,984	37,282	24,800	2,314,574
Expenses:									
Salaries and wages	303,296	94,978	-	1,227,166	49,133	10,903	-	-	1,685,476
Benefits	81,860	15,703	-	308,317	10,537	1,081	-	-	417,498
Transportation	352	-	-	51,294	-	-	-	-	51,646
Administration (note 8)	488	-	-	1,772	28	-	-	-	2,288
Supplies and materials	3,004	-	87,100	4,980	500	-	37,282	-	132,866
Small operational equipment	-	-	-	-	-	-	-	24,800	24,800
Amortization of tangible capital assets	-	-	-	-	-	-	-	-	-
	389,000	110,681	87,100	1,593,529	60,198	11,984	37,282	24,800	2,314,574
Annual surplus	\$ -	-	-	-	-	-	-	-	-

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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, 2019

9. Revenues and expenses by funding sources (continued):

	2018-19 One-time Funding						Total
	Mandatory Disclosure	Mandatory Effective Public Health Practice	Healthy Menu Choices: Enforcement	Indigenous Communities	PHI Practicum	Non-Ministry	
Revenue:							
Provincial grants	\$ -	-	-	-	-	-	19,963,266
Provincial grants - one-time	533	24,959	411	33,218	3,568	-	145,551
Unorganized territories	-	-	-	-	-	-	826,000
Municipalities	-	-	-	-	-	-	7,345,618
Plumbing and inspections	-	-	-	-	-	-	290,514
Interest	-	-	-	-	-	-	300,985
Other	-	-	-	-	-	386,074	883,397
	533	24,959	411	33,218	3,568	386,074	29,755,331
Expenses:							
Salaries and wages	485	22,290	374	26,803	3,261	189,042	18,295,647
Benefits	48	2,669	37	4,107	307	32,977	5,041,211
Transportation	-	-	-	117	-	647	307,048
Administration (note 8)	-	-	-	1,493	-	107,622	2,287,486
Supplies and materials	-	-	-	698	-	55,786	1,532,008
Small operational equipment	-	-	-	-	-	-	464,669
Amortization of tangible capital assets	-	-	-	-	-	-	691,091
	533	24,959	411	33,218	3,568	386,074	28,619,160
Annual surplus	\$ -	-	-	-	-	-	1,136,171

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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, 2019

10. 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.

11. Subsequent event:

Subsequent to December 31, 2019, the COVID-19 outbreak was declared a pandemic by the World Health Organization and has had a significant financial, market and social dislocating impact. The situation is dynamic and the ultimate duration and magnitude of the impact on the economy and the financial effect on the Health Unit is not known at this time.