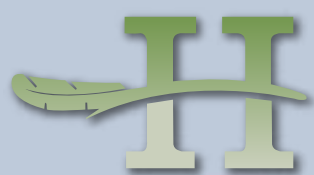


2020- 2021



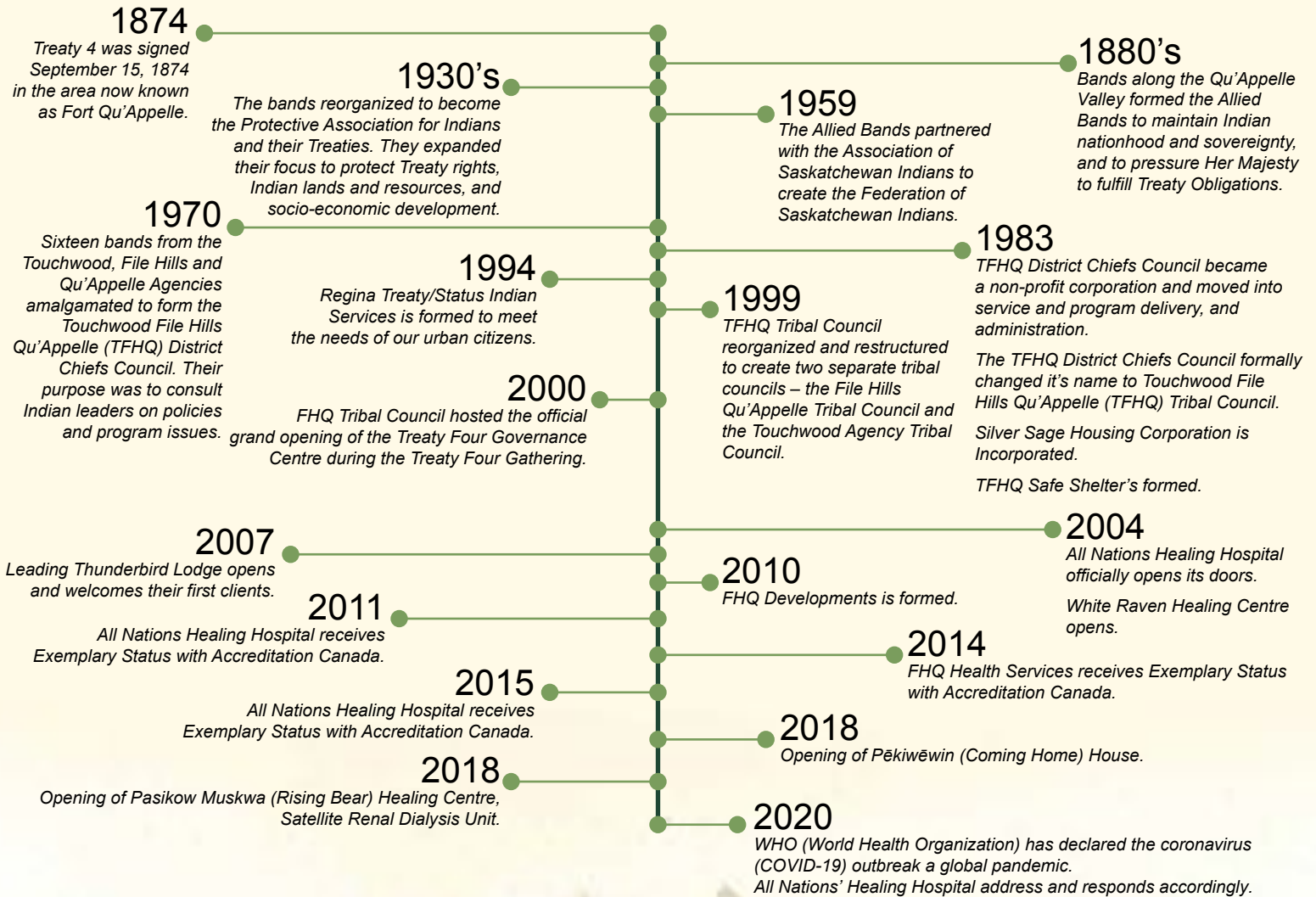
All Nations'
Healing Hospital

Annual Report



Fort Qu'Appelle, Saskatchewan

Looking Back at History



BackRow, L. to R. - Mrs. North Wind (or Mrs. Keewaydin); Mrs. Squaretoes (or Mrs. Jack Fisher); Mrs. Sitting before the Fire (or Mrs. Miss-ta-tik); Mrs. Buffalo Bow; Mrs. Yellow Belly; Mrs. Buffalo Blanket(or Mrs. Pimotatt); Mrs. Playful Child(or Tuckanow). Standing Centre - Day Walker. Front Row, L. to R. - Chief Hawke; Crooked Nose; Chief Star Blanket; Pointed Cap (Cheepoostalin); Buffalo Bow; Sitting before the Fire(Mlss-ta- tik); Feather(Me-Kuinness). Pointed Cap was 107 years of age when this photo taken.

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Treaty Right to Health

"In the context of Treaty 4, the Qu'Appelle Treaty: The Queen cares for you and for your children, and she cares for the children that are yet to be born... The Queen has to think of what will come long after today.

Therefore, the promises we have to make to you are not for today only but for tomorrow, not only for you but for your children born and unborn, and the promises we make will be carried out as long as the sun shines above and water flows in the ocean."

http://www.naho.ca/documents/naho/english/publications/DP_rights.pdf

MESSAGE

FROM THE BOARD CHAIRMAN, EDMUND BELLEGARDE



The All Nations Healing Hospital (ANHH) is pleased to provide you and the residents of our communities with the 2020-2021 Annual Report to the Members.

The annual report is a legislative requirement which demonstrates the ANHH's commitment to transparency and accountability. This year's report includes the approved audited financial statements for the year ending March 31, 2021. Due to the ongoing demands on the ANHH caused by the universal pandemic, this report also focuses on our response to managing the pandemic at ANHH.

Although significantly challenging, 2020 was also a year of substantial accomplishments and progress for ANHH including our commitment to ensure the provision of safe and responsive services during the pandemic. During this time the Board met virtually which allowed us to come together and continue to provide direction and oversight to the Senior Leadership Team.

Adapting our hospital services as directed by the Public Health Orders, the SHA COVID-19 directives and by the communities at the onset of the pandemic and throughout the fiscal year was met with innovation and commitment by our team of health professionals. We are committed to holding ourselves to the highest standards as we continue to provide safe and responsive services throughout the fiscal year.

We recognize challenges remain including addressing, responding and adapting to the rapid changes resulting from COVID-19. Our commitment to a philosophy of care underpins our activities as the foundation of the values at the All Nations Healing Hospital. As demonstrated through our Board of Directors' meetings, the daily internal communications with staff, and our public communications through the ANHH website and the FHQTC social media channels (Facebook, Twitter, YouTube) our commitment to accountability and transparency remains foremost in our obligation to the provision of safe health care services for the citizens of our catchment area.

In closing I want to acknowledge this unprecedented period of modern history and the commitment and dedication our team has demonstrated ensuring we remain responsive and operational. We are extremely grateful for the fortitude, resilience and professionalism of all those involved in the response to the pandemic and by working together we have been able to manage and coordinate services through a time of great uncertainty.

LEADERSHIP

GOVERNANCE REPORT

ABOUT US

The All Nations Healing Hospital is governed by the ANHH Board of Directors. The Board consists of 13 voting members who are appointed in accordance with our Bylaws. The Board is accountable to member nations of the File Hills Qu'Appelle Tribal Council and the Touchwood Agency Tribal Council and of course, to you, the residents who use our facility.

In 2019, the Board welcomed several new members including Chief Peigan, Chief Tavita, Chief Stonechild, Councillor Pelletier, Councillor Desjarlais, Councillor Buffalo, Mayor Gus Legace and Councillor Knowles. Concluding their term on the Board is Chief Soo-Oyewaste, Chief Cappo, Councillor Hugh Pratt, Chief Dustyhorn, Mayor Whiting and Councillor Joye Schoonbaert. We extend our appreciation for their dedicated years service to the ANHH and the communities we serve.

After many years of service Chief Marie Anne Daywalker-Pelletier and Shirley McNab both concluded their term with All Nations Healing Hospital. Their leadership, and passion for safe community directed service and commitment to the people we serve contributed to the successes our hospital has achieved and we thank them for their years of service on our Board and their leadership in our community.

On behalf of our Board of Directors and our Executive Leadership Team, we look forward to continuing to work with the people we serve, and our health care teams to achieve our vision of leaders in the development, delivery, and influence of exceptional, safe and wholistic care.

**STRIVING
TOWARDS THE
HIGHEST QUALITY
CARE AND
SERVICE!**



LEADERSHIP

BOARD OF DIRECTORS



ALL NATIONS HEALING HOSPITAL BOARD OF DIRECTORS

Edmund Bellegarde, FHQTC & ANHH Chairperson

Chief Michael Starr, Starblanket First Nation

Chief Richard Stonechild, Okanese First Nation

Chief Melissa Tavita, Muscowpetung First Nation

Chief Matthew T. Peigan, Pasqua First Nation

Cora Leigh Buffalo, Day Star First Nation

Cynthia Desjarlais, Muskowekwan First Nation

Tammy Pelletier, Gordons First Nation

Mayor Gus Lagace, Fort Qu'Appelle

Lee Carlson, R.M. North Qu'Appelle

Monica Knowles, Village of Lipton

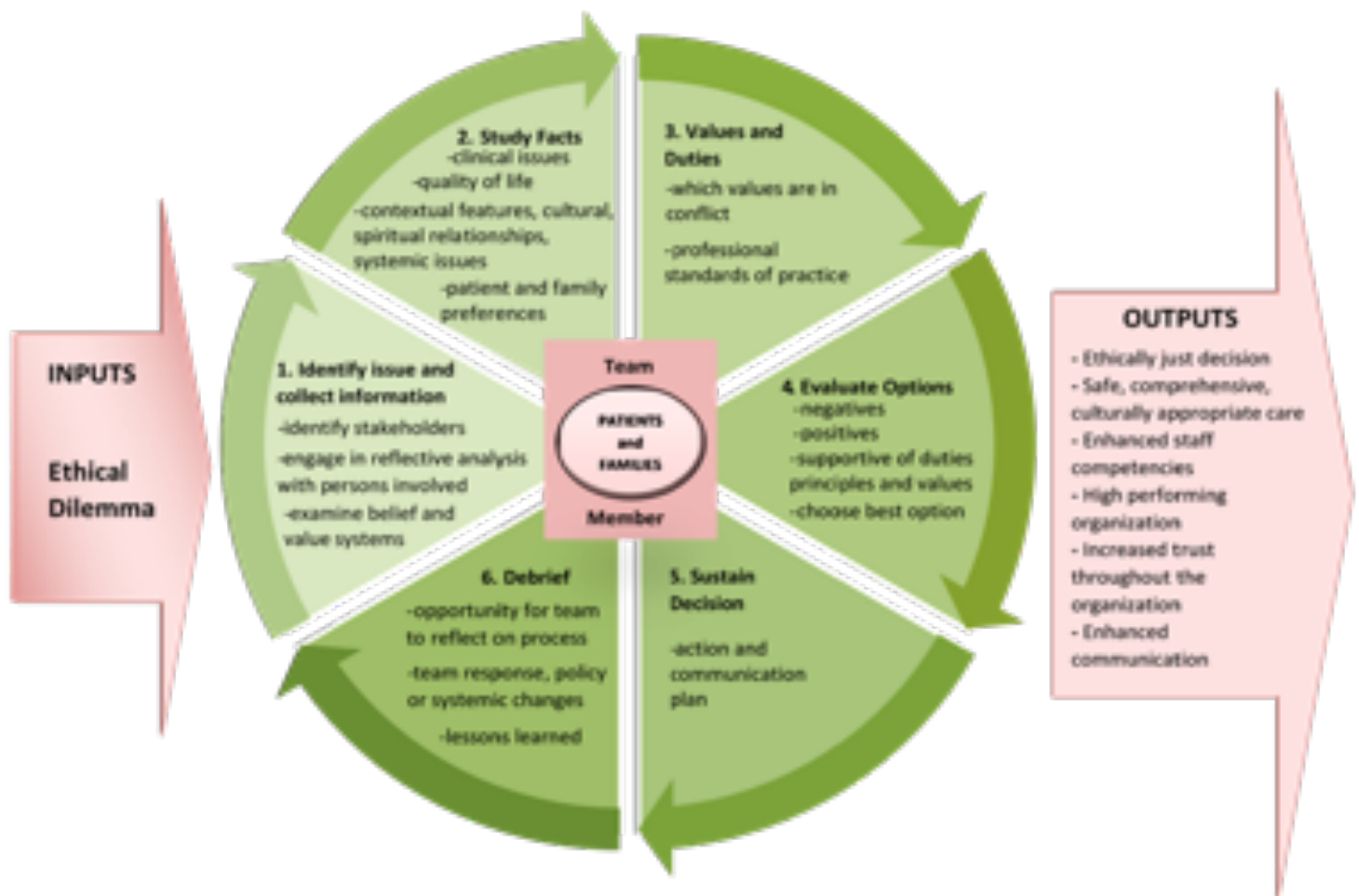
Cory Senft, R.M. Lipton

Marian Zerr, Member at Large

REPRESENTATION

The Board of Directors of the All Nations Healing Hospital is comprised of representatives from the File Hills, Qu'Appelle, and Touchwood Agencies as well as surrounding Municipalities, Villages and Towns.

GUIDING PRINCIPLES ETHICS



An Ethics Committee was established with membership from ANHH internal departments and representation from external affiliates. The committee provides consultation and advice on ethical issues, policy reviews, and case consultations. The group also ensures health research protocols are adhered to and provides educational opportunities.

Subsequently, an Ethics Framework was developed to further guide and assist staff and other professionals with every day ethical issues in his or her work to provide the best possible outcomes for clients.

2017 – 2020 *EXTENDED TO 2022*

STRATEGY MAP



All Nations Healing Hospital

Vision

Recognized leaders in the development, delivery, and influence of exceptional, safe and wholistic care

Values

Respectful,
compassionate service
that understands client
needs

Partnerships based
on mutually
desirable outcomes

Confidentiality
and
accessibility

Three Year Strategic Imperative

To maintain the highest standard of accreditation while continuing to evolve and demonstrate a better model of health care for our communities and surrounding areas.

Clients/ Stakeholders	4.1 Recipients of Care 4.1.1 Wholistic care that is responsive to the unique needs of individual clients resulting in improved health outcomes	4.2 Funders 4.2.1 Supportive partnerships that champion the delivery of the wholistic care model and best practices in culturally integrated services.	4.3 Communities 4.3.1 Confidence and trust in the availability of quality care impacting the overall health of communities
Financial	3.1 Sustain 3.1.1 Maintain sound, accountable financial operations to support sustainability		
Operations	2.1 Research and Development 2.2.1 Expand research in efficacy of traditional healing and wholistic health care service delivery 2.2.2 Evaluate programs and services	2.2 Health Care Service Delivery 2.2.1 Continue to provide excellent acute health care 2.2.2 Expand chronic health care services 2.2.3 Build on the success of the Women's Health Centre	2.3. Health Promotion 2.3.1 Improve public health outcomes through education 2.3.2 Improve health literacy
Organizational	1.1 First Nations Capacity 1.1.1 Continue to build First Nations capacity in all areas of service delivery	1.2 Build an organizational culture that supports the wholistic model of care 1.2.1 Provide training and mentorship for all care providers	



2017 – 2020 Strategy Map

Mission

The All Nations Healing Hospital delivers safe, wholistic health services and research to meet the needs of our communities. Specifically, ANHH Provides services in the areas of acute and chronic health care and women's health.

Values

Recognize and exercise the Treaty Right to Health

Innovation

Fostering independence

Accountability, honesty and integrity

4.4 Practitioners

4.4.1 Supportive leaders of the wholistic model in an inclusive environment devoid of systemic barriers to individualized care.

4.5 First Nations Community

4.5.1 Confidence and trust in the services provided and proud supporters of the ANHH

3.2 Grow

3.2.1 Expand revenue sources to support growth in programs and facilities

2.4 Public Engagement and Advocacy

2.4.1 Build community knowledge and interest
2.4.2 Maintain and expand existing partnerships
2.4.3 Build policy support for model of care

2.5 Technology

2.5.1 Continue to be a leader in information management to ensure integration of services

1.3 Governance Excellence

1.3.1 Ensure informed, representative, and supportive leadership
1.3.2 Build effective governance practices

1.4 Recruitment and Retention

1.4.1 Ensure exceptional resource complement

PATIENT FAMILY ADVISORY COUNCIL

01 ORIENTATION, MEETINGS

- The initial orientation was held October 22, 2018 for founding members with a second orientation December 10, 2019 for new members, which included five volunteers and two staff
- The Council met once per month for a total of 13 meetings

02 RECRUITMENT

- The Council actively recruits new members through public signage, communication with community stakeholders, special events, word of mouth and informal communication
- The Council recognizes the value of diverse members and actively seek youth representation and includes student nurse participation



03 PARTICIPATION

- Participation in new employee interviews
- PFAC member sits on the local Physician Recruitment Working Group
- PFAC volunteers participated in two focus groups: the ANHH Accreditation survey and for Praxis to assist in development of a client satisfaction survey
- Participated in a *Patients as Partners* webinar
- Volunteered as patient escorts during ANHH renovation
- PFAC volunteer will sit on ANHH Ethics committee once meetings resume

04 DEVELOPED, DISTRIBUTED, REVIEWED

- Distributed client satisfaction surveys, reviewed results and made recommendations to staff
- Developed Terms of Reference
- Designed new ANHH brochure
- Reviewed various documents used in the organizations
- Patient valuables list and signage
- Emergency triage signage
- Dialysis independent suite user agreement
- Patient Experience survey
- Lab registration data gathering and analysis and communication of results to public

MESSAGE

FROM THE CEO, GAIL BOEHME



Reflecting back on this historic and challenging year, a year dominated by the universal pandemic which almost paralyzed our province we can with confidence state we met wave after wave with resilience. Looking back on the early days of April 2020 where a dramatic and immediate response was needed in ways we never before experienced the team at ANHH moved into action. In partnership with our sister organization, the FHQTC Health Services, our teams responded throughout each wave of the pandemic, relying on the wisdom, advice and direction of our public health officials. Their advice, which is based on the evolving evidence and science across Canada and around the world, thoughtful and often difficult choices to mitigate the impact of the virus were made while still providing hospital services. Hour by hour we adapted, increased our flexibility and our innovation and with an experienced team of health professionals at the lead it strengthened our ability to remain sustainable throughout the pandemic.

As a result of the need to cohort staff we realized additional staffing challenges, however by creating strong entryway screening processes, responsive testing and contact tracing, innovative approaches to communication and more are all representative of these rarely noted pressures which involved our people every day. Countless hours of their time were required to implement and operationalize the elevated protocols around personal protective equipment and support communities and citizens of our catchment area. The following report summarizes the past years events however it does not outline the additional countless hours invested by the team to ensure ANHH remained operational through one of the most difficult periods of our lifetime.

The accompanying consolidated financial statements are the responsibility of management, and are approved by the All Nations Healing Hospital Board of Directors. The consolidated financial statements have been prepared in accordance with Canadian Public Sector Accounting Standards and of necessity include amounts based on estimates and judgements.

Management maintains appropriate systems of internal control, including policies and procedures, which provide reasonable assurance the ANHH's assets are safeguarded and the financial records are relevant and reliable.

The external auditor and ANHH financial management team review the consolidated financial statements and meets with the Board, Senior Management, to discuss and review the financial matters, and approves the consolidated financial statements.

The appointed auditor conducts an independent audit of the consolidated financial statements. The auditor's report expresses an opinion on the fairness of the consolidated financial statements prepared by management.

In closing ANHH has weathered a very difficult year. The Traditional Knowledge Keepers, nurses, lab and X-Ray, environmental services, physicians, FHQTC Health Services team, maintenance, finance, procurement, our support teams and many many more all committed to providing safe health services and preventing the spread of the coronavirus. I want to thank you for persevering, for being beside us, grieving, adapting and boosting us up inspiring us to work together toward an even stronger organization in years to come.

KEY ACTIVITIES FOR THE FISCAL YEAR

DEPARTMENTS

DEPARTMENT	DEPARTMENT HEAD	TITLE
ANHH & FHQ Health Services	Gail Boehme	Executive Director
Programs & Community Services	Lorna Breitzkreuz, RN, MN	Director
Clinical & Acute Care Services	Kendra Filteau, BSN, CDE	Director
Diagnostics	Sonya Mayo	Supervisor
Health Information Management	Laurie Dixon	Supervisor
Quality Improvement & Infection Control	Dinys Reed, RN BScN	Accreditation Coordinator
Maintenance	Chris Hahn	Supervisor
Environmental Services/Dietary/Laundry	Dawn Desjarlais	Supervisor
Purchasing/Scheduling	Erin Anardi	Coordinator
Nursing	Michelle Carroll, RN	Supervisor
Women's Health Centre	Stella DeVenney, RN, NP	Manager
Miko-Mahikan Red Wolf	Stella DeVenney, RN, NP	Manager
Rising Bear Healing Centre	Amanda Harrison, RN	Manager
Finance	Lana George, BBA	Manager
Human Resources	Vacant	Manager

ALL NATIONS HEALING HOSPITAL

COVID-19 RESPONSE

In the anticipation of a potentially significant impact with the ability to cripple our systems, the province was brought to almost a complete standstill in April of 2020. To support the COVID-19 response ANHH ensured processes were in place to implement and follow the Public Health Orders as set out by the Chief Medical Health Officer of Saskatchewan. Staff were made aware of the orders and ANHH participated in daily and weekly meetings with the Saskatchewan Health Authority and Indigenous Services Canada. All services at ANHH continued to be offered at the preference of the client, either virtual or in person.

To protect patients and employees throughout this time ANHH:

- Monitored the Protective Personal Equipment (PPE) for the facility, trained staff in the appropriate use and ensured adequate supply for ANHH, FHQTC Health Services staff and Health Centres.
- N-95 Mask Fit testing was ongoing and ramped up to ensure all direct health care workers were up-to-date with fit testing.
- ANHH & FHQTC Health Services dedicated additional staff to testing and tracing and support the need as it grew throughout the fiscal year including ANHH Immunization Nurse assigned responsibility for the staff sick calls and follow-up of potential COVID19.
- Increased and enhanced cleaning of frequently touched areas throughout the facility
- All onsite meetings were postponed and rescheduled to accommodate virtual settings
- All group activities were postponed or cancelled
- Applied the safe family presence (visitor) guidelines
- Screening of clients, visitors, contractors and staff was implemented
- Limited movement of staff between health care facilities
- Staff able to work from home were sent home with tools to access to systems, digital files and virtual platforms.
- Cafeteria was closed to the public
- Pasikow Muskwa (Rising Bear) Healing Centre offered a fourth day of Dialysis for patients
- Enhanced our IT systems and increased our broadband to ensure access to virtual meetings was available and effective.
- Board meetings occurred virtually
- January of 2021 the organization was able to secure vaccine to begin vaccination of frontline Health Care Providers. Uptake was very high and most Frontline Staff were fully vaccinated by the end of February.
- Due to RN shortage and to ensure patient safety the Acute Care Ward temporarily closed the inpatient beds In March.

ALL NATIONS HEALING HOSPITAL

COVID-19 RESPONSE CONT...

March of 2021 also saw the declaration of an outbreak related to 3 staff members who contracted COVID 19 in the community. During the outbreak ANHH strengthened its protective measures to include:

- Inpatient beds remained closed but the Emergency Department remained open.
- Regular meetings with our Medical Health Officer.
- Twice weekly staff testing throughout the outbreak period occurred.
- Using the Abbot ID Now device testing teams were trained in the testing process. The teams continue to offer weekly staff testing as well as any on demand community testing.

In addition to our COVID 19 response ANHH also:

- Established the GeneXpert platform to provide urgent results within two hours.
- Set up access to diagnostic testing by erecting a drive thru tent in front of main access doors.
- In partnership with our Community Health Program testing of residents of our communities needing urgent testing was underway.
- Deployed Abbot ID Now testing devices in Acute, Rising Bear, and two in FHQ Health Services. The implementation of this polymerase chain reaction (PCR) device which provides results within 15 minutes of testing have been core elements of ANHH and FHQTC Health Services prevention strategy.
- Distribution of Rapid Point of Care kits to health-care workers so they can test themselves at home.

These supplies were provided to the All Nations Healing Hospital and FHQTC Health Services by the federal government. The federal government continues to provide testing kits throughout this fiscal year.

ALL NATIONS HEALING HOSPITAL

ACCREDITATION

CHRONOLOGY OF EVENTS APRIL 2020 – MARCH 2021

- April 1, 2020 COVID 19 has resulted in a provincial response to allow the health system in Saskatchewan time to prepare its response to the management of the virus.
 - a) Work has been done to ensure the organization follows the Public Health Orders set by the SHA Chief Medical Health Officer and that staff are aware of the orders. Acute Care and Primary Care will follow guidelines set out by the Sask. Health Authority. Weekly meetings have begun with the SHA Zones as well as regular meetings with FHNH Medical Health Officer.
 - b) Regular weekly meetings with Provincial Infection Control Practitioners took place.
- In addition to our pandemic responses, we also turned our attention to the following:
 - a) To meet Accreditation Medication Management Standard 12.5: Medication storage areas meet any applicable legislated requirements and regulations for controlled substances.
 - b) Locks have been applied to all cupboard doors in Birthing Unit.
 - c) Medication Security Audits have taken place with results reviewed with staff monthly.
- To meet the criteria of Accreditation Canada's Medication Management ROP 2.3.5 *"The program is evaluated on an ongoing basis and results are shared with the stakeholders in the organization"*. Surveyors had indicated that staff was not aware of formal audits and evaluations of the Antimicrobial program at ANHH. The staff does not report receiving any reports.
 - a) The ANHH Pharmacist has been assigned to take the lead on the Antimicrobial stewardship program.
 - b) The Pharmacist has linked in with the Regional Program and was able to get applicable stats for ANHH.
 - c) The Pharmacist connected with physicians individually and provided updates at the monthly Physician Advisory Committee Meeting (PAC).
 - d) Antimicrobial Stewardship was a standing agenda item at the PAC.
- May 4, 2020, Rural Integrated Health Incident Command Center Meetings have been increased in frequency to Monday, Wednesday, and Friday.
- May 20, 2020, ANHH N-95 Fit Tester was recertified to do N-95 Fit-Testing through Sask. Association for Safe Workplaces.

ALL NATIONS HEALING HOSPITAL

ACCREDITATION

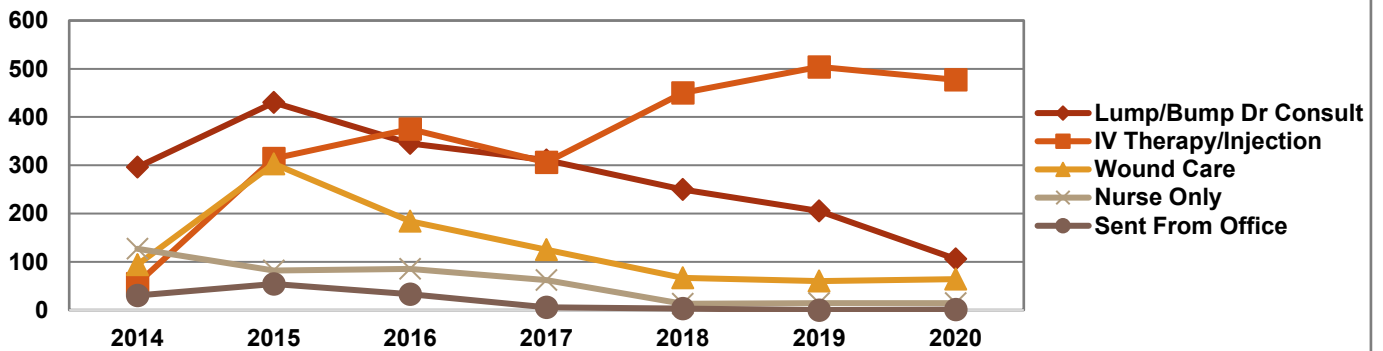
CHRONOLOGY OF EVENTS APRIL 2020 – MARCH 2021 CONTINUED

- May 2020 Audit report of Maintenance Request for services log book provided to Director.
- May 2020 Maintenance Policies 4.13.001 and 4.13.005 were revised and updated to reflect current practice.
- Regular meetings with Maintenance were established.
- June 15, 2020 Interview with G. Akiri regarding the ongoing Praxis Consulting ANHH Staff Satisfaction Survey.
- OH&S Meetings continued to occur on a monthly basis.
- IT has worked to establish ongoing WebEx meetings with the PFAC meetings.
- ANHH Immunization Nurse has taken on the role of managing the Staff sick calls and doing follow-up for any potential COVID 19.
- As per Letter received from Accreditation Canada on Feb 10, 2020 on September 29, 2020 additional evidence submitted to Accreditation Canada as per their requirements for tests for compliance.
 - Final decision from Accreditation Canada on January 27, 2021 with a result of all criteria being met and ANHH remains Accredited with Commendation.
- November 2020 team established to support the Community Health Nurses in the work of Community mass Testing for Covid 19. Teams attended communities on demand.
 - The organization worked with the province to secure GeneXpert rapid lab testing machine for lab to ensure ability to provide timely COVID 19 results to patients.
- January 2021 the organization was able to secure vaccine to begin vaccinating in communities and to vaccinate the frontline Health Care Providers.
 - a) Uptake of vaccine very high with minimal to no wastage of doses.
 - b) Most Frontline Staff fully vaccinated by the end of February 2021.
- March 2021- to ensure patient safety the Acute Care Ward had to close inpatient beds due to shortage of RN staff.
- March 2021 the Acute Care facility was declared to be on outbreak related to 3 staff members who contracted COVID 19 in community.
 - a) Inpatient beds were closed but Emergency Room remained open.
 - b) Regular meetings with FNIH MHO were held.
 - c) The organization secured ABBOT ID Rapid PCR testing machines and Testing teams were trained in the process and provided twice weekly Staff testing throughout the outbreak period (Rapid testing results are available within 15 minutes).
 - d) Weekly Staff testing continued to occur as well as the on-demand community testing.

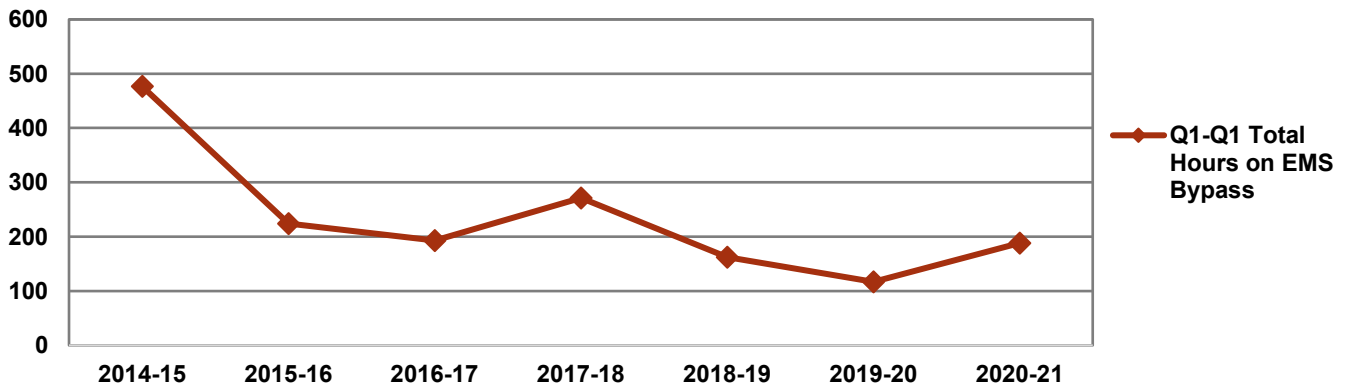
OPERATIONS

EMERGENCY DEPARTMENT

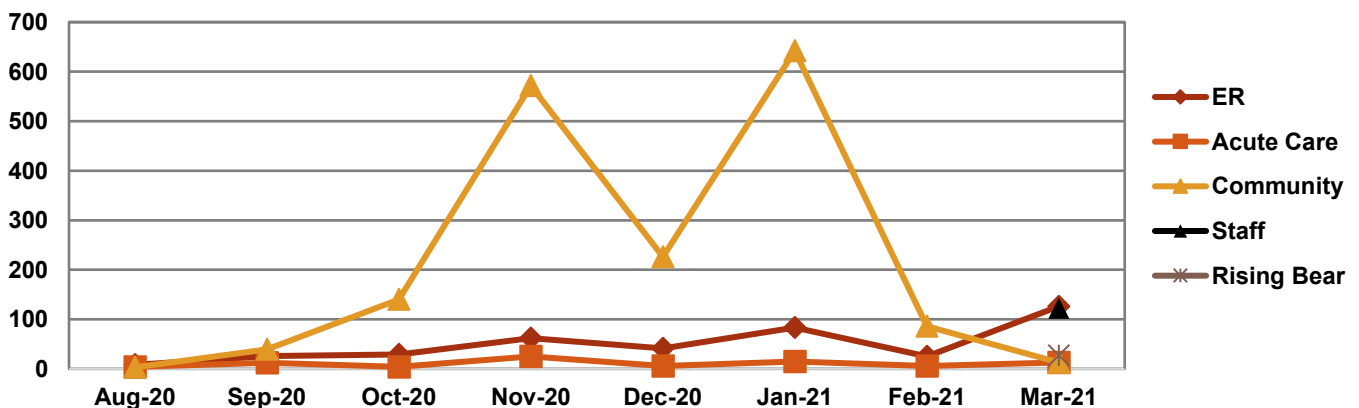
Non-Triaged Procedures Done in the ANHH Emergency Department



Q1-Q4 ANHH Emergency Department Hours on Ambulance Bypass



Number of Covid Swabs Done Through ANHH

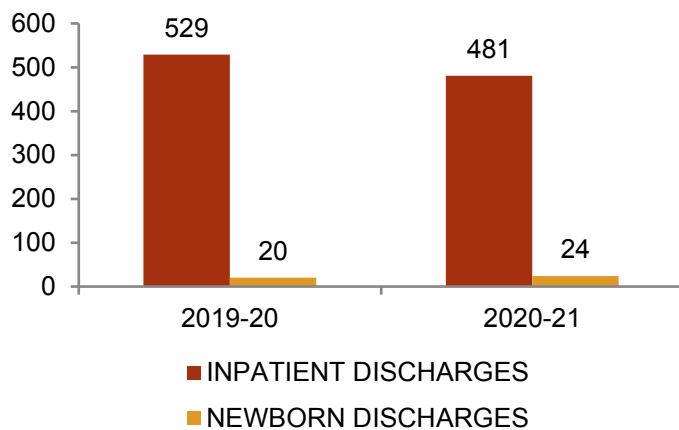


OPERATIONS

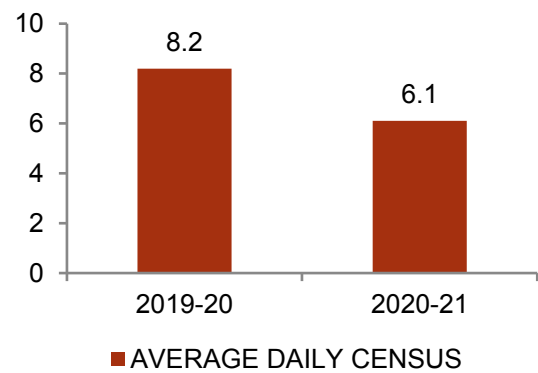
ACUTE CARE

InPatient, OutPatient and Emergency Room visits were severely impacted by the COVID19 Pandemic. In person visits were drastically reduced in 2020-21.

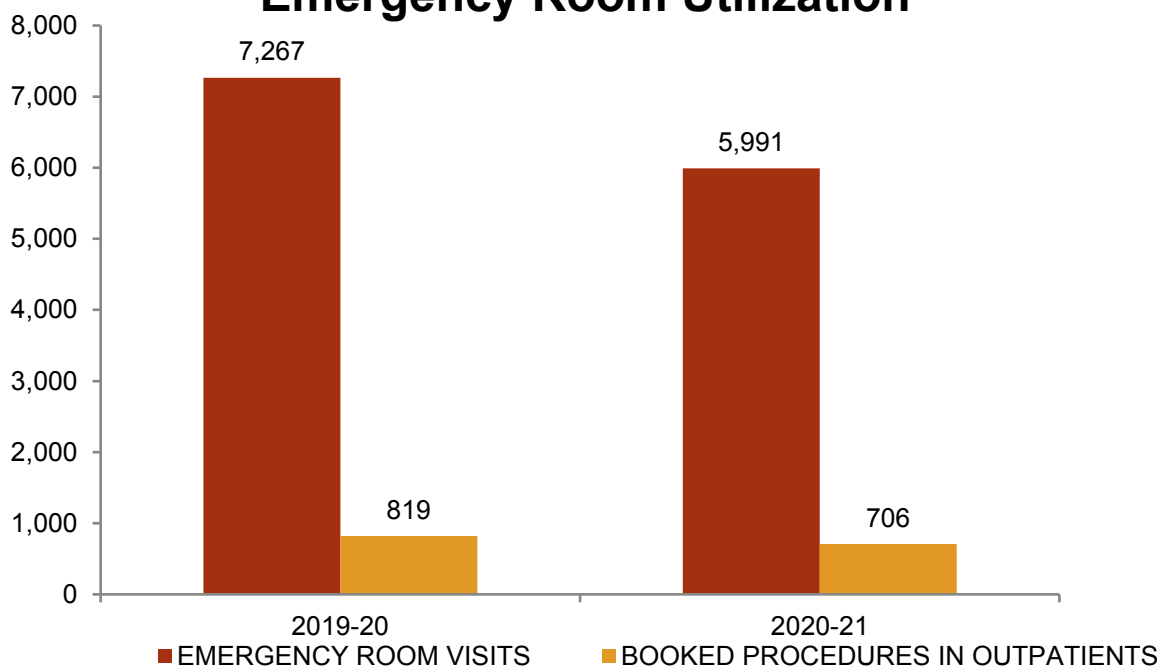
Types of Discharges



AVERAGE DAILY CENSUS



Emergency Room Utilization



OPERATIONS

LABORATORY Diagnostics

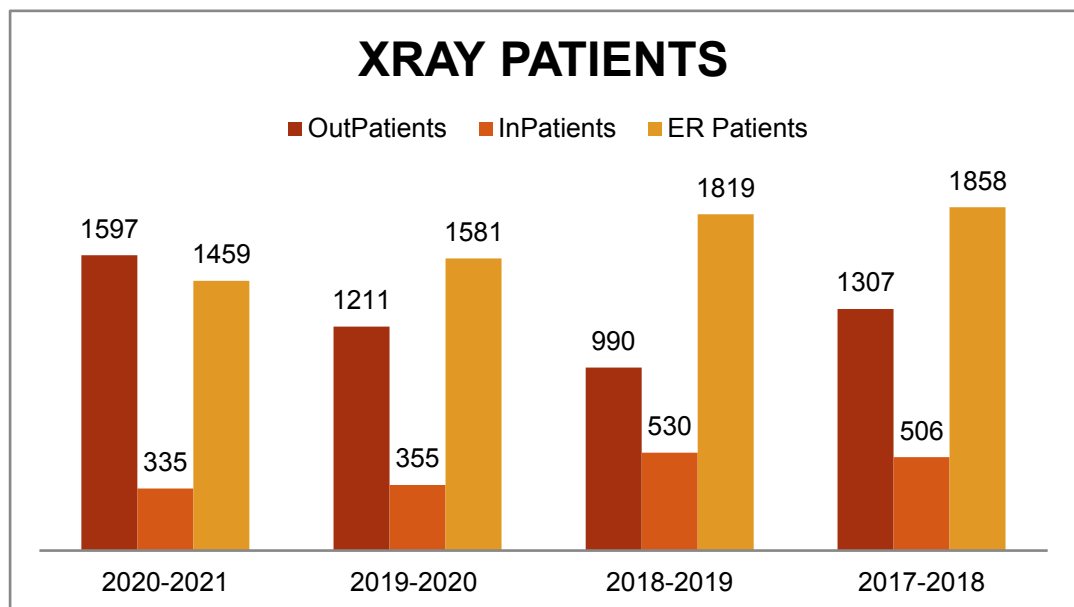
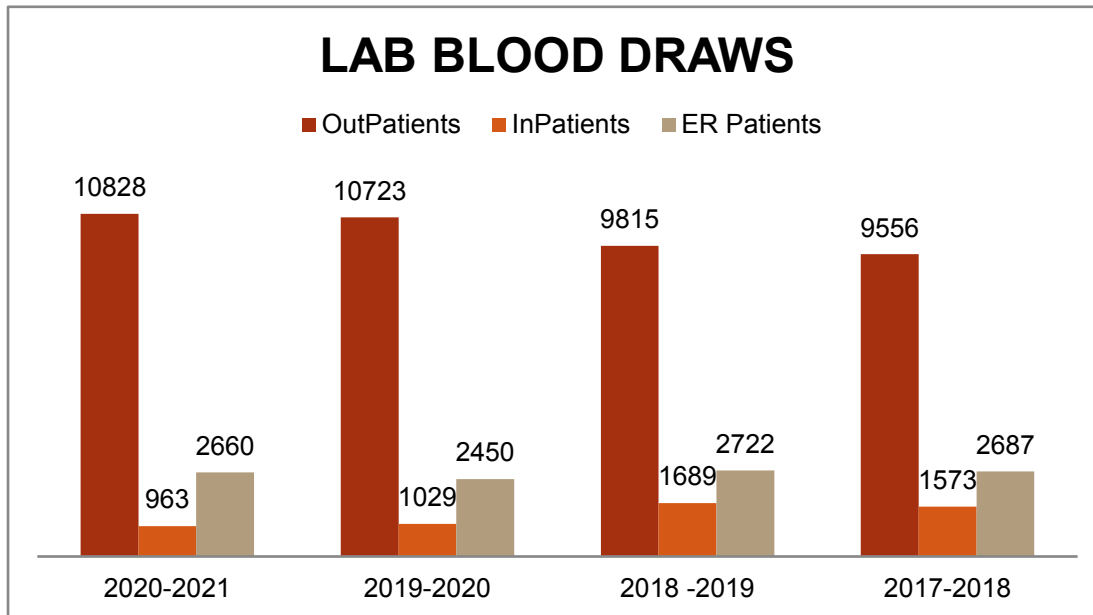


Although 2020 – 2021 presented many challenges in meeting our goal of providing patient-focused, accurate, and timely diagnostic services in a safe environment, we have taken steps to continue to serve our clients.

- The addition of a phlebotomist to the team to meet staffing needs during the pandemic.
- Approval to validate a new chemistry analyzer to update our current machine.
- A need for blood gas testing was identified by the Saskatchewan Health Authority and a GEM 3500 blood analyzer is currently being validated for implementation.
- Implemented staffing of the diagnostic department on Sundays in addition to Saturdays to provide better support to the Emergency Room department on weekends.

OPERATIONS

LABORATORY Statistics



*HOLTER MONITORS PERFORMED: **101** (113 previous year)*

*ECGS PERFORMED: **2544** (2106 previous year)*

OPERATIONS

WOMEN'S HEALTH CENTRE

The Women's Health Centre continued to provide comprehensive services throughout the COVID-19 pandemic. During these unprecedented times, a number of barriers were created in accessing healthcare services but the centre ensured that women continued to have access to healthcare, including reproductive and sexual health. This was done by continuing in-person appointments throughout the entire duration of the pandemic.

**8,208 Visits /
Contacts in 2020 -
2021**

MIDWIFERY PROGRAM

25

ANHH Birthing
Centre
Deliveries

17

Deliveries by
Midwives at
Regina General
Hospital

22

Midwifery clients
transfer of care to
Obstetricians at Regina
General Hospital

217

• Women's
Health Centre
Prenatal
Clients

78

• Total
Midwifery
Clients

12

• Outreach
Clinics



OPERATIONS

DIETARY, HOUSEKEEPING, LAUNDRY

Dietary

Dietary welcomed 2 credentialed staff to the department and bring a wealth of knowledge and work experience.

As ANHH expands, Dietary is supplementing the 3 week menu by including additional cultural foods. In the initial phase the department is revitalizing current menus with the assistance of in-house dietitians and nutritionists.

Housekeeping and Laundry

The department welcomed 3 new staff to the team and all have been cross trained in Housekeeping, Laundry and Dietary and have obtained casual hours.

This includes staffing an added afternoon shift during the pandemic. This is a 1500 – 2000 shift to assist with addressing Infection Control requirements of ANHH. As restrictions lift, this shift will be evaluated and possibly phased out, extended, or added permanently to our core services.

The Laundry Department has been stretched this fiscal year with the extra demand on isolation gowns (PPE) and linen produced on the ward and emergency departments during the pandemic. The turnover and stocking of essential items such as gloves and masks has been made more difficult with limited access from distributors. The department continues to monitor daily input and output of linen as ANHH is one of the only facilities in the region that purchase and launder our own linens.

"This year has had its struggles, but it's also had its triumphs. We are Essential Services and I'm glad to be a part of this team."

Dawn Desjarlais, Supervisor

OPERATIONS

MAINTENANCE

Implemented

- Annual Fire Suppression system preventative maintenance program including fire hydrant flush and other 3-5 year internal system inspections.
- Monthly Fire Drills.
- Kitchen exhaust fan cleaning and inspection.
- Equipment evaluations and creation of proposals to replace dated equipment.
- Updated ULC Fire Panel monitoring system to 2021 standards
- Updated and utilizing maintenance logs and checks for all major equipment.
- Reinstated monthly CO2 Alarm, Panic alarm, Crawlspace and Fire Extinguisher checks
- Organized and maintain a coherent filing system.
- On-going shop and grounds organization and cleaning.
- Proactive approach to technical advisement on repairs and preventative maintenance for all major equipment.
- Laundry equipment annual maintenance service

Ongoing

- Heat recovery wheel replacement project.
- Monthly Generator Load/Transfer test training complete with monthly tests and documentation.
- Main Chiller plant replacement project along with Chiller unit circulation pump replacement and redundancy.
- Water softener upgrade.
- New Heli-pad planning and construction.
- Implementation of professional annual Preventative Maintenance program for the RO system for the Dialysis machines in Rising Bear.
- Upgrades to all incandescent and fluorescent lighting fixtures throughout, replaced with LED fixtures.

“ANHH is showing its age and along with that comes the task of replacing worn out equipment along with addressing some issues with the lack of redundancy in some systems and replacement of old fixtures to more energy efficient/current technology.”

Chris Hahn, Supervisor

COMPLEMENTARY SERVICES

PASIKOW-MUSKWA (RISING BEAR) HEALING CENTRE

PROGRAMMING

- Rising Bear was faced with shifts in care delivery to support COVID-19 pandemic measures, while maintaining and advocating for the continuation of high quality and culturally led chronic disease primary care and kidney wellness.
- COVID-19 Pandemic presented barriers for clients such as transportation, housing, food security, access to community and primary care services, ALC, Private care home and respite care access, domestic and family violence, addictions, and depression/anxiety. There has been an increased need for Health Navigator support, social advocacy, mental health counseling, funding, and programming.
- Nurse Practitioner continued to provide services in-person and virtual with increasing needs and patient complexity related to co-morbid chronic disease and limited access to physician primary care services during the pandemic.
- Traditional services and Traditional Medicine continue to be fundamental and available to access for all clients of Pasikow Muskwa Healing Centre
- Staff trained to collect and run COVID-19 PCR tests at point-of-care for screening of staff and patients

Episodes of Care from April 2020 – March 2021	
Total Episodes of Care	Visits for Traditional Services
3997	1444



COMPLEMENTARY SERVICES

PASIKOW-MUSKWA (RISING BEAR) HEALING CENTRE

POINT OF CARE KIDNEY SCREENING

3 events for early detection and screening for kidney disease were completed in September 2020.

Community	# of Kidney Screening Events
Peepeekisis	4
Muscowpetung	3
Piapot	3

Kidney screening events in community have been on hold during the pandemic. Staff and equipment remain ready to resume as soon as able.

DIALYSIS SERVICES

- Dialysis is an essential and life-saving treatment that continued to be offered throughout the pandemic on Monday, Wednesday, and Friday each week to support 13 clients in receiving dialysis care.
- Since opening Satellite Dialysis services on September 26, 2018 there have been over 4,500 hemodialysis treatments completed
- Rising Bear expanded to open a 4th treatment day on Saturdays on April 18th, 2020 in response to patient needs and anticipated surge capacity during COVID-19 Pandemic. This temporary service of dialysis was provided up to September 26, 2020.
- There continues to be a waitlist for patients to receive their dialysis care closer to home at Pasikow Muskwa Healing Centre.



Independent Dialysis Suite

Is available for clients to access 7 days a week in providing their own care for home hemodialysis, with support from the interdisciplinary team.

COMPLEMENTARY SERVICES

PASIKOW-MUSKWA (RISING BEAR) HEALING CENTRE

A full time Traditional Knowledge Keeper and Pharmacist are part of the interdisciplinary team at Pasikow Muskwa. Their services for the organization cover a wide range of activities both on-site and in our communities. Based out of the Pasikow Muskwa Healing Center, the Traditional Knowledge Keeper and the pharmacist provide expertise and knowledge on traditional and modern medicines as part of the multidisciplinary patient care team. Support is provided on-site for chronic disease management, enhanced kidney disease services, acute care, emergency, and women's health and midwifery programs. The team leads several integral programs that allow the organization to maintain a high standard of patient care and align with accreditation standards such as medication management and antimicrobial stewardship. By working closely with the cultural program, pharmacy services help integrate patient care with traditional and spiritual practices offered to help achieve holistic needs of the client and family.

Their knowledge is shared in the community during clinics or during community requested presentations. Funding has been secured to better assess the community needs and identify patient care gaps that exist. This information will be used to guide projects that can help improve the accessibility of provincially funded pharmacy services to clients and families and have a positive impact on health outcomes.

In response to COVID-19 pandemic the Pharmacist has been instrumental in supporting all teams with vaccine administration, education, and counselling.



By working closely with the cultural program, pharmacy services help integrate patient care with traditional and spiritual practices offered to help achieve holistic needs of the client and family.



COMPLEMENTARY SERVICES

MIKO-MAHIKAN RED WOLF

The Miko-Mahikan Red Wolf program saw a significant increase of people on the Opioid Agonist Therapy (OAT) program. As of March 31, 2021 there were 93 people receiving OAT, which is an increase of 47 people from the year prior.

With the increase of drug overdoses in Saskatchewan, the Red Wolf team has strived to educate the communities regarding safe drug use. During this fiscal year the Red Wolf team provided 215 naloxone kits to people. Red Wolf also trained 133 people on how to recognize an overdose and how to administer naloxone.

During this fiscal year, Red Wolf recorded 1125 harm reduction interactions in which supplies were provided. The distribution of harm reduction supplies is based on recommended best practices. There are no limits placed on the quantities of supplies requested by any individual. All services are confidential, and we do not require any identifying information from any individual accessing these services. This harm reduction approach provides an opportunity for those using drugs to be engaged and connected to services if and when they choose to do so.

During the uncertain times that Covid-19 brought, Red Wolf remained open and filled the gap for many people. This included providing food, transportation, referrals, and crisis support.

2019-20	2020-21	Services Provided
44,259	92,520	Sterile needles distributed
28,487	75,106	Needles collected
804	2208	Appointments with Nurse Practitioners
667	1291	Appointments with Health/Outreach Navigators
36	26	Participated in community needle pickups

In partnership with Silver Sage Housing, the File Hills Qu'Appelle Tribal Council Health Services created a 4-person residential home, Yellow Thunderbird House that Sits in the Sunrise. This new program focuses on harm reduction as well as supporting individuals to find their path forward to permanent housing. As we operationalize services and work with partners and stakeholders such as ANHH, FHQTC, community members, and government, clients will be provided with opportunities for coaching, mentoring, and creating positive relationships.

Yellow Thunderbird House that Sits in the Sunrise officially opened its doors and welcomed tenants in 2021.

COMPLEMENTARY SERVICES

OUTREACH SPECIALIST SERVICES

NEPHROLOGY

Dr. S. Karunakuran is a kidney specialist providing regular clinics for those living with chronic kidney disease. These clinics provide accessibility options for clients from the area.



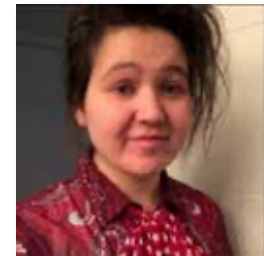
INFECTION CONTROL

Dr. S. Skinner is an infectious disease specialist offering clinics at Miko-Mahikan Red Wolf, providing convenient access for clients living with infectious disease.



DERMATOLOGY

Dr. Rachel Netahe Asiniwasis (MD, FRCPC) is a dermatologist based in Regina and continues to provide medical dermatology services at ANHH since 2014.



PHYSIOTHERAPY

The Saskatchewan Health Authority and Bourassa and Associates offer physiotherapy services to in-patients at ANHH, utilizing a variety of therapeutic interventions.





FINANCIAL STATEMENT

ALL NATIONS' HEALING HOSPITAL INC.

FINANCIAL STATEMENTS

MARCH 31, 2021

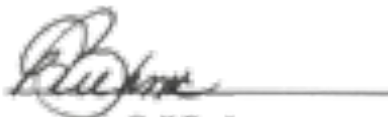
MANAGEMENT'S RESPONSIBILITY FOR FINANCIAL STATEMENTS

The accompanying financial statements of **All Nations' Healing Hospital Inc.** have been prepared by the Hospital's management in accordance with Canadian accounting standards for not-for-profit organizations and necessarily include some amounts based on informed judgement and management estimates.

To assist management in fulfilling its responsibilities, a system of internal controls has been established to provide reasonable assurance that the financial statements are accurate and reliable and that assets are safeguarded.

The board of directors has reviewed and approved these financial statements.

These financial statements have been examined by the independent auditors, **Virtus Group LLP**, and their report is presented separately.

A handwritten signature in black ink, appearing to read 'G. Boehme', followed by a horizontal line.

Gail Boehme
Executive Director

INDEPENDENT AUDITORS' REPORT

**To the Directors,
All Nations' Healing Hospital Inc.**

Opinion

We have audited the financial statements of **All Nations' Healing Hospital Inc.**, which comprise the statement of financial position as at March 31, 2021, and the statements of operations, changes in net assets and cash flows 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 Hospital as at March 31, 2021, and its financial performance and 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 Hospital in accordance with the ethical requirements that are relevant to our audit of the financial statements in Saskatchewan, 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.

Information Other than the Financial Statements and Auditors' Report Thereon

Management is responsible for the other information. The other information comprises the information included in the annual report, but does not include the financial statements and our auditors' report thereon. The annual report is expected to be made available to us after the date of this auditors' report.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information identified above when it becomes available and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated.

When we read the annual report, if we conclude that there is a material misstatement therein, we are required to communicate the matter to those charged with governance.

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 Hospital'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 Hospital or to cease operations, or has no realistic alternative but to do so.

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

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INDEPENDENT AUDITORS' REPORT continued

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 Hospital'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 Hospital'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 Hospital 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 significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

July 8, 2021
Regina, Saskatchewan

VIRTUS GROUP LLP
Chartered Professional Accountants

ALL NATIONS' HEALING HOSPITAL INC.
STATEMENT OF FINANCIAL POSITION
AS AT MARCH 31, 2021
(with comparative figures for 2020)

ASSETS		2021	2020
Current assets			
Cash	\$	132,503	\$ 437,825
Term deposits (Note 3)		755,716	786,092
Accounts receivable		2,653,020	1,705,041
Inventory		64,685	75,624
Prepaid expenses		26,528	29,069
		<u>3,632,452</u>	<u>3,033,651</u>
Tangible capital assets (Note 4)		<u>12,499,563</u>	<u>11,935,456</u>
	\$	<u>16,132,015</u>	<u>\$ 14,969,107</u>
LIABILITIES			
Current liabilities			
Accounts payable and accrued liabilities	\$	1,755,827	\$ 1,667,213
Deferred capital contributions (Note 6)		965,616	470,033
Deferred contributions relating to purchase of tangible capital assets (Note 7)		<u>12,415,998</u>	<u>11,848,613</u>
		<u>15,137,441</u>	<u>13,985,859</u>
NET ASSETS			
Net assets invested in tangible capital assets		83,565	86,843
Internally restricted surplus (Note 8)		1,285,734	1,266,525
Unrestricted surplus (deficit)		<u>(374,725)</u>	<u>(370,120)</u>
		<u>994,574</u>	<u>983,248</u>
	\$	<u>16,132,015</u>	<u>\$ 14,969,107</u>
Commitments (Note 11)			

APPROVED BY:



Director



Director

ALL NATIONS' HEALING HOSPITAL INC.
STATEMENT OF CHANGES IN NET ASSETS
FOR THE YEAR ENDED MARCH 31, 2021

	Internally restricted surplus (Note 8)	Investment in tangible capital assets	Unrestricted surplus (deficit)	2021	2020
Balance - beginning of year	\$ 1,266,525	\$ 86,843	\$ (370,120)	\$ 983,248	\$ 968,547
Excess of revenues over expenses	19,209	-	(7,883)	11,326	14,701
Purchase of tangible capital assets	-	1,263,028	(1,263,028)	-	-
Transfers from deferred contributions		(1,263,028)	1,263,028	-	-
Amortization of tangible capital assets		(698,921)	698,921	-	-
Amortization of deferred contributions relating to purchase of tangible capital assets		695,643	(695,643)	-	-
Balance - end of year	\$ 1,285,734	\$ 83,565	\$ (374,725)	\$ 994,574	\$ 983,248

ALL NATIONS' HEALING HOSPITAL INC.
STATEMENT OF OPERATIONS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

	2021	2020
Revenues		
Amortization of deferred contributions relating to tangible capital assets	\$ 695,643	\$ 593,519
Cafeteria and dietary receipts	53,820	63,147
FHQ shared cost revenue	142,020	132,720
File Hills Qu'Appelle Tribal Council	567,380	643,368
Health Canada - PNIHB	460,965	30,878
Other patient revenue	107,373	120,603
Other revenue	171,687	50,220
Resident long-term care	7,620	8,608
Saskatchewan Health Authority	5,561,860	5,558,623
Funds received in advance, prior year	470,033	237,099
Funds received in advance, current year	(965,616)	(470,033)
	<u>7,272,785</u>	<u>6,968,752</u>
Expenses		
Accreditation	-	73,478
Administration	211,906	170,495
Amortization	698,921	596,933
Dietary supplies	74,332	76,573
Health records	1,867	3,572
Hospital maintenance	155,739	121,960
Housekeeping supplies	43,077	32,660
Lab supplies	250,793	140,043
Maternal Child and Women's Health Services	633,780	649,481
Medical supplies	129,342	114,761
Nursing supplies	58,253	56,011
Pharmacy	89,473	109,238
Radiology	78,054	62,671
Ultrasound	(492)	11,059
Utilities	167,712	186,530
Vehicle maintenance	4,209	5,505
Wages and benefits	4,664,493	4,543,081
	<u>7,261,459</u>	<u>6,954,051</u>
Excess of revenues over expenses	<u>\$ 11,326</u>	<u>\$ 14,701</u>

ALL NATIONS' HEALING HOSPITAL INC.
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

	2021	2020
Cash provided by (used in) operating activities:		
Excess of revenues over expenses	\$ 11,326	\$ 14,701
Items not involving cash:		
- Amortization	698,921	596,933
- Amortization of deferred contributions relating to purchase of tangible capital assets	<u>(695,643)</u>	<u>(593,519)</u>
	14,604	18,115
Non-cash operating working capital (Note 9)	<u>(815,509)</u>	<u>(57,390)</u>
	<u>(800,905)</u>	<u>(39,275)</u>
Cash provided by (used in) investing activities:		
Additions to tangible capital assets	<u>(1,263,028)</u>	<u>(2,639,726)</u>
	<u>(1,263,028)</u>	<u>(2,639,726)</u>
Cash provided by (used in) financing activities:		
Contribution by FHQ and transfers from other entities	1,731,596	2,844,181
Restricted donations, interest and fundraising (Note 6)	<u>27,015</u>	<u>28,480</u>
	<u>1,758,611</u>	<u>2,872,661</u>
Increase (decrease) in cash	<u>(305,322)</u>	<u>193,660</u>
Cash position - beginning of year	<u>437,825</u>	<u>244,165</u>
Cash position - end of year	<u>\$ 132,503</u>	<u>\$ 437,825</u>

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

1. Nature of operations

All Nations' Healing Hospital Inc. (the "Hospital") is a not for profit organization and a registered charity. It operates a hospital which provides acute, palliative, emergency, women's health, midwife, laboratory, radiology, low risk birthing and renal programs in Fort Qu'Appelle and surrounding areas. As a registered charity, the Hospital is exempt from income tax under the treaty right to tax exemption and paragraph 149(1)(f) of the *Income Tax Act*.

2. Summary of significant accounting policies

The financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations. The financial statements required management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amount of revenues and expenses during the period. These estimates are reviewed periodically, and, as adjustments become necessary, they are reported in earnings in the period in which they become known. The financial statements reflect the following policies:

Financial instruments - recognition and measurement

Financial assets and financial liabilities are recorded on the statement of financial position when the Hospital becomes party to the contractual provisions of the financial instrument. All financial instruments are required to be recognized at fair value upon initial recognition, except for certain related party transactions. Measurement in subsequent periods of equity instruments is at fair value. All other financial assets and financial liabilities are subsequently measured at amortized cost adjusted by transaction costs, which are amortized over the expected life of the instrument.

Fair value is the amount at which a financial instrument could be exchanged at arm's length between willing, unrelated parties in an open market. Changes in fair values of financial assets and financial liabilities measured at fair value are recognized in statement of operations.

When there is an indication of impairment and such impairment is determined to have occurred, the carrying amount of financial assets measured at amortized cost is reduced to the greater of the discounted cash flows expected or the proceeds that could be realized from sale of the financial asset. Such impairments can be subsequently reversed if the value improves.

The Hospital's financial instruments include cash, term deposits, accounts receivable, accounts payable and accrued liabilities. The fair market value of cash, term deposits, accounts receivable, accounts payable and accrued liabilities approximate carrying values given the short term nature of the amounts.

Inventory

Inventory consists of medical supplies and medication. It is recorded at the lower of cost or net realizable value, with cost determined on the first in first out basis.

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

2. Summary of significant accounting policies (continued)

Tangible capital assets

Tangible capital assets are recorded at cost less accumulated amortization. Amortization is provided on the diminishing balance basis over the estimated useful life of the assets at the following annual rates:

Buildings	4 %
Hospital equipment	20 %

Amortization is not recorded on assets under construction.

Deferred capital contributions

Contributions received to fund capital purchases are deferred until the related assets are purchased. Once assets are purchased, the deferred capital contributions are transferred to deferred contributions related to the purchase of tangible capital assets, and is then amortized on the same basis as the related asset is amortized.

Revenue recognition

The Hospital uses the deferral method of accounting for contributions. The Hospital enters into agreements with government agencies and other organizations and the funding is recorded as revenue in the period specified in the agreement. Amounts received in advance of the contract period, or for which services have not yet been delivered, are deferred until the next fiscal period. Restricted revenues are recorded as deferred revenue and recognized as revenue in the year in which the related expenses are incurred. Contributions for tangible capital assets are deferred and recognized into revenue on the same basis as the asset is amortized. Donations are recognized when received. Other income is recorded in the period the amounts are earned.

3. Term deposits

Term deposits are recorded at cost, have interest rates ranging from 0.30% - 1.10% and maturity dates ranging from June 2021 to April 2022. The market value at March 31, 2021 is \$755,716 (\$786,092 in 2020).

4. Tangible capital assets

	2021		2020	
	Cost	Accumulated Amortization	Net Book Value	Net Book Value
Buildings	\$ 18,074,365	\$ 6,113,660	\$ 11,960,705	\$ 11,492,191
Hospital equipment	3,265,342	2,746,984	518,358	422,765
Land	20,500	-	20,500	20,500
	<u>\$ 21,360,207</u>	<u>\$ 8,860,644</u>	<u>\$ 12,499,563</u>	<u>\$ 11,935,456</u>

The building category includes \$1,596,800 (2020 - \$1,550,300) in costs incurred for a renovation project. As the renovation was not complete at year end, no amortization expense has been recorded.

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

5. Line of Credit

The Organization has an authorized line of credit of \$250,000 which bears interest at prime plus 1%, and has a guaranteed investment certificate and general security agreement pledged as security. At year end, the line of credit was not utilized (2020 - \$0).

6. Deferred capital contributions

	2021	2020
Balance, beginning of year	\$ 470,033	237,099
Contributions received	1,731,596	2,844,181
Restricted donations, interest and fundraising	27,015	28,480
Transfer to deferred contributions relating to purchase of tangible capital assets	(1,263,028)	(2,639,727)
Balance, end of year	<u>\$ 965,616</u>	<u>\$ 470,033</u>

7. Deferred contributions relating to purchase of tangible capital assets

	2021	2020
Balance, beginning of year	\$ 11,848,613	9,802,405
Transfers from deferred capital contributions	1,263,028	2,639,727
Amortization recognized in the year	(695,643)	(593,519)
Balance, end of year	<u>\$ 12,415,998</u>	<u>\$ 11,848,613</u>

Of the balance outstanding, it is estimated that \$732,700 will be recognized as revenue in the next fiscal year (2020 - \$695,643).

8. Internally restricted net assets

The Board of Directors has internally restricted net assets for specific purposes as follows:

- Charity Fund: \$921,309 (2020 - \$902,099) consists of the unspent funds raised through charitable activities.
- FHQ Fund: \$364,425 (2020 - \$364,425) consists of unspent contributions from File Hills Qu'Appelle Tribal Council.

These funds will be used at the discretion of the Board of Directors.

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

9. Non-cash operating working capital

Details of net change in each element of working capital relating to operations excluding cash are as follows:

	2021	2020
(Increase) decrease in current assets:		
Term deposits	\$ 30,376	\$ (13,262)
Accounts receivable	(947,979)	(1,295,505)
Inventory	10,939	(7,393)
Prepaid expenses	2,541	26,061
	<u>(904,123)</u>	<u>(1,290,099)</u>
Increase (decrease) in current liabilities:		
Accounts payable and accrued liabilities	<u>88,614</u>	<u>1,232,709</u>
	<u>\$ (815,509)</u>	<u>\$ (57,390)</u>

10. Related party transactions

In addition to amounts disclosed separately, the Hospital incurred the following related party transactions with File Hills Qu'Appelle Tribal Council for the year:

	2021	2020
Revenue:		
Cafeteria and catering	\$ 9,370	\$ 6,336
Other revenue	80,880	7,500
Expenses:		
Other expenses	-	950

These transactions are in the normal course of operations and are measured at the exchange amount, which is the amount of consideration established and agreed to by the related parties.

At the end of the year, the amounts included in accounts receivable and payable related to File Hills Qu'Appelle Tribal Council are as follows:

	2021	2020
Accounts receivable	\$ 2,473,698	\$ 1,496,765
Accounts payable	818,553	950,810

These balances are payable on demand and have arisen from the transactions referred to above.

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

11. Commitments

The Organization is undertaking renovations and at the end of the year, the outstanding commitments on the construction contracts was \$289,000. The Organization leases equipment and services under agreements requiring aggregate minimum payments over the next four years as follows:

2022	\$	25,956
2023		25,628
2024		3,389
2025		305

12. Economic dependence

The Hospital currently received significant funding from the Saskatchewan Health Authority and File Hills Qu'Appelle Tribal Council. As a result, the Hospital is dependent on the continuance of these grants to maintain operations at their current level.

13. Beneficial interest in an endowment fund

In 2020, a donor contributed \$1,000,000 to establish a fund, The DEK All Nations' Healing Hospital Foundation Fund, which is held and managed by the South Saskatchewan Community Foundation. The fund was established for the benefit of the Hospital. The original contribution was an endowment, and thus, may not be withdrawn. The Hospital may apply to withdraw 3.5% of the fund balance, in excess of the endowed amount, annually. As of January 1, 2021, the withdrawable balance is \$43,878. There were no withdrawals in 2021 (2020 - \$nil).

14. Financial risk management

The Hospital has a risk management framework to monitor, evaluate and manage the principal risks assumed with financial instruments. The significant financial risks to which the Hospital is exposed are:

Credit risk

Credit risk is the risk that one party to a financial instrument will cause a financial loss for the other party by failing to discharge an obligation. The Hospital is exposed to credit risk on the accounts receivable from its patients, however, does not have a significant exposure to any individual patient or counterpart. The majority of the Hospital's receivables are from Government agencies and therefore, credit risk is low.

Interest rate risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The Hospital's exposure to interest rate risk is limited to the line of credit. The interest rate on this debt is variable; therefore, the Hospital may face increasing interest costs in an increasing interest rate market, if a balance is outstanding.

Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The Hospital's exposure to liquidity risk is dependent on the receipt of funds from its operations, external borrowings and other related sources. Funds from these sources are primarily used to finance working capital and capital expenditure requirements, and are considered adequate to meet the Hospital's financial obligations.

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2021
(with comparative figures for the year ended March 31, 2020)

15. Significant event

On March 11, 2020, the World Health Organization declared a global pandemic for the COVID-19 virus. The Hospital is following health advisories and mandatory requirements from local, provincial and national health and government organizations. At this time, the Hospital continues to provide health services to the public as it has been deemed an essential service by government authorities. The future impact of the pandemic on the Hospital's operations and finances, if any, is unknown.





All Nations' Healing Hospital



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