



South East Grey Community Health Centre



2019 Volunteer Appreciation Brunch - SEGCHC has over 40 volunteers that play a key role in providing quality support and programs to our community. We are so grateful to the individuals who support our programs and services.

Annual Report

2018-2019

Every One Matters

We are grateful for the ongoing support and funding received from the following organizations:

South West Local Health Integration Network

Community Foundation Grey Bruce

Erskine Presbyterian Congregation

Municipality of Grey Highlands

Ontario Trillium Foundation

Province of Ontario to support the Healthy Kids Community Challenge

Township of Southgate

Township of Melancthon

A special thank you to our donors:

Dr. Roddy Caulfeild

Continental Fitness

Patricia Houston

Deb McCulloch

Penny Pedlar

Cindy Sabo

Table of Contents

Message from the Board Chairperson _____	1
To Our Stakeholders _____	2
Operations _____	3
A Review of our Strategic Planning and Priority Status _____	3
Community Initiatives _____	3
Finance/Administration and IT _____	7
What our Clients/Patients are Saying _____	10
By the Numbers – Our Performance _____	12
SEGCHC Clinical Data Reporting 2014-18 _____	12
Accountability _____	15
Multi-Sector Service Accountability Agreement _____	15
2018-2019 South East Grey CHC - Board of Directors _____	15
Independent Auditor’s Report _____	16
Statement of Financial Position _____	18
Statement of Operations and Changes in Fund Balances _____	19
Centre Information _____	21

“Be the change that you wish to see in the world.”

— **Mahatma Gandhi**

Message from the Board Chairperson

2018/19 has been a most exciting and rewarding year for the South East Grey CHC.

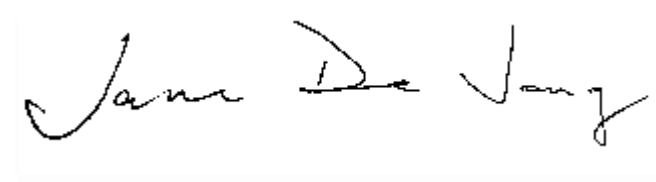
Thanks to the support of the LHIN, the Municipalities, Ontario Trillium Foundation and volunteers, we have expanded services at every location to provide more patients more healthcare and wellness programs. The opening of the new sites in Dundalk has provided that community with consistent high quality healthcare in their area.

Our community is indebted to the leadership team and the committed staff and volunteers who have worked so hard to adapt to the changing needs of the community, expand the services we offer while maintaining the highest standards of efficiency and caring in Ontario.

Three of the founding board members of the CHC are retiring this year, and we will lose that continuity with the start-up phase of our organization. But in making Terry Mokriy, Susie Furlong and Paul Tessier – Board Members Emeritus, we will continue to benefit from their experience, insights and local knowledge. On behalf of the CHC, I extend a big vote of thanks to each of them for their tenacity, energy and leadership.

Our Board works tirelessly to represent the interests of the community, and will continue to do so as we move ahead in collaboration with other partners in creating an Ontario Health Team for Grey Bruce. Thank you to each of them for their unique contributions and perspectives. The new board members elected at the AGM are bringing additional new skills and experience and we welcome them to the SEGCHC.

We look forward to another dynamic year ahead in primary care and maintaining the high standards our staff exhibit each day. With the acquisition of new space at our Markdale site, the plan for a health hub is another step closer – a single point of care for clinical, mental health, social services – what a huge benefit to our patients.



Jane de Jong – Board Chairperson

“Everything you
can imagine is
real.”

— **Pablo
Picasso**

To Our Stakeholders

Each year, through this report, I have the pleasure of highlighting the events and activities that the CHC carries out annually in order to improve its service offering. This year marks the most significant improvement in services in our brief history – especially for the residents of Southgate, the fastest growing area in Grey County.

In 2018 the CHC was successful in receiving \$1.050M in additional permanent funding from the MOHLTC all of which was allocated to our operations in the Township of Southgate. The funding allowed the CHC to assume responsibility for the patients served by the former VON nursing station (retirement) and the patients rostered to Dr. Tuk (moved from the area). More than 2,500 patients were affected and the transition to the CHC was, for the most part, seamless thanks to the efforts of CHC staff. The facility at the Dundalk Lions primary care clinic was upgraded thanks to one-time funding received from the SW LHIN, to meet our operational needs and the Presbyterian Church renovated to provide accommodations for the allied health team, community partners and programs.

A full time physician and two full time nurse practitioners supported by registered practical nurses, a dietitian and a part time social worker are dedicated to meeting the needs of Southgate residents.

When visiting the Southgate clinic recently, I engaged in a conversation with the on-duty physician. She indicated to me that the level of patient need in Southgate is enormous and that it would take the CHC up to five years to pro-actively meet the needs of local residents.

In the coming months, the CHC will be engaged in discussions locally with the Grey Bruce Ontario Health Team (OHT) organizing committee. The OHT strategy introduced by the MOHLTC to reduce hallway medicine will see the creation of a pan Grey/Bruce health strategy designed to reduce barriers and improve patient flow through the health system. The CHC will play a leadership role in determining how the OHT will be governed, and how current siloed services may be better integrated to improve patient care. The OHT journey will test the fibre of local health system leaders as challenges to the status quo are challenged and a new vision for the delivery of healthcare in Grey and Bruce is forged. I look forward to contributing in a pro-active, patient-centric manner.



Allan Madden – Chief Executive Officer

“A person's a person, no matter how small.”

— **Dr. Seuss,**
Horton Hears a Who!

Operations

A Review of our Strategic Planning and Priority Status

SEGCHC continues to be committed to providing the best services possible without undue duplication. Our programs and services have always been based on the social determinants of health, and will continue to be so in the future. A major focus of 2018/19 was to “use a health equity lens in the work that we do”. Working with community partners, including clients and families, we aimed to deliver programs designed to meet the needs of marginalized groups including seniors, youth, Mennonites, LGBTQ and others facing socio-economic stressors. In 2018/19 our strategic priorities included:

- Stabilize Infrastructure
- Expand Volunteer Base
- Seek Integration Opportunities
- Build awareness of SEGCHC Brand
- Continue our community and health system leadership role
- Diversify Funding

The South East Grey CHC Board is proud of the following accomplishments:

- Lowest Cost per Patient Served in the SW LHIN
- Lowest Cost per Patient Visit in the SW LHIN
- Expansion of services in Southgate including the opening of the Dundalk Medical Centre to improve access to care
- Successful implementation of Practice Solutions electronic medical record as an early-adopter organization and provincial leader
- This year 11,086 group participants attended our classes, programs and events. 5,650 unique individuals were served by the CHC in 2018/19.

Community Initiatives

The Healthy Kids Community Challenge

September 2018 marked the conclusion of the South East Grey Healthy Kids Community Challenge. This three-year project aimed at promoting healthy behaviours in children (3 to 12 years). The South East Grey Community Health Centre, Municipality of Grey Highlands, and numerous other community stakeholders collaborated to implement and sustain locally-relevant programs and policies that focused on one common goal: promoting childrens' health through physical activity and healthy eating. The four themes were: 1) Run.Jump.Play, 2) Water Does Wonders, 3) Choose to Boost Veggies and Fruit and 4) Power Off and Play.



Children from Kids & Us Community Childcare and Family Education Centre participate in a nutrition program about cooking with vegetables.

Southgate Expansion

In Partnership with the Erskine Presbyterian congregation and the Township of Southgate, the Erskine Community Health Centre opened its doors in July 2017. This allowed us to expand our services and programs offered to the residents of Southgate and surrounding areas. In May 2018 The Erskine Presbyterian congregation gifted the church to SEGCHC.

In November 2018 after taking over the roster of the Dundalk VON clinic and onboarding orphaned patients of a local sole practitioner due to his relocation, SEGCHC outgrew the clinical space at the Erskine Community Health Centre. SEGCHC contacted the Dundalk Lion's Club about available space and renovated this space. We are now providing primary care services; including one physician, two nurse practitioners, and a registered practical nurse five days a week, out of the Dundalk Medical Centre located at 53 Main Street.

With the move of clinical services from the Erskine site, we have been able to expand our community programs and partnerships at that site. We are planning further renovations in the upcoming year with financial support of the Community Foundation Grey Bruce.



Some of the staff of the Dundalk Medical Centre: Tina Wright (RPN), Angela Moxam (NP), Laura Chianello (NP) and Dr. MacNeil (Physician)

Ontario Trillium Foundation Seed Grant

In November 2018 SEGCHC received a \$75,000 Ontario Trillium Foundation (OTF) Seed Grant to provide an expansion of community-based programs for isolated seniors in Southgate. This grant will provide funding for staffing, program materials and instructors to lead programs.



March 12, 2018 at the SEGCHC OTF Kick-off Celebration: Jim Heppel (OTF), Jane de Jong (Chairperson, SEGCHC Board of Directors), Tanya Shute (Manager of Allied Health Services), MPP Bill Walker and Barbara Dobreen (Councilor Township of Southgate)

Community Wellbeing Survey

In May 2018, the SEGCHC hosted the launch of The Community Index of Wellbeing (CIW) Survey to twenty-five per cent of households in Grey County and Bruce County, asking questions about health, education, employment, leisure, and recreation.

The Canadian Index of Wellbeing is a part of a global movement that recognizes the contribution of various domains of life to wellbeing. In Canada, these domains include community vitality, democratic engagement, education, environment, healthy populations, leisure and culture, living standards and time use. By monitoring wellbeing, policy makers and the general public can advocate for social change to promote the highest level of wellbeing for all citizens. Community organizations can also better understand and support the people they serve.

The survey was made possible as part of the \$500,000 Grow Grant received from the Ontario Trillium Foundation. As a part of the grant requirements, the Community Health Centre committed to conducting a Wellbeing Survey to further promote healthy policy planning and program development. The local CIW working group saw leadership from: Bruce Grey Poverty

Task Force, County of Bruce, County of Grey, Grey Bruce Public Health Unit, Community Foundation Grey Bruce and the South East Grey Community Health Centre.

The Wellbeing Survey is administered by the Canadian Index of Wellbeing (CIW) at the University of Waterloo. The full report was made available to community partners in early 2019, with a public report available on the Grey Bruce Health Unit website.

Health Equity

The SEGCHC has been a leader in mobilizing “Moving Health Equity Forward in Grey & Bruce”. A working group of cross-sector stakeholders representing health, social services, housing and the justice system has produced a health equity wheel to encourage providers to use a “social determinants of health” lens in their daily work. Manager of Allied Health Services, Tanya Shute presented “Moving Health Equity Forward-A Shared Journey to Get it Right” at the Alliance For Healthier Communities Conference in June 2018. The group is also a platform for information dissemination on seniors dental.

Finance/Administration and IT

Quality Improvement Plan

On April 1, 2019, SEGCHC submitted their 2019/20 Quality Improvement Plan (QIP) to the Ministry of Health and Long Term Care (MOHLTC) and SW Local Health Integration Network (SWLHIN). The SEGCHC QIP is focused on the quality dimensions of effective, efficient, equitable, patient-centered quality care that is safe and timely.

Information Technology Update

2018/19 was a busy year from an information technology perspective. We upgraded our financial information system, Great Plains in August 2018 and implemented a Human Resource Information System, Quadrant HRIS, in September 2018. SEGCHC also implemented a new electronic medical record, PS Suites, in November 2018.

SEGCHC held 100 Ontario Telemedicine Network (OTN) sessions last year. OTN is one of the largest telemedicine networks in the world. It uses two-way videoconferencing to provide access to care for patients in every hospital and hundreds of other health care locations across the province. In addition to clinical care, OTN facilitates the delivery of distance education and meetings for health care professionals and patients. We continue to do frequent OTN consultations here at the clinic with Specialists from all over Ontario helping our patients.

OTN has now been set up at our Chatsworth site and at our Grey Highlands Secondary School Student Clinic in Flesherton.

Financial Report and Update

The Audit Plan was prepared and an interim audit was completed in November 2018 and a year-end audit was completed in May 2019.

Clinical Operations

Primary Care Expansion in Southgate

During 2018/19 a business case was submitted to the SW LHIN outlining the need for primary care in Southgate. The area of Southgate has been under-serviced by family physicians for a number of years. There was one family physician and one nurse practitioner serving a population of 7,300. The nearest provider is a Family Health Team operating from Shelburne, 25 minutes by car. There was a backlog of up to four weeks in Southgate to see a primary care provider. Most individuals used the ER in Markdale or Durham as a walk-in clinic.

The people of Southgate were identified as high needs by the CHC. There is a significant Mennonite population and the census shows a low income – low socio-economic majority of people residing in Dundalk, the largest town in Southgate.

The need for primary care in Southgate had increased dramatically as a current housing development builds out. The Town has sold 1,000 new building permits representing an increase of 2,400 people in the coming years.

The CHC operates a lab service in Southgate for all residents. Clients are able to provide urine, blood samples, and have analysis provided directly to their provider through Life Labs. In an area where transportation is always an issue, this service, offered close to home was extremely well received.

The business case planned to retrofit the Lions Club site using one-time LHIN money and use this site for primary care. In January 2019 we were advised by the South West Local Health Integration Network that our annual funding would increase by \$861,982 to expand our primary care services in Grey County.

This enabled the hiring of additional staff included a physician, nurse practitioner, registered practice nurse, medical secretaries, social worker, chiropodist, and dietitian.

VON Transfer

In May 2018 a health system improvement concept proposal was submitted to the SWLHIN that would see the merger of two entities – The VON Nursing Station in Dundalk and the South East Grey Community Health Centre currently operating in Dundalk. The VON nursing station was staffed by one nurse practitioner on a part-time basis. This NP provided basic primary care and identified that she would be retiring in the coming weeks. VON administration supported this proposal. The NP had a current roster size of 1,100 patients. The CHC was poised to take

over the care of the patients using a multi-disciplinary care team approach. Patients would have access to multi-disciplinary primary care five days per week and as well as access to specialist care including psychiatry, internal medicine, neurology and clinical psychology. Access to care would improve by 50% with the increased hours of operation. Cancer screening rates and immunization would improve by 30% as SEGCHC has the highest rates in Ontario. Access to same day services would be guaranteed. Any patients referred to the local hospital would be seen within 24 hours of discharge. SEGCHC believes that all of these improvements will result in fewer ER visits for Canadian Triage Acuity Scale (CTAS) level 4 (less urgent) and level 5 (non-urgent) and a decrease in readmit rates for patients requiring a hospital stay.

In March 2019 we were advised by the South West LHIN that our base funding would increase by \$175,000 to support the transfer of 1 nurse practitioner from VON to the CHC. These monies are provided to support an increased roster of patients that would be left orphaned due to the retirement of a local physician.

Satellite Sites

SEGCHC staff continue to be very busy seeing students at our satellite clinic at Grey Highlands Secondary School, which opened in March 2012. The Student Health Clinic was recently given the name The Wellness Zone by the youth to capture the wholesome wellness we strive to help the youth achieve. At this site we offer Primary Care with a Nurse Practitioner, Counselling Services, Nutrition Counselling and a number of programs for youth. Current programs that run through The Wellness Zone are Find Us Fridays, Girls Fitness, Stress/Worry/Anxiety workshops, and the occasional event. The Bluewater School Board approved a student survey designed to measure the effectiveness of the CHC services offered at the clinic. Survey results are expected in early 2019.

Our Chatsworth site, which opened in June 2014 in the lower level of the Chatsworth municipal office, continues to see remarkable growth specifically with the Mennonite population. Here we offer a Nurse Practitioner, Registered Practical Nurse, and Social Work Counselling. We are currently working to expand our program offering in the Chatsworth area with the addition of an indoor walking program and a chair fitness class.

The Erskine Community Health Centre in Dundalk, opened in July 2017 in partnership with the Township of Southgate and the Erskine Presbyterian congregation. Erskine is home to all our community and partner run programs. We have partnered with Upper Grand District School Board to offer skills upgrading education and English as a Second Language Program for Mennonite mothers, United Way to be able to offer financial counselling, Ontario Works to provide financial and employment assistance and SEGSS Job Directions for employment assistance.

Our newest site, the Dundalk Medical Centre, opened in November 2018 to meet the increasing need for Primary Care in Southgate. Here we offer primary care services; including one physician, two nurse practitioners, and a registered practical nurse five days a week.

We continue to extend our primary care offering to Participation Lodge residents. Participation Lodge offers a residential service to people with complex medical needs.

All of our physicians and nurse practitioners provide home visits to their clients who are either homebound or have mobility challenges.

What our Clients/Patients are Saying

SEGCHC continues to conduct an annual patient survey as required by our Multi-Sector Accountability Agreement. The patient survey questions are consistent across the SW LHIN CHCs and the same questions have been used the last four years. SEGCHC is pleased to have achieved an overall patient satisfaction rating of 93.3% in 2018/19. The table below shows a summary of the results:

The last time you were sick or concerned you had a health problem, how many days did it take from when you first tried to see your doctor or nurse practitioner or someone else at the Centre?	61% of respondents said same or next day
When you did see your Doctor or NP, how often do they or someone else in the office give you an opportunity to ask questions about recommended treatment?	92.2% of respondents said always/often
When you see your Doctor or NP, how often do they or someone else in the office involve you, as much as you want to be, in the decisions about your care and treatment?	92.8% of respondents said always/often
When you see your Doctor or NP, do they or someone else in the office, spend enough time with you?	95% of respondents said always/often
I always feel comfortable at the CHC?	99.2% of respondents said yes

The following comments summarize the patient experience:

“SEGCHC is a model of what I see as community health. A variety of linked services with exceptional staff. I feel that I am so lucky to have my doctor and that group of health professional services”

“Everyone is very helpful and friendly”

“I love my nurse practitioner”

"[I] appreciate that SEGCHC tries to provide what our community needs/wants. It is impressive the amount of programs that are offered. Thank you!"



The 1st Annual 10-in-10 event was held at Southgate Ruth Hargrave Memorial Library on October 20, 2018. Community members rotated through 10 interactive booths to learn a new skill in 10 minutes.

Featured skills included: rug hooking, origami, recycling, preparing a resume, knitting/crocheting, protecting against scams, tune up your PC, wiring, drawing and make a breakfast smoothie.

“Peace begins
with a smile.”

— **Mother
Teresa**

By the Numbers – Our Performance

SEGCHC Clinical Data Reporting 2014-18

The numbers in Chart I reflect the activity of the SEGCHC over the last five years of operation. Essentially, the CHC has increased access to care, as measured by total client encounters (visits) by 78% in the last five years of operations. The number of clients served by the CHC has increased by 47% over the same period.

Chart I: Client Activity over Last Five Years

	2014-15	2015-16	2016-17	2017-18	2018-19	% Change
Total Clients Served	3867	4567	4936	5240	5650	47%
Total Client Visits	26288	35433	35805	39576	46752	78%
Clients by Specialty						
Physiotherapy	297	350	491	330	252	-15%
Social Worker	374	383	405	645	1349	260%
Chiroprody	313	404	410	274	1254	300%
Dietitian	242	235	234	289	354	46%

During 2018/19 the CHC implemented a new electronic medical record (EMR) system, PS Suites. The data from the previous system, Nightingale on Demand, was migrated and due to differences in system formatting, we were unable to validate the annual data comprised of the two systems.

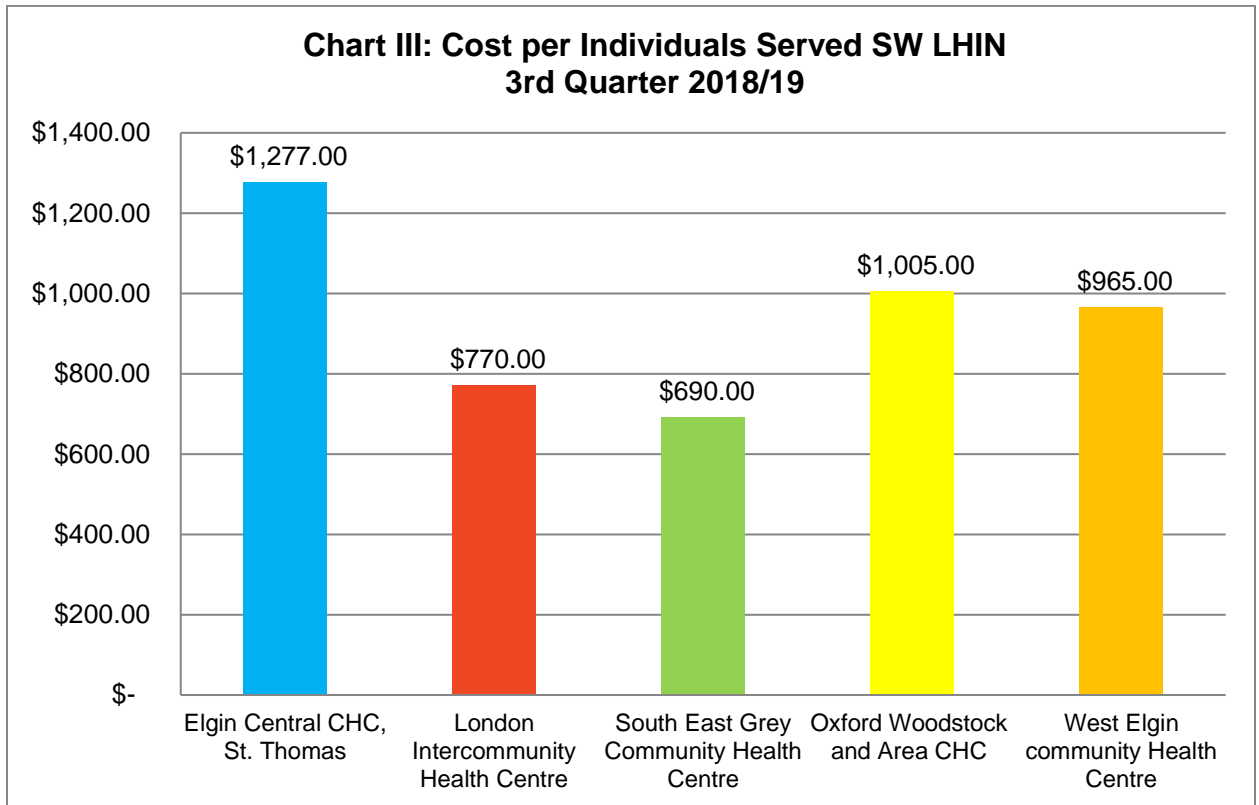
The SEGCHC is required to sign a Multi-Sector Accountability Agreement (M-SAA) with our funders, the South West LHIN. The M-SAA requires that the organization focus its primary care attention to cancer screening and flu vaccination in addition to providing primary care and community development services.

Chart II: 2nd Quarter 2018-2019 M-SAA Results*

M-SAA Indicators	SEGCHC	SW LHIN	Difference	Province	Difference
Breast Cancer Screening	99%	80%	19%	71%	28%
Cervical Cancer Screening	97%	79%	18%	75%	22%
Inter-professional Diabetes Care	98%	96%	2%	92%	5%
Influenza Vaccination Rate	99%	80%	19%	54%	45%
Colorectal Cancer Screening Rate	98%	80%	18%	72%	26%

* Q3 and Q4 not available

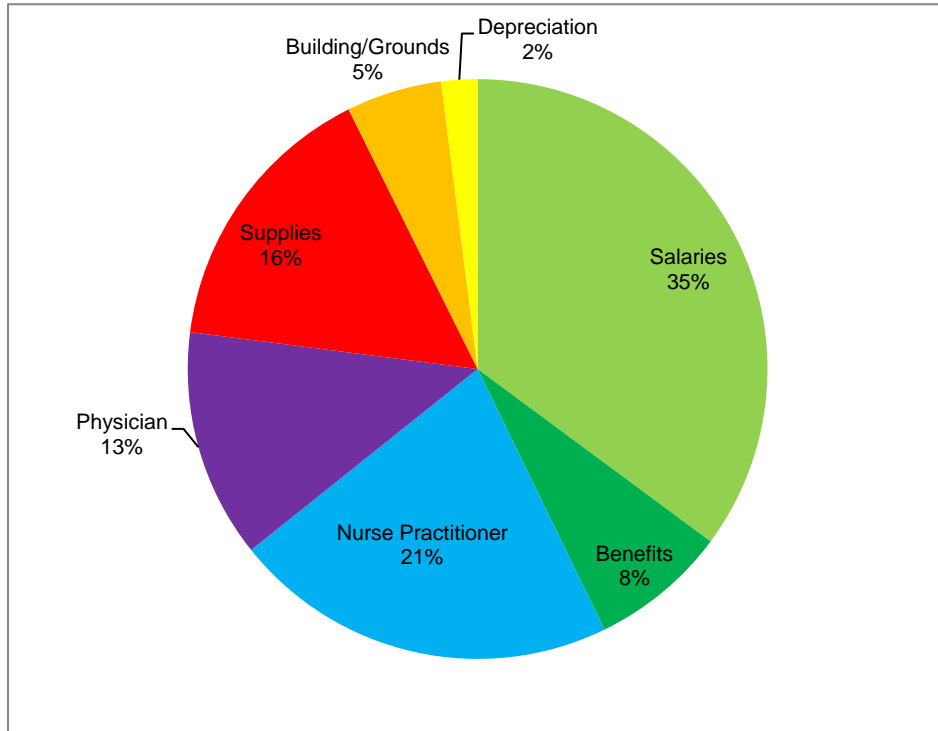
As indicated in Chart II, the SEGCHC surpassed all of their provincial and SW LHIN colleagues in delivering cancer screening and flu vaccination services.



Source: Ministry of Health and Long Term Care Health Data Branch web portal – HIT Tool

As indicated in Chart III, SEGCHC has the lowest cost per individuals served in the South West LHIN.

Chart IV: 2018/19 Expenditures



Participants of the 2018 International Youth Day

Accountability

Multi-Sector Service Accountability Agreement

The Executive Director and the Board Chairperson signed a Multi-Sector Service Accountability Amending Agreement on April 1, 2019 which links the Centre's performance to funding received through the South West Local Health Integration Network (SW LHIN). *The Local Health System Integration Act, 2006* requires that the LHIN and the Centre to enter into a service accountability agreement. The agreement enables the LHIN to provide funding to the Centre for the provision of services. It supports a collaborative relationship between the LHIN and the Centre to improve the health of Ontarians through better access to high quality health services, to co-ordinate health care in local health systems and to manage the health system at the local level effectively and efficiently.

2018-2019 South East Grey CHC - Board of Directors

Jane de Jong – Chairperson

Larry Mann – Vice Chair/Treasurer

Susie Furlong

Jim Harrold

Gord Lawson

Catherine Miller

Terry Mokriy

Paul Tessier

John Woodbury

We are grateful to Terry Mokriy, Paul Tessier and Susie Furlong who will be completing their terms in June, Terry, Paul and Susie are founding members of the CHC. Their contribution and dedication to the development of a community-based, community-governed health centre in Grey County will serve as their legacy.

Independent Auditor's Report

To the Board of Directors of **South East Grey Community Health Centre**:

Opinion

We have audited the financial statements of **South East Grey Community Health Centre** (the Centre), which comprise the statement of financial position as at March 31, 2019 and the statements of operations and changes in fund balances and cash flow statement for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Centre as at March 31, 2019, and results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

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 Centre in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, 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 Centre'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 Centre or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Centre'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.

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 Centre'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 Centre'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 Centre 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.

Statement of Financial Position

South East Grey Community Health Centre
As at March 31

	2019	2018
ASSETS	\$	\$
Current		
Cash	338,970	487,123
Accounts Receivable	52,315	17,812
Due from MOHLTC	55,600	-
HST Rebate Receivable	42,600	51,085
Prepaid Expenses	15,437	15,437
	504,922	571,457
Capital Assets	315,821	371,433
Total Assets	820,743	942,890
LIABILITIES		
Current		
Accounts Payable and Accrued Liabilities	379,841	360,034
Government Remittances Payable	42,186	67,746
Due to MOHLTC	25,748	171,730
Deferred Revenue	164,600	79,399
	612,375	678,909
Deferred Capital Contributions	315,820	371,433
Total Liabilities	928,195	1,050,342
FUND BALANCES		
Unrestricted Net Assets	(107,452)	(107,452)
Total Liabilities and Fund Balances	820,743	942,890

Statement of Operations and Changes in Fund Balances

South East Grey Community Health Centre
For the Year Ended March 31

	2019	2018
REVENUE	\$	\$
Funding from South West LHIN - Operating	4,298,078	3,525,759
Funding from South West LHIN - One Time	-	28,114
Municipality of Grey Highlands – Healthy Kids Program	62,500	125,000
Ontario Trillium Foundation	158,112	124,395
Other	68,031	30,612
Amortization of Deferred Capital Contributions	101,082	93,766
	<u>4,687,803</u>	<u>3,927,646</u>
EXPENSES		
Salaries, Wages and Benefits	3,504,330	2,716,147
Operating Supplies and Expenses	807,240	770,922
Medical and Surgical Supplies and Drugs	47,202	50,757
Community One Time Expense	-	28,114
Healthy Kids Program Expenses	62,500	125,000
Ontario Trillium Foundation – Growth Grant Expenses	158,112	124,395
Amortization	101,082	93,900
Total Operating Costs	<u>4,680,466</u>	<u>3,909,235</u>
Excess of Revenues Over Expenses for the Year before Due to MOHLTC	7,337	18,411
Due to MOHLTC	(7,337)	(18,411)
Excess of Revenue Over Expenses for the Year	-	-
Unrestricted Net Assets at Beginning of Year	(107,452)	-
Adjustment to Prior Year Recovery	-	(107,452)
Unrestricted Net Assets at End of Year	<u>(107,452)</u>	<u>(107,452)</u>

Basis of the Summary Financial Statements:

South East Grey Community Health Centre (the “Centre”) has prepared these summary financial statements to be included as part of its annual report. The Centre has determined that the level of aggregation presented is adequate for the readers of the annual report. The audited financial statements may be obtained from the Centre.

BAKER TILLY SGB LLP
LICENSED PUBLIC ACCOUNTANTS

Owen Sound, Ontario

June 28, 2019

Centre Information

South East Grey Community Health Centre

55 Victoria Avenue
Markdale, ON N0C 1H0

Tel 519-986-2222

Fax 519-986-3999

www.segchc.ca



Participants of the Boys PD Day Program