Financial Statements of

# GRAND RIVER HOSPITAL CORPORATION

Year ended March 31, 2008 (Expressed in Thousands of Dollars)



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#### **AUDITORS' REPORT**

To the Board of Directors of Grand River Hospital Corporation

We have audited the statement of financial position of Grand River Hospital Corporation (the "Hospital") as at March 31, 2008 and the statements of operations, changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the Hospital's management. 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 plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Hospital as at March 31, 2008 and the results of its operations and its cash flows for the year then ended in accordance with the Canadian generally accepted accounting principles.

Chartered Accountants, Licensed Public Accountants

Waterloo, Canada May 9, 2008

KPMG LLP

Statement of Financial Position (Expressed in Thousands of Dollars)

March 31, 2008, with comparative figures for 2007

		2008	 2007
Assets			
Current assets:			
Cash and short-term investments (note 2)	\$	36,105	\$ 26,020
Accounts receivable (note 3)		17,753	12,791
Inventories		1,942	1,977
Prepaid expenses		2,544	 2,510
		58,344	43,298
Capital assets (note 4)		153,341	149,269
Accrued pension benefit plan (note 5)		12,722	12,788
	\$	224,407	\$ 205,355
Liabilities and Net Assets			
Current liabilities:			
Accounts payable and accrued liabilities	\$	38,338	\$ 34,636
Deferred contributions (note 6)		7,971	6,751
Current portion of deferred credit (note 7(a))		142	143
Current portion of long-term debt (note 7(b))		60	59
Current portion of capital lease obligation (note 7(c))		146	 141
		46,657	41,730
Other long-term liabilities (note 7(d))		473	822
Accrued other benefits plan obligation (note 5)		2,143	425
Deferred capital contributions (note 8)		137,605	124,890
Net assets:			
Invested in capital assets (note 9)		11,633	22,619
Internally restricted - education and corporate development		1,200	1,200
Unrestricted		24,696	13,669
Commitments and contingencies (note 10)		37,529	37,488
Total Indiana and Continguition (110to 10)			

See accompanying notes to financial statements.

On behalf of the Board:

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Statement of Operations (Expressed in Thousands of Dollars)

Year ended March 31, 2008, with comparative figures for 2007

	 2008	2007
Revenue:		
Ontario Ministry of Health and Long-Term Care	\$ 218,496	\$ 210,172
Other	43,438	44,570
Amortization of deferred capital contributions		•
related to equipment (note 8)	5,434	3,859
	 267,368	258,601
Expenses:		
Salaries, wages, benefits and purchased services	162,602	156,110
Medical staff remuneration	18,755	19,258
Medical and surgical supplies, drugs and other expenses	78,281	72,806
Amortization of equipment	7,021	7,867
	 266,659	256,041
Excess of revenue over expenses for	 	
Ontario Ministry of Health and Long-Term Care purposes	709	2,560
Amortization of buildings and building improvements	(7,776)	(7,756)
Amortization of deferred capital contributions related to	<b>,</b> , ,	,
buildings and building improvements (note 8)	7,108	5,046
Excess (deficiency) of revenue over expenses	\$ 41	\$ (150)

See accompanying notes to financial statements.

Statement of Changes in Net Assets (Expressed in Thousands of Dollars)

Year ended March 31, 2008, with comparative figures for 2007

	ested in al assets	ternally stricted	Unre	estricted	2008 Total	2007 Total
Balance, beginning of year	\$ 22,619	\$ 1,200	\$	13,669	\$ 37,488	\$ 37,638
Excess (deficiency) of revenue over expenses	(2,255)	-		2,296	41	(150)
Investment in capital assets (note 9)	(8,731)	-		8,731	-	-
Balance, end of year	\$ 11,633	\$ 1,200	\$	24,696	\$ 37,529	\$ 37,488

See accompanying notes to financial statements.

Statement of Cash Flows (Expressed in Thousands of Dollars)

Year ended March 31, 2008, with comparative figures for 2007

	 2008	2007
Cash provided by (applied to):		
Operations:		
Excess (deficiency) of revenue over expenses	\$ 41	\$ (150)
Employer cash contributions to the KWH pension plan	(6,850)	(6 <u>,</u> 272)
Items not involving cash:	, , ,	` ' '
Amortization of equipment	7,021	7,867
Amortization of buildings	7,776	7,756
Amortization of deferred contributions related to equipment	(5,434)	(3,859)
Amortization of deferred contributions related to buildings	(7,108)	(5,046)
Defined benefit expense	8,634	7,696
Change in non-cash operating working capital (note 11)	(2,526)	2,065
	1,554	 10,057
Investing activities:		
Purchase and construction of capital assets, net of disposals	(16,324)	(6,747)
Financing activities:		
Contributions received for capital purposes	25,056	5,308
Principal repayments on long-term debt and capital lease	(201)	(59)
	24,855	5,249
Increase in cash	 10,085	 8,559
Cash and short-term investments, beginning of year	26,020	17,461
Cash and short-term investments, end of year	\$ 36,105	\$ 26,020

See accompanying notes to financial statements.

Notes to Financial Statements (Expressed in Thousands of Dollars)

Year ended March 31, 2008

The Grand River Hospital Corporation (the "Hospital") is a regional provider of community hospital services to the Cities of Kitchener and Waterloo and the Regional Municipality of Waterloo. The Hospital provides its services primarily through the Kitchener-Waterloo site and the Freeport site. The Hospital is assigned to the Wellington Waterloo Local Health Integration Network. The Hospital is incorporated under the Corporations Act (Ontario) without share capital and is a registered charity under the Income Tax Act (Canada) and is exempt from income taxes.

#### 1. Significant accounting policies:

#### (a) Basis of presentation:

These financial statements present only the accounts of the Hospital as a separately managed entity. They do not include the accounts of the following related, but separate entities:

Grand River Hospital Volunteer Association Grand River Hospital Foundation

The financial information of these entities is reported separately from the Hospital.

#### (b) Basis of funding:

The Hospital is funded primarily by the Province of Ontario, in accordance with budget arrangements established with the Ontario Ministry of Health and Long-Term Care (the "Ministry"). The funding is provided to the Hospital on a global basis as well as a cost reimbursement basis for specific programs. Except for certain programs, a surplus of revenue over expense incurred during a fiscal year is not required to be returned to the Ministry. As well, the Ministry's stated policy is that deficits incurred by the Hospital will not be funded.

#### (c) Revenue recognition:

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

Under the Health Insurance Act and Regulations thereto, the Hospital is funded primarily by the Province of Ontario in accordance with budget arrangements established by the Ontario Ministry of Health and Long-Term Care. 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.

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 1. Significant accounting policies (continued):

#### (c) Revenue recognition (continued):

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, other than endowment 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 of the related capital assets.

Revenue from the Ministry, preferred accommodation, as well as income from parking and other ancillary operations, is recognized when the goods are sold or the service is provided.

#### (d) Measurement uncertainty:

The preparation of financial statements in conformity with Canadian generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the dates of the financial statements and the reported amounts of revenue and expenses during the years. Significant items subject to such estimates and assumptions include the carrying amount of accrued pension benefit plan, capital assets, accounts payable and accrued liabilities, accrued other benefit plan obligation, and valuation allowances for receivables. Actual results could differ from those estimates.

#### (e) Inventories:

Inventories are valued at lower of cost or market.

Provision has been made for any obsolete or unusable inventory on hand.

#### (f) Capital assets:

Capital assets are recorded at cost less accumulated amortization. The Hospital records amortization of its capital assets on a straight-line basis over the estimated useful life of the asset at the following annual rates:

Buildings and building improvements	2% to 20%
Furniture and equipment	5% to 20%
Equipment under capital lease	20%

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 1. Significant accounting policies (continued):

#### (g) Employee benefits plans:

The Hospital accrues its obligations under employee benefit plans as the employees render the services necessary to earn the pension and post-retirement benefits. The Hospital has the following accounting policies:

#### (i) Defined benefit plans:

The Hospital has defined benefit pension plans covering substantially all employees and a supplemental pension plan for a specific group of employees. The benefits are based on years of service and the employee's final average earnings. The cost of this program is being funded currently.

The Hospital provides a defined benefit plan covering health and dental care benefits upon early retirement. Early retirees, who are in receipt of pension benefits, may also elect to receive health and dental benefits under the plan until the age of 65. The cost of health and dental benefits related to employees' current service is charged to income annually.

The cost of pensions and post-retirement benefits earned by employees is actuarially determined using the projected benefit method pro-rated on service and management's best estimate of expected plan investment performance, salary escalation, expected health and dental costs and retirement ages of employees.

For the purpose of calculating the expected return on plan assets, those assets are valued at fair value which represent a market-related value. The market-related value of assets has been used for determining the expected return on assets component of the annual expense and for determining the amount of experience gains (losses) to be amortized. The market values at the measurement date are developed from the market values at each of the four preceding fiscal year-ends by accumulating these amounts with contributions, benefit payments, expenses and assumed investment return for the period up to the measurement date. Assumed investment return is calculated assuming that each year assets earned interest at the expected rate of return on assets during the applicable period.

Past service costs from plan amendments or plan initiations are amortized on a straight-line basis over the average remaining service period up to the full eligibility date of each of employees active at the date of amendment or plan initiation. The past service costs related to the plan initiation are being amortized over 8 years (2007 – 8 years).

Actuarial gains (losses) arise from the difference between actual long-term rate of return on plan assets for a period and the expected long-term rate of return on plan assets for that period or from changes in actuarial assumptions used to determine the accrued benefit obligation.

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 1. Significant accounting policies (continued):

#### (g) Employee benefits plans (continued):

#### (i) Defined benefit plans:

The transitional asset is being amortized at \$3,423 per year and will be fully amortized in the year ending March 31, 2013.

The excess of the net actuarial gain (loss) over 10% of the greater of the benefit obligation and the fair value of plan assets is amortized over the average remaining service period of active employees. The average remaining service period of the active employees covered by the pension plan is 13 years (2007 - 13 years).

When the restructuring of a benefit plan gives rise to both a curtailment and a settlement of obligations, the curtailment is accounted for prior to the settlement.

#### (ii) Multi-employer plan:

Defined contribution plan accounting is applied to the multi-employer defined benefit Hospitals of Ontario Pension Plan ("HOOPP") for which the Hospital does not have the necessary information to apply defined benefit plan accounting.

#### (h) Contributed services:

Volunteers contribute numerous hours to assist the Hospital in carrying out certain charitable aspects of its service delivery activities. The fair value of these contributed services is not readily determinable and is not reflected in these financial statements.

#### (i) Financial instruments:

Effective April 1, 2007, the Hospital adopted the new Canadian Institute of Chartered Accountants ("CICA") Handbook Section 3855 "Financial Instruments - Recognition and Measurement". Under the new standard, all financial instruments are initially recorded on the statement of financial position at fair value. They are subsequently valued at fair value or amortized cost depending on the classification selected for the financial instrument. Financial assets are classified as either "held-for-trading", "held-to-maturity", "available-for-sale" or "loans and receivables" and financial liabilities are classified as either "held-for-trading" or "other liabilities". Financial assets and liabilities classified as held-for-trading are measured at fair value with changes in fair value recorded in the statement of operations.

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 1. Significant accounting policies (continued):

(i) Financial instruments (continued):

The Hospital has classified its financial instruments as follows:

Cash and short-term investments are classified as held-for-trading;

Accounts receivable are classified as loans and receivables;

Accounts payable and accrued liabilities are classified as other liabilities; and

Other long-term liabilities are classified as other liabilities.

The Hospital has elected to use trade date accounting for regular-way of purchases and sales of financial assets.

The new accounting policy is treated retroactively, without restatement of prior year comparatives, as required under the standard. There is no effect on the opening net assets at April 1, 2007.

#### 2. Cash and short-term investments:

The Hospital's investment policy restricts short-term investments to highly liquid, high grade Canadian federal and provincial government bonds, commercial paper of Canadian corporations, and bankers acceptances. At year end, \$2,573 (2007 - \$2,491) is held in short-term investment instruments bearing interest at 4.30% (2007 - 4.15%).

The remaining cash is in a current account bearing interest at a rate of prime minus 1.75%. At year end, the prime rate was 3.75% (2007 - 6.00%).

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 3. Accounts receivable:

		2008	2007
Ontario Ministry of Health and Long-Term Care Cancer Care Ontario:	\$	5,146	\$ 1,223
Operating		1,989	3,221
Capital		200	-
Grand River Hospital Foundation		142	302
Other	10,276	10,276	8,045
	\$	17,753	\$ 12,791

#### 4. Capital assets:

	·			2008		2007
	Cost	Accumulated amortization		Net book value	_	Net book value
Land \$ Buildings and related service	809	\$	-	\$ 809	\$	809
equipment and improvements	194,532		84,576	109,956		116,115
Furniture and equipment	70,927		49,150	21,777		22,371
Construction in progress	20,799		· -	20,799		9,974
\$	287,067	\$	133,726	\$ 153,341	\$	149,269

Certain land and buildings designated for Hospital purposes are leased to the Hospital, at a nominal charge, by The Corporation of The City of Kitchener and The Corporation of The City of Waterloo.

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 5. Pension and other defined benefit plans:

Substantially all of the employees of the Kitchener-Waterloo site are members of a defined benefit registered pension plan ("KWH pension plan") and several individuals also participate in an unfunded supplemental pension plan, both of which are final average earnings programs. The Hospital measures its accrued benefit obligations for accounting purposes based on the most recent actuarial valuation as at December 31, 2005, together with a projection of these results to March 31, 2008 and 2007. The next required valuation will be undertaken as at December 31, 2008.

Substantially all of the employees of the Freeport site are eligible to be members of HOOPP, which is a multi-employer, defined benefit, final pay, contributory plan. As HOOPP's assets and liabilities are not segmented by participating employer, the Hospital accounts for its HOOPP obligation on a cash basis (as a defined contribution plan). The most recent actuarial valuation of the plan at December 31, 2006 indicated that the plan is fully funded on a solvency basis.

The expense for the Hospital's benefit plans are included in the statement of operations and are as follows:

#### (a) Multi-employer defined benefit plan:

	2008			2007		
Cash paid for contributions to HOOPP	\$	3,549	\$	3,212		

#### (b) The information, relating to the Hospital's defined benefit plans:

	2008	•	2007	2008	2007
	Pension plan		Pension plan	Other benefit plan	Other benefit plan
Current service costs, net of					
employees' contributions	\$ 10,115	\$	9,923	\$ 174	\$ 52
Expected non-investment expense	500		-	-	-
Interest cost	15,827		15,016	366	100
Less – expected return on					
plan assets	(18,740)		(17,236)	-	-
Amortization of transitional					
obligation (asset)	(3,423)		(3,423)	271	-
Amortization of past service costs	681		681	907	273
Amortization of experience loss					
on plan assets	1,956		2,310	-	-
Benefit plan expense	6,916		7,271	 1,718	 425
Cash paid for employer contributions	(6,850)		(6,272)		-
	\$ 66	\$	999	\$ 1,718	\$ 425

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

### 5. Pension and other defined benefit plans (continued):

(b) The information, relating to the Hospital's defined benefit plans (continued):

	2008	-	2007	 2008	2007
	 2000		2001	 	 
	<b>.</b> .			Other	Other
	Pension		Pension	benefit	benefit
	 plan		plan	plan	plan
Accrued benefit obligation:					
Balance, beginning of year	\$ (304,032)	\$	(275,962)	\$ (2,767)	\$ _
Current service costs, inclusive	•				
of employee contributions	(15,555)		(14,904)	(174)	(52)
Interest cost	(15,827)		(15,016)	(366)	(100)
Less – benefits paid	9,691		8,864	176	
Actuarial gain (loss)	15,533		(7,014)	768	-
Plan initiation	-		-	-	(2,170)
Change in cost sharing	-		-	(5,113)	-
Balance, end of year	\$ (310,190)	\$	(304,032)	\$ (7,476)	\$ (2,322)
				•	
Plan assets:					
Fair value, beginning of year	\$ 298,067	\$	272,097	\$ -	\$ -
Actual return on plan assets	(9,012)		23,580	-	-
Employer contributions (included					
in salaries, wages and benefits)	6,850		6,273	176	-
Employees' contributions	5,440		4,981	42	-
Less benefits paid	(9,691)		(8,864)	(218)	-
Actual plan expenses	(558)		-	-	-
Fair value, end of year	\$ 291,096	\$	298,067	\$ -	\$ 
Funded status-plan deficit	\$ (19,094)	\$	(5,965)	\$ (7,476)	\$ (2,322)
Unamortized net actuarial					
loss (gain)	44,235		33,914	(768)	-
Unamortized transitional asset	/ A 800 / / / 1		(00.50.1)	4 007	
(obligation)	(17,111)		(20,534)	1,627	-
Unamortized past service costs	4,692		5,373	4,474	1,897
Accrued defined benefit plan					 
assets (obligation)	\$ 12,722	\$	12,788	\$ (2,143)	\$ (425)
-				 	

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 5. Pension and other defined benefit plans (continued):

The significant actuarial assumptions adopted in measuring the Hospital's accrued benefit obligation and benefit costs, are as follows:

	2008	2007
Accrued benefit obligation at end of year:		
Rate of compensation increase	3.50%	3.50%
Discount rate (pension benefits)	5.35%	5.15%
Discount rate (other benefits)	5.30%	4.60%
Benefit costs for fiscal year:		
Expected long-term rate of return on plan assets	5.35%	6.75%
Discount rate (pension benefits)	5.15%	5.30%
Discount rate (other benefits)	4.60%	4.60%
Healthcare costs (other benefits)	9.00%	10.00%
Dental costs (other benefits)	4.50%	4.50%
Rate of compensation increase	3.50%	3.50%

The KWH pension plan consists of the following assets as at December 31:

	2008	2007
Bonds	41.8%	40.4%
Pooled investments	58.2%	59.6%
	100.0%	100.0%

### 6. Deferred contributions:

Deferred contributions represent unspent restricted grants for education and research of \$2,086 (2007- \$2,504), and deferred funding from Ministry of Health and Long-Term Care in the amount of \$3,294 (2007- \$1,713) and for the Grand River Regional Cancer Centre in the amount of \$2,591 (2007- \$2,534). The changes in the deferred contributions balance are as follows:

	 2008	 2007
Balance, beginning of year Contributions received during the year Less amounts recognized as revenue during the year	\$ 6,751 3,190 (1,970)	\$ 2,532 4,972 (753)
Balance, end of year	\$ 7,971	\$ 6,751

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 7. Other long-term liabilities:

#### (a) Deferred credit:

The Hospital has entered into a long-term supply contract for certain medical equipment and supplies. On entering into the supply contract in 2002, the Hospital received \$1,000 as a discount on the future purchase of supplies under the terms of the contract. The discount is being recognized on a straight-line basis over the 7 year term of the contract as a reduction of the cost of the related medical supplies purchased under the contract.

The details of the deferred credit are as follows:

	2008	 2007
Deferred credit Accumulated amortization	\$ 1,000 858	\$ 1,000 715
	 142	285
Less current portion of deferred credit	142	143
	\$ **	\$ 142

#### (b) Long-term debt:

	 2008	 2007
Medical equipment loan, bearing no interest, with annual payments of \$59, maturing May 2008	\$ 60	\$ 119
Less current portion of long-term debt	60	59
	\$ 	\$ 60

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 7. Other long-term liabilities (continued):

### (c) Obligation under capital lease:

	 2008	2007
Year ending March 31:		
2008	\$ -	\$ 169
2009	169	169
2010	170	170
2011	170	170
2012	170	170
Total minimum lease payments	679	848
Less amount representing interest at 4.94%	60	87
Present value of net minimum capital lease payments	619	761
Current portion of obligation under capital lease	146	141
	\$ 473	\$ 620

### (d) Other long-term liabilities consist of:

	 2008	2007
Deferred credit Long-term debt	\$ -	\$ 142 60
Capital lease	473	620
	\$ 473	\$ 822

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

### 8. Deferred capital contributions:

The changes in deferred capital contributions are as follows:

	2008	2007
Balance, beginning of year	\$ 124,890	\$ 129,592
Contributions from:		
Grand River Hospital Foundation (note 12)	1,582	2,709
Ontario Ministry of Health and Long-Term Care	17,296	275
The Regional Municipality of Waterloo	3,536	579
Cancer Care Ontario	2,410	225
Other capital contributions	433	415
	150,147	 133,795
Less:		
Amortization of deferred capital contributions		
related to equipment	(5,434)	(3,859)
Amortization of deferred capital contributions		
related to buildings and building improvements	(7,108)	(5,046)
Balance, end of year	\$ 137,605	\$ 124,890

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

### 9. Net assets invested in capital assets:

Net assets invested in capital assets is calculated as follows:

	 2008	2007
Capital assets	\$ 153,341	\$ 149,269
Amounts financed by: Deferred capital contributions Accounts payable and accrued liabilities Long-term liabilities	(137,605) (3,424) (679)	(124,890) (880) (880)
	\$ 11,633	\$ 22,619

Change in net assets invested in capital assets is calculated as follows:

	2008	2007
Amortization of capital assets	\$ (14,797)	\$ (15,623)
Amortization of deferred capital contributions	12,542	8,905
Deficiency of revenue over expenses	(2,255)	 (6,718)
Purchases and construction of capital assets, net of disposals Accounts payable and accrued liabilities	18,865	7,628
related to capital assets	(2,544)	(120)
Amounts funded by deferred capital contributions	(25,253)	(4,203)
Long-term liabilities related to capital assets	201	(703)
Investment in capital assets	(8,731)	 2,602
Change in net assets invested in capital assets	\$ (10,986)	\$ (4,116)

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 10. Commitments and contingencies:

#### (a) Service commitments:

The Hospital has outsourced its information systems under an agreement that expires in 2009. Specific medical equipment and other support services are outsourced under agreements that expire 2010, 2011 and 2012, respectively. The payments that cover the operating components under the terms of these agreements are as follows:

2009	\$ 4,314
2009 2010	651
2011	266
2012	11

#### (b) Capital commitments:

The Hospital has entered into several contracts relating to major capital projects.

The commitments are as follows as at March 31, 2008:

Major capital projects:

High-dose Radiotherapy, Freeport Satellite Dialysis and Patient Care Development

\$ 41,216

These projects are being funded by the Ontario Ministry of Health and Long-Term Care, the Regional Municipality of Waterloo and the Grand River Hospital Foundation.

#### (c) Operating lease commitments:

The Hospital is committed to payments under various operating leases for office and medical equipment. The annual payments are as follows:

2009 2010	\$	935 387
2011		197
2012	,	43
2013		1

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 10. Commitments and contingencies (continued):

#### (d) Contingencies:

The nature of the Hospital's activities is such that there may be litigation pending or in the prospect at any time. With respect to claims at March 31, 2008, management believes that the Hospital has valid defenses and appropriate insurance coverage in place. In the event claims are successful, management believes that such claims are not expected to have a material effect on the Hospital's financial position.

The Hospital participates in Healthcare Insurance Reciprocal of Canada, a pooling of the public liability insurance risks of its hospital members. All members of the pool pay premiums which are actuarially determined. All members are subject to assessment for losses, if any, experienced by the pool for the year in which they were members. No assessments have been made to March 31, 2008.

#### 11. Net change in non-cash operating working capital balances:

	 2008	-	2007
Accounts receivable not applicable to capital assets	\$ (4,762)	\$	(3,465)
Inventories	35		91
Prepaid expenses	(34)		(372)
Accounts payable and accrued liabilities not applicable	• ,		, ,
to capital assets	1,158		1,735
Deferred contributions not applicable to capital assets	1,220		4,219
Long-term liabilities not applicable to capital assets	(143)		(143)
Net change in non-cash operating working capital balances	\$ (2,526)	\$	2,065

#### 12. Related party transactions:

#### (a) Grand River Hospital Foundation:

The Grand River Hospital Foundation (the "Foundation") is an independent organization which raises funds to finance the purchase of capital assets, as directed by the Foundation's donors, for the Hospital. Although the Foundation is a separate entity and disburses funds at the discretion of its own Board of Governors, some of the Foundation Board members are also members of the Hospital. The accounts of the Foundation are not included in these financial statements.

During the year, the Foundation donated \$1,582 (2007 - \$2,709) to the Hospital to fund capital projects. At March 31, 2008, there is \$142 (2007 - \$302) due from the Foundation to the Hospital. At December 31, 2007, the Foundation had net assets of \$25,833 (2006 - \$19,768).

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 12. Related party transactions (continued):

#### (b) Volunteer Association:

The Grand River Hospital Volunteer Association (the "Volunteer Association") is an independent organization, which raises funds and contributes these funds to the Foundation, which in turn contributes the funds to the Hospital for the purpose mentioned above. The accounts of the Volunteer Association are not included in these financial statements.

At March 31, 2008, there is \$8 (2007 - \$50) due from the Volunteer Association to the Hospital.

#### (c) Grand River Regional Cancer Centre:

Effective January 1, 2006, the former joint venture agreement with Cancer Care Ontario (CCO) ended and the Hospital entered into an integration cancer program agreement ("ICP") with CCO. Certain assets are to be transferred in the future from CCO to the Hospital, for \$nil consideration, pending Ministry approval. The net book value and related unamortized portion of capital grants of the assets yet to be transferred is \$541 (2007-\$1,123). Under the ICP, equipment with a unit value greater than \$250 will remain the property of CCO and is not reflected in these financial statements.

Also under the ICP, CCO (as paymaster for the Ministry) provided operating funding, restricted for cancer services, to the Hospital for ambulatory, hotel and corporate costs of \$17,100 for the year ending March 31, 2008 (2007 - \$16,679). Ministry funding for inpatient oncology services remains as part of the Hospital's global funding.

#### 13. Supplemental cash flow information:

	 2008	 2007
Cash received for interest Non-cash investing and financing activities:	\$ 911	\$ 825
Acquisition of capital assets through capital leases	_	761

Notes to Financial Statements, continued (Expressed in Thousands of Dollars)

Year ended March 31, 2008

#### 14. Financial instruments:

Fair value:

The carrying values of cash and short-term investments, accounts receivable, and accounts payable and accrued liabilities, approximate their fair value due to the relatively short periods to maturity of the instruments.

The carrying value of the Hospital's long-term debt is comparable to its fair market value. Fair value has been calculated using the estimated future cash flows of the actual outstanding debt instruments, discounted at current market rates available to the Hospital for the same or similar instruments.

#### 15. Future accounting changes:

The CICA has issued the following new Handbook Sections that will become effective on April 1, 2008 for the Hospital:

- CICA Handbook Section 3862, "Financial Instruments Disclosures"
- CICA Handbook Section 3863, "Financial Instruments Presentation"

CICA Handbook Section 3862 modifies the disclosure requirements for CICA Handbook Section 3861, "Financial Instruments – Disclosure and Presentation", including required disclosure for the assessment of the significance of financial instruments for the Hospital's financial position and performance and of the extent of risks arising from financial instruments to which the Hospital is exposed and how the Hospital manages those risks. CICA Handbook Section 3863 carries forward the presentation requirements of CICA Handbook Section 3861. The Hospital is currently evaluating the impact of the adoption of these standards.

#### 16. Change in comparative figures:

Certain comparative figures have been reclassified to conform with the financial statement presentation adopted in the current year.

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