Halton Healthcare Services Corporation Financial Statements For the year ended March 31, 2023

Halton Healthcare Services Corporation

Financial Statements
For the year ended March 31, 2023

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Independent Auditor's Report

To the Members of Halton Healthcare Services Corporation

Opinion

We have audited the financial statements of Halton Healthcare Services Corporation (HHSC), which comprise the statement of financial position as at March 31, 2023, and the statements of changes in net assets, accumulated remeasurement losses, operations, and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and other explanatory information.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the HHSC as at March 31, 2023, and its results of operations 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 HHSC 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 these financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the HHSC'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 HHSC or to cease operations, or has no realistic alternative but to do so.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian 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 these financial statements.



Independent Auditor's Report

Auditor's Responsibilities for the Audit of the Financial Statements (continued)

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 HHSC's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the HHSC'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 HHSC to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

BDO Canada LLP

Chartered Professional Accountants, Licensed Public Accountants

Oakville, Ontario June 16, 2023

Halton Healthcare Services Corporation Statement of Financial Position

(expressed in thousands)

As at March 31,	2023			2022	
				Restated	
ASSETS				(note 9)	
Current Assets					
Cash and cash equivalents	\$	130,064	\$	125,425	
Restricted cash (note 3)		49,751		52,174	
Short-term investments (note 4)		15,142		2,381	
Accounts receivable (note 5)		22,268		36,165	
Due from related parties (note 6)		1,029		1,383	
Current portion of long-term receivable (note 7b,c)		15,587		14,888	
Inventories		3,056		3,518	
Prepaid expenses		4,427		4,232	
·		241,324		240,166	
Long-term investments (note 4)		9,569		-	
Long-term receivable (note 7b,c)		669,976		685,514	
Capital assets (note 7a)		1,464,917		1,509,745	
	\$	2,385,786	\$	2,435,425	
Current Liabilities Accounts payable and accrued liabilities (note 8) Current portion of long-term debt (note 16) Current portion of long-term payable (note 7b,c)	\$	155,939 2,521 15,538 173,998	\$	136,796 2,413 14,708 153,917	
Deferred grants (note 15)		1,394,704		1,438,825	
Long-term debt (note 16)		76,404		78,925	
Long-term payable (note 7b,c)		669,976		685,514	
Interest rate swaps (note 16)		7,126		12,165	
Asset retirement obligation (note 9)		702		680	
Post-retirement and employment benefits (note 11)		14,720		14,086	
Commitments and contingencies (note 7b,c and 13)		2,337,630		2,384,112	
Net assets		55,282		63,478	
Accumulated remeasurement losses		(7,126)		(12,165)	
	\$	2,385,786	\$	2,435,425	

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Director D. I. J. A.

Director

Halton Healthcare Services Corporation Statement of Changes in Net Assets

(expressed in thousands)

For the year ended March 31,	2023	2022
		Restated
		(note 9)
Net Assets, beginning of the year	\$ 63,478	55,466
Adoption of asset retirement obligation (note 9)	_	(574)
Net Assets, beginning of the year restated	\$ 63,478	54,892
Excess (Deficiency) of revenues over expenses	(8,196)	8,615
Adoption of asset retirement obligation (note 9)	-	(29)
Excess (Deficiency) of revenues over expenses as restated	 (8,196)	8,586
Net Assets, end of the year	\$ 55,282	63,478

Halton Healthcare Services Corporation Statement of Accumulated Remeasurement Losses (expressed in thousands)

For the year ended March 31,	2023	2022		
Accumulated remeasurement losses, beginning of year	\$	(12,165)	\$	(19,246)
Unrealized gains attributable to derivative interest rate swaps		5,039		7,081
Accumulated remeasurement losses, end of the year	\$	(7,126)	\$	(12,165)

Halton Healthcare Services Corporation Statement of Operations (expressed in thousands)

For the year ended March 31,	2023	2022	
		Restated	
		(note 9)	
Revenues			
Ministry of Health and Long-term Care (note 10)	\$ 527,213 \$	513,519	
Interest income	5,821	841	
Other operational income	73,127	63,939	
Deferred grant amortization	13,890	14,178	
	620,051	592,477	
Expenses			
Salaries, wages and benefits (note 11)	448,502	413,919	
Supplies and other expenses (note 16)	101,000	97,132	
Medical and surgical supplies	34,035	30,386	
Drugs	25,833	22,234	
Equipment amortization	16,394	17,849	
	625,764	581,520	
Excess (Deficiency) of revenues over expenses before building			
interest and amortization	(5,713)	10,957	
Building interest and amortization, net (note 15)	(2,483)	(2,371)	
Excess (Deficiency) of revenues over expenses	\$ (8,196) \$	8,586	

Halton Healthcare Services Corporation Statement of Cash Flows

(expressed in thousands)

For the year ended March 31,	2023	2022
		Restated
		(note 9)
Cash flows from operating activities		
Excess (Deficiency) of revenues over expenses	\$ (8,196) \$	8,586
Adjustment for items not affecting cash:		
Amortization of capital assets	65,505	63,470
Amortization of deferred grants	(60,518)	(57,428)
Post-retirement and employment benefits	634	886
Accretion expense	22	21
Changes in non-cash working capital items:		
Accounts receivable	13,897	(6,533)
Due from related parties	354	(40)
Inventories	462	376
Prepaid expenses	(195)	292
Accounts payable and accrued liabilities	19,143	20,252
	 31,108	29,882
Cash flows used in investing activities		
Decrease in long-term receivable	14,839	13,865
Increase in investments	(22,330)	, =
Decrease in restricted cash	2,423	6,268
	 (5,068)	20,133
Cash flows used in capital activities		
Purchase of capital assets	 (20,677)	(22,482)
Cash flows from financing activities		
Contributions received for capital purposes	16,397	10,124
Repayment of long-term debt	(2,413)	(2,310)
Decrease in long-term payable, net	(14,708)	(13,925)
	(724)	(6,111)
Increase in cash, during the year	4,639	21,422
Cash, beginning of year	125,425	104,003
Cash, end of year	\$ 130,064 \$	125,425

(expressed in thousands)
For the year ended March 31, 2023

1. Operations

Halton Healthcare Services Corporation ("HHSC") is a non-profit organization incorporated without share capital under the laws of Ontario. HHSC is a registered charity and, as such, is exempt from income taxes under the Income Tax Act (Canada).

HHSC was created on August 1, 1998 as a result of the amalgamation of the Oakville-Trafalgar Memorial Hospital Association and the Milton District Hospital. On January 2, 2006, the operations of the Georgetown Hospital were transferred to HHSC. HHSC is principally involved in providing health care services to the Towns of Halton Hills, Milton, and Oakville and their surrounding communities.

These financial statements include the assets, liabilities and activities of HHSC. The Oakville Hospital Volunteer Association, Milton District Hospital Auxiliary, Georgetown Hospital Volunteer Association, Oakville Hospital Foundation, Milton District Hospital Foundation, The Georgetown Hospital Foundation and Halton Healthcare LTC Inc. are separate entities whose financial information is reported separately from HHSC.

2. Summary of significant accounting policies

Basis of presentation

These financial statements have been prepared by management in accordance with Canadian public sector accounting standards (PSAS) including accounting standards that apply only to government not-for-profit organizations.

Cash and Cash Equivalents

Cash and cash equivalents consist of cash on hand and bank balances.

Inventories

Inventories are valued at the lower of cost and net realizable value. Cost is determined on the average cost basis. Inventory consists of medical and general supplies used in HHSC's operations and not for resale purposes.

Capital Assets

Purchased capital assets are recorded at cost less accumulated amortization. Contributed capital assets are recorded at fair value at the date of contribution. Repairs and maintenance costs are expensed as incurred. Betterments which extend the estimated life of an asset are capitalized.

When conditions indicate a tangible capital asset no longer contributes to HHSCs' ability to provide services, or that the value of future economic benefits associated with the tangible capital asset is less than its net book value, the cost of the tangible capital asset is reduced to reflect the decline in the asset's value.

(expressed in thousands)
For the year ended March 31, 2023

2. Summary of significant accounting policies (continued)

Capital Assets (continued)

Capital assets are amortized on a straight-line basis at annual rates based on the estimated useful lives of the assets:

Land improvement10 yearsBuildings10 to 50 yearsBuilding service equipment10 to 20 yearsMajor equipment3 to 10 years

Capital projects in progress are not amortized until projects are substantially complete and the assets are ready for use.

Asset Retirement Obligation

A liability for an asset retirement obligation is recognized when there is a legal obligation to incur retirement costs in relation to a tangible capital asset; the past transaction or event giving rise to the liability has occurred; it is expected that future economic benefits will be given up; and a reasonable estimate of the amount can be made. The liability is recorded at an amount that is the best estimate of the expenditure required to retire a tangible capital asset at the financial statement date. This liability is subsequently reviewed at each financial reporting date and adjusted for the passage of time and for any revisions to the timing, amount required to settle the obligation or the discount rate. Upon the initial measurement of an asset retirement obligation, a corresponding asset retirement cost is added to the carrying value of the related tangible capital asset if it is still in productive use. This cost is amortized over the useful life of the tangible capital asset. If the related tangible capital asset is unrecognized or no longer in productive use, the asset retirement costs are expensed.

Pension plan

Substantially all of the employees of HHSC are eligible to be members of the Healthcare of Ontario Pension Plan (HOOPP), which is a multi-employer, best five years average earnings and contributory pension plan. Contributions made to HOOPP are expensed as funded, as the plan is accounted for as a defined contribution plan.

Employee future benefits

The cost of post-employment benefits is determined using the projected benefit method pro-rated on service and various assumptions. The discount rate used to determine the accrued benefit obligation was determined based on the Ontario provincial yield curve and a spread. The spread is equal to 60% of the spread between Ontario provincial and AA corporate bonds. The actuarial gains and losses are amortized over the average remaining service period of active employees. Past service costs are expensed in the period of the plan amendment.

Revenue Recognition

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

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

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

(expressed in thousands)
For the year ended March 31, 2023

2. Summary of significant accounting policies (continued)

Revenue Recognition (continued)

Revenue from the Provincial Insurance Plans, preferred accommodation and marketed services is recognized when the goods are sold or the service is provided.

Amortization of buildings is not fully funded by the Ontario Ministry of Health and Long-term Care ("MOHLTC") and accordingly the amortization of buildings has been reflected as an undernoted item in the statement of operations with the corresponding realization of revenue for deferred contributions.

Parking revenues are recognized when the service is provided.

Under the Health Insurance Act and Regulations thereto, HHSC is funded primarily by the Province of Ontario in accordance with funding arrangements established by the MOHLTC, and the Local Health Integration Network ("LHIN"). Pursuant to a transfer order made by the Minister of Health under subsection 40(1) of the Connecting Care Act, 2019, the H-SAA between HHSC and the LHIN dated effective March 31, 2021, as amended, was transferred to Ontario Health ("OH"), effective April 1, 2021.

HHSC has entered into a Hospital Service Accountability Agreement (the "H-SAA") for fiscal 2023 with the MOHLTC and OH that sets out the rights and obligations of the parties to the H-SAA in respect of funding provided to HHSC by the MOHLTC/OH. The H-SAA also sets out the performance standards and obligations of HHSC that establish acceptable results for HHSC's performance in a number of areas. 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. These financial statements reflect agreed arrangements approved by the MOHLTC/OH with respect to the year ended March 31, 2023.

Financial Instruments

HHS is party to an interest rate swap agreement that manages the exposure to market risks from changing interest rates. At March 31, 2023, \$78,925 (2022 - \$81,338) has been advanced under this interest rate swap. HHSC's policy is not to utilize derivative financial instruments for trading or speculative purposes.

HHSC classifies its financial instruments as either fair value or amortized cost. HHSC's accounting policy for each category is as follows:

Fair value

This category is comprised of cash, restricted cash and derivative instruments. They are initially measured at cost and subsequently carried at fair value with changes in fair value recognized in the statement of accumulated remeasurement losses until they are realized, when they are transferred to the statement of operations. Transaction costs related to financial instruments in the fair value category are expensed as incurred.

When a decline in fair value is determined to be other than temporary, the amount of the loss is removed from accumulated remeasurement gains and losses and recognized in the statement of operations. On sale, the amount held in accumulated remeasurement gains and losses associated with that instrument is removed from net assets and recognized in the statement of operations.

(expressed in thousands)
For the year ended March 31, 2023

2. Summary of significant accounting policies (continued)

Financial Instruments (continued)

Amortized Cost

This category includes accounts receivable, investments, long-term receivable, due from related parties, accounts payable and accrued liabilities, long-term payable, long-term debt and asset retirement obligation. They are initially recognized at cost and subsequently carried at amortized cost using the effective interest rate method, less any impairment losses on financial assets, except financial contributions, which are recognized at fair value.

Transaction costs related to financial instruments in the amortized cost category are added to the carrying value of the instrument.

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

Use of Estimates

In preparing the financial statements, management is required to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates. Accounts requiring significant estimates include collectability of accounts receivable, accrued liabilities, deferred revenue, asset retirement obligations and employee future benefits.

The infectious coronavirus ("COVID-19") pandemic has added to HHSC's measurement uncertainty primarily due to a reduction of available information with which to make significant assumptions related to critical estimates as compared to those estimates reported prior to the pandemic.

Contributed Services

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

3. Restricted Cash

Restricted cash represents funds internally and externally restricted for the purpose of redevelopment projects. The externally restricted portion totaled \$20,232 (2022 - \$20,184).

(expressed in thousands)
For the year ended March 31, 2023

4. Short-term and Long-term Investments

Short-term investments include restricted and unrestricted funds invested in guaranteed investment certificates (GICs) that earn interest between 4.8% and 5.25% with maturity dates ranging from May 2023 to March 2024.

Long-term investments include unrestricted funds invested in GICs that earn interest of 5.25% with maturity dates ranging from May 2024 to November 2024.

5. Accounts Receivable

	2023	2022
MOHLTC	\$ 11,033	\$ 24,339
Patients, net of allowance	6,268	8,699
Harmonized Sales Tax (HST)	4,088	2,110
Other	879	1,017
	\$ 22,268	\$ 36,165

6. Due from Related Parties

		2023	2022
Oakville Hospital Foundation	\$	551 \$	994
Milton District Hospital Foundation		84	90
The Georgetown Hospital Foundation		79	91
Oakville Hospital Volunteer Association		208	
	\$	1,029 \$	1,383

7. Capital Assets

a) Capital Assets

, .	2023						2022			
		Cost	Accumulated Amortization			Cost		cumulated nortization		
						(Restated)		(Restated)		
Land	\$	31,396	\$	=	\$	31,396	\$	-		
Land improvement		5,352		1,874		5,005		1,410		
Buildings		1,677,112		332,724		1,677,150		291,355		
Building service equipment		43,948		31,037		35,334		23,752		
Major equipment		233,600		170,558		225,783		155,503		
Capital projects in process		9,702		-		7,097		-		
	\$	2,001,110	\$	536,193	\$	1,981,765	\$	472,020		
Net book value			\$	1,464,917			\$	1,509,745		

(expressed in thousands)
For the year ended March 31, 2023

7. Capital Assets (continued)

a) Capital Assets (continued)

Capital projects in process reflect monies expended on assets not yet in use including the pre-planning and design phase of the Georgetown Hospital (GH) expansion, development of the Oakville Trafalgar Memorial Hospital (OTMH) and Milton District Hospital (MDH) shell-in spaces and information technology system optimization projects.

b) New Oakville Trafalgar Memorial Hospital

In July 2011, HHSC entered into the New Oakville Hospital Project Agreement ("NOH PA") with a third party construction company, Hospital Infrastructure Partners Partnership ("HIP"), to design, build, finance, and maintain (for a 30-year term) the Oakville hospital project.

The balance of the amount due to HIP of \$560,258 (2022 - \$571,566) is related to the construction of the buildings, bears interest of 6.64% and is funded by the MOHLTC. The receivable related to the Oakville project is \$560,306 (2022 \$571,759). The payments over the next five years and thereafter are as follows:

			Operating						
_	Debt		Interest		Costs	L	ife Cycle		
2024	\$ 12,028	\$	34,375	\$	13,968	\$	5,269		
2025	12,794		33,551		14,287		2,542		
2026	13,608		32,796		14,495		3,968		
2027	14,474		31,869		14,827		6,779		
2028	15,395		31,009		15,043		11,539		
Thereafter	491,959		311,120		311,760		222,592		
	\$ 560,258	\$	474,720	\$	384,380	\$	252,689		
Current	12,028		34,375		13,968		5,269		
Long Term	548,230		440,345		370,412		247,420		
Total	\$ 560,258	\$	474,720	\$	384,380	\$	252,689		

Part of the NOH PA and HIP requires that it provide certain operating and maintenance services. The debt, operating and maintenance services are payable in blended average monthly installments of \$5,974 and the NOH PA matures on July 31, 2045. The total remaining operating and maintenance service costs are projected to be \$384,380 over the term of the NOH PA. In addition, HHSC is committed to making total payments of approximately \$252,689 related to life cycle maintenance over the remaining term of the NOH PA. These payments are to be substantially funded by the MOHLTC and included in revenue from the MOHLTC.

(expressed in thousands)
For the year ended March 31, 2023

7. Capital Assets (continued)

c) Milton District Hospital

On March 30, 2015, HHSC entered into the Milton District Hospital Redevelopment Project Agreement ("MDH PA") with a third party construction company, Plenary Health Milton LP ("Plenary"), to design, build, finance, and maintain the Milton hospital redevelopment project.

The balance of the amount due to Plenary of \$125,256 (2022 - \$128,656) is related to the construction of the buildings and bears interest of 4.47% and is funded by the MOHLTC. The receivable related to the Milton hospital project is \$125,257 (2022 – \$128,643).

The payments over the next five years and thereafter are as follows:

		Operating					
_	Debt	Interest		Costs	L	ife Cycle	
2024	\$ 3,510	\$ 5,074	\$	2,999	\$	953	
2025	3,557	4,962		3,053		1,227	
2026	3,672	4,847		3,107		1,139	
2027	3,792	4,727		3,163		1,243	
2028	3,915	4,604		3,220		1,466	
Thereafter	106,810	58,002		74,005		51,663	
	\$ 125,256	\$ 82,216	\$	89,547	\$	57,691	
Current	3,510	5,074		2,999		953	
Long Term	121,746	77,142		86,548		56,738	
Total	\$ 125,256	\$ 82,216	\$	89,547	\$	57,691	

Part of the MDH PA with Plenary requires that it provide certain building operating and maintenance services. The debt, operating and maintenance services are payable in blended average monthly installments of \$1,038 and the MDH PA matures on April 1, 2047. The total remaining operating and maintenance service costs over the term of the MDH PA is \$89,547. In addition, HHSC is committed to making total payments of approximately \$57,691 related to life cycle maintenance over the remaining term of the MDH PA. These payments are substantially funded by the MOHLTC and included in revenue from the MOHLTC.

8. Accounts Payable and Accrued Liabilities

	2023	2022
MOHLTC	\$ 61,087	\$ 59,140
Trade	38,751	38,317
Government remittances	5,559	5,419
Wages, benefits and other accruals	50,542	33,920
	\$ 155,939	\$ 136,796

(expressed in thousands)
For the year ended March 31, 2023

9. Asset Retirement Obligations

Effective April 1, 2022, HHSC adopted new Public Sector Accounting Handbook Standard, PS 3280 Asset Retirement Obligations. As a result of the adoption, the presentation of the financial statements changed from the prior year. The standard requires a legal obligation to be recognized and an increase in cost to capital assets measured as of the date the legal obligation was incurred. This change in accounting policy has been applied under a modified retrospective approach with restatement to comparative figures. The impact of adoption of this standard was as follows:

	 2022
	 _
Increase in capital assets	\$ 77
Increase in asset retirement obligation	\$ 680
Decrease in revenues in excess of expenses	\$ (29)
Decrease in opening net assets	\$ (574)

The asset retirement obligation has been recognized in respect to the appropriate handling and removal of asbestos present within the buildings at the MDH and GH sites. The related asset retirement costs are being amortized on a straight-line basis over the useful life of the buildings. The liability has been estimated using a net present value technique with a discount rate of 3.18%. The estimated total undiscounted future expenditures of \$933 will be incurred over the useful life of the buildings, with the liabilities expected to be settled by 2030 and 2035.

The carrying amount of the liability is as follows:

	2023	2022
Balance, beginning of year	\$ 680 \$	659
Accretion expense	 22	21
Balance, end of year	\$ 702 \$	680

10. COVID-19 MOHLTC Funding

In response to the COVID-19 pandemic, the MOHLTC has announced funding programs to assist hospitals with incremental operating and capital costs as a result of COVID-19. Additionally, as part of the broad based funding reconciliation, the MOHLTC is allowing hospitals to reallocate surplus funding that otherwise would have been repayable from certain programs to offset budget constraints created by COVID-19.

Management's estimate of HHSC's MOHLTC revenue is based on guidance which continues to evolve. This guidance includes the maximum amount of funding potentially available to HHSC, as well as the criteria for eligibility. As a result, there is measurement uncertainty associated with the MOHLTC revenue related to COVID-19. In addition, as the funding is subject to review and reconciliation in subsequent periods, funding recognized as revenue during a period may be increased or decreased in subsequent periods.

(expressed in thousands)
For the year ended March 31, 2023

11. Post-retirement and Employment Benefits

Pension

Substantially all of the employees of HHSC are members of HOOPP. The most recent valuation for financial reporting purposes completed by HOOPP as at December 31, 2022 disclosed net assets available for benefits of \$103,674,000 with pension obligations of \$92,721,000, resulting in a surplus of \$10,953,000. During the year, employer contributions made by HHSC to HOOPP amounted to \$22,270 (2022 - \$22,130) and are included in salaries, wages and employee benefits in the Statement of Operations.

Non-Pension

Certain employees of HHSC are entitled to certain post-employment benefits. HHSC recognizes the present value of its obligation from these benefits as they are earned. At March 31, 2023, HHSC's accrued benefit obligation, related to post-retirement benefit plan is estimated to be \$14,720 (2022 - \$14,086). The most recent actuarial valuation of the obligation was performed as at March 31, 2022.

The significant actuarial assumptions adopted in estimating HHSCs' accrued benefit obligations are as follows:

Discount rate	4.50% (2022 – 3.70%)
Dental benefits cost escalation	3.00% (2022 – 3.00%) per annum
Medical benefits cost escalation	5.70% (2022 – 5.70%) per annum

Included in salaries, wages and employee benefits in the Statement of Operations is an expense of \$634 (2022 - \$886) relating to non-pension future employee benefits.

12. Financial Instrument Classification

The following table provides cost and fair value information of financial instruments by category. The maximum exposure to credit risk would be the carrying value as shown below.

				Amortized		
	Fa	ir Value		Cost		
Cash	\$	130,064	\$	-		
Restricted cash		49,751		-		
Short-term investments		-		15,142		
Accounts receivable		-		22,268		
Long-term investments		-		9,569		
Long-term receivable		-		685,563		
Due from Related Parties		-		1,029		
Accounts payable and accrued liabilities		-		(155,939)		
Long-term debt		-		(78,925)		
Asset retirement obligation		-		(702)		
Long-term payable		-		(685,514)		
Interest rate swap		(7,126)		-		

(expressed in thousands)
For the year ended March 31, 2023

12. Financial Instrument Classification (continued)

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

- Level 1 fair value measurements are those derived from quoted prices (unadjusted) in active markets for identical assets or liabilities using the last bid price;
- 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).

Cash
Restricted cash
Interest rate swaps
Total

Level 1	L	evel 2	2 Level		Total
\$ 130,064	\$	-	\$	-	\$ 130,064
49,751		-		-	49,751
=		-		(7,126)	(7,126)
\$ 179,815	\$	-	\$	(7,126)	\$ 172,689

There were no transfers between Level 1 and Level 2 for the year ended March 31, 2023. There were also no transfers in or out of Level 3 during the year.

13. Commitments and contingencies

a) Outstanding commitments for service contracts for the next two years are as follows:

2024	\$ 2,435
2025	1,540
	\$ 3,975

- b) Due to the nature of its operations, HHSC is periodically subject to lawsuits in which HHSC is a defendant. With respect to claims and possible claims at March 31, 2023, management believes HHSC has valid defenses and/or appropriate insurance coverage in place. In the event any claims are successful, management believes that such claims are not expected to have a material adverse effect on HHSC's financial position and results of operations.
- c) Effective June 2019, the Province of Ontario enacted Bill 124 "Protecting a Sustainable Public Sector for Future Generations Act, 2019". This legislation limited compensation increases to 1.0% per year for a three-year moderation period for both unionized and non-unionized employees in the Ontario public sector. The starting dates of the moderation period varied across entities and employee groups.

(expressed in thousands)
For the year ended March 31, 2023

13. Commitments and contingencies (continued)

On November 29, 2022, the Ontario Superior Court of Justice struck down Bill 124, finding it unconstitutional and declaring it to be "void and of no effect". On December 29, 2022, the Ontario government filed a Notice of Appeal with the Ontario Court of Appeal.

In September 2021, an arbitrator issued an interest arbitration award under the Hospital Labour Disputes Arbitration Act (HLDAA) for ONA, representing nurses employed by participating hospitals, related to the collective agreement ending March 31, 2023. This award contained a clause that stated the Board of Arbitration would "remain seized with respect to reopener on monetary proposals in the event that ONA is granted an exemption, or Bill 124 is declared unconstitutional by a court of competent jurisdiction, or the Bill is otherwise amended or repealed.

As a result of the November 29, 2022 Court decision, ONA returned to the arbitrator. On April 1, 2023 the arbitrator issued a Supplemental Award under the HLDAA, ordering an additional 0.75% wage increase effective April 1, 2020, an additional 1.0% increase effective April 1, 2021 and an additional 2.0% increase effective April 1, 2022.

The impact to HHSC as a result of the Ontario Superior Court decision has been considered.

14. Financial Instrument Risk Management

Credit risk

Credit risk is the risk of financial loss to HHSC if a debtor fails to make payments of interest and principal when due. HHSC is exposed to this risk relating to its cash and cash equivalents, long-term receivables, due from related parties and accounts receivable. HHSC holds its cash accounts with federally regulated chartered banks who are insured by the Canadian Deposit Insurance Corporation.

HHSC's credit risk is primarily attributable to its receivables which are primarily due from the MOHLTC. Credit risk is mitigated by the financial solvency of the provincial government and highly diversified nature of the patient population.

HHSC measures its exposure to credit risk based on how long the amounts have been outstanding. An impairment allowance is set up based on HHSC's historical experience regarding collections. The amounts outstanding at year end were as follows:

	Total	C	urrent	30)-60 days	61	-90 days 91-1	20 days	121 plus
MOHLTC	\$ 11,033	\$	11,033	\$	-	\$	- \$	-	\$ -
Patients	12,622		6,312		2,040		919	601	2,750
Other	4,967		4,967		=		-	-	-
Gross receviables	28,622		22,312		2,040		919	601	2,750
Less: impairment allowance	(6,354)		(1,733)		(767)		(725)	(423)	(2,706)
Net receivables	\$ 22,268	\$	20,579	\$	1,273	\$	194 \$	178	\$ 44

(expressed in thousands)
For the year ended March 31, 2023

14. Financial Instrument Risk Management (continued)

The amounts greater than 90 days owing from patients that have not had a corresponding impairment allowance setup against them are collectible based on HHSC's past experience. Management has reviewed the individual balances and based on the credit quality of the debtors and their past history of payment has determined that the balances are collectible.

Additional measurement uncertainty exists around the collectability of patients receivables, due to the impact of COVID-19 pandemic. The uncertainty is caused by collection delays and increase in the rate of doubtful accounts from patients due to economic slowdown in Ontario.

Market risk

Market risk is the risk that the fair value of future cash flows of a financial instrument will fluctuate as a result of market factors. Market factors include currency risk and equity risk. HHSC is not exposed to significant currency or equity risk as it doesn't hold any equity or foreign instruments.

Interest rate risk

Interest rate risk is the potential for financial loss caused by fluctuations in fair value or future cash flows of financial instruments because of changes in market interest rates. HHSC is exposed to this risk through its interest bearing investments. The risk on interest bearing investments is mitigated by the fact that HHSC holds only guaranteed investment certificates. The risk over interest bearing debt is mitigated by the use of interest rate swaps to fix the interest rate on the debt over a period of the obligation.

Liquidity risk

Liquidity risk is the risk that HHSC will not be able to meet its obligations as they come due. HHSC manages this risk by forecasting cash flow from operations and anticipating investing and financing activities and maintaining credit facilities to ensure it has sufficient funds to meet current and foreseeable financial requirements. There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure risk.

(expressed in thousands)
For the year ended March 31, 2023

15. Deferred Grants

In the Statement of Operations, building amortization is net of amortization of building deferred grants as follows:

	2023	2022
Building		
Amortization	\$ 49,111	\$ 45,621
Building grant amortization	 (46,628)	(43,250)
	\$ 2,483	\$ 2,371
Interest on long-term obligations related to building	 2023	2022
Interest on long-term obligations	\$ 40,278	\$ 41,059
Government contribution for interest on long-term		
obligations	 (40,278)	(41,059)
	\$ =	\$ -

In the Statement of Financial Position, deferred grants are net of accumulated amortization less any other adjustments.

	2023	2022
Grants		
Ministry of Health and Long-Term Care	\$ 1,507,067	\$1,499,321
Regional Municipality of Halton	18,571	18,571
Town of Oakville	129,173	129,173
Town of Milton (Note 5)	28,838	28,795
Capital donations	208,643	200,035
	1,892,292	1,875,895
Accumulated Amortization		
Building	\$ 330,483	\$ 283,855
Equipment	167,105	153,215
	497,588	437,070
Balance, end of year	\$ 1,394,704	\$1,438,825

Included in deferred grants is \$350 (2022 - \$408) of unspent funds relating to funding received from the Health Infrastructure Renewal Fund ("HIRF"). The unspent funds are a result of the impacts of the COVID-19 pandemic.

16. Long Term Debt & Credit Facilities

HHSC has a long term loan ("Facility 2") which was utilized to provide local share plan contributions related to the redevelopment projects. As at March 31, 2023 the outstanding balance is \$78,925 (2022 - \$81,338) and bears interest at 28 to 35 day Bankers' Acceptances. It is repayable in blended monthly payments of approximately \$516, maturing in April 2043.

(expressed in thousands)
For the year ended March 31, 2023

16. Long Term Debt & Credit Facilities (continued)

The principle payments due under this facility for the next five years and thereafter are as follows:

2024	\$ 2,521
2025	2,634
2026	2,752
2027	2,875
2028	3,004
Thereafter	65,139
Total	\$ 78,925
Current	2,521
Long-Term	76,404
Total	\$ 78,925

Interest expense of \$3,789 (2022 - \$3,899) related to Facility 2 has been reflected in supplies and other expenses on the statement of operations.

HHSC has two \$5,000 demand operating lines of credit, which bear interest at prime minus 0.5% and prime plus 0.5% respectively. As at March 31, 2023, \$Nil (2022 - \$Nil) had been drawn against these facilities.

HHSC holds a treasury risk management facility ("Facility 4") up to \$35,000 to cover the hedge risk in connection with the swap related to Facility 2.

Derivative Liability

HHSC entered into an interest rate swap contract with its bank in order to hedge its variability in future interest payments relating to its Facility 2 loan. This swap effectively locked in the interest rate on the long-term debt at 4.72%.

Fair value as at March 31, 2023 of this interest rate swap is \$7,126 (2022 - \$12,165) and is reflected as a liability on the statement of financial position.

17. Related Parties

In conjunction with two other hospitals, effective March 29, 2009, HHSC became a member of West GTA Healthcare Shared Services Corporation, operating as Shared Services West (SSW). SSW is a non-profit corporation, administered by a board which includes representation from each of the three member hospitals.

HHSC has an economic interest in the operations of the Oakville Hospital Volunteer Association (the "Oakville VA"), Milton District Hospital Auxiliary (the "Milton Auxiliary") and Georgetown Hospital Volunteer Association (the "Georgetown VA"). The Oakville VA, Milton Auxiliary and Georgetown VA are registered charities under the Income Tax Act. In accordance with their by-laws, all or part of the surplus from operations of the Oakville VA, Milton Auxiliary and Georgetown VA is to be contributed for the benefit of HHSC.

(expressed in thousands)
For the year ended March 31, 2023

17. Related Parties (continued)

The Foundations ("Georgetown Hospital Foundation (GHF), Oakville Hospital Foundation (OHF), and Milton District Hospital Foundation (MDHF)") are independent corporations incorporated without share capital which have their own Board of Directors and are registered charities under the Income Tax Act. HHSC has an economic interest in the operations of the Foundations as they receive and maintain funds for charitable purposes for the use of operations, renovations, maintenance and equipment of the HHSC community hospitals.

GHF

At March 31, 2023, HHSC had a receivable from the GHF of \$79 (2022 - \$91) for reimbursement of costs incurred on its behalf. Total funds received from the GHF for fiscal 2023 amounts to \$482 (2022 – \$271).

OHF

At March 31, 2023, HHSC had a receivable from the OHF of \$551 (2022 - \$994) for reimbursement of costs incurred on its behalf. Total funds received from the OHF for fiscal 2023 amounts to \$7,649 (2022 – \$5,423).

MDHF

At March 31, 2023, HHSC had a receivable from the MDHF of \$84 (2022 - \$90) for reimbursement of costs incurred on its behalf. Total funds received from the MDHF for fiscal 2023 amounts to \$940 (2022 – \$212).

18. Halton Healthcare LTC Inc.

HHSC is related to Halton Healthcare LTC Inc. ("LTC") as a result of common board members. LTC provides residence and long-term care. LTC, a non-share capital charitable organization, is incorporated under the Canada Corporations Act, is a non-profit organization, and is exempt from income tax under the Income Tax Act.

HHSC was awarded an opportunity by the MOHLTC to develop and operate a 128 bed long-term care facility on its lands. HHSC assigned its rights to develop and manage the facility to LTC. In an agreement commencing April 18, 2002, HHSC agreed to lease a parcel of its land to BPC Long-Term Care Facilities (Oakville) Inc. ("BPC Oakville") for a 40-year term. BPC Oakville agreed to sublease that parcel to LTC. The facility opened in October 2003.

LTC has not been consolidated in HHSC's financial statements. A financial summary of the non-consolidated entity for the current and previous year is as follows:

(expressed in thousands)
For the year ended March 31, 2023

18. Halton Healthcare LTC Inc. (continued)

	2023	2022
Financial position:		
Total assets	\$ 10,619	\$ 11,641
Total liabilities	13,050	14,495
Net deficiency	\$ (2,431)	\$ (2,854)
Results of operations:		
Total revenues	\$ 13,247	\$ 12,313
Total expenses	12,824	11,634
Excess of revenues over expenses	\$ 423	\$ 679

19. Comparative Figures

Comparative figures have been restated where necessary to conform to the presentation adopted during the current fiscal year.