For the year ended March 31, 2012

For the year ended March 31, 2012

	Contents
Independent Auditor's Report	2
Financial Statements	
Statement of Financial Position	3
Statement of Changes in Net Assets	4
Statement of Operations	5
Statement of Cash Flows	6
Summary of Significant Accounting Policies	7
Notes to Financial Statements	11



Tel: 519 245 1913 Fax: 519 245 5987 strathroy@bdo.ca www.bdo.ca BDO Canada LLP 28636 Centre Road RR 5 Strathroy ON N7G 3H6 Canada

Independent Auditor's Report

To the Board of Directors Strathroy Middlesex General Hospital

We have audited the accompanying financial statements of Strathroy Middlesex General Hospital which comprise the statement of financial position as at March 31, 2012 and the statements of changes in net assets, operations and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian generally accepted accounting principles, 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, these financial statements present fairly, in all material respects, the financial position of Strathroy Middlesex General Hospital as at March 31, 2012 and the results of its operations and the changes in its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Chartered Accountants, Licensed Public Accountants

Strathroy, Ontario May 17, 2012

BDO CanadaLLP

Strathroy Middlesex General Hospital Statement of Financial Position

March 31	2012	2011
Assets		
Current Cash Accounts receivable (Note 1) Inventories (Note 2) Prepaid expenses	\$ 2,621,550 667,525 89,780 111,383	\$ 2,555,762 993,358 77,769 151,970
	3,490,238	3,778,859
Capital assets (Note 3)	18,230,066	18,426,149
	\$21,720,304	\$ 22,205,008
Liabilities and Net Assets Current Accounts payable and accrued liabilities Current portion of obligation under capital lease (Note 6)	\$ 2,653,598 184,806	\$ 2,844,507
	2,838,404	2,844,507
Deferred contributions relating to capital assets (Note 5) Employee future benefits (Note 7) Obligation under capital lease (Note 6)	15,536,863 217,000 697,074	16,416,581 130,988
	19,289,341	19,392,076
Net assets Internally restricted (Note 14) Unrestricted	600,000 1,830,963	600,000 2,212,932
	2,430,963	2,812,932
	\$21,720,304	\$ 22,205,008

On behalf of the Board of Directors:

Director

Director

The accompanying summary of significant accounting policies and notes are an integral part of these financial statements.

Strathroy Middlesex General Hospital Statement of Changes in Net Assets

For the year ended March 31				2012	2011
		Restricted (Note 14)	Unrestricted	Total	Total
Balance, beginning of year	~	000,009	\$ 2,212,932 \$ 2,812,932	\$ 2,812,932	\$ 2,197,616
(Deficiency) excess of revenues over expenditures		ı	(381,969)	(381,969)	615,316
Balance, end of year	\$	600,000	\$ 1,830,963 \$ 2,430,963	\$ 2,430,963	\$ 2,812,932

Strathroy Middlesex General Hospital Statement of Operations

For the year ended March 31	2012	2011
Revenue		
Ministry of Health and Long-Term Care	\$29,582,257	\$ 29,013,476
Patient revenues	2,469,180	2,418,915
Differential and co-payment	335,244	347,836
Recoveries and miscellaneous	1,546,529	1,376,453
Amortization of deferred capital contributions, equipment	1,096,719	1,415,990
Other votes	656,346	653,63 <u>4</u>
	35,686,275	35,226,304
Expenses Salaries and wages	15,484,413	15,199,193
Employee benefits (Note 7)	3,713,892	3,517,377
Medical staff remuneration	5,458,862	5,160,096
Supplies and other expenses	5,808,500	5,092,985
Medical and surgical supplies	2,602,481	2,348,811
Drugs	594,125	566,839
Amortization - equipment (Note 3)	1,246,368	1,452,556
Other votes	762,300	770,108
·	35,670,941	34,107,965
Operating excess of revenue over expenses	15,334	1,118,339
a.i.		
Other	E00 020	E04.040
Amortization of deferred capital contributions, building	599,820	584,919
Amortization of buildings and land improvements (Note 3)	(997,123)	(1,087,942)
	(397,303)	(503,023)
(Deficiency) excess of revenue over expenses	\$ (381,969)	\$ 615,316
(Deficiency) excess of revenue over expenses	4 (301,707)	7 013,310

Strathroy Middlesex General Hospital Statement of Cash Flows

For the year ended March 31	2012	2011
Cash provided by (used in)		
Operating activities (Deficiency) excess of revenues over expenses Items not involving cash Amortization Gain on disposal of capital assets Amortization of deferred contributions relating to capital assets	\$ (381,969) 2,243,491 (32,310) (1,696,539)	\$ 615,316 2,540,498 (18,585) (2,000,890)
Net changes in non-cash working capital balances: Accounts receivable Inventory Prepaid expenses Accounts payable and accrued liabilities	132,673 325,833 (12,011) 40,587 (190,909) 296,173	1,136,339 61,880 31,564 51,215 198,246 1,479,244
Investing activities Purchase of capital assets Proceeds on disposal of capital assets	(1,059,204) 32,310 (1,026,894)	(764,036) 18,585 (745,451)
Financing activities Contributions received for capital assets Payments on capital lease Repayment of long-term debt Increase (decrease) in employee future benefits liability	816,821 (106,324) - 86,012	885,877 - (688,000) (22,258)
Increase in cash and equivalents during the year	796,509 65,788	175,619 909,412
Cash and equivalents, beginning of year	2,555,762	1,646,350
Cash and equivalents, end of year	\$ 2,621,550	\$ 2,555,762

March 31, 2012

Nature of Organization

The Hospital provides health care services to the residents of Strathroy and surrounding areas. The Hospital, incorporated without share capital under the Corporations Act of Ontario, is a charitable organization within the meaning of the Income Tax Act (Canada).

Basis of Accounting Presentations

The financial statements have been prepared using the accrual method of accounting. Under the accrual method of accounting, revenue is recorded when earned and expenses are recorded when incurred.

The financial statements do not include the assets, liabilities and activities of any organizations such as volunteer groups, which, although related to the Hospital, are not operated by it.

Inventories

Inventories are stated at the lower of cost and net realizable value. Cost is generally determined on the first-in, first-out basis. Reversals of previous write-downs to net realizable value are permitted when there is a subsequent increase in the value of inventories.

Capital Assets

Capital assets are recorded at cost and amortized on a straightline basis over their estimated useful lives once they are ready for use.

Building and related service equipment 5 - 40 years 3 - 20 years Properties for future expansion 20 years

Vacation Pay

Vacation pay is accrued for all employees as entitlement is earned.

Ministry of Health and Long-Term Care Funding

Under the Health Insurance Act and the 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 financial statements reflect agreed funding arrangements approved by the Ministry with respect to the year ended March 31, 2012.

March 31, 2012

Financial Instruments

The Hospital utilizes various financial instruments.

All transactions related to financial instruments are recorded on a settlement date basis.

The Hospital classifies its financial instruments into one of the following categories based on the purpose for which the asset was acquired. The Hospital's accounting policy for each category is as follows:

Held-for-trading

This category is comprised of cash. It is carried in the balance sheet at fair value with changes in fair value recognized in the statement of operations. Transaction costs related to instruments classified as held-for-trading are expensed as incurred.

Loans and receivables

These assets are non-derivative financial assets resulting from the delivery of cash or other assets by a lender to a borrower in return for a promise to repay on a specified date or dates, or on demand. They arise principally through the provision of goods and services to patients (accounts receivable), but also incorporate other types of contractual, monetary assets. They are initially recognized at fair value and subsequently carried at amortized cost, using the effective interest rate method, less any provision for impairment. Transaction costs related to loans and receivables are included in the amount initially recognized.

Other financial liabilities

Other financial liabilities include all financial liabilities, and are comprised of trade payables and other short-term monetary liabilities. These liabilities are initially recognized at fair value and subsequently carried at amortized cost using the effective interest rate method. Transaction costs related to other financial liabilities are netted against the amount initially recognized.

March 31, 2012

Financial Instruments - continued

Fair values

The fair value of a financial instrument is the amount of consideration that would be agreed upon in an arms length transaction between knowledgeable, willing parties who are under no compulsion to act. The fair value of a financial instrument on initial recognition is the transaction price, which is the fair value of the consideration given or received. Subsequent to initial recognition, the fair values of financial instruments that are quoted in active markets are based on bid prices for financial assets held and offer prices for financial liabilities. When independent prices are not available, fair values are determined by using valuation techniques that refer to observable market data.

Revenue Recognition

The Hospital follows the deferral method of accounting for contributions which include donations and government grants.

Operating grants are recorded as revenue in the period to which they relate. Grants approved but not received at the end of an accounting period are accrued. Where a portion of a grant relates to a future period, it is deferred and recognized in that subsequent period.

Unrestricted contributions are recognized as revenue when received or receivable if the amount 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. Contributions restricted for the purchase of capital assets are deferred and amortized into revenue on a straight-line basis, at a rate corresponding with the amortization rate for the related capital assets.

Use of Estimates

The preparation of financial statements in accordance with Canadian generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from management's best estimates as additional information becomes available in the future.

March 31, 2012

Leases

Leases meeting certain criteria are accounted for as capital leases. The imputed interest is charged against income and the capitalized value is amortized over its estimated useful life. Obligations under capital lease are reduced by lease payments net of imputed interest.

Employee Future Benefit Liability

Employee future benefit liability is actuarially determined and reflects management's best estimate of future cost trends associated with such benefits and interest rates. Cumulative gains and losses in excess of 10% of the beginning of year accrued benefit obligation are amortized on a straight-line basis over the expected average remaining service to expected retirement age of the active employees. Past service costs and plan amendments are amortized over the expected average remaining service to full eligibility of the active employees.

Pension Plan

The Hospital participates in a multi-employer defined benefit pension plan, however, sufficient information is not available to use defined benefit accounting. Therefore, the Hospital accounts for the plan as if it were a defined contribution plan, recognizing contributions as an expense in the year to which they relate.

March 31, 2012

1.	Accounts Receivable	 2012	 2011
	Loans and receivables: Inpatients Outpatients Ministry of Health and Long-Term Care Miscellaneous	\$ 58,537 296,955 - 336,033	\$ 70,131 320,793 39,889 582,545
	Deduct: Allowance for doubtful accounts	 691,525 (24,000)	1,013,358 (20,000)
		\$ 667,525	\$ 993,358
2.	Inventories	2012	2011
	Pharmacy inventory	\$ 89,780	\$ 77,769

Inventory is carried at cost, which exceeds net realizable value.

March	31.	201	2
-------	-----	-----	---

3.	Capital Assets			201	2			2011
			Cost	Accumula Amortizat			Cost	Accumulated Amortization
	Land Building and related	\$	92,528	\$		\$	92,528	\$ -
	service equipment Major equipment Construction in progress		7,777,827 ,850,416 3,383	15,073,3 18,420,7			29,516,411 22,750,574 1,223	14,076,208 19,858,379
		\$ 5 1	,724,154	\$33,494,0	88	\$ 5	52,360,736	\$ 33,934,587
	Net book value			\$18,230,0	66			\$ 18,426,149
	The amortization charge for	the yea	ar is as follov	ws:			2012	 2011
	Building Equipment				\$		7,123 6,368	\$ 1,087,942 1,452,556
					\$	2,24	3,491	\$ 2,540,498

Included in major equipment is equipment under capital lease with a cost of \$988,204 (2011 - \$nil) and accumulated amortization of \$123,535 (2011 - \$nil). Amortization expense includes amortization on equipment under capital lease of \$123,525 (2011 - \$nil).

4. Bank Indebtedness

As at March 31, 2012, the Hospital had \$2,500,000 in available credit (2011 - \$2,500,000), consisting of a \$1,500,000 operating line and \$1,000,000 in available transfers from Four Counties Health Services. At year end, neither facility was drawn upon.

March 31, 2012

5. Deferred Contributions Relating to Capital Assets

Deferred capital contributions relating to capital assets represent the unamortized amount of donations and grants received for the purchase of capital assets. The amortization of capital contributions is recorded as revenue in the statement of operations.

			2012		2011
	Balance, beginning of year Contributions received Amortized to revenue		6,416,581 816,821 1,696,539)	\$	17,531,594 885,877 (2,000,890)
	Balance, end of year	\$ 1	5,536,863	\$	16,416,581
6.	Obligation Under Capital Lease		2012		2011
	Obligation under capital lease - 3.33%, due December, 2016, repayable in semi-annual instalments of \$106,324 principal and interest Less current portion	\$	881,880 184,806	\$	- -
		<u>\$</u>	697,074	<u>\$</u>	-

Obligations under capital lease are secured by specific digital imaging equipment.

Principal payments required on obligations under capital lease for the next five years are as follows:

Year		Amount
2013		84,806
2014	1	91,012
2015	1	97,425
2016		204,054
2017	1	104,583
	\$ 8	881,880

March 31, 2012

7. Pension Plan and Employee Future Benefits

Substantially all of the full-time employees and some of the part-time employees are members of the Hospitals of Ontario Pension Plan. Contributions to the plan made during the year by the hospital on behalf of these employees amounted to \$1,387,497 (2011 - \$1,324,208) and are included in employee benefits in the statement of operations. The Hospital had a liability of \$nil (2011 - \$nil), associated with the pension plan.

Due to restructuring and staff reductions in previous years, early retirement packages have been made available to eligible Hospital employees. Eligible full-time employees who opted for early retirement received a continuation of their current health care benefits plan, up to the age of 65. The hospital also pays 50% of the premiums for health and dental benefits of Ontario Nurses' Association (ONA) members that retired after April 1, 2011 from the date of the retirement until the employee reaches the age of 65.

Employee future benefit liability is actuarially determined using the projected accrued benefit cost method pro-rata on service and reflects management's best estimate of future cost trends associated with such benefits and interest rates. Plan amendments are amortized over the expected average remaining service to full eligibility of the active employees (7.5 years). Cumulative gains and losses in excess of 10% of the beginning of year accrued benefit obligation are amortized over the expected average remaining service to the expected retirement age of active employees (12.3 years).

Information about the Hospital's accrued benefit obligation relating to its post-retirement benefit plan at March 31, 2012, is as follows:

	2012	 2011
Accrued benefit obligation	\$ 1,004,300	\$ 130,988
Less unamortized losses Unamortized past service costs Unamortized net actuarial (gain)/loss	(294,900) (492,400)	-
Accrued Benefit Liability - end of year	<u>\$ 217,000</u>	\$ 130,988

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

Discount rate - beginning of the year	4.80%
Discount rate - end of the year	4.10%
Weighted average health care trend rate	
- Initial	7.5%
- Ultimate	4.5%
- Year Ultimate Reached	2033

The actuarial valuation is for the period April 1, 2011 to March 31, 2012. Included in employee benefits on the statement of operations is an amount of \$106,715 (2011 - \$21,277) regarding employee future benefits.

March 31, 2012

8. Related Entities

a) Strathroy Middlesex General Hospital Foundation

Strathroy Middlesex General Hospital exercises significant influence over Strathroy Middlesex General Hospital Foundation (the Foundation) by virtue of its ability to appoint some of the Foundation's directors of the board. The Foundation raises funds for capital acquisition and other related purposes of the Hospital. The Foundation is incorporated under the Corporations Act of Ontario and is a registered charity under the Income Tax Act (Canada).

During the year, the Foundation transferred \$599,000 (2011- \$875,300) to the Hospital to be used for the purchase of capital assets and \$344,720 (2011 - \$79,828) for operations (education, parking, and capital lease).

b) Strathroy Middlesex General Hospital Auxiliary

The Auxiliary is an ancillary volunteer organization that is a registered charity under the Income Tax Act (Canada). Under its constitution and by-laws the stated purpose of the Auxiliary is to assist the Hospital and the community.

c) Four Counties Health Services

Strathroy Middlesex General Hospital is related to Four Counties Health Services as they are controlled by the same board of directors. Staff resources are shared by the hospital. During the year, Strathroy Middlesex General Hospital recovered remuneration of \$779,928 (2011 - \$678,209) from Four Counties Health Services, and reimbursed Four Counties Health Services \$405,006 (2011 - \$378,942) for remuneration paid by Four Counties Health Services. Joint purchases of supplies are expensed to each Hospital at point of purchase.

9. Economic Dependence

The Hospital received 83% of its total revenue for the year ended March 31, 2012 (2011 - 82%) from the Southwest LHIN and Ministry of Health and Long-Term Care.

March 31, 2012

10. Joint Venture Agreement

The Hospital was part of an agreement with the Regional Shared Services ("RSS") which was initially formed by the Thames Valley Hospital Planning Partnership ("TVHPP") to develop and operate a shared electronic health information management system. An agreement was executed by all involved hospitals in order to outline the rights, obligations and duties of each joint venture partner. The Hospital had an economic interest in RSS and paid to the RSS its share of capital, staffing and operating costs incurred by the RSS. The shared assets of the RSS resided on the financial statements of the London Health Sciences Centre ("LHSC"). The Hospital accounted for the joint venture on an equity basis.

Effective July 21, 2011 the parties revised their contractual relationship in order to adopt a purchased service model for existing services, and to create advisory and decision-making committees composed of London Health Sciences Centre and St. Joseph's Health Care, London, collectively known as the Service Provider, and the Customers.

11. Public Sector Salary Disclosure Act

The Public Sector Salary Disclosure Act requires that the Hospital disclose in its annual statement, the amount of salary and benefits paid in excess of \$100,000. In calendar year 2011, Michael Mazza, Chief Executive Officer of the Middlesex Hospital Alliance received salary of \$175,125 and taxable benefits of \$4,787; Nancy Maltby-Webster, Chief Operating Officer of the Middlesex Hospital Alliance received salary of \$146,658 and taxable benefits of \$7,784; Gina Taylor, Director of Patient Care received salary of \$125,400 and taxable benefits of \$503; and Marianne Lewis, Registered Nurse received salary of \$100,782 and taxable benefits of \$355. Generally, the Act defines salary as the amount received by an employee required by the Income Tax Act (Canada) and defines benefits as amounts reported to Revenue Canada, Taxation, under the Income Tax Act (Canada).

March 31, 2012

12. Capital Requirements

The Hospital's primary objective when managing capital is to safeguard the entity's ability to deliver comprehensive family-centred patient care in a rural and community-focused health service setting in collaboration and integration with our healthcare partners. The Hospital defines its capital as its cash and net assets, both restricted and unrestricted.

The Hospital monitors its cash position on a weekly basis and reviews the current ratio and working capital position on a monthly basis.

The Hospital manages the capital structure and makes adjustments to it in light of changes in economic conditions and the risk characteristics of the underlying assets. The Strathroy Middlesex General Hospital Foundation provides the annual capital equipment support, which is paid on a predetermined basis during the fiscal year. In order to adjust the capital structure the Hospital may sell or purchase investments, utilize the approved operating line of credit, or any advances from the Southwest Local Health Integration Network (LHIN). Longer term borrowing arrangements with financial institutions are also in place.

There have been no changes in what the Hospital defines as capital, or the objectives, policies and procedures for managing capital, in the year.

13. Contingencies

The Hospital has been named defendant in certain legal actions. The final liability, if any, of these claims is indeterminable as the Hospital has established defense actions and further, in the opinion of legal counsel and the Hospital's insurance adjustors, should any claim be successful, it would be subject to material coverage by the hospital's policies of insurance.

14. Internally Restricted Net Assets

\$600,000 (2011 - \$600,000) of net surplus has been internally restricted for future capital asset purchases.

15. Comparative Information

The comparative information presented in the financial statements has been restated to conform to the current year's presentation.