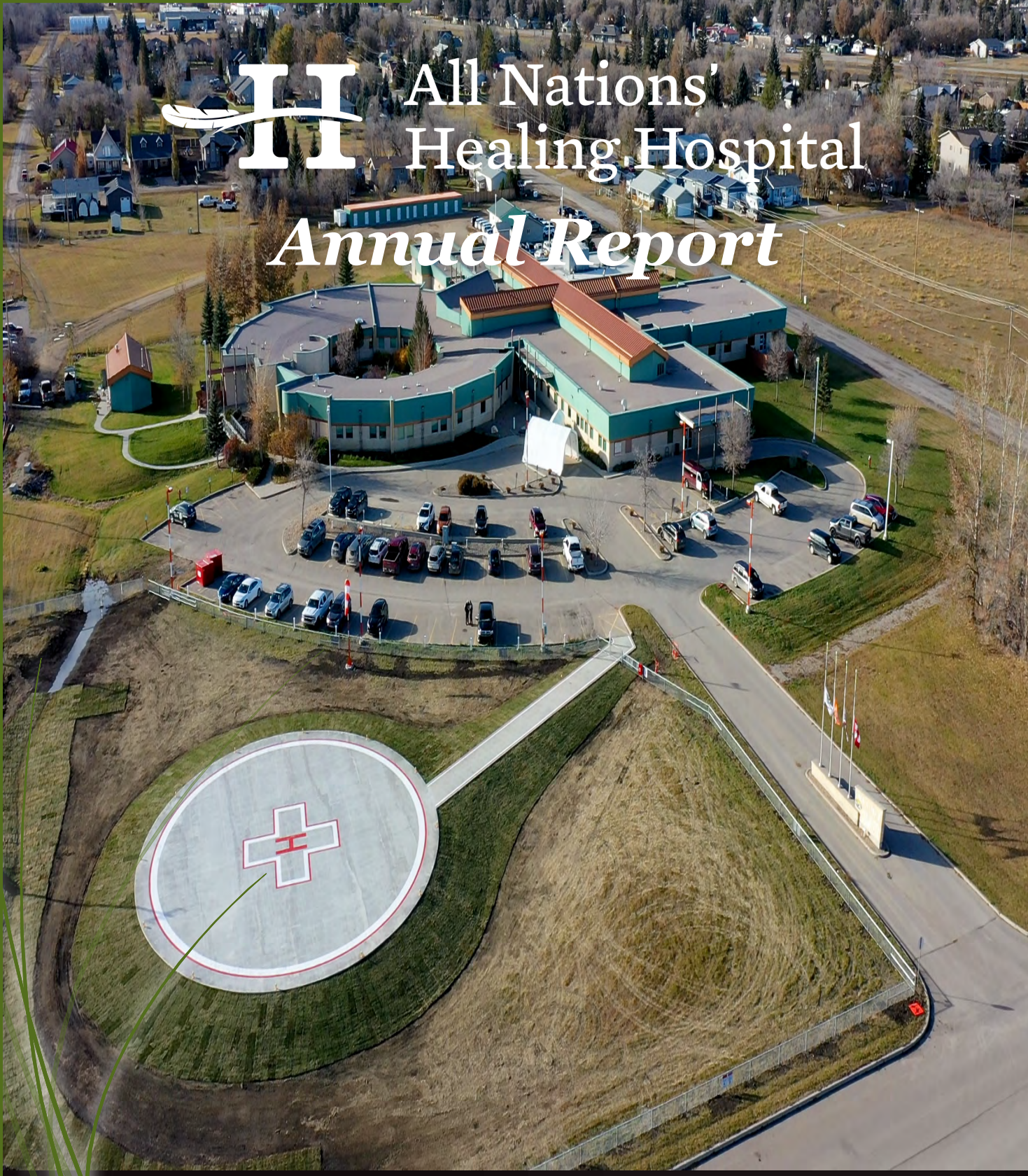


2021- 2022

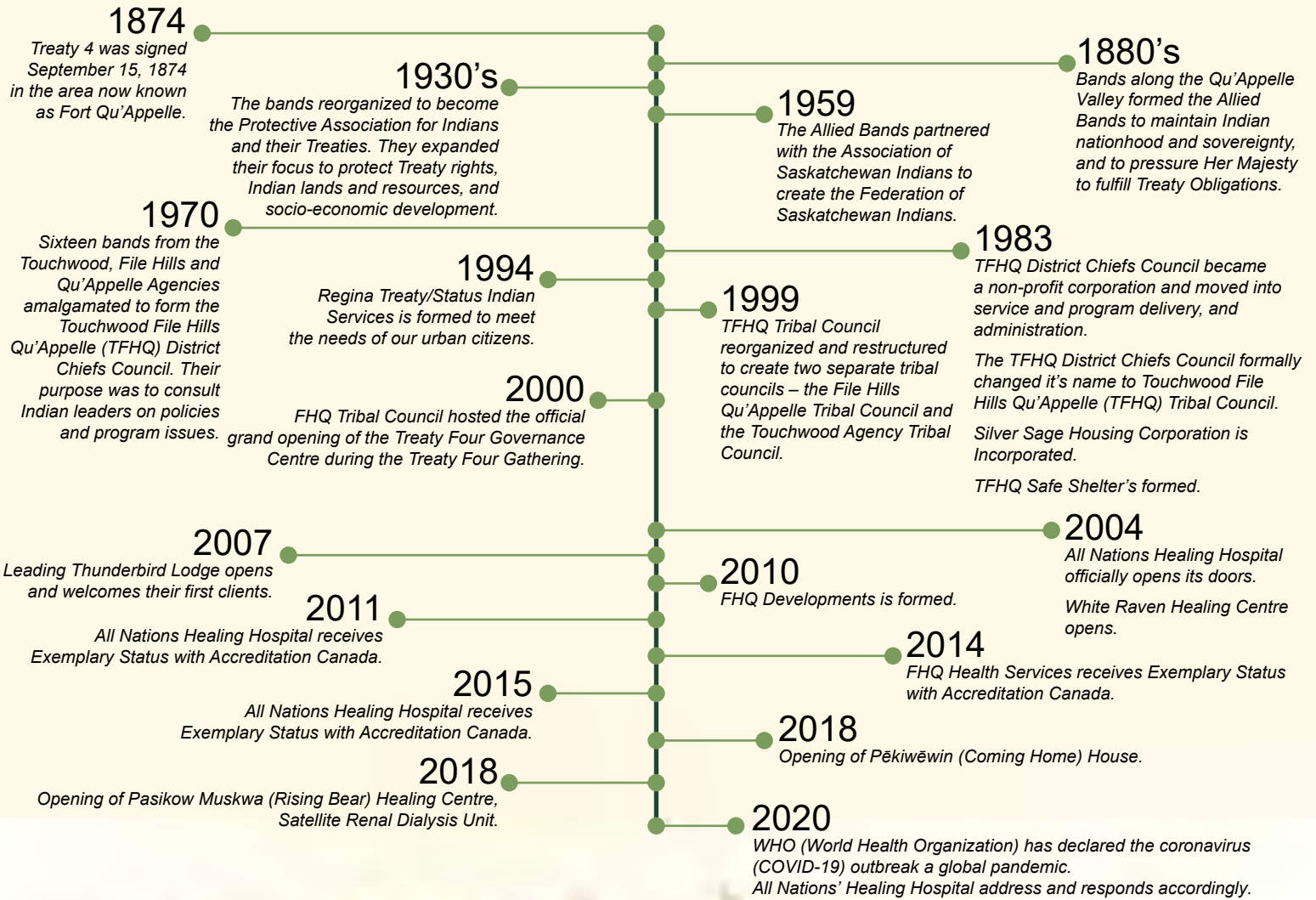


All Nations'
Healing Hospital
Annual Report



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.

CONTENT

04

**BOARD
CHAIRMAN**

10

**PATIENT FAMILY
ADVISORY COUNCIL**

13

**COVID-19
RESPONSE**

24

**COMPLIMENTARY
SERVICES**

05

**GOVERNANCE
REPORT**

11

**MESSAGE FROM
THE CEO**

15

ACCREDITATION

29

**FINANCIAL
STATEMENT**

06

**BOARD OF
DIRECTORS**

12

**KEY
ACTIVITIES**

17

OPERATIONS

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, Jeremy Fourhorns

The All Nations Healing Hospital (ANHH) is pleased to provide you, the residents and citizens of our Community and Nations with the ANHH Annual Report.

The annual report is a legislated requirement which demonstrates our commitment to transparency and accountability. As in the past, this year's report includes the approved audited financial statements for the year ending March 31, 2022.

While widespread vaccination made it possible for workplaces and businesses to re-open their doors, the economic and health -related effects of the universal pandemic will continue to resonate for the foreseeable future. The true cost to healthcare of the last few years of the pandemic has yet to be fully realized.

Our 2021-22 Annual Report outlines how we have remained steadfast and responsive throughout this last tumultuous year in solidifying our commitment to enhancing healthcare for all the residents of the catchment area.

The COVID-19 pandemic created unmatched pressures on our hospital's health system this year. Wave after wave of infections tested our provincial health system pressuring our hospital to respond quickly to rapid change. Vital staffing and operational strategies were required to address areas where employees were at home on self-isolation often leaving departments short staffed. As we emerge from the pandemic, we continue to take the slow but welcome steps towards a return to life with fewer restrictions, but there remains work to be done. As the impact of these last two years continues to be felt, the advice and recommendations advanced by the communities we serve remain vital in shaping a strong, responsible, and sound pathway forward for 2022 and beyond.

Our work is made possible by the ongoing support of our community members. Given the adversities and tribulations of the last year, your critical support allowed us to dedicate our team and partners to manage and coordinate services ensuring we remained responsive and operational.

As we move forward, we extend our heartfelt appreciation to retiring board members including Edmund Bellegarde and Marian Zerr. Their dedication to community and the people we serve contributed to the successes our hospital achieved and we thank them for their service to ANHH.

On behalf of our Board of Directors and our Executive Leadership Team we look forward to working together through what we anticipate will be another challenging year of the universal pandemic.

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.

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 2021/2022

BOARD OF DIRECTORS



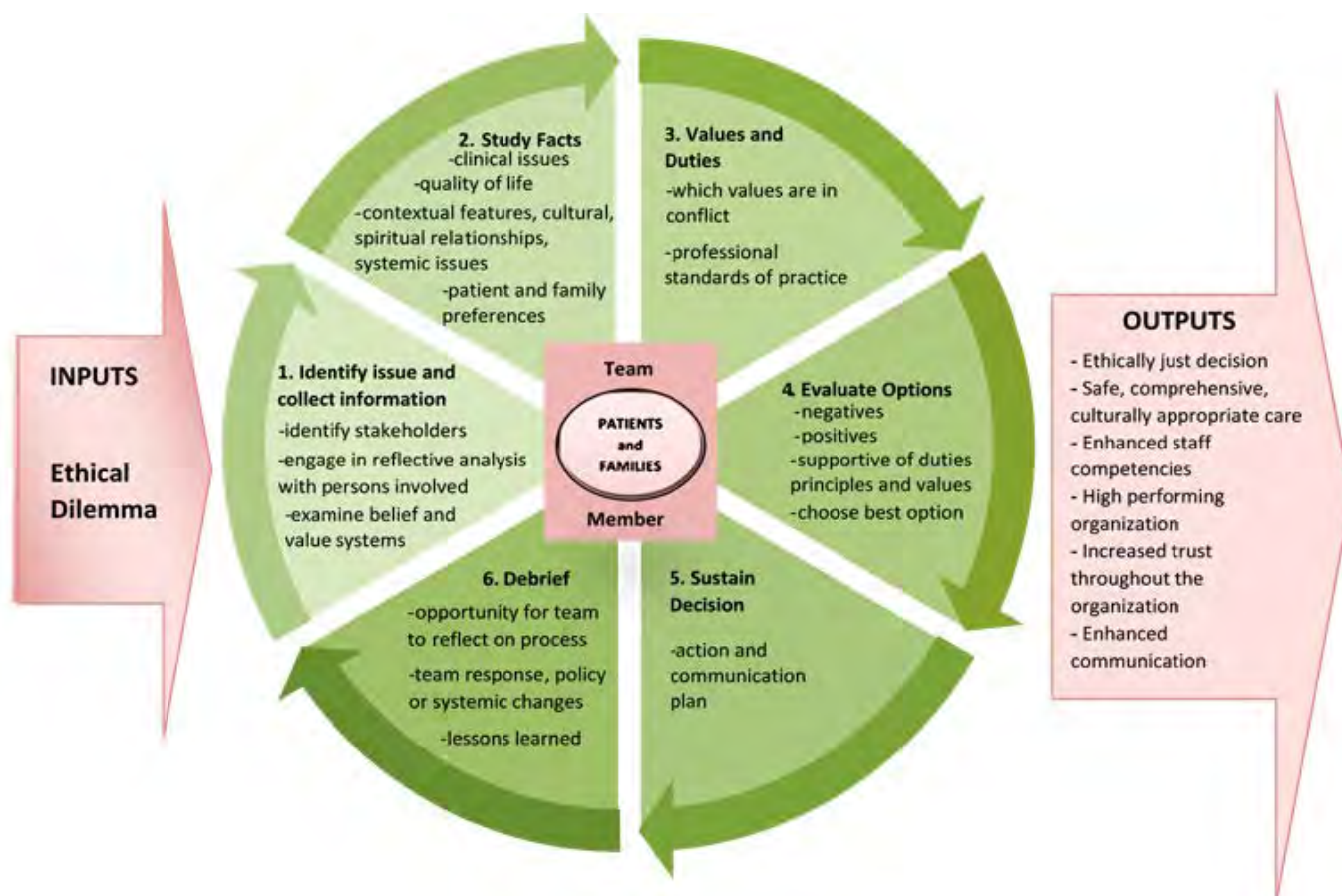
ALL NATIONS HEALING HOSPITAL BOARD OF DIRECTORS

Jeremy Fourhorns, 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
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.

<p>Clients/ Stakeholders</p>	<p>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</p>	<p>4.2 Funders 4.2.1 Supportive partnerships that champion the delivery of the wholistic care model and best practices in culturally integrated services.</p>	<p>4.3 Communities 4.3.1 Confidence and trust in the availability of quality care impacting the overall health of communities</p>
<p>Financial</p>	<p>3.1 Sustain 3.1.1 Maintain sound, accountable financial operations to support sustainability</p>		
<p>Operations</p>	<p>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</p>	<p>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</p>	<p>2.3. Health Promotion 2.3.1 Improve public health outcomes through education 2.3.2 Improve health literacy</p>
<p>Organizational</p>	<p>1.1 First Nations Capacity 1.1.1 Continue to build First Nations capacity in all areas of service delivery</p>	<p>1.2 Build an organizational culture that supports the wholistic model of care 1.2.1 Provide training and mentorship for all care providers</p>	



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 another historic and challenging year, a year which continued to be dominated by the universal pandemic, I believe we can again state with confidence we met wave after wave with resilience and commitment to ensuring we provided services to the catchment area of the All Nations Healing Hospital.

Looking back two years ago, in the early days of the pandemic, when 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, FHQTC Health Services, throughout the following years our teams have responded to 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 communities and Canada and around the world, was thoughtful and although difficult choices were often made to mitigate the impact of the virus while still providing hospital services we managed to remain operational. Hour by hour we adapted, responded, increased our flexibility and our innovation and with an experienced team of health professionals at the lead, we strengthened our ability to remain sustainable throughout the second full year of 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 year's events however it does not outline the 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.

The audit confirms 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 and 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 another very difficult year. The team remains committed to providing safe health services and as the endemic begins learn to manage in a world where this virus will continue to exist. I want to thank you for persevering beside us, grieving, adapting and boosting us up inspiring us to work together, sharing our successes and our challenges all the while working toward building an even stronger organization for 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	Dyns Reed, RN BScN	Accreditation Coordinator
Maintenance	Chris Hahn	Supervisor
Environmental Services/Dietary/Laundry	Dawn Desjarlais	Supervisor
Purchasing/Scheduling	Erin Anardi	Coordinator
Nursing	Christine Renwick, 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	Cody O'Watch	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
- 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 however E.R. remained open and operational.

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.

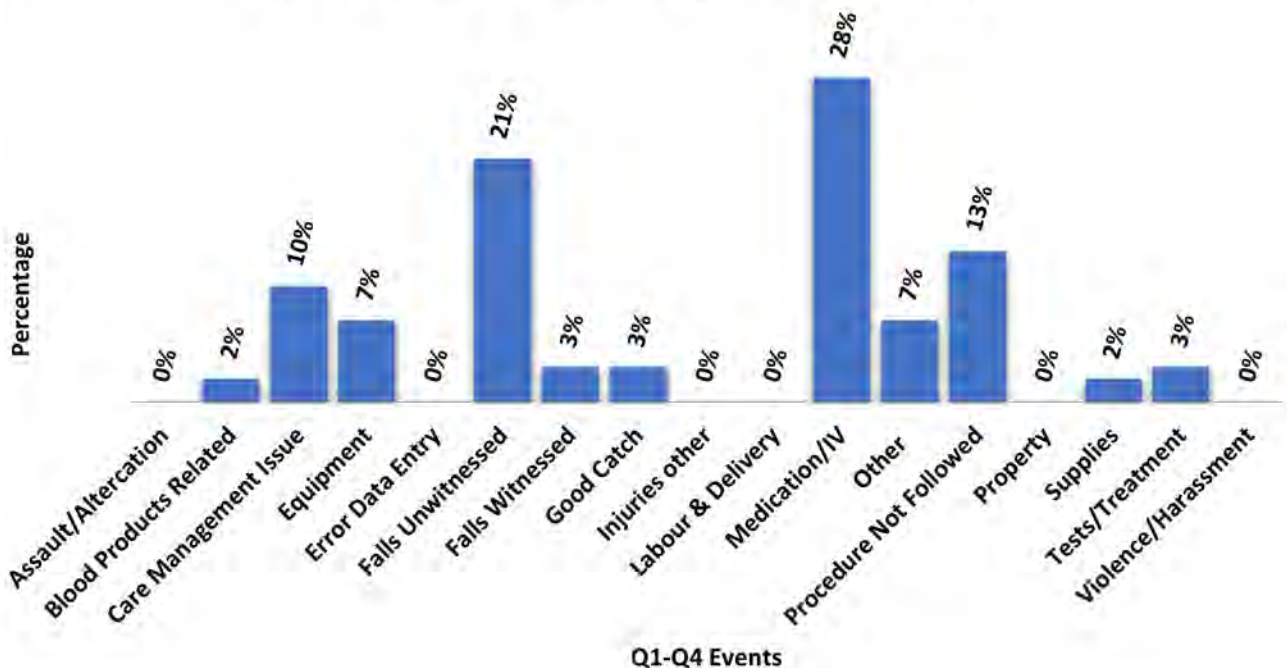
ALL NATIONS HEALING HOSPITAL ACCREDITATION

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 <https://accreditation.ca/qmentum-accreditation/>)

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.

Information is gathered on any events that occur including employee events. This information is reviewed on a regular basis with opportunities for improvement identified and action plans developed.

Q1-Q4 Events as a Percentage of Total FY 2021-22



ALL NATIONS HEALING HOSPITAL

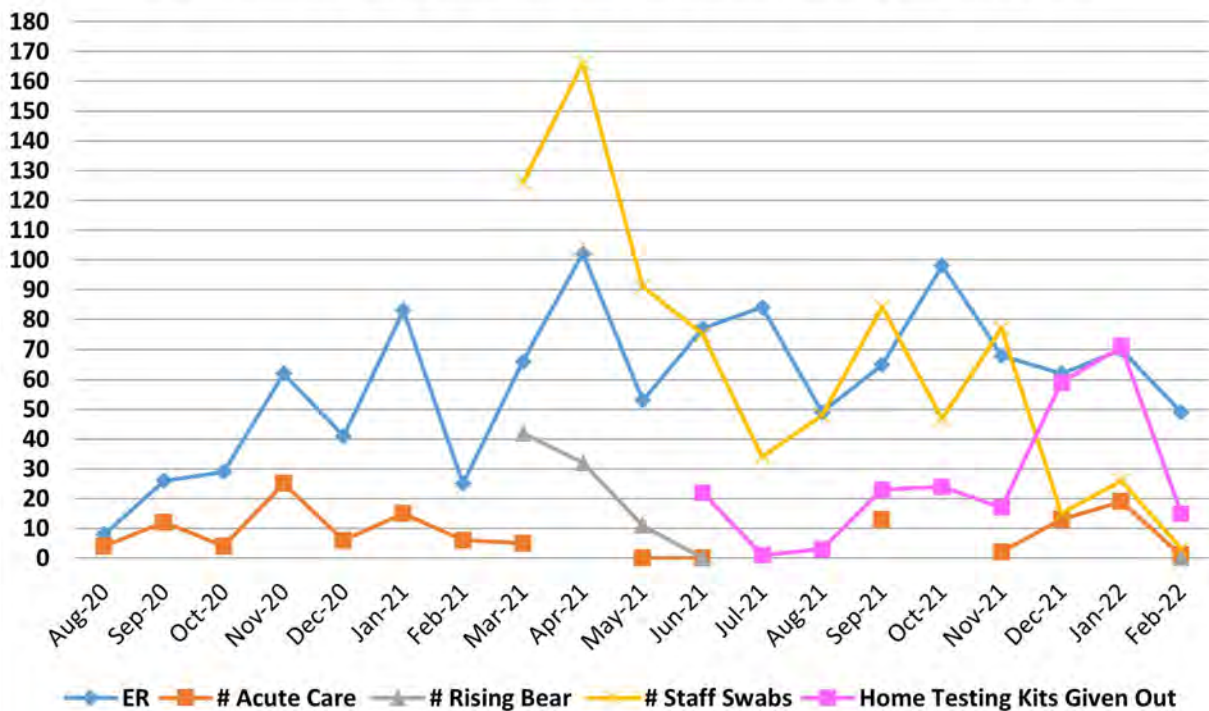
INFECTION CONTROL

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 was front and center throughout year. 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 at all times to ensure safety of patients and staff. Heightened awareness of potential risks for spread of infection ensured ANHH had limited Healthcare Associated Infections (HAI) of any type.

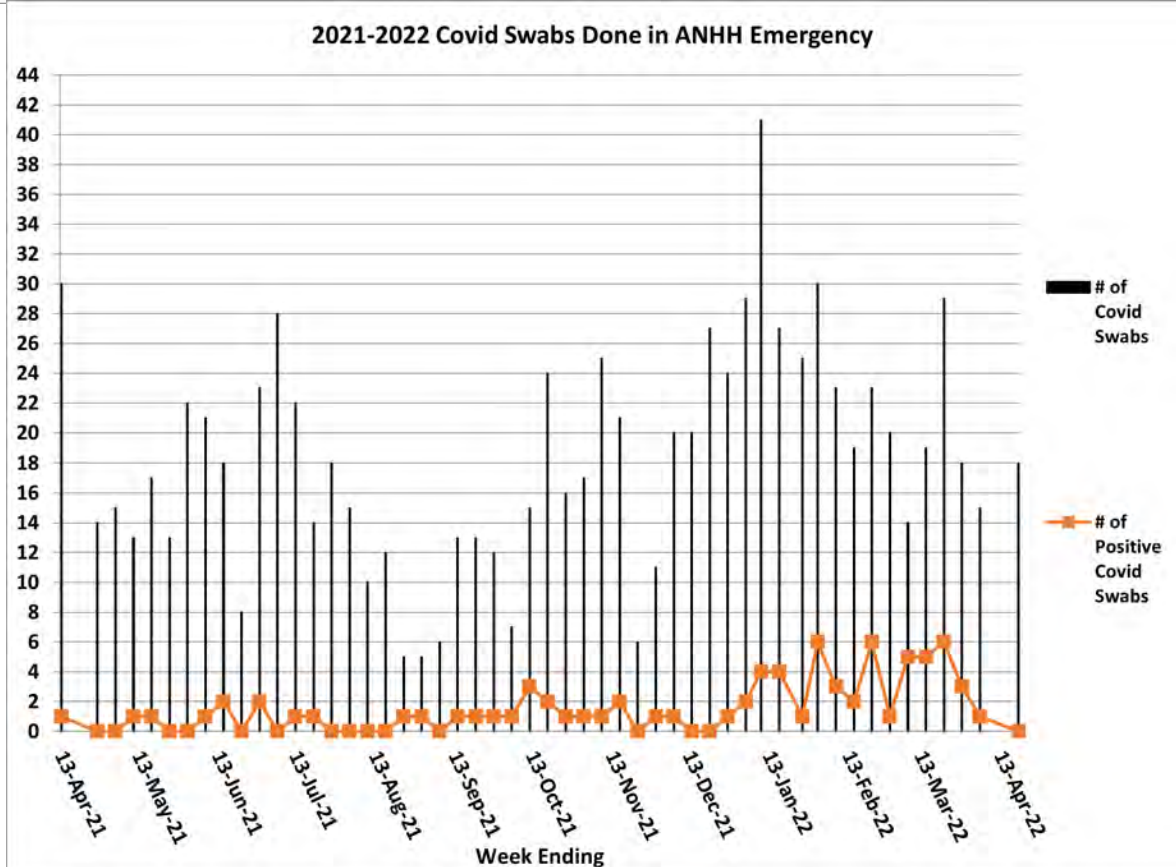
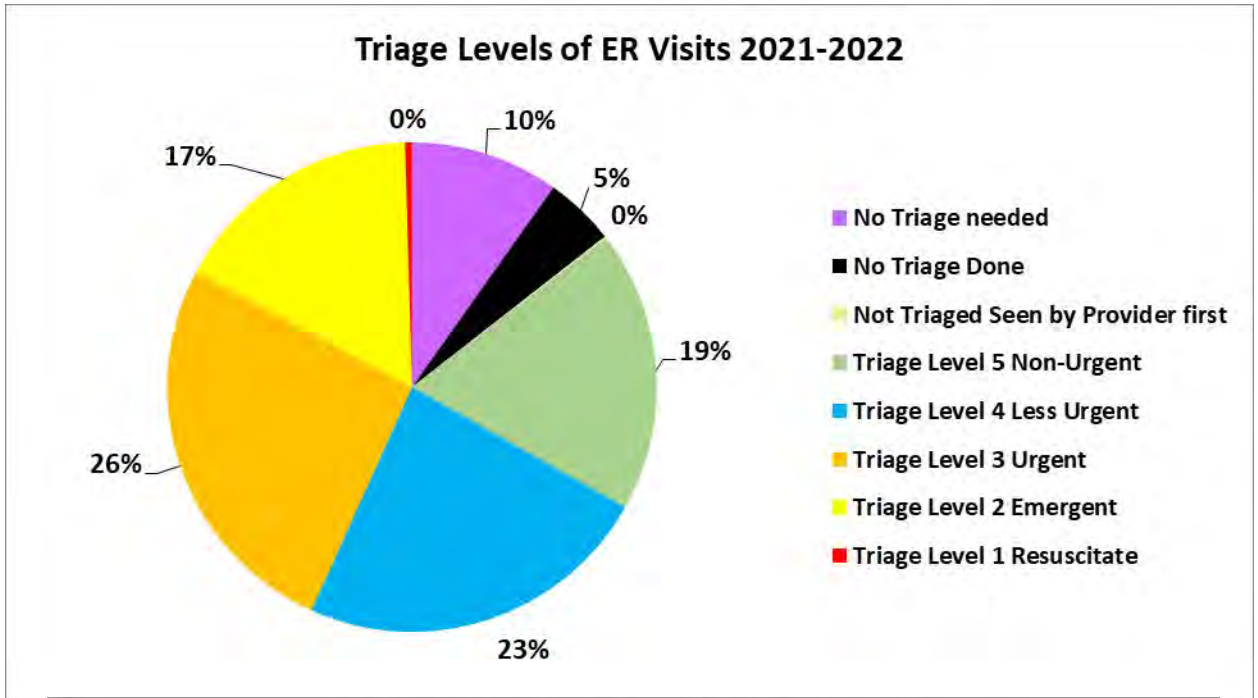
COVID Testing for staff was done on site on a weekly basis and home testing kits were provided for staff. ANHH provided a drive-through testing site to ensure that staff and community member testing could be done in a safe, confidential and timely manner along with limiting potential for exposure to COVID. Point of Care COVID Testing available in the ER, reduces risk of any COVID exposure to staff, patients in the ER and admitted patients by enabling quick identification and isolation any positive cases.

2021 ANHH COVID Swabs Done and Staff Home Testing Kits Given Out



OPERATIONS

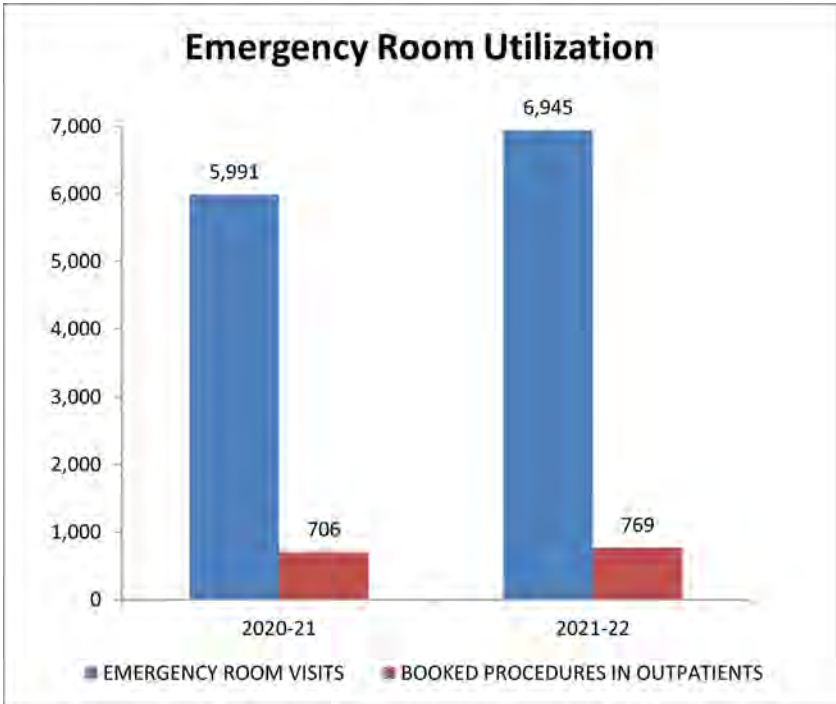
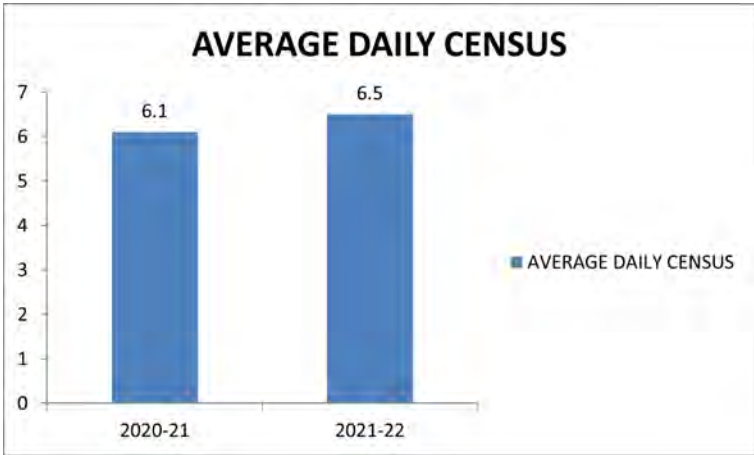
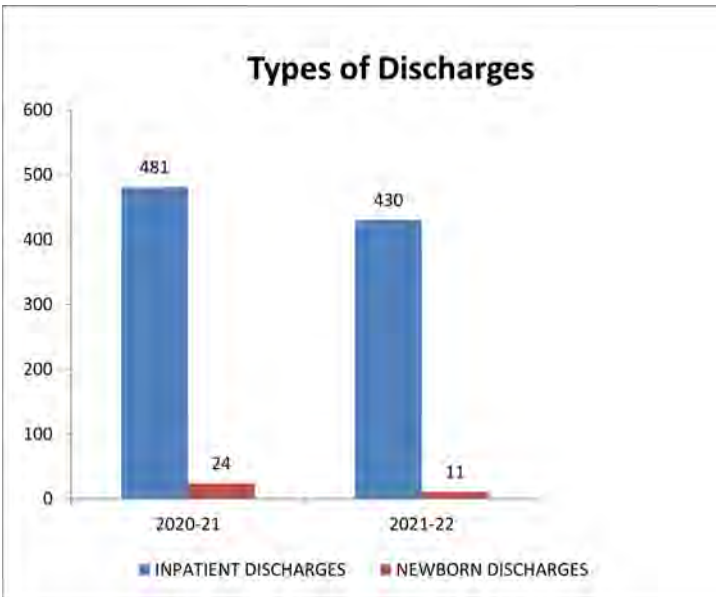
EMERGENCY DEPARTMENT



OPERATIONS

ACUTE CARE

ANHH experienced an Acute Care bed closure, which impacted our Inpatient as well as our Newborn discharges. Our Emergency Department remains extremely busy.



OPERATIONS

LABORATORY Diagnostics



Steps we have taken in 2020-2021 to help us serve our clients:

- Phlebotomist position extended to meet staffing needs
- New chemistry analyzer testing and validation performed and awaiting approval for implementation.
- Venous blood gas testing made available December 2021.
- Staffing challenges and higher turnover of staff in during 2021-2022 identified the need to add a supernumerary position to plan for the future.
- Training of multiple new staff members
- As part of our diagnostic quality assurance program a laboratory inspection was completed in Sept 2021. Certificate of Accreditation awarded in April 2022.

Our goal:

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

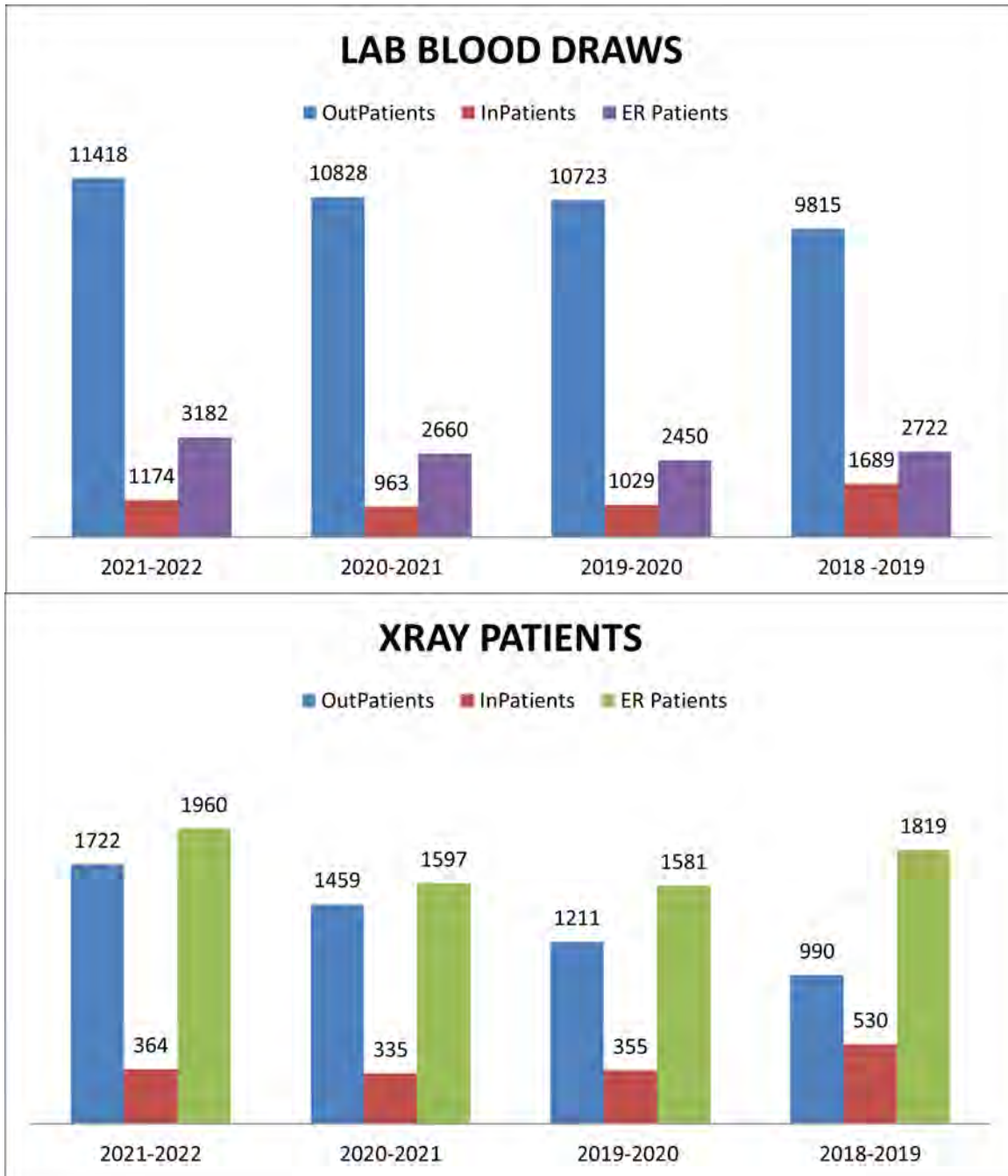
Challenges:

2021-2022:

- Staffing shortages leading to reduced outpatient hours in November.
- Staff turnover due to increased workload and overtime demands
- Disruption of services in surrounding communities increase the need for our services

OPERATIONS

LABORATORY Statistics



HOLTER MONITORS PERFORMED 2021-2022: 123 (101 previous year)

ECGS PERFORMED: 2715 (2544 previous year)

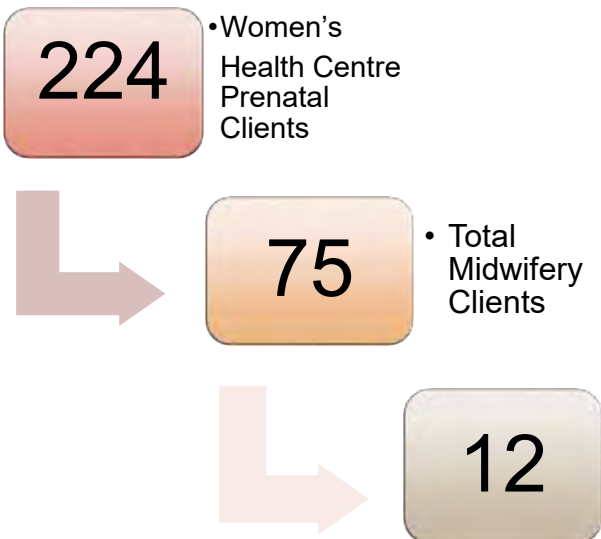
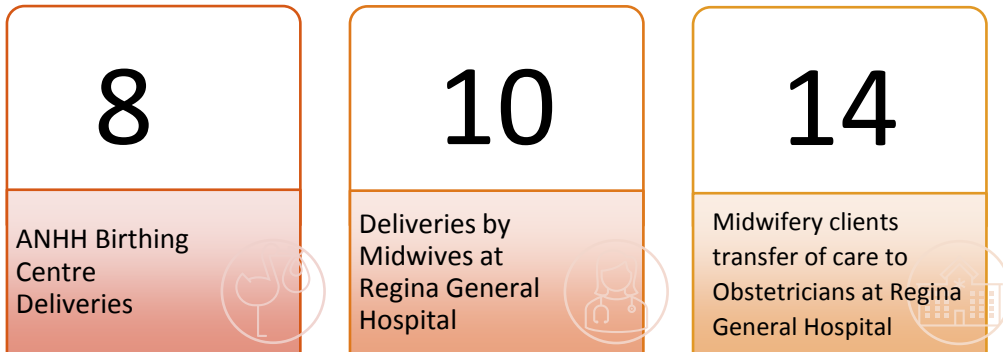
OPERATIONS

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



OPERATIONS

DIETARY, HOUSEKEEPING, LAUNDRY

Dietary

Dietary welcomed one dietary aid to the team this year and added a Red Seal cook with knowledge of Traditional menus and service to the weekly rotation. This new position consists of three shifts per week Monday, Wednesday and Friday. This was created to support the dietary department and work with our Knowledge Keepers in providing Traditional, well balanced, nutritional menu choices for our dialysis clients and acute patients on the ward.

Housekeeping and Laundry

The housekeeping department welcomed one casual team member. With the ongoing concerns and infection control measures during the pandemic the 1500-2000 shift was extended to 2024 to assist with addressing infection control requirements to support the ward and Rising Bear.

The laundry department welcomed a new permanent part time employee this past year. The department continues to be keep up with the demands for essential linens (PPE) and keeping everything well stocked on the ward including all entities and emergency department. Laundry continues to monitor the daily input and output of all its linens and supplies in order to maintain flow to all the departments.



“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

- Dishwasher replacement, new dishwasher is installed. Old dishwasher was close to 20 years old and is at the end of its lifespan.
- Chiller plant (Air Conditioner) replacement is complete, system runs at a much better capacity and has rectified all cooling issues
- Chiller plant circulation pump replacement.
- Heat Recovery Wheel project complete in Air Handler #2.
- Heliport construction and Certification complete.
- New Grasshopper and Attachments purchased for Heliport and Grounds maintenance. One of our existing Grasshoppers was over 20 years old and parts were no longer available.
- Physio/Gym renovations are complete.

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.
- Increased Fire/Panic/Fridge annunciator training and call list protocols for each specific alarm.
- Fire drills and annunciator training with the nursing staff, to respond to fire alarms with more efficiency and greater confidence.
- Contracted garbage removal (Loraas), as the Town of Fort Qu'Appelle no longer provides this service.
- Worked closely with our local Emergency Measures Officer to monitor and mitigate any water flow issues during the spring melt of 2022.
- Annual kitchen exhaust fan system inspection/cleaning.
- Biannual contracted service of the RO System for the renal unit.
- Cafeteria renovation and equipment upgrades tentatively scheduled for September start-up. Kitchen equipment is dated and prone to breakdowns which in- turn affects our service standards.
- Working along with Vipond (Fire Suppression Contractor) to identify and replace old and/or damaged sprinkler heads.
- On-going discussions with Canadian Water Technologies regarding the purchase of critical back up parts for the RO system for Rising Bear (Dialysis Unit), to alleviate any supply chain issues should any of these components fail and need replacement.
- Purchase of a scissor lift to provide a safe and more efficient working platform when working at heights inside and around the perimeter of the building.
- Initiated professional roof inspection. Roof Condition Assessment is in hand and working with Roof Management & Inspection Services to rectify some minor issues. Roof is in good shape considering the age.
- Initiated annual professional PM of the Oxygen distribution system.

All Nations Healing Hospital is reaching the 20 year mark and along with that comes with the replacement of critical operating systems/equipment. I have made it one of my priorities to identify these areas and proactively acquire the parts, equipment and services to limit the amount of downtime, when the need occurs, so as to maintain our level of service and care.

COMPLEMENTARY SERVICES

PASIKOW-MUSKWA (RISING BEAR) HEALING CENTRE

PROGRAMMING

- We faced challenges with staffing over the course of the year and had a gap in service with no NP coverage, and only 1 RN. We hired a permanent full time NP in October
- 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; brought in an Oskapew Iskwew, and Oskapewis to assist in the delivery of services
- Continued referral for 24hr ambulatory blood pressure monitoring
- Continued outpatient IV Iron for CKD not on dialysis
- Outreach NP services in communities – On hold during COVID, resumed in March 2022 in 1 community
- Resumed in person appointments, with option for phone appointments if required
- Work closely with specialty services, Nephrologists and Dr. Karunakaran with monthly Nephrologist clinics – in person clinics were on hold during COVID – resumed June 2021
- Increase in Nephrology telehealth appointments
- Abbott ID now – utilized for staff and patient screening
- The Health navigator has resumed home visits to some of our vulnerable clients. Coordination of transportation to medical appointments. Provides counselling with the main themes being trauma, coping with chronic diseases, domestic violence, grief, memory testing, and relationship difficulties (caregiver burnout)

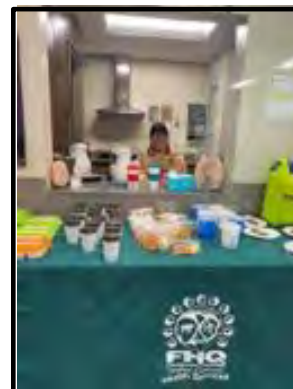
Episodes of Care from April 2020 – March 2021

Total Episodes of Care

Visits for Traditional Services

2254

1489



COMPLEMENTARY SERVICES

PASIKOW-MUSKWA (RISING BEAR) HEALING CENTRE

POINT OF CARE KIDNEY SCREENING

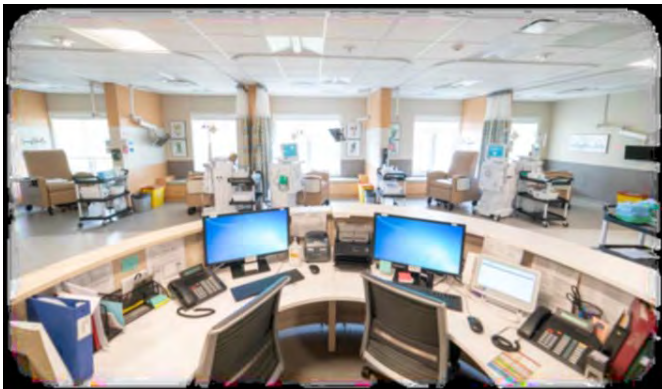
3 events for early detection and screening for kidney disease were completed in September 2020.

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

- Opened September 26, 2018, have consistently had chairs full with waitlist to start dialysis at our facility
- Hired a new Full time RN, 1 casual RN, and 2 new casual LPN's
- Transonic Monitoring: Routine transonic monitoring is completed on patients for assessment and surveillance of dialysis accesses; fistula or graft.
- Still seeing the negative effects of COVID-19 Pandemic resulting in barriers for clients such as transportation, housing, food security, access to services (ie. Access Nurses/Transplant/Home Dialysis clinics/Telehealth/Home Care/OT/podiatry etc.) ALC, Private care home and respite care access. Requiring increased need for Health Navigator support, social advocacy and mental health counseling



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 continued to see a significant increase of people starting the Opioid Agonist Therapy (OAT) program to treat opioid use disorder. At fiscal year end there were 136 people on the program.

Red Wolf’s harm reduction services serve as an important means of connecting with people and engaging them in care. In order to do so, we provide a safe space and confidential services free from judgment. During this fiscal year Red Wolf recorded 855 contacts in which harm reduction supplies were provided. The distribution of sterile supplies for drug use is intended to reduce the sharing of used needles and other injecting equipment, which helps prevent the spread of blood-borne infections.

Red Wolf continues to embark on the journey of providing education and awareness to individuals and communities in regards to harm reduction services in an effort to reduce stigma and discrimination.

Red Wolf’s Outreach Team also continued to provide support services to the tenants of Yellow Thunderbird House that Sits in the Sunrise.



2021-22	Services Provided
3422	Nurse Practitioner Appointments
3227	Health/Outreach Navigator Appointments

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.



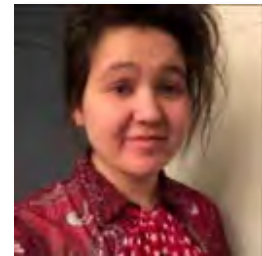
INFECTION CONTROL

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 Venture Rehabilitation 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, 2022

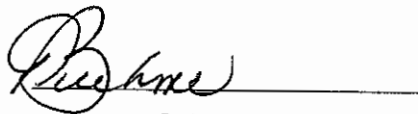
MANAGEMENT'S RESPONSIBILITY FOR FINANCIAL STATEMENTS

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 cursive script, appearing to read "Boehme", is written over 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, 2022, 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, 2022, 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.

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.

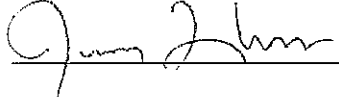
June 27, 2022
Regina, Saskatchewan

VIRTUS GROUP LLP
Chartered Professional Accountants

ALL NATIONS' HEALING HOSPITAL INC.
STATEMENT OF FINANCIAL POSITION
AS AT MARCH 31, 2022
(with comparative figures for 2021)

	ASSETS	
	<u>2022</u>	<u>2021</u>
Current assets		
Cash	\$ 459,500	\$ 132,503
Term deposits (Note 3)	759,073	755,716
Accounts receivable	1,374,914	2,653,020
Inventory	68,980	64,685
Prepaid expenses	8,338	26,528
	2,670,805	3,632,452
Tangible capital assets (Note 4)	13,649,232	12,499,563
	<u>\$ 16,320,037</u>	<u>\$ 16,132,015</u>
	LIABILITIES	
Current liabilities		
Accounts payable and accrued liabilities	\$ 1,808,273	\$ 1,755,826
Deferred capital contributions (Note 6)	563,091	965,616
Deferred contributions relating to purchase of tangible capital assets (Note 7)	12,966,872	12,415,998
	15,338,236	15,137,440
	NET ASSETS	
Net assets invested in tangible capital assets	682,360	83,567
Internally restricted surplns (Note 8)	626,203	1,285,732
Unrestricted surplus (deficit)	(326,762)	(374,724)
	981,801	994,575
	<u>\$ 16,320,037</u>	<u>\$ 16,132,015</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, 2022**

	Internally restricted surplus (Note 8)	Investment in tangible capital assets	Unrestricted surplus (deficit)	2022	2021
Balance - beginning of year	\$ 1,285,732	\$ 83,566	\$ (374,724)	\$ 994,574	\$ 983,248
Excess (deficiency) of revenues over expenses	(45,303)	-	32,530	(12,773)	11,326
Purchase of tangible capital assets	(614,226)	1,844,306	(1,230,080)	-	-
Transfers from deferred contributions	-	(1,230,080)	1,230,080	-	-
Amortization of tangible capital assets	-	(694,638)	694,638	-	-
Amortization of deferred contributions relating to purchase of tangible capital assets (Note 7)	-	679,206	(679,206)	-	-
Balance - end of year	<u>\$ 626,203</u>	<u>\$ 682,360</u>	<u>\$ (326,762)</u>	<u>\$ 981,801</u>	<u>\$ 994,574</u>

ALL NATIONS' HEALING HOSPITAL INC.
STATEMENT OF OPERATIONS
FOR THE YEAR ENDED MARCH 31, 2022
(with comparative figures for the year ended March 31, 2021)

	<u>2022</u>	<u>2021</u>
Revenues		
Amortization of deferred contributions relating to tangible capital assets (Note 7)	\$ 679,206	\$ 695,643
Cafeteria and dietary receipts	62,062	53,820
FHQ shared cost revenue	142,020	142,020
File Hills Qu'Appelle Tribal Council	576,945	567,380
Health Canada - FNIHB	-	460,965
Other patient revenue	77,317	107,373
Other revenue	108,538	171,687
Resident long-term care	5,856	7,620
Saskatchewan Health Authority	5,637,065	5,561,860
Funds received in advance, prior year	965,616	470,033
Funds received in advance, current year	(563,091)	(965,616)
	<u>7,691,534</u>	<u>7,272,785</u>
Expenses		
Administration	155,170	211,906
Amortization	694,638	698,921
Capacity	22,840	-
Dietary supplies	75,709	74,332
Health records	4,248	1,867
Hospital maintenance	231,877	155,739
Housekeeping supplies	32,612	43,077
Lab supplies	174,964	250,793
Maternal Child and Women's Health Services	559,973	633,780
Medical supplies	126,992	129,342
Nursing supplies	61,591	58,253
Pharmacy	83,457	89,473
Radiology	87,165	78,054
Ultrasound	-	(492)
Utilities	164,904	167,712
Vehicle maintenance	7,624	4,209
Wages and benefits	5,220,543	4,664,493
	<u>7,704,307</u>	<u>7,261,459</u>
Excess (deficiency) of revenues over expenses	<u>\$ (12,773)</u>	<u>\$ 11,326</u>

ALL NATIONS' HEALING HOSPITAL INC.
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED MARCH 31, 2022
(with comparative figures for the year ended March 31, 2021)

	<u>2022</u>	<u>2021</u>
Cash provided by (used in) operating activities:		
Excess (deficiency) of revenues over expenses	\$ (12,773)	\$ 11,326
Items not involving cash:		
- Amortization	694,638	698,921
- Amortization of deferred contributions relating to purchase of tangible capital assets	(679,206)	(695,643)
	<u>2,659</u>	<u>14,604</u>
Non-cash operating working capital (Note 9)	1,293,465	(815,510)
	<u>1,296,124</u>	<u>(800,906)</u>
Cash provided by (used in) investing activities:		
Additions to tangible capital assets	(1,844,306)	(1,263,027)
	<u>(1,844,306)</u>	<u>(1,263,027)</u>
Cash provided by (used in) financing activities:		
Contribution by FHQ and transfers from other entities	843,374	1,731,596
Restricted donations, interest and fundraising (Note 6)	31,805	27,015
	<u>875,179</u>	<u>1,758,611</u>
Increase (decrease) in cash	326,997	(305,322)
Cash position - beginning of year	<u>132,503</u>	<u>437,825</u>
Cash position - end of year	<u>\$ 459,500</u>	<u>\$ 132,503</u>

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2022
(with comparative figures for the year ended March 31, 2021)

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, 2022
(with comparative figures for the year ended March 31, 2021)

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.

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% - 0.35% and maturity dates ranging from April 2022 to June 2022. The market value at March 31, 2022 is \$759,073 (\$755,716 in 2021).

4. Tangible capital assets

	2022			2021
	Cost	Accumulated Amortizatiou	Net Book Value	Net Book Value
Buildings	\$ 19,535,729	\$ 6,471,038	\$ 13,064,691	\$ 11,960,705
Hospital equipment	3,648,285	3,084,244	564,041	518,358
Land	20,500	-	20,500	20,500
	\$ 23,204,514	\$ 9,555,282	\$ 13,649,232	\$ 12,499,563

ALL NATIONS' HEALING HOSPITAL INC.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED MARCH 31, 2022
(with comparative figures for the year ended March 31, 2021)

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 (2021 - \$0).

6. Deferred capital contributions

	<u>2022</u>	<u>2021</u>
Balance, beginning of year	\$ 965,616	470,033
Contributions received	843,377	1,731,596
Restricted donations, interest and fundraising	31,805	27,015
Transfer to deferred contributions relating to purchase of tangible capital assets	(1,230,080)	(1,263,028)
Non-capital contributions recognized in revenue	(47,626)	-
Balance, end of year	\$ 563,092	\$ 965,616

7. Deferred contributions relating to purchase of tangible capital assets

	<u>2022</u>	<u>2021</u>
Balance, beginning of year	\$ 12,415,998	11,848,613
Transfers from deferred capital contributions	1,230,080	1,263,028
Revenue recognized in the year	(679,206)	(695,643)
Balance, end of year	\$ 12,966,872	\$ 12,415,998

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: \$261,778 (2021 - \$921,308) consists of the unspent funds raised through charitable activities.
- FHQ Fund: \$364,425 (2021 - \$364,424) 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, 2022
(with comparative figures for the year ended March 31, 2021)

9. Non-cash operating working capital

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

	<u>2022</u>	<u>2021</u>
(Increase) decrease in current assets:		
Term deposits	\$ (3,357)	\$ 30,376
Accounts receivable	1,278,106	(947,979)
Inventory	(4,295)	10,939
Prepaid expenses	18,190	2,541
	1,288,644	(904,123)
Increase (decrease) in current liabilities:		
Accounts payable and accrued liabilities	52,447	88,613
Deferred revenue - non capital contributions	(47,626)	-
	4,821	88,613
	\$ 1,293,465	\$ (815,510)

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>2022</u>	<u>2021</u>
Revenue:		
Cafeteria and catering	\$ 8,410	\$ 9,370
Other revenue	179,070	80,880

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>2022</u>	<u>2021</u>
Accounts receivable	\$ 1,024,418	\$ 2,473,689
Accounts payable	760,227	818,553

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, 2022
(with comparative figures for the year ended March 31, 2021)

11. Commitments

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

2023	\$	25,982
2024		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. In December 2021, \$43,069 was withdrawn from the fund (2021 - \$nil) leaving a balance of \$60,410 available for withdrawal in the future.

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

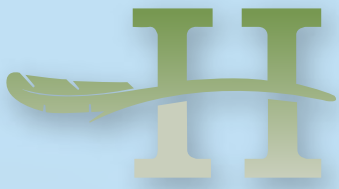
Liquidity risk is the risk that an entity will encounter difficulty in meeting obligations associated with financial liabilities. The Hospital's exposure to liquidity risk is dependent on the receipt of funds from its operations, external borrowings and other related sources. Funds from these sources 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, 2022
(with comparative figures for the year ended March 31, 2021)

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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