

**TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT**

**Financial Statements**

**Year Ended March 31, 2009**

# **TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT**

(incorporated under the laws of the Province of Ontario as a corporation without Share Capital)

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## **BOARD OF DIRECTORS**

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Maureen Lawrence, Vice Chair  
David Thomas, Vice Chair  
Leon Laforest, Treasurer  
Dr. Harry Voogjarv, Chief of Staff  
Dr. Lesley Griffiths, President of Medical Staff  
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Mireille Fortier  
Sheila Lamontagne  
Dr. Larry Malo, Vice President of Medical Staff  
Robert Perrault  
Paul Rokeby  
Ann Rudd-Robins, Honourary Director

## **AUDITORS**

Ross, Pope & Company LLP, Chartered Accountants  
Timmins, Ontario

**TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT**

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**Year Ended March 31, 2009**

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# Ross, Pope & Company LLP

**Chartered Accountants**

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## AUDITORS' REPORT

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To the Members of Timmins and District Hospital/L'Hôpital de Timmins et du district

We have audited the statement of financial position of Timmins and District Hospital/L'Hôpital de Timmins et du district as at March 31, 2009 and the statements of operations, changes in net assets and cash flow 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, 2009 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

*Ross, Pope & Company LLP*

Timmins, Ontario  
May 22, 2009

Ross, Pope & Company LLP  
Chartered Accountants  
Licensed Public Accountants


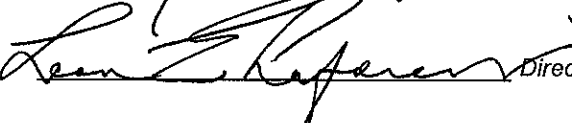
TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

Statement of Financial Position

March 31, 2009

	2009	2008
<b>ASSETS</b>		
<b>CURRENT</b>		
Cash	\$ -	\$ 3,363,852
Accounts receivable (Note 3)	3,707,793	4,627,791
Inventories (Note 2)	725,455	679,547
Prepaid expenses	644,574	496,288
	<b>5,077,822</b>	<b>9,167,478</b>
LONG TERM ACCOUNTS RECEIVABLE	215,807	258,594
CAPITAL ASSETS (Notes 2, 4, 8)	62,138,813	61,331,000
	<b>\$ 67,432,442</b>	<b>\$ 70,757,072</b>
<b>LIABILITIES AND NET ASSETS</b>		
<b>CURRENT</b>		
Line of Credit (Note 13)	\$ 2,107,141	\$ -
Accounts payable and accrued liabilities	11,252,910	11,587,959
Deferred revenue	1,892,057	1,778,074
Current portion of long term debt	-	160,875
Current portion of obligations under capital lease (Note 6)	450,857	401,345
Current portion of accrued benefit liability (Note 7)	145,600	139,000
	<b>15,848,565</b>	<b>14,067,253</b>
OBLIGATIONS UNDER CAPITAL LEASE (Note 6)	-	404,727
ACCRUED BENEFIT LIABILITY (Note 7)	2,177,700	1,965,499
DEFERRED CONTRIBUTIONS (Note 8)	52,872,732	53,943,781
	<b>70,898,997</b>	<b>70,381,260</b>
<b>NET ASSETS</b>		
Unrestricted	(12,011,781)	(5,774,460)
Invested in Capital Assets (Note 9)	8,545,226	6,150,272
	<b>(3,466,555)</b>	<b>375,812</b>
	<b>\$ 67,432,442</b>	<b>\$ 70,757,072</b>

Approved by

  
 \_\_\_\_\_ Director  
  
 \_\_\_\_\_ Director

See accompanying notes.

**TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT**

**Statement of Operations**

**Year Ended March 31, 2009**

	2009	2008
<b>REVENUES</b>		
Ministry of Health - Hospital Funding	\$ 63,164,038	\$ 62,091,740
Ministry of Health - Paymaster	58,864	93,864
Cancer Care Ontario	1,161,723	806,358
Other revenue ( <i>Schedule 1</i> )	18,080,535	18,594,819
Amortization of deferred contributions - equipment ( <i>Note 8</i> )	1,425,965	2,119,001
	<b>83,891,125</b>	<b>83,705,782</b>
<b>EXPENSES</b>		
Salaries and wages	40,898,257	37,976,018
Medical staff fees and honouraria	11,409,462	11,396,363
Employee benefits	11,344,683	10,919,228
Medical and surgical supplies	3,896,237	3,898,385
Drugs	3,111,958	3,054,683
Supplies and other expenses	13,760,061	13,148,329
Interest on long term debt	14,365	20,924
Amortization of equipment and other	3,125,495	3,867,780
	<b>87,560,518</b>	<b>84,281,710</b>
<b>DEFICIENCY OF REVENUES OVER EXPENSES FROM OPERATIONS</b>	<b>(3,669,393)</b>	<b>(575,928)</b>
AMORTIZATION OF DEFERRED CONTRIBUTIONS AND CAPITAL BUILDINGS		
Amortization of deferred contributions - buildings ( <i>Note 8</i> )	2,018,025	1,987,110
Amortization of buildings	(2,190,999)	(2,167,167)
	<b>(172,974)</b>	<b>(180,057)</b>
<b>DEFICIENCY FROM OPERATIONS INCLUDING AMORTIZATION OF DEFERRED CONTRIBUTIONS AND CAPITAL BUILDINGS</b>	<b>(3,842,367)</b>	<b>(755,985)</b>
OTHER MINISTRY OF HEALTH PROGRAMS ( <i>Schedule 2</i> )		
Other program revenues	3,483,292	3,548,140
Other program expenses	(3,483,292)	(3,548,140)
	-	-
<b>DEFICIENCY OF REVENUES OVER EXPENSES</b>	<b>\$ (3,842,367)</b>	<b>\$ (755,985)</b>

**TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT**

**Statement of Changes in Net Assets**

**Year Ended March 31, 2009**

	Unrestricted	Invested in Capital Assets	2009	2008
<b>NET ASSETS - BEGINNING OF YEAR</b>	\$ (5,774,460)	\$ 6,150,272	\$ 375,812	\$ 1,131,797
Deficiency of revenues over expenses	(1,963,168)	(1,879,199)	<b>(3,842,367)</b>	(755,985)
Purchase of capital assets	(6,131,119)	6,131,119	-	-
Amounts funded by financing arrangements	(516,090)	516,090	-	-
Amounts funded by deferred contributions	2,373,056	(2,373,056)	-	-
<b>NET ASSETS - END OF YEAR</b>	\$ (12,011,781)	\$ 8,545,226	\$ <b>(3,466,555)</b>	\$ 375,812

**TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT**

**Statement of Cash Flow**

**Year Ended March 31, 2009**

	2009	2008
<b>OPERATING ACTIVITIES</b>		
Deficiency of revenues over expenses	\$ (3,842,367)	\$ (755,985)
Items not affecting cash:		
Amortization of equipment and other	3,132,306	3,873,746
Amortization of buildings	2,190,999	2,167,167
Amortization of deferred contributions - equipment	(1,426,081)	(2,135,299)
Amortization of deferred contributions - buildings	(2,018,025)	(1,987,110)
Increase in Employee Future Benefits (Note 7)	218,801	108,000
	<b>(1,744,367)</b>	<b>1,270,519</b>
Changes in non-cash working capital:		
Accounts receivable	919,998	1,379,518
Inventories	(45,908)	53,777
Accounts payable and accrued liabilities	(335,047)	503,139
Deferred revenue	113,983	719,667
Prepaid expenses	(148,286)	(60,235)
	<b>504,740</b>	<b>2,595,866</b>
Cash flow from (used by) operating activities	<b>(1,239,627)</b>	<b>3,866,385</b>
<b>INVESTING ACTIVITIES</b>		
Purchase of capital assets	(6,131,119)	(3,894,603)
Decrease in long-term accounts receivable	42,787	10,021
Cash flow used by investing activities	<b>(6,088,332)</b>	<b>(3,884,582)</b>
<b>FINANCING ACTIVITIES</b>		
Repayment of long term debt	(160,875)	(539,748)
Repayment of obligations under capital lease	(355,215)	(402,021)
Increase in deferred contributions	2,373,056	1,166,044
Cash flow from financing activities	<b>1,856,966</b>	<b>224,275</b>
<b>INCREASE (DECREASE) IN CASH FLOW</b>	<b>(5,470,993)</b>	<b>206,078</b>
Cash - beginning of year	<b>3,363,852</b>	<b>3,157,774</b>
<b>CASH (DEFICIENCY) - END OF YEAR</b>	<b>\$ (2,107,141)</b>	<b>\$ 3,363,852</b>
<b>CASH (DEFICIENCY) CONSISTS OF:</b>		
Cash	\$ -	\$ 3,363,852
Line of Credit	(2,107,141)	-
	<b>\$ (2,107,141)</b>	<b>\$ 3,363,852</b>

# TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

## Notes to Financial Statements

Year Ended March 31, 2009

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### 1. HOSPITAL ORGANIZATION

The Timmins and District Hospital/L'Hôpital de Timmins et du district is incorporated without share capital by Letters Patent issued by the Province of Ontario. The hospital is regulated by the Public Hospitals Act and accordingly, the accounting for the operations of the hospital are based on reporting procedures approved by the Ministry of Health. The hospital is a registered charity under the Income Tax Act and accordingly is exempt from income taxes under section 149.1 of the Income Tax Act.

### 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### (a) REVENUE RECOGNITION

The hospital follows the deferral method of accounting for contributions which include donations and government transfers.

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 Ministry of Health and Long-Term Care. Operating transfers are recorded as revenue in the period to which they relate. Transfers approved but not received at the end of an accounting period are accrued. Where a portion of a transfer relates to a future period, it is deferred and recognized in that subsequent period. These financial statements reflect agreed arrangements approved by the Ministry with respect to the year ended March 31, 2009.

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.

Patient related revenue is recognized when the goods are sold or the service is provided.

#### (b) INVENTORIES

Inventories are valued at the lower of average cost and replacement value.

#### (c) PLEDGES

The amount of any pledges to donate funds to the hospital are not included in revenues until such time as funds are received.

#### (d) CAPITAL ASSETS

Capital assets are stated at cost and amortized on a straight-line basis over the estimated life of assets as follows:

Land improvements	10 years
Buildings	10 - 40 years
Equipment	3 - 20 years
Building service equipment	10 years

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# TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

## Notes to Financial Statements

Year Ended March 31, 2009

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### 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES *(continued)*

#### (e) ACCRUED BENEFIT LIABILITY

The hospital accrues for employee future benefit plans and related costs. The cost of retirement benefits earned by employees is actuarially determined using the projected unit method pro-rated on service and management's best estimate of salary escalation, retirement ages of employees and expected health care costs.

#### (f) 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 amount of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Such estimates include providing for amortization of capital assets, estimating the allowance for doubtful accounts and recording significant accruals based on management assumptions. Actual results could differ from these estimates.

#### (g) DONATED SERVICES

The work of the hospital Board is dependent on the voluntary service of members of the Board and others. Since these services are not normally purchased by the hospital and because of the difficulty in determining their fair value, donated services are not recognized in these financial statements.

#### (h) LEASED EQUIPMENT

Equipment leased on terms which transfer substantially all of the benefits and risks of ownership to the hospital are accounted for as "capital leases" and are, therefore, accounted for as though an asset had been purchased and a liability incurred.

#### (i) FINANCIAL INSTRUMENTS

Financial instruments are classified into one of the following five categories: held for trading, held-to-maturity, loans and receivables, available for sale financial assets, or other financial liabilities. All financial instruments are included on the Statement of Financial Position and are initially measured at fair value. Loans and receivables, held-to-maturity investments and other financial liabilities are subsequently measured at amortized cost. Held for trading financial instruments are subsequently measured at fair value, and all gains and losses are included in surplus in the period which they arise. Available-for-sale financial instruments are subsequently measured at fair value with revaluation gains and losses included in Net Assets until the instrument is derecognized or impaired. As a result of adoption of these standards, the hospital has classified its cash and cash equivalents as held for trading. Accounts receivable are classified as loans and receivables. Accounts payable and accrued liabilities are classified as other financial liabilities.

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# TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

## Notes to Financial Statements

Year Ended March 31, 2009

### 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES *(continued)*

#### (j) FUTURE CHANGES IN SIGNIFICANT ACCOUNTING POLICIES

The following accounting standards have been issued by the Canadian Institute of Chartered Accountants (CICA) but are not yet effective. The hospital is currently evaluating the effect of adopting these standards on their financial statements.

Section 1535, "Capital disclosures", which is effective for years beginning on or after October 1, 2007. This Section establishes standards for disclosure, both qualitative and quantitative, about the entity's objectives, policies and processes for managing capital. Amendments issued in June 2008, exempt non-publicly accountable entities from this standard unless they have external capital requirements.

Section 3862, "Financial instrument-disclosure", and Section 3863, "Financial instruments-presentation", are effective for years beginning on or after October 1, 2007. These Sections replace Section 3861, "Financial instruments-disclosures and presentations". These Sections establish the standards for presentation of financial instruments and non-financial derivatives and identifies information that should be disclosed. Amendments issued in June 2008, exempt non-publicly accountable entities from applying these Sections. NPAEs may apply Section 3860. Not-for-profit entities may continue to apply Section 3861.

For years beginning January 1, 2009 or later new Section 4470 requires that when allocations of fundraising and general support expenses have been made to other functions, the policies adopted for the allocation of expenses among functions, the nature of the expenses being allocated, and the basis on which such allocations have been made should be disclosed. In addition, the amounts allocated from each of these two categories and the amounts and the functions to which they have been allocated, should be disclosed. Management is currently considering the best means to comply with this requirement for our next year end.

### 3. ACCOUNTS RECEIVABLE

	2009	2008
Ministry of Health	\$ 168,337	\$ 623,157
Insurers and patients	2,355,772	2,159,531
Other	1,238,683	1,900,102
Subtotal	3,762,792	4,682,790
Less: Allowance for doubtful accounts	(55,000)	(55,000)
	<b>\$ 3,707,792</b>	<b>\$ 4,627,790</b>

# TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

## Notes to Financial Statements

Year Ended March 31, 2009

### 4. CAPITAL ASSETS

	Cost	Accumulated amortization	Net 2009	Net 2008
Land	\$ 490,002	\$ -	\$ 490,002	\$ 490,002
Land improvements	363,047	57,438	305,609	83,302
Buildings	78,315,477	28,904,979	49,410,498	50,489,693
Equipment	43,305,163	33,883,835	9,421,328	8,850,820
Building service equipment	3,456,732	945,356	2,511,376	1,417,183
	\$125,930,421	\$ 63,791,608	\$ 62,138,813	\$ 61,331,000

### 5. PENSION PLAN

Substantially all of the employees of the hospital are members of the Hospitals of Ontario Pension Plan. Contributions to this defined benefit plan made during the year by the hospital on behalf of its employees amounted to \$3,009,111 (\$2,871,480 in 2008) and are included in employee benefits in the Statement of Operations. Contributions are related to actuarial requirements established by the trustees of the plan.

### 6. OBLIGATIONS UNDER CAPITAL LEASE

Obligation under capital lease with Toshiba of Canada Limited is interest free and is repayable with the final payment on April 30, 2009.

### 7. ACCRUED BENEFIT LIABILITY

The Timmins and District Hospital/l'Hôpital de Timmins et du district provides extended health care, dental and life insurance benefits to all full-time employees. The cost of premiums for these benefits is shared by the hospital and full-time employees. The hospital's accrued benefit obligation relating to post-retirement plans is as follows:

	2009	2008
Current portion	\$ 145,600	\$ 139,000
Long term portion	2,177,700	1,965,499
Total accrued benefit liability	\$ 2,323,300	\$ 2,104,499

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

Discount rate	4.75%
Dental benefits cost escalation	4.00%
Medical benefits cost escalation - extended health care per annum to an ultimate rate of 4.5% in in 2017	10.0%; decreasing by 0.55%

	2009	2008
Benefit expense for year ended March 31, 2009	\$ 303,300	\$ 292,000
Payments made by Hospital	(84,499)	(184,000)
	\$ 218,801	\$ 108,000

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# TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

## Notes to Financial Statements

Year Ended March 31, 2009

### 7. ACCRUED BENEFIT LIABILITY *(continued)*

The accrued benefit liability has been determined by an actuary based on an actuarial valuation performed as at March 31, 2009. The next required actuarial valuation will be performed as at March 31, 2011.

### 8. DEFERRED CONTRIBUTIONS

#### CAPITAL ASSETS

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

	2009	2008
Balance, beginning of year	\$ 53,943,781	\$ 56,900,142
Additional contributions received	2,373,056	1,166,047
Amounts amortized to revenue	(3,444,105)	(4,122,408)
Balance, end of year	<b>\$ 52,872,732</b>	<b>\$ 53,943,781</b>

### 9. RESTRICTED NET ASSETS

Restricted net assets are calculated as follows:

	2009	2008
CAPITAL ASSETS	<b>\$ 62,138,813</b>	\$ 61,331,000
AMOUNTS FINANCED BY:		
Long-term bank loans	(450,855)	(966,947)
Deferred contributions	(52,872,732)	(53,943,781)
Unrestricted funds used for PACS contribution	(270,000)	(270,000)
	<b>\$ 8,545,226</b>	<b>\$ 6,150,272</b>

CHANGE IN NET ASSETS INVESTED IN CAPITAL ASSETS IS CALCULATED AS FOLLOWS:

#### DEFICIENCY OF REVENUE OVER EXPENSES

Amortization of deferred contributions related to capital assets	\$ 3,444,105	\$ 4,122,410
Amortization of capital assets	(5,323,305)	(6,057,096)
	<b>\$ (1,879,200)</b>	<b>\$ (1,934,686)</b>

### 10. RELATED ENTITIES

The financial statements do not include the assets, liabilities and activities of any organizations such as the Timmins and District Hospital Foundation or the Hospital Auxiliary which, although related to the hospital, are not operated by it.

The hospital has an economic interest in the Timmins and District Hospital Foundation, whose mandate is to fundraise for the hospital. During the year, the Foundation contributed \$1,509,443 (2008 - \$629,816) towards the purchase of capital assets.

# TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

## Notes to Financial Statements

Year Ended March 31, 2009

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### 11. HEALTHCARE INSURANCE RECIPROCAL OF CANADA

On July 1, 1987, a group of health care organizations ("subscribers"), formed Healthcare Insurance Reciprocal of Canada ("HIROC"). HIROC is registered as a Reciprocal pursuant to provincial Insurance Acts which permit persons to exchange with other persons reciprocal contracts of indemnity insurance. HIROC facilitates the provision of liability insurance coverage to health care organizations in the provinces of Ontario, Manitoba, Saskatchewan and Newfoundland. Subscribers pay annual premiums, which are actuarially determined, and are subject to assessment for losses in excess of such premiums, if any, experienced by the group of subscribers for the years in which they were a subscriber. No such assessments have been made to March 31, 2009.

Since its inception in 1987, HIROC has accumulated an unappropriated surplus, which is the total of premiums paid by all subscribers plus investment income less the obligation for claims reserves and expenses and operating expenses. Each subscriber which has an excess of premium plus investment income over the obligation for their allocation of claims reserves and expenses and operating expenses may be entitled to receive distributions of their share of the unappropriated surplus at the time such distributions are declared by the Board of Directors of HIROC. There are no distributions receivable from HIROC as of March 31, 2009.

### 12. ECONOMIC DEPENDENCE

The hospital receives a significant amount of its revenue from the Ministry of Health. The continuation of this hospital is totally dependent on this funding.

### 13. LINE OF CREDIT

The hospital has a \$5,000,000 line of credit available to meet current expenditures. The facility bears interest at a rate equal to the lender's prime rate less 0.65% and is secured by general security agreement.

### 14. FINANCIAL INSTRUMENTS

The hospital's financial instruments consist of cash, accounts receivable, accounts payable and accrued liabilities, long-term debt, obligation under capital lease and accrued benefit liability. It is management's opinion that the hospital is not exposed to significant interest, currency or credit risks arising from these financial instruments.

#### FAIR VALUE

The hospital's carrying value of cash, accounts receivable, accounts payable and accrued liability approximate its fair value due to the immediate or short term maturity of these instruments.

The fair value the obligation under capital lease is less than carrying value, as the amount is non-interest bearing. Using a discount rate of 4.5% (average of the current rates offered to the hospital for debt with similar terms), the fair value of the obligation under capital lease is calculated at \$384,062.

The carrying value of the long term debt and the accrued benefit liability approximates the fair value as the interest rates are consistent with the current rates offered to the hospital for debt with similar terms.

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# TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT

## Notes to Financial Statements

Year Ended March 31, 2009

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### 14. FINANCIAL INSTRUMENTS *(continued)*

#### CREDIT RISK

The hospital does not have sufficient exposure to any individual or party. A large portion of the hospital's receivables are due from other levels of government. An allowance for doubtful accounts is established based on factors surrounding the risk related to specific accounts, historical trends and other information. The hospital has an allowance for doubtful accounts in the amount of \$55,000 (2008 - \$55,000).

#### INTEREST RISK

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. In seeking to minimize the risks from interest rate fluctuations, the hospital manages exposure through its normal operating and financing activities. The hospital is exposed to interest rate risk primarily through its floating interest rate bank indebtedness and credit facilities.

#### COMMODITY RISK

The hospital is exposed to fluctuations in commodity prices for natural gas, crude oil and natural gas liquids. Commodity prices are affected by many factors including supply, demand and the Canadian to U.S. dollar exchange rate. The hospital had no financial hedges or price commodity contracts in place at year end.

### 15. COMPARATIVE FIGURES

Some of the comparative figures have been reclassified to conform to the current year's presentation.

**TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT****Schedule of Other Revenue****(Schedule 1)****Year Ended March 31, 2009**

	<b>2009</b>	<b>2008</b>
Ministry of Health - Emergency Physician Funding	<b>\$ 2,632,232</b>	<b>\$ 2,598,073</b>
Preferred accommodation	<b>896,666</b>	<b>947,628</b>
Investment Income	<b>39,335</b>	<b>188,475</b>
Ambulance	<b>70,270</b>	<b>65,730</b>
Cafeteria and coffee shop	<b>979,014</b>	<b>984,878</b>
In Patient	<b>717,087</b>	<b>885,949</b>
Other revenue	<b>1,003,351</b>	<b>990,664</b>
Out patients - OHIP	<b>6,607,478</b>	<b>6,453,969</b>
Out patients - other	<b>1,689,606</b>	<b>2,106,209</b>
Recoveries - other services	<b>938,462</b>	<b>1,799,731</b>
Recoveries - all other	<b>1,379,009</b>	<b>1,354,960</b>
Undistributed income	<b>1,128,025</b>	<b>218,553</b>
	<b>\$ 18,080,535</b>	<b>\$ 18,594,819</b>

**TIMMINS AND DISTRICT HOSPITAL/L'HÔPITAL DE TIMMINS ET DU DISTRICT**

**Schedule of Other Ministry of Health Programs**

*(Schedule 2)*

**Year Ended March 31, 2009**

	2009	2008
<b>Revenues</b>		
Adult Community Mental Health	\$ 1,398,892	\$ 1,369,768
Air and Land Ambulance Base Hospital	249,693	277,134
Interim Long-Term Care	674,432	627,122
Mental Health Out-Patient Sessional Fees	249,242	201,912
Municipal Taxation	12,300	12,300
Nurse Practitioner	129,750	126,250
Partnerships and projects	768,983	933,654
	<b>3,483,292</b>	<b>3,548,140</b>
<b>Expenses</b>		
Adult Community Mental Health	1,399,348	1,369,768
Air and Land Ambulance Base Hospital	249,237	277,134
Interim Long-Term Care	674,432	627,122
Mental Health Out-Patient Sessional Fees	249,242	201,912
Municipal Taxation	12,300	12,300
Nurse Practitioner	129,750	126,250
Partnerships and Projects	768,983	933,654
	<b>3,483,292</b>	<b>3,548,140</b>
<b>NET</b>	<b>\$ -</b>	<b>\$ -</b>