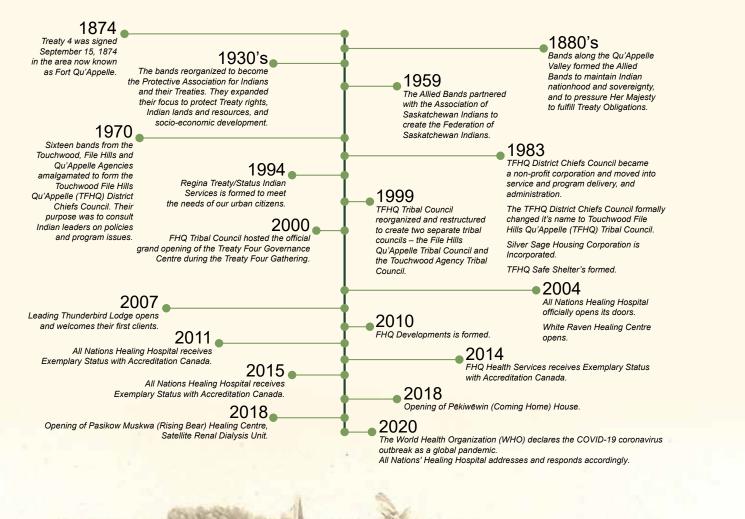
All Nations' Healing Hospital

Annual Report 2022-23





LOOKING BACK AT HISTORY





Back Row, 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 (Miss-ta-tik); Feather (Me-Kuinness). Pointed Cap was 107 years of age when this photo taken.

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All Nations' Healing Hospital is situated on Treaty 4 lands near the site of the signing of Treaty 4 on September 15, 1874. The Treaty 4 Governance Centre in Fort Qu'Appelle, SK is the central ground for the Chiefs' Legislative Assembly. ANHH strives to honour Treaty Right to Health as described in the 1874 Treaty 4 agreement and a nation to nation relationship.

All Nations' Healing Hospital is owned and operated by the File Hills Qu'Appelle Tribal Council and Touchwood Agency Tribal Council communities. Any resident or visitor from the catchment area is able to fully access all available services offered at ANHH, including Emergency Department, Laboraty and X-Ray Department, Pasikow Muskwa Healing Centre, and White Raven Healing Centre.







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 ANHH BOARD CHAIR



The All Nations' Healing Hospital (ANHH) is delighted to deliver the 2023-2024 Annual Report to you, the residents, and citizens of our Nations and Communities. We are pleased to provide you with a clear account of our continued commitment to ensuring access to top-tier healthcare. This report is a legislated requirement and includes the approved audited financial statements for the fiscal year ending March 31, 2023.

Our dedication to enhance healthcare at ANHH for the residents of the catchment area remains stronger than ever. From the lessons we have learned over the past few years, our operations have improved drastically to ensure we offer wholistic and safe hospital services that meet the needs of our communities. In particular, culturally responsive acute care, chronic healthcare, and women's health care services.

The doctors, nurses, Rehab Therapies, Lab staff, and other integral healthcare professionals who work tirelessly at ANHH are the real heroes behind the services we provide, they continue to go above and beyond for patients every day.

In order to mitigate some of these challenges, including long-term barriers such as access to healthcare in rural Saskatchewan, we are continuing to make improvements through new investments made available by both federal and provincial governments. Emergency Departments are the gateway to primary care, which is why we will be increasing the number of overall healthcare staff. This will have the benefit of easing strain on our current teams while increasing timely access to services. We would like to thank retiring board members Chief Michael Starr and Lee Carlson for their years of service. The honest care and compassion they brought to ANHH and the community has supported real and positive change. As their chapter comes to a close, a new one opens. Please join me in welcoming Chief Frank Dieter and Judy Sugar to the Board of Directors in 2022. We are excited to work alongside them and to count on their expertise on the Board.

Our purpose is to ensure access to high-quality healthcare for our Nations and communities, and although we have accomplished much in increasing services this past year, we know there is still a long road ahead to ensure sustainable care for future generations. However, through the efforts of leadership and the incredible staff at ANHH, we know we will be able to meet our goals and achieve our priorities together.

JEREMY FOURHORNS Tribal Chief, File Hills Qu'Appelle Tribal Council, and Board Chair, ANHH



Leadership BOARD OF DIRECTORS

GOVERNANCE REPORT

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. 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.

REPRESENTATIVES FROM FILE HILLS QU'APPELLE TRIBAL COUNCIL NATIONS



Jeremy Fourhorns FHQTC Tribal Chief & ANHH Chairperson

Chief Melissa Tavita Muscowpetung First Nation **Chief Michael Starr** Starblanket First Nation

Chief Matthew Todd Peigan Pasqua First Nation **Chief Richard Stonechild** Okanese First Nation

REPRESENTATIVES FROM TOUCHWOOD AGENCY TRIBAL COUNCIL NATIONS



Cora Leigh Buffalo Day Star First Nation

Cynthia Desjarlais Muskowekwan First Nation **Tammy Pelletier** George Gordon First Nation

REPRESENTATIVES FROM COMMUNITY AND AREA



Gus Legace Town of Fort Qu'Appelle **Nik Walen** R.M. North Qu'Appelle

Cory Senft R.M. Lipton **Judy Sugar** Member at Large **Monica Knowles** Village of Liption

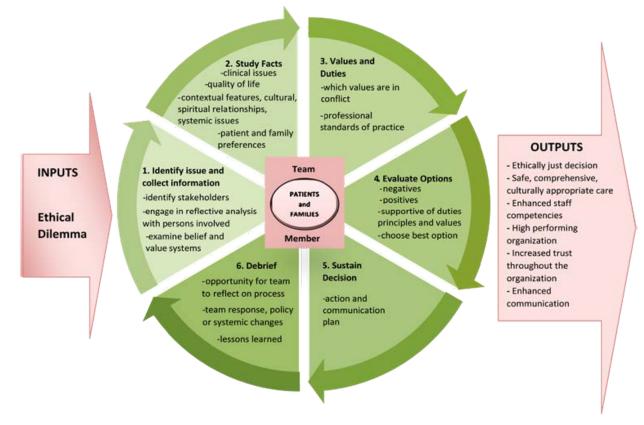
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RECOGNIZED LEADERS IN THE DEVELOPMENT, DELIVERY AND INFLUENCE OF EXCEPTIONAL, SAFE, AND WHOLISTIC CARE.

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

ANHH 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.



Leadership PATIENT FAMILY ADVISORY COUNCIL

The Patient Family Advisory Council (PFAC) is an advisory group focused on matters important to patients and families. The Council's goal is to enhance patient-centered care and improve the overall patient experience at the ANHH and with FHQTC Health Services. Clients, patients, families and staff will work together to achieve these goals.

Current volunteer PFAC members:

- Joan Bellegarde
- Linda Peagam
- Freda Koochicum
- Gwenda Watson

01 MEETINGS

- Currently have six members on PFAC
- In 2022-23, there were nine regular monthly meetings held

02 RECRUITMENT

- The Council actively recruits newmembers 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

- Connie Wowchuk
- Maureen Johns
- Denise Gettle

03 PARTICIPATION

- PFAC member is co-chair for the Ethics Committee, which met three times last year
- PFAC provided small staff appreciation Christmas gifts for acute care staff
- PFAC members shared a booth with the Lions Club at the Fort Qu'Appelle Trade show – they promoted the the ANHH survey, recruited for new members and had a draw for a few gift baskets
- Participated in a focus group for the FHQTC Health Services Accreditation survey

- Participated in a stakeholder meeting and provided feedback on the design of the new Primary Care Center
- A PFAC member also sits on Patient Family Leadership Council through SHA
- Participated in ANHH values workshop
- Continue to participate in new employee interviews



2017-2020 (Extended to 2022) STRATEGY MAP

		All Nations Healing Hospital	
		Vision	
	Recognized leaders in the develo	pment, delivery, and influence of except	ional, safe and wholistic care
		Values	
	Respectful, npassionate service t understands client needs	Partnerships based on mutually desirable outcomes	Confidentiality and accessibility
		Three Year Strategic Imperative	
-	To maintain the highest standard of accre care fo	ditation while continuing to evolve and d r our communities and surrounding area	
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 sustainability	financial operations to support	
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	halexcellent acute health carethrough educatiotic2.2.2 Expand chronic health2.3.2 Improve healthdeliverycare servicesliteracy	
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 organization supports the wholistic m 1.2.1 Provide training and for all care providers	odel of care

2017-2020 (Extended to 2022) STRATEGY MAP

	2017 – 2020 Stra	ategy Map
	Mission	
The All Nations Healing H	lospital delivers safe, wholistic health services and Provides services in the areas of acute and chi	research to meet the needs of our communities. Specifically, ANHH ronic health care and women's health.
	Values	
Recognize and exercise the Treaty Right to Health	Innovation	Fostering Accountability, independence honesty and integri
	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

Message From the CEO



2022-23 was an interesting and challenging year for All Nations' Healing Hospital. The organization's ongoing growth saw the introduction of new programming, facility renovations, as well as welcoming new hires and celebrating retirements. While we experienced challenges over the year, which included fluctuating service delivery and staffing shortages across the health care system, we have been able to successfully navigate these obstacles and new opportunities because of our dedicated staff and board.

In addition to these challenges, our efforts focused on improving our health care delivery model to offer a culturally responsive Rehabilitation Therapies Program. Offering Occupational Therapy and Physiotherapy services to inpatients enabled the safe transition from hospital to home for patients needing these services in support their recovery. As a result of offering these services, we have been able to support clients both as inpatients and as outpatients in their home following discharge. We welcome you to come and check out our newly renovated cafeteria at ANHH. It is a fully refurbished and vibrant space filled with a calming energy. Most of our office space has been renovated and we look forward to sharing it with you in December at our Annual Christmas Open House. Our Open House event opens our doors as a thank you to the members of our communities to come and meet our teams, learn about our services, and enjoy a great meal with other community members.

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 that 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 and Senior Management to discuss and review the financial matters, and approve 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.

It's an honor to say ANHH, with the support of an incredible community weathered these past years, ensuring the community could trust the health programs and services their citizens have come to know and value and would continue to be available when needed.

In closing I want to say thank you to the very special people who are at the cultural core of our organization and to those who came before them and now watch over us from the spirit world. We can express enough our appreciation for your prayers, support, and assistance over these past years. In closing I look forward to the year ahead and am grateful for your continued dedication to your hospital.

GAIL BOEHME Executive Director, All Nations' Healing Hospital, and FHQ Health Services

anhh Department Listing

DEPARTMENT	DEPARTMENT HEAD	TITLE
ANHH & FHQ Health Services	Gail Boehme	Executive Director
Programs & Community Services	Lorna Breitkreuz, RN, MN	Director
Clinical & Acute Care Services	Kendra Filteau, BSN, CDE	Director
Diagnostics	Sonya Mayo	Supervisor
Health Information Management	Melanie Gabel	Supervisor
Quality Control & Infection Control	Dinys Reed, RN BScN	Accreditation Coordinator
Maintenance	Scott McIntye, RSE	Supervisor
Environmental Services Dietary/Laundry/Housekeeping	John Morris (Dietary) Barbra Huber (Laundry/Housekeeping)	Supervisor
Purchasing/Scheduling	Erin Anardi	Coordinator
Nursing	Christine Renwick, RN	Supervisor
Women's Health Centre	Stella De Venney, 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	Cody O'Watch	Manager



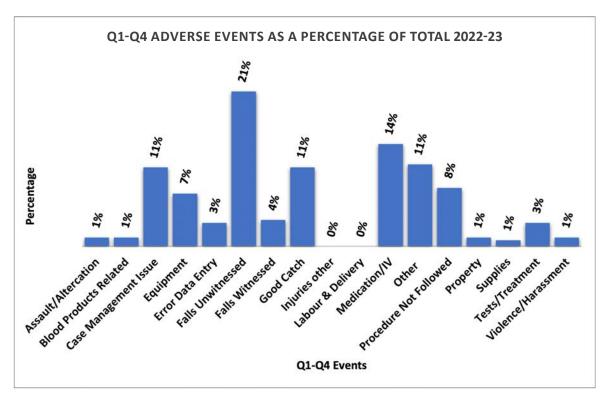
ANHH Accreditation

ACCREDITATION AND QUALITY IMPROVEMENT

Accreditation Canada's Qmentum accreditation program helps providers meet global standards, putting mechanisms in place that lead to safe and effective care. (Retrieved July 25, 2022 from Accreditation Canada <u>https://accreditation.ca/qmentum-accreditation</u>)

All Nations' Healing Hospital Participates in an Accreditation Canada Survey every 4 years. By ensuring meeting the evidence informed standards the ANHH Departments/Teams are empowered to provide people-centered care keeping quality and safety top of mind throughout the entire four year period.



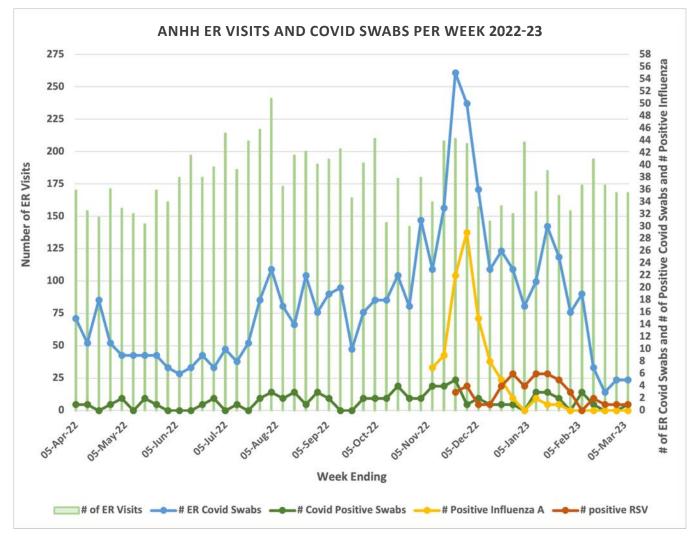








ANHH INFECTION CONTROL



Infection control prevents or stops the spread of infections in healthcare settings. (Retrieved July 25, 2022 from Center for Disease Control (CDC) https://www.cdc.gov/infectioncontrol/index.html)

COVID-19 continued to front and center throughout year with additional precautions being lifted in spring 2023. ANHH Departments and Teams worked to ensure that Infection Control practices such as Hand Hygiene and appropriate use of Personal Protective Equipment (PPE) were in place. Heightened awareness of potential risks for spread of infection ensured ANHH had limited Healthcare Associated Infections (HAI) of any type.

COVID home testing kits are provided for staff and communities as requested. Point of Care COVID Testing available in the Emergency Department, reduces risk of any COVID exposure to staff, patients in the ER and admitted patients by enabling quick identification and initiation of additional precautions for any positive cases.

OPERATIONS EMERGENCY DEPARTMENT

Triage = the process of determining the priority of patients' treatments based on the severity of their condition.

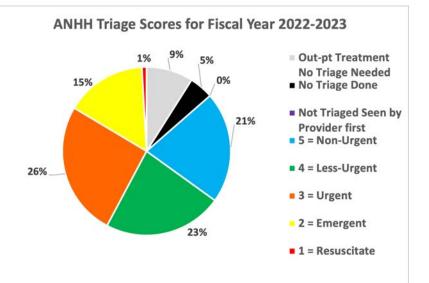


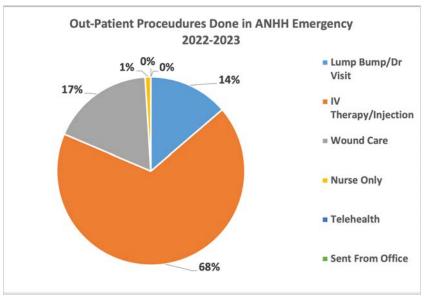
Patients presenting to ER in 2022-2023 were Triage Level 5 and 4

(Triage 5 and most triage 4 are appropriate for an office visit)



People who came in for outpatient treatment in the ER Department







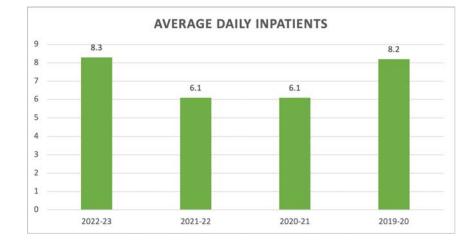
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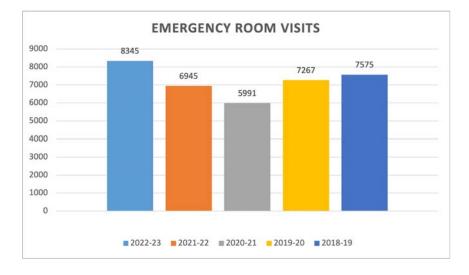
Operations ACUTE CARE

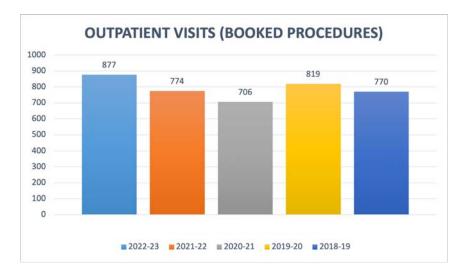
ANHH continued to experience Acute Care bed closures, which impacted our Inpatient as well as our Newborn discharges. Our Emergency Department continues to remain extremely busy.

IP beds were reduced to 10 from 14 in January 2022 due to covid as well as staffing challenges, heavy workloads, high acuity and high volumes.

The bed capacity continued to fluctuate from 8-12 beds in the months of May-Oct 2022 and then remained at a capacity of 10 beds from Oct -Dec 2022, with 4 beds remaining closed.







OPERATIONS LABORATORY: DIAGNOSTICS

MISSION

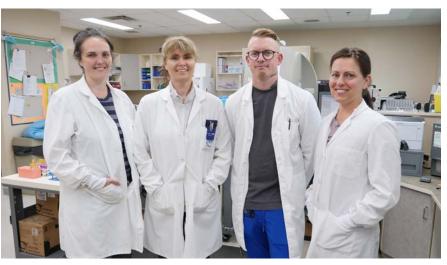
Providing patient-focused, accurate, and timely diagnostic services in a safe environment.

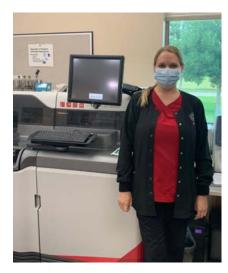
Challenges 2022-2023:

- Continued staffing shortages
- Minimizing the impact of our staffing levels on patient services, by adjusting staffing schedules and relying on adaptability of staff
- Disruption of services in surrounding communities increasing the need for our services

Steps we have taken in 2022-2023 to help us serve our clients:

- Permanent phlebotomist position created
- Trial of an evening shift in laboratory to support the wellbeing of staff and minimize overtime
- New chemistry analyzer put in use November 2022
- Training of multiple new staff members
- New holter monitors in use June 2022
- New ECG carts on site to replace broken equipment March 2023





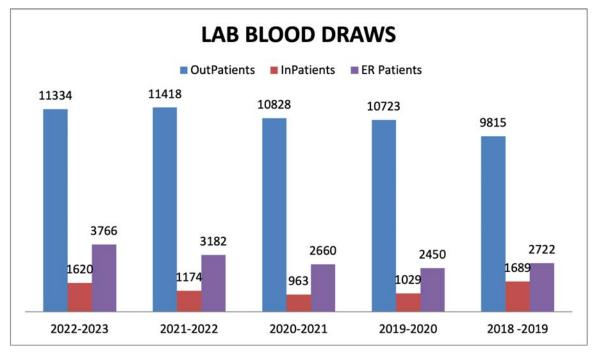


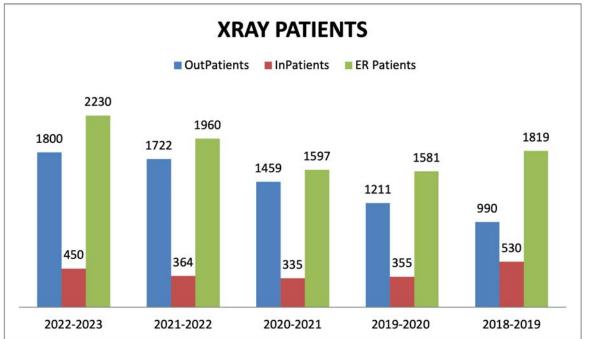


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OPERATIONS

LABORATORY: STATISTICS





160

Holter Monitors Performed 2021-21 Previous year: 123

2544

ECGS Performed 2021-22 Previous year: 2,715

Operations Women's Health Centre & Midwifery Program

The Women's Health Centre provides comprehensive services that focus on improving access to preventative health care for women. In a safe environment reproductive health care is available to meet the needs of the women from all our communities. Nurse Practitioners are able to manage and treat health concerns unique to women across the life span. The goal of the Women's Health Centre is to improve access to primary health care services for women.

The Women's Health Centre has experienced staffing challenges over the past year and is looking forward to reaching a full complement of staff.



Operations Dietary, Housekeeping & Laundry

DIETARY

Dietary went through some changes with our supervisor retiring in December, we promoted from within and replaced her with a red seal chef. This had made the department having to add 3 new casuals to the department. This past year the department had received a facelift in the cafeteria, it looks fantastic. We have continued with our food is medicine program featuring tradition foods and medicines for our patients and cafeteria which is run once a month. We also added to dietary's responsibility; of making food for our Red Wolf department, and for their support homes four times a week.



HOUSEKEEPING & LAUNDRY

The Environmental Services department has seen a big change in staffing this past year. First of all with the retirement and appointment of a new supervisor as well as adding 3 new casual staff members to the team. Two of the casuals accepted temporary part-time positions filling the pandemic shift of 15:00 -20:00. We were also able to purchase a new floor scrubber that is able to fit in smaller spaces. It has been a great help to us to keep up with the maintenance of the floors. With the lifting of many of the pandemic restrictions we know it is more important than ever to be diligent in our infection control procedures. We have focused on reviewing and updating our policies and procedures to ensure the safety of all patients, staff, and public in our facility.

They laundry department has been busy meeting the demands for PPE with the pandemic and ensuring linen is clean and stocked on a daily basis. We have made changes in the procedures to further ensure that all clean linen is safe from contamination. We also were able to upgrade one of our dryers to ensure continue support of personal patient laundry.



Operations MAINTENANCE

IMPLEMENTED

- Updated piping and recirculation pump for East wing of hospital (long standing issues with poor hot water circulation)
- Patching of Shale pops and sealing of Helipad concrete apron
- New walk in freezer door
- New walk in cooler refrigeration unit
- New refrigeration unit for garbage room
- Transport Canada Heliport Inspection: Exemplary status
- Cafeteria renovation complete
- Electrical Infrastructure Risk Assessment complete
- Oxygen system PM complete
- New exterior LED lights for ER canopy, Main entrance and Loading dock
- Added gravel parking lot west of Maintenance shop to alleviate parking congestion

ONGOING

- On-going replacement of hot water supply pumps and inventory management to make sure we have replacement pumps available.
- On-going light replacement to LED style lighting.
- Fire drills and annunciator training with the nursing staff, to respond to fire alarms with more efficiency and greater confidence.
- Worked closely with our local Emergency Measures Officer to monitor and mitigate any water flow issues during the spring melt.
- Annual kitchen exhaust fan system inspection/cleaning.
- Biannual contracted service of the RO System for the renal unit.
- Working along with Vipond (Fire Suppression Contractor) to identify and replace old and/or damaged sprinkler heads.
- Initiated annual professional PM of the Oxygen distribution system.

- Action items from Electrical Infrastructure Risk Assessment
- Working on acquiring a new emergency transfer switch
- Initiated a quote for a conveyor belt to assist with file storage in the mezzanine file storage room, injury prevention
- Material purchased to begin replacing portions of building main water supply line, has been showing signs of corrosion





18

Operations HEALTH TECHNOLOGY

MANDATE

The IT/Telehealth Department provides support for the delivery of health care, health education, and health information through Telehealth technology for staff and communities of ANHH and FHQ Tribal Council Health Services.



TYPES OF CLINICS

- Nephrology
- Oncology
- Psychiatry
- Gastroenterology
- Neurosurgey

These Telehealth clinics were attended by:

- 81 patients
- 7 pharmacists
- 58 RNs
- 30 family members









COMPLEMENTARY SERVICES: ANHH PASIKOW-MUSKWA (RISING BEAR) HEALING CENTRE

Pasikow Muskwa Rising Bear Healing Centre is a culturally enhanced Chronic Kidney Wellness Initiative. The centre provides wholistic services for individuals, families and communities and includes traditional healing practices and/or clinical health services. Health care professionals address all aspects of health and well-being for Physical, Emotional, Spiritual and Cultural Health. Satellite Dialysis Services opened September 26th, 2018 operating Monday, Wednesday, Friday to accommodate 12 patients.

PROGRAMMING

- Nurse Practitioner led Primary Care clinic focuses on chronic disease. Needs continue to increase with patient complexity related to co-morbid chronic disease and the continuation of general strains on the health care system with long wait times for surgical and specialist referrals
- Traditional services and Traditional Medicine continue to be fundamental and available to access for all clients of Pasikow Muskwa; services provided by our Cultural Practitioner.
- Capability to complete 24hr ambulatory blood pressure monitoring

- Outpatient IV Iron for CKD on non-dialysis
- Clinic Nurse providing wound care, suture/staple removal, health teaching and promotion.
- Outreach NP services in communities – ongoing in 1 community
- NP services for Lakeview Lodge Personal Care Home Residents
- Work closely with specialty services, Nephrologists visit our unit every three months and Dr. Karunakaran with monthly Nephrologist clinics

Nephrology telehealth appointments

- Abbott ID now utilized for client and staff screening
- Fee for service Physician started at Pasikow Muskwa Jan 2023.
- The Health navigator has had an increase in patient transportation for medical appointments, assisting clients in completing funding applications, and memory testing. Providing counselling with the main themes being coping with chronic disease, grief, relationship difficulties (caregiver burnout), and has completed Eye Movement Desensitization and Reprocessing training (EMDR) to better assist clients dealing with trauma.





COMPLEMENTARY SERVICES: ANHH PASIKOW-MUSKWA (RISING BEAR) HEALING CENTRE

POINT OF CARE KIDNEY SCREENING

- Utilized equipment at NP outreach day to have up to date hA1c for clients in community.
- Monthly quality testing/maintenance maintained, additional staff trained on use of equipment.

DIALYSIS SERVICES

- We had our first client treatments on September 26, 2018. We provide hemodialysis services Monday, Wednesday, and Friday. We have consistently had a full client compliment with a lengthy waitlist to attend treatment at our location.
- **Transonic Monitoring**: Routine transonic monitoring is completed on clients for assessment and surveillance of dialysis accesses; fistula or graft.
- Health Navigator and our interdisciplinary team works with the clients to remove barriers such as transportation, housing, food security, access to services (ie. Vascular Access Nurses/Transplant/Kidney Health Clinic/Home Care/Occupational Therapy/ Physiotherapy, ect), social advocacy, and mental health counseling.
- Independent Dialysis Suite: Has been unoccupied. Available for the use of home hemodialysis patients if water quality in their home is not suitable. Currently being utilized as an additional clinic room.

PHARMACY SERVICES

A full time Pharmacist is part of the interdisciplinary team at Pasikow Muskwa. The role is designed to cover a wide range of activities both on-site and in our communities. Pharmacist knowledge is shared in the community during clinics or during community requested presentations.

The pharmacist is based out of Pasikow Muskwa and provides expertise drug knowledge as part of our 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. Pharmacy 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.

CULTURAL SERVICES

A full time Cultural Practitioner is an integral part of the interdisciplinary team at Pasikow Muskwa. They provide services for a wide variety of actives in the organization and community. They share their knowledge to staff and clients on traditional medicines and practices so we are able to provide culturally safe holistic care. While they do provide traditional medicines, under the guidance of White Raven Healing Centre, they also provide traditional healing (ie. smudging, praying, all mens sweats, facility smudging).

878

SERVICES PROVIDED 2022-23



Total episodes of care

Visits for Traditional Services



COMPLEMENTARY SERVICES: FHQ HEALTH SERVICES MIKO-MAHIKAN RED WOLF

The Miko-Mahikan Red Wolf program maintained between 120-170 people on the Opioid Agonist Therapy (OAT) program. As of March 31, 2023 there were 127 people receiving OAT. In addition to Fort Qu'Appelle and the surrounding communities, people from Regina, Yorkton, Esterhazy, and Kamsack continue to access the comprehensive services at Red Wolf.

With the increase of toxic drug poisoning/ overdose deaths in Saskatchewan, the Red Wolf team is available to provide education in the communities regarding safe drug use. During this fiscal year the Red Wolf team provided 467 naloxone kits to community members. Red Wolf also trained 292 people on how to recognize a toxic drug poisoning/ overdose and how to administer naloxone. In addition, every person starting the OAT program receives a prescription for several take home naloxone kits. During this fiscal year, Red Wolf recorded 3,241 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.

We continue to see fall out from Covid restrictions to services within our communities. Mental health concerns and grief/loss resulting from a lack of support during Covid resulted in a higher need and higher acuity. We continue to provide access to mental health counselling through a contract basis. We also provide food, transportation, referrals and crisis support. We strive to keep our communities safe and are diligent in following standards in relation to carries.

Yellow Thunderbird House has assisted several men in the community as they work to finding their own homes. A need for housing for women was also identified, which led to the opening of our second house. This house has three small suites which will allow for a women and/or a small family to have space and privacy. Red Wolf will continue to provide supportive and outreach services to the tenants of both homes.



COMPLEMENTARY SERVICES: FHQ HEALTH SERVICES MIKO-MAHIKAN RED WOLF

We were successful in recruiting to our HIV/HCV outreach nurse position. This has allowed us to begin treating individuals with sexually transmitted and blood borne infections and will provide needed clinical support for continued screening, treatment and follow up of HIV and HCV. As well in collaboration with Community Health Nurses in our communities we will jointly provide testing and treatment of sexually transmitted and blood borne infections in our new van directly in the community.

The new van has been modified to allow for exams, blood collection and treatment.

We continue to provide smoking cessation to our patients along with our community pharmacies. We are currently updating job description and will be recruiting to provide more prevention activities within our communities. We provide encouragement to adopt a harm reduction philosophy to those that are currently using tobacco.

SERVICES PROVIDED 2022-23







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COMPLEMENTARY SERVICES: FHQ HEALTH SERVICES REHABILITATION THERAPIES PROGRAM

The Therapies Rehabilitation program developed in July of 2022, through a Needs Assessment conducted in partnership with the File Hills Qu'Appelle Tribal Council Health Services and University of Saskatchewan.

We provide services to the 11 First Nations Communities in FHQTC. These services consist of Occupational Therapy and Physical Therapy which include home visits in community, outpatient care as well as the inpatients at the All Nations' Healing Hospital.

The therapies program provides services such as assessing home environments for equipment and accessibility, providing rehabilitation services for people following injuries or surgery and helping individuals leave the hospital to home environments safely.

The therapies department also attends community health fairs and treaty days to provide health promotion related to falls prevention and physical activity.

Currently our team can provide OT and PT assistant services. We are looking forward to increasing PT services and implementing community fitness programming and health promotion in the future as our program continues to grow.

PATIENT REFERRALS

- OT Outpatient Referrals: 127 (90% of these referrals have been OT community visits due to intermittent PT services).
- ANHH Inpatient Referrals: 113
- PT Outpatient Referrals: 12 (Intermittent PT Services)





COMPLEMENTARY SERVICES: FHQTC WHITE RAVEN HEALING CENTRE

White Raven Healing Centre is located at All Nations' Healing Hospital. White Raven provides culturally based support and services to clients as well as referrals from others, and the communities of File Hills Qu'Appelle Tribal Council.

VISION

Provide client-centered mental health and addictions services that integrates the best of mainstream therapeutic techniques with traditional First Nation healing practices to provide a wholistic approach to heal from past traumatic experiences and current psychological issues.

MISSION

Promote guiding principles that will encourage open communication with all individuals, families and communities. Our primary focus is to provide traditional and conventional counselling designed to address the legacy of intergenerational impacts of residential schools and unresolved trauma and family violence.

SERVICES

- Indian residential School Resolution Health Support Workers Program
- Counselling Program
- Training Workshops
- Holistic Wellness Treatment Programs
- Elders, Men, Women, and Children Programming
- Addictions Outpatient/Outreach
- In-house Services and Evening Programming
- Cultural Access, Support and Programming





Complementary Services: External 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.



DERMATOLOGY

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



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.



FAMILY MEDICINE

Dr. A. Nari Rad specializes in family medicine and his office operates out of Rising Bear Healing Centre at All Nations' Healing Hospital.



CHARITY FUND DEK/ANHH FOUNDATION

ABOUT

The DEK/All Nations' Healing Hospital Foundation Fund supports the delivery of safe, wholistic health services and research to meet the needs of individuals in Fort Qu'Appelle and the surrounding area through acute care services, women's health, low-risk birthing, kidney care, and cultural and traditional services. This includes, but is not limited to, physician services, acute care beds, emergency services, access to traditional knowledge keeping, traditional medicine, and spiritual counselling.

The value of the fund, as of April 1, 2023, is \$1,285,964.²⁴

HISTORY

All Nations' Healing Hospital received a \$1,025,00.00 donation on July 21, 2019 from the family of a patient who had passed away at ANHH. The organizational needs were discussed with the family, including the Board's desire to establish a foundation at ANHH. As a result, a Foundation Fund was established at the family's request

DONOR REQUESTS

In memory of their husband and father, the Foundation is named the DEK/ANHH Foundation Fund

ANHH works with the South Saskatchewan Community Foundation (SSCF) to manage the funds until such time as ANHH can establish an independent Foundation.



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2022-23 Financial Statements

ALL NATIONS' HEALING HOSPITAL INC.

FINANCIAL STATEMENTS

MARCH 31, 2023



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.

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, 2023, 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, 2023, 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.

SASKATOON

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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 12, 2023 Regina, Saskatchewan

VIRTUS GROUP UP

Chartered Professional Accountants



ALL NATIONS' HEALING HOSPITAL INC. STATEMENT OF FINANCIAL POSITION AS AT MARCH 31, 2023 (with comparative figures for 2022)

ASSETS			
		<u>2023</u>	<u>2022</u>
Current assets			
Cash	\$	344,214	\$ 459,500
Term deposits (Note 3)		761,504	759,073
Accounts receivable		375,508	1,374,914
Inventory		93,678	68,980
Prepaid expenses		8,703	 8,338
		1,583,607	2,670,805
Tangible capital assets (Note 4)		14,219,801	 13,649,232
	<u>\$</u>	15,803,408	\$ 16,320,037
LIABILITI	ES		
Current liabilities			
Accounts payable and accrued liabilities	\$	1,029,071	\$ 1,808,272
Deferred capital contributions (Note 6)		1,170,257	563,092
Deferred contributions relating to purchase of tangible			,
capital assets (Note 7)		12,641,229	12,966,872
		14,840,557	15,338,236
NET ASSET	ſS		
Net assets invested in tangible capital assets		1,578,575	682,362
Internally restricted surplus (Note 8)		635,945	626,203
Unrestricted surplus (deficit)		(1,251,669)	(326,764)
	_	962,851	981,801
	\$	15,803,408	\$ 16,320,037
Commitments (Note 11)			

APPROVED BY: An 7- Lagues

Director

lonica Knowledbirector

ALL NATIONS' HEALING HOSPITAL INC. STATEMENT OF CHANGES IN NET ASSETS FOR THE YEAR ENDED MARCH 31, 2023

	r	nternally estricted surplus (Note 8)	Investment in tangible capital assets	Unrestricted surplus (deficit)	2022	2021
Balance - beginning of year	\$	626,203	\$ 682,362	\$ (326,764)	\$ 981,801	\$ 994,574
Excess (deficiency) of revenues over expenses		9,742	5 - 5	(28,692)	(18,950)	(12,773)
Purchase of tangible capital assets		-	1,402,676	(1,402,676)	-	-
Transfers from deferred contribtions		-	(291,851)	291,851	-	
Amortization of tangible capital assets			(832,106)	832,106	-	-
Amortization of deferred contributions relating to purchase of tangible capital assets (Note 7)	5	- (617,494	(617,494)	-	-
Balance - end of year	\$	635,945	\$1,578,575	\$(1,251,669)	\$ 962,851	\$ 981,801

ALL NATIONS' HEALING HOSPITAL INC. STATEMENT OF OPERATIONS FOR THE YEAR ENDED MARCH 31, 2023 (with comparative figures for the year ended March 31, 2022)

	<u>2023</u>		<u>2022</u>
Revenues			
Amortization of deferred contributions relating			
to tangible capital assets (Note 7)	\$ 617,494	S	679,206
Cafeteria and dietary receipts	31,516		62,062
FHQ shared cost revenue	160,980		142,020
File Hills Qu'Appelle Tribal Council	1,675,873		576,945
Other revenue	32,105		114,394
Patient revenue	284,454		77,317
Saskatchewan Health Authority	5,868,142		5,637,065
Funds received in advance, prior year	563,091		965,616
Funds received in advance, current year	 (1,170,257)		(563,091)
	 8,063,398		7,691,534
Expenses			
Administration	196,008		155,170
Amortization	832,106		694,638
Capacity	220		22,840
Dietary supplies	108,977		75,709
Health records	7,401		4,248
Hospital maintenance	217,690		231,877
Housekeeping supplies	39,428		32,612
Lab supplies	219,149		174,964
Maternal Child and Women's Health Services	421,003		559,973
Medical supplies	152,805		126,992
Nursing supplies	111,768		61,591
Pharmacy	78,960		83,457
Radiology	94,582		87,165
Utilities	196,929		164,904
Vehicle maintenance	7,559		7,624
Wages and benefits	5,397,763		5,220,543
	 8,082,348		7,704,307
Excess of expenses over revenues	\$ (18,950)	\$	(12,773)

ALL NATIONS' HEALING HOSPITAL INC. STATEMENT OF CASH FLOWS FOR THE YEAR ENDED MARCH 31, 2023 (with comparative figures for the year ended March 31, 2022)

		<u>2023</u>		2022
Cash provided by (used in) operating activities:				
Excess of expenses over revenues	\$	(18,950)	\$	(12,773)
Items not involving cash:				
- Amortization		832,106		694,638
 Amortization of deferred contributions relating to purchase of tangible capital assots 		((17.404)		
tangible capital assets		(617,494)	_	(679,206)
New seeds and the state of		195,662		2,659
Non-cash operating working capital (Note 9)		192,711		1,293,465
		388,373		1,296,124
Cash provided by (used in) investing activities:				
Additions to tangible capital assets		(1,402,676)		(1,844,306)
		(1,402,676)		(1,844,306)
Cash provided by (used in) financing activities:				
Contribution by FHQ and transfers from other entities		864,695		843,374
Restricted donations, interest and fundraising (Note 6)	-	34,322		31,805
		899,017		875,179
increase (decrease) in cash		(115,286)		326,997
Cash position - beginning of year	2	459,500		132,503
Cash position - end of year	\$	344,214	\$	459,500

ALL NATIONS' HEALING HOSPITAL INC. NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2023 (with comparative figures for the year ended March 31, 2022)

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 provdes 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-forprofit 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.

2. <u>Summary of significant accounting policies</u> (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 transfered to deferred contributions related to the purchase of tangible capital assets, and is then amortized on the same basis as the related asset.

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 0.90% - 1.20% and maturity dates ranging from April 2023 to June 2023. The market value at March 31, 2023 is \$761,504 (\$759,073 in 2022).

4. Tangible capital assets

			 2023		2022
	_	Cost	Accumulated	et Book alue	Net Book Value
Buildings Hospital equipment Land	\$	20,650,694 3,935,995 20,500	\$ 7,385,314 3,002,074	\$ 13,265,380 933,921 20,500	\$ 13,064,691 564,041 20,500
	\$	24,607,189	\$ 10,387,388	\$ 14,219,801	\$ 13,649,232

The building category includes \$656,300 (2022 - \$nil) 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, 2023 (with comparative figures for the year ended March 31, 2022)

5. Line of Credit

7.

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 (2022 - \$0).

6. Deferred capital contributions

		<u>2023</u>	<u>2022</u>
Balance, beginning of year	\$	563,092	965,616
Contributions received		1,127,082	843,377
Restricted donations, interest and fundraising		34,322	31,805
Transfer to deferred contributions relating to		0 1,022	51,005
purchase of tangible capital assets		(554,239)	(1,230,080)
Non-capital contributions recognized in revenue		-	(47,626)
Balance, end of year	\$	1,170,257	\$ 563,092
Deferred contributions relating to purchase of tangible capital assets			
		<u>2023</u>	<u>2022</u>
Balance, beginning of year	\$	12,966,872	12,415,998
Transfers from deferred capital contributions	Ŷ	554,239	1,230,080
Returned to funder		(262,388)	1,250,000
Revenue recognized in the year		(617,494)	(679,206)
Balance, end of year	\$	12,641,229	\$ 12,966,872

The current portion of deferred contributions related to tangible capital assets is estimated to be \$655,845 at the end of the year.

8. Internally restricted net assets

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

- Charity Fund: \$271,520 (2022 \$261,778) consists of the unspent funds raised through charitable activites.
- FHQ Fund: \$364,425 (2022 \$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.

9. Non-cash operating working capital

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

		2023		<u>2022</u>
(Increase) decrease in current assets:				
Term deposits	\$	(2, 431)	\$	(3,357)
Accounts receivable		999,406	10.00	1,278,106
Inventory		(24,698)		(4,295)
Prepaid expenses	12	(365)		18,190
		971,912		1,288,644
Increase (decrease) in current liabilities:				
Accounts payable and accrued liabilities		(779,201)		52,447
Deferred revenue - non capital contributions		-		(47,626)
		(779,201)		4,821
	\$	192,711	\$	1,293,465

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:

	<u>2023</u>	2022
Revenue:		
Cafeteria and catering	\$ 12,933	\$ 8,410
Other revenue	-	179,070

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:

	<u>2023</u>	<u>2022</u>
Accounts receivable	\$ 294,706	\$ 1,024,418
Accounts payable	-	760,227

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

11. Commitments

The Organization leases equipment and services and construction of real property under agreements requiring aggregate minimum payments over the next two years as follows:

2024	\$	283,300
2025		2,475

12. Economic dependence

The Hospital currently receives 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. At December 31, 2022, the fund had a balance of \$1,249,400. During 2023, \$nil was withdrawn from the fund (2022 - \$43,069) leaving a balance of \$43,730 available for withdrawal in the 2024 fiscal year.

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

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