



ANNUAL REPORT 2020-2021



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Sensenbrenner Hospital

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OUR MISSION

Providing Quality and Compassionate Health Care with our Partners in our Northern Community

OUR VISION

Working Together for a Healthy Community

OUR VALUES

Integrity, Teamwork, Professionalism, Accountability, Respect

BOARD CHAIR & CHIEF EXECUTIVE OFFICER REPORT

As Chair of the Board of Directors and Chief Executive Officer (CEO) of Sensenbrenner Hospital, we are pleased to jointly submit the 2020-2021 Annual Report. Despite an extraordinary year of operating during a global pandemic, we are proud and humbled to share this past year's highlights and provide a quick glance into the hospital's upcoming challenges.

COVID-19

2020 was definitely an unprecedented year full of insecurity and uncertainty. Despite the fear and alarm, the entire team at Sensenbrenner Hospital was able to come together and tackle one of the greatest obstacles it has ever had to endure. We overcame the problems, one after another, and found solutions, thanks to supportive employees, dedicated medical staff, and a strong leadership team. In just a short amount of time, our team had built a COVID ward on the Active Care floor and moved its Alternate Level of Care (ALC) patients away from potential exposure to a newly formed wing called Continuing Care Unit (CCU) East; had transformed the front lobby into an active screening station; and moved the outpatient laboratory services, locum/specialty/VON clinics, and Community Care Access Centre (CCAC) offices, to an area outside of the hospital in order to reduce non-urgent traffic. Visiting guidelines were revised continuously to ensure patient safety and Personal Protective Equipment (PPE) acquisition and compliance became a number one priority (and became the most used acronym in our environment!). We are especially proud that so far, our cautious efforts have achieved to keep the infection rate at 0% in our hospital. Again, we sincerely thank our employees, medical staff, suppliers, visitors and family members for their vigilance and patience during the most trying times.

Infrastructure Improvements

The maintenance team was very busy this year with countless projects. Various departments and patient rooms received cosmetic facelifts, which included fresh paint, flooring, and new furniture. The hospital roof was completely redone. Restructuring and renovating initiatives definitely kept our maintenance team extremely busy during this last year.

Home & Community Care Second Provider Contract

After years of negotiations with the NE LHIN, an agreement was finally reached in order for the Sensenbrenner Hospital to be the second provider of Personal Support Worker services in the community. Thanks to this initiative, approximately sixty clients received 4,887 hours of personal support services in their homes during the 2020-21 fiscal year. We are happy to say that these services led to fewer admissions to the hospital and increased peace of mind for the clients and their family members. The help of the team at the Centre de santé communautaire de Kapuskasing et région was instrumental with the start up of the project.

Sensenbrenner Hospital Foundation

On April 1, 2020, the Fondation de l'Hôpital Sensenbrenner Hospital Fondation was granted status as a registered charity by the Government of Canada. The first year of operations was

challenging due to the COVID-19 pandemic. In November 2020, the Foundation hired a Coordinator, Mireille Dubosq, to help the Board with a variety of tasks, including branding, marketing and communications, fundraising and more. The Foundation tackled two major projects during the year: the Pharmacy/Chemo Suite Renovations and the Mammography Project. An anonymous donor funded the complete Pharmacy project (approximate value of \$750,000) which will help the Hospital meet government-mandated physical and patient-safety requirements. The second fundraising project was launched in mid-November 2020 to help the Hospital purchase new mammography equipment since it was past its useful life and the operating hardware could no longer be supported by the vendor. The Foundation's goal is to raise \$150,000 for this project since it is committed to the provision of breast screening services in the Hospital's catchment area and its objective of keeping services local. We are truly grateful for the Foundation's hard work and assistance.

Surgical Services

After years of negotiations with the Ministry of Health and Long-term Care, we have finalized an agreement for the Northeastern Ontario Regional Surgical Network. This agreement will greatly assist in the recruitment and retention of surgeons for Sensenbrenner Hospital, Notre-Dame Hospital in Hearst and MICs Group of Hospitals in Matheson/Iroquois Falls/Cochrane. Dr. Jessica Kwapis' leadership was absolutely essential in bringing this project to fruition.

Evacuations

In partnership with the Town of Kapuskasing, we continue to make progress in setting up a structure to ensure appropriate healthcare services for the residents that are evacuated to our community, as well as to other communities. We continue to work with the NE LHIN, the MOHLTC and Health Canada to ensure appropriate planning and access to the necessary financial, human and physical resources for evacuations. Our colleagues at the various governmental organizations recognize the importance of healthcare services for evacuees.

Partnerships in Education

Sensenbrenner Hospital partnered with the Collège Boréal to offer individuals the amazing opportunity to receive paid tuition and accelerated Personal Support Worker (PSW) training and education in only three months, all while working as a paid Compassionate Worker at the Hospital. nineteen individuals enrolled in the program and Sensenbrenner Hospital hired ten workers who successfully completed the training. These new PSW team members are currently providing personal support services in the community and the hospital.

Return of Service Agreements

We are excited to announce that two physicians practicing Family Medicine have signed a 5-year return of service agreement with the Health Care Recruitment and Retention Committee. Dr. Elissa Laflamme and Dr. Pierre Plamondon will each be practicing in our community upon completion of their second year of residency, in the summer of 2022.

We are also pleased to share that Dr. Susan Krajewski, General Surgeon, has signed a 1-year return of service until March 1, 2022. Her commitment is truly appreciated and of great assistance due to Dr. Kwapis' temporary leave.

What's more, we are hopeful that a Family Physician and a General Practitioner/Anesthetist (GP/A) will each sign a return of service agreement within the next two years. This would be excellent news for the community!

Hospitalist Program

We are happy to report that we were able to keep the Hospitalist Program running this past year - without any lapses in coverage - with the help of our local team of dedicated physicians and our group of locum physicians. The Hospitalist Program is a major retention initiative for our local physicians as it provides relief from being on-call 365 days/year and reduces exhaustion and burnout. The success of the program is also partially due to the Northern Specialist Locum Program funded by Health Force Ontario.

Outpatient Medical Clinic

In an effort to reduce the amount of traffic entering the hospital during the pandemic, we moved the locum & specialty clinics and the outpatient laboratory services to the building adjacent to the hospital (formerly the Kapuskasing Regional Doctors' Office). The building, which is now owned by the Hospital, also houses the Paramedic EMS and the Health Records departments as they both await a permanent location (relocation and completion of renovations, respectively).

Safe Bed

This year a Safe Bed was added to the Hospital. The Safe Bed Program is a partnership between the Northeast Local Health Integration Network, Hearst-Kapuskasing-Smooth Rock Falls Counselling Services (HKSCS) and Sensenbrenner Hospital. The program is intended to divert persons in a mental health and/or addictions crisis from incarceration, the justice system, and/or unnecessary hospitalization by providing them with voluntary community crisis accommodation and support. The goal of the program is to de-escalate and stabilize the initial crisis, and connect the client with the services and support they need to enable stable community living that address their health and wellbeing over the long term. The program provides 24/7 residential support services to persons in mental health and addictions crisis who are medically stable, not a safety risk to themselves or others, and not suitable for hospital admission or criminal detention. The Safe Bed is located on the Active Care floor and is staffed with a HKSCS social worker.

Mobile Crisis

The Mobile Crisis Team (MCT) initiative was implemented in the community this year by the Hearst-Kapuskasing-Smooth Rock Falls Counselling Services. The program allows a social worker to ride along with the OPP officers when they receive calls of distress with a goal to intervene and de-escalate the crisis situation and to try to avoid bringing patients to the Emergency Department.

Balanced Budget

Despite all the financial challenges we faced this past year surrounding COVID-19 (PPE expenses, increased sick time, infrastructure and maintenance, loss of revenue, and much more), we still managed to end the year with a balanced budget. Our finance team worked, and continues to work, tirelessly to identify funding opportunities for specific projects and to collect revenues from different sources.

Temporary Assisted Living Project/Transitional Beds

The Hospital has received funding from the Ministry for a trial of an Assisted Living Project. The funding was used to open 15 transitional beds at the Residence and to place select hospital and community clients who are awaiting long-term care placement and who require minimal home care and homemaking services. The program, which provides meals, personal support services and night supervision, is a great success! We are hoping that the Ministry recognizes the significant impact this has on the hospital and long-term care sectors and that they will continue to support this project beyond the trial period.

Here are a few projects and challenges that lie ahead for our Hospital team and local community partners:

Relocating Emergency Medical Services (EMS)

We are currently working with the Cochrane District Social Services Administration Board (CDSSAB) to relocate the EMS building in Kapuskasing. The EMS services are currently based at the Hospital; however, its location and space are not sufficient and don't meet the current standards. Thankfully, since the closure of the Kapuskasing Regional Doctors' Office (located adjacent to the Hospital), the EMS office moved into that space temporarily in order to allow the staff sufficient space, storage and comfort, compared to the previous all-in-one space of the Ambulance Garage. Unfortunately, the current garage does not meet the current EMS needs. We will be working with the CDSSAB to find and/or secure a permanent space for the EMS in Kapuskasing that will meet the actual criteria and standards of an ambulance base.

Hospitalist Funding

In the past years, we have been lucky to have our Hospitalist Program partially funded by the Centre de santé communautaire de Kapuskasing et région (CSCK). Thankfully, the CSCK was in a position of sharing their unused funds but that will not necessarily always be the case. It is extremely important for us to continue to work with our local partners and the Ministry to identify some long-term funding sources for this essential program.

Long-Term Care Beds

It was announced this year that Kapuskasing had not been on the list of northern towns that would be allocated new long-term care beds in Ontario. This came as some disappointing and surprising news. The Extencicare Kapuskasing's proposal was not accepted. The community partners will continue to work together to come up with a plan to ensure that additional long-term care beds are allocated to our community. As of January 2021, approximately 100 patients are on the wait list to receive a long-term care bed.

Labour Challenges

Our Human Resources team has been working hard to maintain and recruit a full labour force in all departments. The pandemic has exacerbated our efforts in finding a full complement of Registered Nurses, Registered Practical Nurses and Personal Support Workers; however, we have made great strides and have welcomed many new faces to our team and to the community.

We will continue to actively promote our hospital and offer appealing incentives which will hopefully be successful in retaining employees and recruiting new staff, but as you are aware, the competition is extremely fierce.

Anesthesia Services

We continue to work with our partners in Hearst and Cochrane to develop and implement an Alternate Payment Plan for Anesthesia services - similar to the one that was successfully developed for the Surgical services. The creation of an Anesthesia Network would provide an opportunity for more collaboration between hospitals to attract, recruit and retain anesthetists as well as to provide more seamless anesthesia coverage for the region.

Infrastructure and Renovations

The Chemotherapy Suite and Pharmacy will undergo significant renovations to meet the new provincial standards. These major expenses will thankfully be covered by the funding from an anonymous donor. However, there are many significant upgrades and maintenance in the very near future such as the Continuing Care Unit, the Surgical Suite and the Outpatient Services. These are also many important pieces of equipment that need to be replaced. Major capital investments are necessary. We estimate the annual capital budget for the next few years at approximately \$5 million/year.

Outpatient Wait Times

The wait times for rehabilitation and outpatient services continue to rise as there is an extremely high demand for services. Unfortunately, COVID necessitated the closure or reduction of capacity of the following departments: Physiotherapy, Occupational Therapy, Laboratory, Diagnostic Imaging, Cardiology, and Respiratory Therapy. As a result, the teams are still trying to catch up on the backlog while triaging the most urgent patients.

In summary, we are extremely grateful to our exceptional teams who have been amazing throughout the year. Their collaboration and contributions have been a key element in the success of our organization's many endeavors. We wish to express our sincere gratitude to our various teams: our dedicated employees, our leadership team, our group of physicians and locums, our Board Members, the Hospital Auxiliary members, the Sensenbrenner Hospital Foundation and our multiple donors, our healthcare partners and our volunteers. Once again, we have demonstrated a true commitment to our vision of working *together for a healthy community*.

Sincerely,



Gary Fortin,
Board Chair



France Dallaire
Chief Executive Officer



HEALTH CARE PARTNERS WORKING TOGETHER FOR A HEALTHY COMMUNITY

Community Support Services

i.e Flex Shuttle, Disability Resource Centre, NEOFACS, Red Cross, Aging At Home, etc.

Home and Community Care

i.e Care partners, Résidence Jody Blais, CDSAAB, NEACL, VON Clinic, etc.

Mental Health & Addictions

i.e Kap Counselling, North Cochrane Addiction Services, La Maison Arc-en-ciel, Mobile Crisis Team, etc.

Primary Care

i.e Centre de Santé, Family Health Team, Fauquier Health Centre, Locum Clinic, etc.

Specialty Care

i.e Optometry, Podiatry, Visiting Specialists, etc.

Long-Term Care

i.e Extendicare, North Centennial Manor, etc.

Emergency/ Transportation Services

i.e Ambulance Services, ORNGE, Non-Urgent Patient Transfers

Public Health

iPorcupine Health Unit

Hospital/Acute Care

i.e Sensenbrenner Hospital Outpatient Services (diagnostic, rehabilitation), Emergency Department, Acute Care, Active Care, Continuing Care



FRENCH LANGUAGE SERVICES ADVISORY COMMITTEE REPORT 2020-2021

Members of the French Language Services Advisory Committee (FLSAC) met two times during the year 2020-2021. The global pandemic and the current regulatory restrictions during the Provincial Emergency order have had an impact on the number of meetings we were able to conduct. That said, during these unprecedented times, French Language Services remain a top priority for the Committee and for Sensenbrenner Hospital.

The goals of the Committee are to raise awareness of the value of the active offer of French Health services, to help people realize the important role they can play in ensuring the provision of French Health Services and to encourage the population to use the French-language services offered at Sensenbrenner Hospital. The Committee and the Hospital have been working together to ensure best practice, and compliance with the French Language Services Act in order to remain a Designated Hospital.

We are pleased to announce that for the 55 designated positions that became vacant, 48 of them were filled with bilingual staff members. Every year, French courses are offered to employees wishing to better communicate with French-speaking clients. The Hospital continues to utilize the translation services financed by the Ministry of Health and Long-Term Care.

I would like to thank the FLSAC members for their commitment and their expertise which allow us to fulfill our mandate. This year we welcomed a new member to the committee, Mrs. Denise Hotte. The following individuals currently sit on the French Language Services Advisory Committee:

Jessica Allarie	Lizanne Hall	Denise Hotte	Denise Fortier
Carole Lessard	Madeleine Paquette	Laurette Tanguay	Madeleine Tremblay

Thank you to the members who completed their mandate throughout the year; your commitment was very much appreciated. With the support of these resources, our job is made much easier. These people are Sylvie Sylvestre and Melanie Scott.

Madeleine Tremblay

RAPPORT DU COMITÉ CONSULTATIF DES SERVICES EN FRANÇAIS 2020-2021

Au cours de l'année 2020-2021, les membres du Comité consultatif des services en français (CCSF) se sont réunis deux fois.

La pandémie mondiale et les restrictions réglementaires actuelles pendant l'état d'urgence provincial ont eu un impact sur le nombre de réunions que nous avons pu organiser. Cela dit, en ces temps sans précédent, les services en français demeurent une priorité absolue pour l'Hôpital Sensenbrenner.

Le comité vise entre autres la sensibilisation de la valeur de l'offre active des services de santé en français, à amener des gens à prendre conscience du rôle important qu'ils peuvent jouer pour assurer une offre active des services de santé en français et à encourager la population à utiliser les services en français offerts à l'Hôpital Sensenbrenner. Le comité et l'hôpital collaborent pour assurer les meilleures pratiques et le respect de la Loi sur les services en français.

Nous sommes heureux d'annoncer que pour les 55 postes désignés qui sont devenus vacants, 48 ont été comblés par un personnel bilingue. Chaque année, des cours en français sont offerts aux employés qui désirent mieux communiquer avec les clients francophones. L'hôpital continue à utiliser les services de traduction financés par le Ministère de la santé et des soins de longues durées.

Je tiens à remercier les membres du CCSF pour leur engagement et leur expertise qui nous permettent de remplir notre mandat. Cette année, nous avons accueilli un nouveau membre, Mme Denise Hotte. Présentement, les personnes suivantes siègent au Comité consultatif des services en français :

Jessica Allarie
Carole Lessard

Lizanne Hall
Madeleine Paquette

Denise Hotte
Laurette Tanguay

Denise Fortier
Madeleine Tremblay

Merci aux membres qui ont terminé leur mandat au cours de l'année; votre engagement a été très apprécié. Grâce à l'appui des personnes-ressources, notre travail est plus facile. Ce sont Sylvie Sylvestre et Melanie Scott.

Madeleine Tremblay



CHIEF OF STAF REPORT

The past year has been a struggle for everyone in the health care field. In my last annual report, I mentioned that the possibility of a second wave of the COVID-19 virus was real. Looking back, I see how naive I was - here we are today in the middle of the fourth wave of the pandemic.

The community was hit hard in January and February of this year with the outbreak of the virus at the local Extendicare Nursing Home. A significant number of residents and staff contracted the virus, and a number of residents died. Unfortunately, due to necessary public health restrictions, family members could only look in through windows from the outside while their loved ones were suffering.

In the third wave of the pandemic later in the spring of this year, the province was hit badly. Due to the overwhelming numbers of COVID-19 patients admitted to ICUs in Southern Ontario, hospitals in Northern Ontario agreed to transfer patients to their ICUs in order to ease the burden on overwhelmed hospitals in the south of the province. Physicians province-wide were told to get ready to implement a triage system, whereby admissions to ICUs would have been determined by a patient's calculated probability of surviving; there was a real possibility that there would not have been enough ICU resources to accommodate every patient. Fortunately, we weathered that part of the storm, and things eventually improved.

Locally, the medical staff has provided ongoing medical care to the community. On the surgical front, Dr. Jessica Kwapis had to take a leave of absence for medical reasons; Dr. Susan Krajewski has provided back-up surgical care, with the help of locum surgeons. Dr. Roderick Cheung continues to provide anesthesia coverage; both he and Dr. Nicolas Sylvestre provide obstetric services. Dr. Dan Boucher continues to support the community from an internal medicine perspective.

Family physicians have provided in-patient hospitalist care and local Emergency room coverage. Throughout the pandemic, family physicians have continued to provide primary care to the community through the use of both virtual and in-person appointments. With the relative improvement in the circumstances of the pandemic, we are being encouraged to see more patients in-person.

Our two family medicine residents, Dr. Elissa Laflamme and Dr. Pierre Plamondon, will finish their residency training next summer; we look forward to welcoming them to our medical staff. Dr. Miguel Proulx has started his residency last summer; he plans to eventually work as a GP/Anesthetist in the community. We again welcomed four third-year medical students from the Northern Ontario School of Medicine in September of this year; they will be studying locally throughout the year.

So, again, here we are in the fourth wave of the pandemic. With the introduction of a mass vaccine campaign and with ongoing public health measures, the community and the province as a whole seems to be doing relatively well during this phase.

We will continue to meet any further challenges as we have done in the past - with hard work and determination from all parties involved - the very competent hospital administration, the dedicated local nursing staff and the members of the local medical staff.

Sincerely,

Michael Power, M.D.

RAPPORT DU MÉDECIN-CHEF



La dernière année a été pénible pour tout le secteur des soins de santé. Dans mon dernier rapport annuel, j'avais mentionné que la possibilité d'une deuxième vague du virus de la COVID-19 était réelle. Aujourd'hui, je constate à quel point j'étais naïf à l'époque - nous voilà au beau milieu de la quatrième vague de la pandémie.

La communauté a été durement touchée en janvier et en février derniers lors de l'écllosion du virus à la maison de soins de longue durée Extendicare. En effet, beaucoup de résidents et de membres du personnel ont contracté le virus, et un certain nombre de résidents en sont décédés. Malheureusement, étant donné les restrictions de santé publique qui étaient en place, les membres de la famille ont dû se contenter de regarder par les fenêtres, de l'extérieur, pendant que leur proche souffrait.

Au cours de la troisième vague, plus tard au printemps, l'ensemble de la province a été durement frappée. À cause du nombre très élevé de patients atteints de la COVID-19 dans les unités de soins intensifs (USI) des hôpitaux du Sud ontarien, ceux du Nord ont accepté le transfert de patients dans leur USI afin d'alléger le fardeau des établissements submergés dans le sud de la province. Le gouvernement a alors demandé aux médecins de partout dans la province de se préparer à mettre en œuvre un système de triage, c'est-à-dire de déterminer les admissions à l'USI en fonction de la probabilité calculée de survie des patients. Il existait une possibilité bien réelle que les ressources d'USI n'allaient pas suffire pour accueillir tous les patients. Heureusement, nous avons réussi à traverser cette partie de la tempête, puis la situation a fini par s'améliorer.

À l'échelle locale, les médecins ont continué à fournir des soins médicaux aux gens d'ici. En ce qui a trait aux services chirurgicaux, la D^{re} Jessica Kwapis a dû prendre un congé pour des raisons médicales; c'est la D^{re} Susan Krajewski qui a assuré la relève avec l'aide de chirurgiens remplaçants. Le D^r Roderick Cheung continue à fournir des services d'anesthésie; lui et le D^r Nicolas Sylvestre s'occupent des services d'obstétrique. Enfin, le D^r Dan Boucher soutient la communauté en matière de médecine interne.

En outre, certains médecins de famille ont prodigué des soins aux patients hospitalisés en qualité d'hospitalistes en plus de donner un coup de main au Service des urgences. Depuis le début de la pandémie, les médecins de famille fournissent sans cesse des soins primaires aux gens d'ici au moyen de rendez-vous virtuels ou en personne. Grâce à l'amélioration relative de la situation de la pandémie, on nous encourage à voir de plus en plus de patients en personne.

Par ailleurs, nos deux résidents en médecine familiale, soit la D^{re} Elissa Laflamme et le D^r Pierre Plamondon, termineront leur résidence l'été prochain; nous nous réjouissons à la perspective de les accueillir au sein de notre équipe. Quant au D^r Miguel Proulx, il a commencé sa résidence l'été dernier; il prévoit ensuite travailler ici à titre de médecin de famille et anesthésiste. Encore une fois, en septembre dernier, nous avons accueilli quatre étudiants en troisième année de médecine de l'École de médecine du Nord de l'Ontario; ils poursuivront leurs études dans la région tout au long de l'année.

Bref, nous en sommes à la quatrième vague de la pandémie. Grâce au lancement de la campagne de vaccination de masse et du maintien des mesures de santé publique, notre communauté et l'ensemble de la province semblent s'en tirer assez bien.

Enfin, nous continuerons à relever les défis qui se présentent comme nous l'avons toujours fait, soit en comptant sur l'acharnement et la détermination de tous les intervenants, de l'équipe d'administration de l'hôpital des plus compétentes aux dévoués membres du personnel infirmier local en passant par les médecins locaux.

Salutations distinguées,

D^r Michael Power

AUXILIARY REPORT

Sensenbrenner Hospital Auxiliary continues to fundraise for our local hospital, although for the past year the Auxiliary has been very quiet. Due to the COVID-19 pandemic restrictions imposed, all fundraising activities had to be suspended during this period. We look forward to the restrictions being permanently lifted and getting back to normal activities.

There are 127 members, including 9 life members and 14 honorary members.

For the school year 2020-2021, three bursaries totalling \$3,000 were presented to deserving local secondary school students who are pursuing their studies in the health care field.

Christmas gifts, hand-made lap quilts and socks were presented to the residents of the Continuing Care Unit. Thank you to the staff for the distribution of the gifts.

I would like to thank all the volunteers for their hard work and dedication in making the Auxiliary successful. I would also like to thank the Sensenbrenner Hospital Administration, the Hospital Board, the staff and, Kapuskasing and surrounding areas residents for their continued support as well.

Respectfully submitted,

Wendy Guillemette

President



2020-2021 Sensenbrenner Hospital Auxiliary Executive

Wendy Guillemette - President

Marion Johnson - Vice President

Cecile Dinnissen - Treasurer

Aline Dufresne - Secretary

RAPPORT DES AUXILIAIRES

Les auxiliaires de l'Hôpital Sensenbrenner continuent d'amasser des fonds pour notre hôpital local, même si l'année qui vient de s'écouler a été plutôt tranquille. Toutes les activités de collecte de fonds ont été interrompues en raison des mesures de restriction liées à la pandémie de COVID-19. Nous attendons avec impatience la levée permanente de celles-ci et le retour aux activités normales.

Nous comptons 127 membres, y compris 9 membres à vie et 14 membres honoraires.

Pour l'année scolaire 2020-2021, nous avons décerné trois bourses totalisant 3 000 \$ à des élèves méritants d'écoles secondaires locales qui poursuivent leurs études dans le domaine des soins de santé.

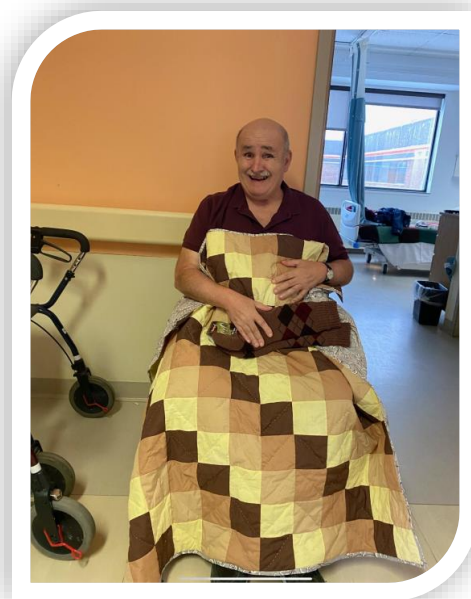
Les résidents du Service de soins continus ont reçu des cadeaux de Noël, des courtepointes et des chaussettes faites à la main. Merci au personnel pour la distribution des cadeaux.

J'aimerais exprimer ma reconnaissance envers tous les bénévoles pour leur travail et leur dévouement. C'est grâce à eux que les auxiliaires peuvent réussir. Je souhaite également remercier les membres de l'administration, du conseil et du personnel de l'Hôpital Sensenbrenner, ainsi que les gens de Kapuskasing et des environs de leur soutien continu.

Le tout respectueusement soumis,

Wendy Guillemette

Présidente



Le comité directeur de 2020-2021

Wendy Guillemette - Présidente Marion Johnson - Vice-présidente

Cécile Dinnissen - Trésorière Aline Dufresne - Secrétaire

FOUNDATION REPORT

On April 1, 2020 the Sensenbrenner Hospital Foundation was granted status as a registered charity by the Government of Canada. Our first year operating as a charity has been challenging due to the COVID-19 pandemic, but it was instrumental to the development of the Foundation. In November 2020, the Foundation hired a Coordinator, Mireille Dubosq, to help the Board with a variety of tasks, including branding, marketing & communication, fundraising and more.

The Foundation tackled two major projects during this year. The first project was the renovation of the pharmacy/chemo suite to meet government-mandated physical requirements for the pharmacy and patient safety requirements for the chemotherapy suite.

An anonymous donor donated the full amount needed to complete this project.

Sensenbrenner Hospital's request for support towards the purchase of new Mammography equipment became our second project. The hospital's equipment at the time was 2 years past its useful life and its operating hardware could no longer be supported by the vendor. In the past three years ending in March 31, 2019, the Sensenbrenner Hospital's Diagnostic Imaging department screened approximately 3,600 patients. The Foundation agreed to raise \$150,000 for this project since it is committed to the provision of breast screening services in the hospital's catchment area and its objective of keeping services local. The Mammography Project was launched in mid-November 2020.

The restrictions, lockdowns and stay-at-home orders relating to the pandemic have evidently impacted the way Foundations typically raise funds for projects. We needed to strategize fundraising efforts and to offer a variety of donation methods to accommodate donors while keeping everyone safe. The use of a Facebook page became the main channel for advertising and targeted communication. Our different approach allowed us to reach groups from different demographics and keep everyone updated electronically.

As we adapted to our realities of fundraising during a pandemic, the support from our communities has been spectacular. In December 2020, local radio station, Moose FM hosted a radiothon, and with their support, the Foundation was able to raise \$98,000 in one day.

The Foundation has since been receiving donations from all over Canada! In March 2021, we inched closer to the \$125,000 mark. We would like to thank the very generous donation of \$50,000 from the Caisse Alliance of Kapuskasing and the \$15,000 donated by Ontario Power Generation. The donations from area businesses and the general community are very much appreciated.

We also successfully held our first Charity Golf Tournament and are very close to launching a virtual 50/50 draw!

We would like to thank our board members for their commitment to the Foundation and their passion for raising funds for our local hospital. The following are the Board of Directors for the Foundation:

- Barbara Lysakowski - Secretary Treasurer
- Denis Bérubé
- Marcel Drisdale
- Chantal Boyer-Brochu
- France Dallaire



As we embark in another year as a charity, we are grateful to our donors and partners who have made our work possible. We look forward to the next year to support projects for the hospital by putting on a variety of fundraising events and activities.

With warm regards and greetings,

Gilbert Peters
Board Chair



RAPPORT DE LA FONDATION

Le 1^{er} avril 2020, la Fondation de l'Hôpital Sensenbrenner Hospital Foundation s'est vu accorder le statut d'organisme de bienfaisance enregistré par le gouvernement du Canada. Même si la première année d'activité à ce titre a été difficile en raison de la pandémie, elle a largement contribué au développement de la Fondation. D'ailleurs, en novembre 2020, la Fondation a engagé une coordonnatrice, Mireille Dubosq, pour aider le conseil d'administration à plusieurs égards, notamment en matière de création d'une image de marque, de marketing, de communication et de collecte de fonds.

Durant l'année écoulée, la Fondation a entrepris deux grands projets, dont le premier visait la rénovation de la pharmacie et de la salle de chimiothérapie. Ces travaux étaient essentiels pour satisfaire aux exigences du gouvernement sur le plan de l'aménagement dans le cas de la pharmacie et aux exigences liées à la sécurité des patients dans le cas de la salle de chimiothérapie.

Or, un donateur anonyme a versé la somme nécessaire pour couvrir le coût en entier de la réalisation de ce projet.

La demande d'aide par l'Hôpital Sensenbrenner à l'appui de l'achat d'un nouvel appareil de mammographie est devenue notre deuxième projet. À l'époque, l'appareil en place avait dépassé de deux ans sa durée de vie utile et le fournisseur ne pouvait plus faire l'entretien du matériel de fonctionnement. Au cours des trois dernières années précédant le 31 mars 2019, le personnel du Service d'imagerie diagnostique de l'Hôpital Sensenbrenner a réalisé quelque 3 600 examens. Comme l'Hôpital s'est engagé à assurer la prestation de services de dépistage du cancer du sein dans sa région et qu'il a pour objectif d'offrir aux patients des services près de chez eux, la Fondation a accepté de recueillir 150 000 \$ à l'appui de ce projet, lequel a été lancé à la mi-novembre 2020.

Évidemment, les restrictions, les confinements et les décrets ordonnant de rester à domicile liés à la pandémie ont eu une incidence sur la façon dont les fondations amassent des fonds à l'appui de projets. Nous avons dû adopter de nouvelles stratégies et offrir aux donateurs divers moyens de faire un don en veillant à protéger tout le monde. L'utilisation d'une page Facebook est devenue notre principale voie de promotion et de communication ciblée. Grâce

à cette approche, nous avons réussi à joindre différents groupes démographiques et à informer tout le monde des dernières nouvelles par voie électronique.

Tandis que nous nous sommes adaptés aux réalités du financement dans le contexte d'une pandémie, nos communautés nous ont accordé un soutien phénoménal. En décembre 2020, la station de radio locale, Moose FM, a tenu un radiothon qui a permis à la Fondation de recueillir 98 000 \$ en une seule journée.

Depuis, la Fondation reçoit des fonds de partout au Canada! En mars 2021, nous nous sommes rapprochés encore un peu plus de la marque des 125 000 \$. Nous tenons à souligner le don très généreux de 50 000 \$ de la Caisse Alliance de Kapuskasing et celui de 15 000 \$ d'Ontario Power Generation. Nous sommes aussi très reconnaissants des dons d'entreprises locales et du grand public.

Enfin, nous tenons à remercier les membres de notre conseil d'administration de leur engagement envers la Fondation et de leur passion pour le financement de notre hôpital. Il s'agit des personnes suivantes : Barbara Lysakowski, secrétaire-trésorière, ainsi que Denis Bérubé, Marcel Drisdale, Chantal Boyer-Brochu et France Dallaire.

Alors que notre organisme de bienfaisance entame une nouvelle année, nous souhaitons exprimer notre gratitude à tous les donateurs et partenaires qui ont rendu notre travail possible. Nous envisageons la prochaine année avec enthousiasme et sommes impatients d'aider l'hôpital à concrétiser ses projets en organisant toutes sortes d'activités, dont un tournoi de golf de bienfaisance, un tirage 50/50 virtuel et un autre radiothon.

Salutations distinguées,

Gilbert Peters

Président du conseil



TREASURER'S REPORT

From a financial perspective, the fiscal year ending March 31, 2021, was laborious yet prosperous for Sensenbrenner Hospital. After a full year spent in a worldwide pandemic, the finance department worked tirelessly to assure we had proper funding to fight COVID-19.

At the start of 2020-2021, Sensenbrenner Hospital was in a deficit position due to COVID-19. Many variances in the budget were COVID-19 related. An increase in human resources such as screeners, housekeepers, personal support workers, as well as increases in personal protective equipment and other factors, increased the expenditures. Despite all these unplanned expenses, our organization was still in a good position as the funding was well managed.

The North East Local Health Integration Network (NE LHIN) now called Ontario Health, provided funding of just over \$1,700,000 for the fiscal year 2020-2021 to cover expenses related to COVID-19. They also provided our Hospital with a 2% base funding increase.

Even though the pandemic was in full swing, capital projects still continued. Just over \$1,270,750 was spent on major building, building service equipment and land improvement projects. Examples of projects are: window replacement, roof upgrade, showers on Active Care, CCU room upgrades, creation of the new CCU East wing, catch basin improvements, Main Tie Breaker upgrade and Back-up Glycol system upgrade. Major equipment purchases totaled \$1,541,206. Some of the major purchases were the Cardiac Monitoring System, hospital-wide lifts, bed upgrades, and new scopes.

Funding was temporarily secured for transitional beds to increase our bed capacity by 15. This temporary funding was immediately used to open the new CCU East wing to accommodate our most vulnerable patients in the Alternate Level of Care wing (ALC). This decision was to ensure that the most vulnerable patients were protected from the transmission of COVID-19. In a matter of a few weeks, the wing was opened and was at full capacity.

Securing funding for Assisted Living apartments at the Jody Blais Residence is another funding initiative that we are very proud to have accomplished. These residents have an option to live independently with some assistance instead of occupying a hospital bed. This community project is an asset for our organizations as well as for the residents living there.

The Sensenbrenner Hospital Foundation turned one year old this year. We are happy to share that they have reached their fundraising goal of \$150,000 to help fund a new mammography machine. They have also received an anonymous donation of \$700,000 to help fund the pharmacy and chemotherapy room upgrades. We would like to express our gratitude to everyone working tirelessly to raise money so our organization can serve the region better. Stay tuned for future projected and the launching of the 50/50 draws.

We are grateful for every individual, corporation, and service organization in our catchment area who continues to support and believe in our Hospital. We wish to express our sincere thanks to everyone who volunteers their time, as well as to everyone who made charitable donations. Special mention to the Sensenbrenner Hospital Auxiliary who contributed over \$1 million since 1993.

To conclude, thank you to the members of the Finance Committee, the Board of Directors, the Administration, the Medical Staff as well as all Sensenbrenner Hospital employees. Nothing can be done alone, we can only reach our goals with the help of everyone.

Respectfully submitted,

Natalie Côté-Tremblay

RAPPORT DE LA TRÉSORIÈRE

Sur le plan financier, l'exercice qui s'est terminé le 31 mars 2021 a été à la fois pénible et prospère pour l'Hôpital Sensenbrenner. Au cours de toute une année dominée par une pandémie mondiale, le personnel du Service des finances a travaillé sans relâche pour faire en sorte que nous avions les fonds nécessaires pour lutter contre la COVID-19.

Au début de 2020-2021, l'Hôpital Sensenbrenner était en position déficitaire en raison de la COVID-19. En effet, bon nombre des écarts budgétaires étaient liés à la pandémie. La hausse au titre des dépenses était largement attribuable à l'augmentation des ressources humaines, notamment des préposés au dépistage, à l'entretien et aux services de soutien à la personne, à une augmentation des stocks d'équipement de protection individuelle ainsi qu'à d'autres facteurs. Malgré toutes ces dépenses imprévues, une gestion judicieuse des fonds a permis à notre organisme de maintenir une bonne position financière.

Le Réseau local d'intégration des services de santé (RLISS) du Nord-Est, maintenant appelé Santé Ontario, a accordé à notre hôpital un financement d'un peu plus de 1 700 000 \$ pour couvrir les dépenses liées à la COVID-19 en plus d'une hausse de 2 % du financement de base.

Même si la pandémie battait son plein, nous avons poursuivi nos projets d'immobilisation. En effet, plus de 1 270 750 \$ ont été investis dans d'importants projets liés au bâtiment, à l'équipement nécessaire à l'entretien du bâtiment et à la mise en valeur des terrains. Citons entre autres les projets suivants : remplacement des fenêtres, rénovation du toit, installation de douches dans l'Unité des soins actifs, rénovation des chambres dans l'Unité des soins continus, aménagement de la nouvelle aile Est de l'Unité des soins continus, amélioration des bassins collecteurs, modernisation du disjoncteur d'attache principal et modernisation du circuit de glycol d'appoint. Les achats de biens d'équipement importants ont totalisé 1 541 206 \$. Citons notamment l'achat du système de surveillance cardiaque, de lève-personnes, de lits et d'appareils de scopie.

Nous avons obtenu un financement temporaire pour ajouter 15 lits de soins transitoires. Ces fonds ont immédiatement servi à l'ouverture de la nouvelle aile Est de l'Unité des soins continus pour nous permettre d'accueillir les patients les plus vulnérables de l'aile destinée aux patients ayant besoin d'un autre niveau de soins (ANS). Nous voulions nous assurer de protéger les patients les plus vulnérables contre la transmission de la COVID-19. Au bout de quelques semaines seulement, l'aile était ouverte et tous les lits étaient occupés.

L'obtention de fonds à l'appui des appartements avec services d'aide à la vie autonome à la Résidence Jody Blais est une autre réalisation dont nous sommes très fiers. Les résidents ont la possibilité de vivre de façon autonome en recevant un peu d'aide plutôt que d'occuper un lit d'hôpital. Ce projet communautaire est un atout pour les organismes de la région ainsi que pour les gens qui y vivent.

Par ailleurs, la Fondation de l'Hôpital Sensenbrenner a célébré son premier anniversaire cette année. Nous sommes heureux de vous annoncer qu'elle a atteint son objectif de financement, soit de recueillir 150 000 \$ à l'appui de l'achat d'un nouvel appareil de mammographie. La Fondation a aussi reçu un don anonyme de 700 000 \$ destiné au financement des travaux de rénovation de la pharmacie et de la salle de chimiothérapie. Nous tenons à remercier sincèrement toutes les personnes qui s'emploient sans relâche à mobiliser des fonds pour que notre hôpital puisse mieux servir les gens d'ici. Restez à l'écoute pour découvrir les nouveaux projets et ne pas rater le lancement des prochains tirages 50/50.

Nous sommes reconnaissants aux personnes, aux sociétés et aux organismes de services de la région qui continuent d'appuyer notre hôpital et de croire en lui. Nous tenons également à exprimer notre sincère gratitude à tous les bénévoles qui ont donné de leur temps ainsi qu'à toutes les personnes qui ont fait un don de bienfaisance. Enfin, il nous faut reconnaître particulièrement les efforts des Auxiliaires de l'Hôpital Sensenbrenner, qui ont versé à l'hôpital plus de 1 million de dollars depuis 1993.

Pour terminer, j'aimerais remercier les membres du comité des finances, du conseil d'administration, de l'équipe de gestion et du personnel médical ainsi que tous les employés de l'Hôpital Sensenbrenner du dévouement inlassable et du travail acharné dont ils ont fait preuve tout au long de l'année. Seul, on ne peut rien accomplir; pour atteindre nos objectifs, nous avons besoin de l'aide de tous.

Le tout respectueusement soumis,

Natalie Côté-Tremblay

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INDEPENDENT AUDITOR'S REPORT ON THE SUMMARY FINANCIAL STATEMENTS

To the Board of Directors
of Sensenbrenner Hospital

Opinion

The summary financial statements, which comprise the summary statement of financial position as at March 31, 2021, the summary statement of operations and changes in net assets for the year then ended are derived from the audited financial statements of Sensenbrenner Hospital for the year ended March 31, 2021.

In our opinion, the accompanying summary financial statements are a fair summary of the audited financial statements, on the basis described in note 1.

Summary Financial Statements

The summary financial statements do not contain all the disclosures required by Canadian Public Sector Accounting Standards for Government Not-for-Profit Organizations. Reading the summary financial statements and the auditor's report thereon, therefore, is not a substitute for reading the audited financial statements of Sensenbrenner Hospital for the ended March 31, 2021.

The Audited Financial Statements and Our Report Thereon

We expressed an unmodified audit opinion on the audited financial statements in our report dated September 2, 2021.

Management's Responsibility for the Summary Financial Statements

Management is responsible for the preparation of the summary financial statements on the basis described in note 1.

Auditor's Responsibility

Our responsibility is to express an opinion on whether the summary financial statements are a fair summary of the audited financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standards (CAS) 810, *Engagements to Report on Summary Financial Statements*.

Baker Tilly HKC

Chartered Professional Accountants
Licenced Public Accountants
September 22, 2021

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SENSENBRENNER HOSPITAL

SUMMARY STATEMENT OF OPERATIONS

YEAR ENDED MARCH 31, 2021

	2020 Budget (Unaudited)	2021 Actual	2020 Actual
REVENUES			
Patient services	\$ 20,556,456	\$ 25,503,288	\$ 20,709,659
Other recoveries	1,032,569	1,115,830	807,731
Investment income	170,000	132,309	197,731
Gain on disposition of capital assets	-	150,284	-
Amortization of deferred capital contributions - equipment	222,149	208,894	74,498
Other votes	1,788,801	1,726,592	1,775,958
	<u>23,769,975</u>	<u>28,837,197</u>	<u>23,565,577</u>
EXPENSES			
Salaries and wages	10,811,224	12,326,963	11,316,485
Employee benefits	3,698,879	4,815,409	3,628,463
Medical staff remuneration	968,203	1,202,991	1,018,338
Supplies and other expenses	4,425,937	6,246,309	4,501,066
Medical and surgical	416,075	586,599	417,362
Drugs and medicine	648,095	598,740	610,831
Amortization of property and equipment	870,090	756,249	559,252
Loss on disposition of investments	-	-	27,244
Loss on disposition of capital assets	-	-	897
Other votes	1,788,801	1,726,592	1,775,958
	<u>23,627,304</u>	<u>28,259,852</u>	<u>23,855,896</u>
EXCESS OF REVENUE OVER EXPENSES (EXPENSES OVER REVENUES) BEFORE OTHER ITEM AND AMORTIZATION OF BUILDINGS	142,671	577,345	(290,319)
OTHER ITEM			
Electricity rebate	-	-	268,557
EXCESS OF REVENUES OVER EXPENSES (EXPENSES OVER REVENUES) BEFORE AMORTIZATION OF BUILDINGS	142,671	577,345	(21,762)
Amortization of deferred capital contributions - buildings	625,653	665,532	630,306
Amortization of capital assets - buildings	(768,324)	(736,576)	(721,665)
	<u>(142,671)</u>	<u>(71,044)</u>	<u>(91,359)</u>
EXCESS OF REVENUES OVER EXPENSES (EXPENSES OVER REVENUES)	\$ -	\$ 506,301	\$ (113,121)

SENSENBRENNER HOSPITAL

SUMMARY STATEMENT OF CHANGES IN NET ASSETS

YEAR ENDED MARCH 31, 2021

	Invested in Capital Assets	Unrestricted	Total 2021	Total 2020
BALANCE, BEGINNING OF YEAR	\$ 4,646,364	\$ 2,564,153	\$ 7,210,517	\$ 7,323,638
EXCESS OF EXPENSES OVER REVENUES	-	506,301	506,301	(113,121)
NET CHANGE IN INVESTED IN CAPITAL ASSETS	<u>781,568</u>	<u>(781,568)</u>	-	-
BALANCE, END OF YEAR	\$ 5,427,932	\$ 2,288,886	\$ 7,716,818	\$ 7,210,517

SENSENBRENNER HOSPITAL

SUMMARY STATEMENT OF FINANCIAL POSITION

MARCH 31, 2021

	2021	2020
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$ 1,810,409	\$ 771,258
Accounts receivable	2,659,841	991,091
Short-term investments	-	781,405
Inventories	491,014	456,492
Prepaid expenses	164,642	150,899
Current portion of long-term receivables	181,250	125,000
	<u>5,307,156</u>	<u>3,276,145</u>
LONG-TERM RECEIVABLES	375,000	300,000
INVESTMENTS	2,749,113	4,262,243
CAPITAL ASSETS	12,832,584	12,011,974
OTHER ASSETS	60,285	60,285
	<u>\$ 21,324,138</u>	<u>\$ 19,910,647</u>
LIABILITIES		
CURRENT LIABILITIES		
Accounts payable and accrued liabilities	\$ 3,568,594	\$ 2,783,627
Current portion of capital lease obligation	20,704	19,599
Current portion of post-retirement benefits payable	177,250	180,291
	<u>3,766,548</u>	<u>2,983,517</u>
CAPITAL LEASE OBLIGATION	106,342	127,046
DEFERRED CONTRIBUTIONS	546,626	462,269
DEFERRED CAPITAL CONTRIBUTIONS	7,277,606	7,218,965
POST-EMPLOYMENT BENEFITS PAYABLE	1,910,198	1,908,333
	<u>13,607,320</u>	<u>12,700,130</u>
NET ASSETS		
INVESTED IN CAPITAL ASSETS	5,427,932	4,646,364
UNRESTRICTED	2,288,886	2,564,153
	<u>7,716,818</u>	<u>7,210,517</u>
	<u>\$ 21,324,138</u>	<u>\$ 19,910,647</u>

SENSENBRENNER HOSPITAL

NOTE TO SUMMARY FINANCIAL STATEMENTS

MARCH 31, 2021

1. BASIS OF PRESENTATION

The accompanying summary financial statements have been prepared with the same accounting standards as the audited financial statements of Sensenbrenner Hospital for the year ended March 31, 2021.

The summary financial statements do not contain all the disclosure required by Canadian Public Sector Accounting Standards for Government Not-for-Profit Organizations. A summary statement of cash flows and the notes to the financial statements are not included.

The complete set of financial statements and the auditor's report can be obtained from the management of Sensenbrenner Hospital.

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RAPPORT DE L'AUDITEUR INDÉPENDANT SUR LES ÉTATS FINANCIERS RÉSUMÉS

Au conseil d'administration
de l'Hôpital Sensenbrenner

Opinion

Les états financiers résumés, qui comprennent l'état de la situation financière résumé au 31 mars 2021 et l'état des résultats résumé et l'état de l'évolution de l'actif net résumé pour l'exercice terminée à cette date sont tirés des états financiers audités de l'Hôpital Sensenbrenner pour l'exercice terminé le 31 mars 2021.

À notre avis, les états financiers résumés ci-joints constituent un résumé fidèle des états financiers audités, conformément selon la base des critères décrits dans la note 1.

États financiers résumés

Les états financiers résumés ne contiennent pas toutes les informations requises par les Normes comptables canadiennes pour les organismes sans but lucratif du secteur public. La lecture des états financiers résumés et du rapport de l'auditeur sur ceux-ci ne saurait par conséquent se substituer à la lecture des états financiers audités de l'Hôpital Sensenbrenner pour l'exercice terminé le 31 mars 2021.

Les états financiers audités et notre rapport sur ces états

Nous avons exprimé une opinion non modifiée sur les états financiers audités dans notre rapport daté du 2 septembre 2021.

Responsabilités de la direction et des responsables de la gouvernance à l'égard des états financiers résumés

La direction est responsable de la présentation des états financiers résumés sur la base des critères décrits dans la note 1.

Responsabilité de l'auditeur

Notre responsabilité consiste à exprimer une opinion indiquant si les états financiers résumés constituent un résumé fidèle des états financiers audités, sur la base des procédures que nous avons mises en oeuvre conformément à la Norme canadienne d'audit (NCA) 810, *Mission visant la délivrance d'un rapport sur des états financiers résumés*.



Comptables professionnels agréés
Comptables publics licenciés
Le 22 septembre 2021

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HÔPITAL SENSENBRENNER

ÉTAT DES RÉSULTATS RÉSUMÉ

EXERCICE TERMINÉ LE 31 MARS 2021

	2021	2021	2020
	Budget	Réel	Réel
	(Non-audité)		
REVENUS			
Services des patients	\$ 20,556,456	\$ 25,503,288	\$ 20,709,659
Autres recouvrements	1,032,569	1,115,830	807,731
Revenu de placements	170,000	132,309	197,731
Gain sur disposition d'immobilisations	-	150,284	-
Amortissement des apports reportés afférents aux équipements	222,149	208,894	74,498
Autres subventions	1,788,801	1,726,592	1,775,958
	<u>23,769,975</u>	<u>28,837,197</u>	<u>23,565,577</u>
DÉPENSES			
Salaires	10,811,224	12,326,963	11,316,485
Avantages sociaux	3,698,879	4,815,409	3,628,463
Rémunération du personnel médical	968,203	1,202,991	1,018,338
Fournitures et autres dépenses	4,425,937	6,246,309	4,501,066
Fournitures médicales et chirurgicales	416,075	586,599	417,362
Médicaments	648,095	598,740	610,831
Amortissement d'équipements	870,090	756,249	559,252
Perte sur cessions de placements	-	-	27,244
Perte sur cessions d'immobilisations	-	-	897
Autres subventions	1,788,801	1,726,592	1,775,958
	<u>23,627,304</u>	<u>28,259,852</u>	<u>23,855,896</u>
EXCÉDENT DES REVENUS SUR LES DÉPENSES (DÉPENSES SUR LES REVENUS) AVANT AUTRES ET L'AMORTISSEMENT DES BÂTIMENTS			
	142,671	577,345	(290,319)
AUTRES			
Rabais d'électricité	-	-	268,557
EXCÉDENT DES REVENUS SUR LES DÉPENSES (DÉPENSES SUR LES REVENUS) AVANT L'AMORTISSEMENT DES BÂTIMENTS			
	<u>142,671</u>	<u>577,345</u>	<u>(21,762)</u>
Amortissement des apports reportés afférents aux bâtiments	625,653	665,532	630,306
Amortissement des bâtiments	(768,324)	(736,576)	(721,665)
	<u>(142,671)</u>	<u>(71,044)</u>	<u>(91,359)</u>
EXCÉDENT DES REVENUES SUR LES DÉPENSES (DÉPENSES SUR LES REVENUS) \$			
	-	\$ 506,301	\$ (113,121)

HÔPITAL SENSENBRENNER

ÉTAT DE L'ÉVOLUTION DE L'ACTIF NET RÉSUMÉ

EXERCICE TERMINÉ LE 31 MARS 2021

	Affecté aux immobilisations	Non-affecté	Total 2021	Total 2020
SOLDE, DÉBUT DE L'EXERCICE	\$ 4,646,364	\$ 2,564,153	\$ 7,210,517	\$ 7,323,638
EXCÉDENT DES DÉPENSES SUR LES REVENUS	-	506,301	506,301	(113,121)
CHANGEMENT DE LA RÉSERVE POUR IMMOBILISATIONS	<u>781,568</u>	<u>(781,568)</u>	-	-
SOLDE, FIN DE L'EXERCICE	<u>\$ 5,427,932</u>	<u>\$ 2,288,886</u>	<u>\$ 7,716,818</u>	<u>\$ 7,210,517</u>

HÔPITAL SENSENBRENNER

ÉTAT DE LA SITUATION FINANCIÈRE RÉSUMÉ

31 MARS 2021

	2021	2020
ACTIF		
ACTIF À COURT TERME		
Encaisse	\$ 1,810,409	\$ 771,258
Comptes à recevoir	2,659,841	991,091
Placements à court-terme	-	781,405
Inventaire	491,014	456,492
Frais payés d'avance	164,642	150,899
Portion courante des comptes à recevoir à long-terme	181,250	125,000
	<u>5,307,156</u>	<u>3,276,145</u>
COMPTES À RECEVOIR À LONG-TERME	375,000	300,000
PLACEMENTS	2,749,113	4,262,243
IMMOBILISATIONS	12,832,584	12,011,974
AUTRES ACTIFS	60,285	60,285
	<u>\$ 21,324,138</u>	<u>\$ 19,910,647</u>
PASSIF		
PASSIF À COURT TERME		
Comptes à payer et frais courus	\$ 3,568,594	\$ 2,783,627
Portion courante de l'obligation de location-acquisition	20,704	19,599
Portion courante des avantages sociaux futurs	177,250	180,291
	<u>3,766,548</u>	<u>2,983,517</u>
OBLIGATION DE LOCATION-ACQUISITION	106,342	127,046
FINANCEMENT REPORTÉ	546,626	462,269
APPORTS REPORTÉS AFFÉRENTS AUX		
IMMOBILISATIONS	7,277,606	7,218,965
AVANTAGES SOCIAUX FUTURS À PAYER	1,910,198	1,908,333
	<u>13,607,320</u>	<u>12,700,130</u>
ACTIF NET		
AFFECTÉ AUX IMMOBILISATIONS	5,427,932	4,646,364
NON-AFFECTÉ	2,288,886	2,564,153
	<u>7,716,818</u>	<u>7,210,517</u>
	<u>\$ 21,324,138</u>	<u>\$ 19,910,647</u>

HÔPITAL SENSENBRENNER

NOTE AFFÉRENTE AUX ÉTATS FINANCIERS RÉSUMÉS

31 MARS 2021

1. BASE DE PRÉSENTATION

Ces états financiers ont été préparés selon les méthodes comptables et les modalités de calcul identiques à celles utilisées dans les états financiers audités de l'Hôpital Sensenbrenner pour l'exercice terminé le 31 mars 2021.

Ces états financiers résumés ne contiennent pas toutes les informations requises par les Normes comptables canadiennes pour les organismes sans but lucratif du secteur public. L'état résumé des flux de trésorerie ainsi que les notes complémentaires requises ne sont pas incluses.

Les membres peuvent obtenir un exemplaire des états financiers complets accompagnés du rapport de l'auditeur indépendant à l'Hôpital Sensenbrenner.



SENEBRENNER HOSPITAL

NOMINATING COMMITTEE REPORT

ANNUAL MEETING – OCTOBER 28, 2021

On May 5, 2021 via email, the Board of Directors accepted the following recommendation from the Nominating Committee:

“THAT THE NAMES OF THE FOLLOWING CANDIDATES BE SUBMITTED TO THE MEMBERSHIP AS FULLY QUALIFIED TO RUN FOR ELECTION AS TRUSTEES OF THE BOARD AT THE ANNUAL GENERAL MEETING OF THE SENEBRENNER HOSPITAL CORPORATION ON JUNE 16, 2021: MR. BOB DAGGETT, MRS. KIM BOUCHER-RAYMOND AND MRS. DOMINIQUE TREMBLAY.”

Update: On September 27, Mrs. Boucher-Raymond withdrew her candidacy due to a demanding work schedule.

As there are two (2) candidates for the two (2) openings on the Board of Directors, an election is not required.

Respectfully submitted,

Barbara Lysakowski

Chair, Nominating Committee



L'HÔPITAL SENEBRENNER

RAPPORT DU COMITÉ DE MISE EN CANDIDATURE

RÉUNION ANNUELLE — LE 28 OCTOBRE

Le Conseil d'administration a accepté, par courriel le 5 mai 2021, la recommandation suivante du Comité de mise en candidature.

« M. BOB DAGGETT, MME. KIM BOUCHER-RAYMOND ET MME. DOMINIQUE TREMBLAY, AYANT TOUTES LES COMPÉTENCES REQUISES D'UN MEMBRE DU CONSEIL D'ADMINISTRATION, IL EST RECOMMANDÉ QUE LEUR CANDIDATURE SOIT PRÉSENTÉE AUX MEMBRES À LA RÉUNION ANNUELLE DE LA CORPORATION DE L'HÔPITAL DE SENEBRENNER LE 16 JUIN 2021. »

Mise à jour : le 27 septembre 2021, Mme Boucher-Raymond a retiré sa candidature en raison d'un horaire très chargé.

Donc, comme il y a deux (2) candidats pour deux (2) postes à pourvoir au conseil d'administration, aucune élection d'est requise.

Le tout, respectueusement soumis par

Barbara Lysakowski

Présidente, Comité de mise en candidature



2020-2021

Board of Directors
Conseil d'administration

Gary Fortin

Chair
Président

Kelly Vos

Vice Chair
Vice-présidente

Natalie Côté-Tremblay

Treasurer
Trésorière

Marcel Drisdale

Secretary
Secrétaire

Denis Bérubé

Roderick Cheung, MD

Bob Daggett

Wendy Guillemette

Carole Lessard

Sébastien Lessard

Michael Power, MD

Madeleine Tremblay

Medical Staff
Personnel médical

Michael Power, MD

Chief of Medical Staff
Médecin-chef

Roderick Cheung, MD

President of Medical Staff
Président du Personnel médical

Daniel Boucher, MD

Vice President
Vice-Président

Julie Boucher, MD

Secretary – Treasurer
Secrétaire – Trésorière

Vanessa Audet, MD

Crystal Boulianne, MD

Susan Krajewski, MD

Jessica Kwapis, MD

Danelle Martin, MD

Chris Meilleur, MD

Nicolas Sylvestre, MD

Senior Management Team

Équipe dirigeante

France Dallaire

Chief Executive Officer
Directrice générale

Chantal Boyer-Brochu

Chief Financial Officer
Directrice des finances

Pierrette Le Saux

(succeeded by Lucie Lamontagne)

Chief Nursing Officer
Directrice des soins infirmiers

Jessica Allarie

Chief Human Resources Officer
Directrice des ressources humaines

Jeanette Vaillancourt

Chief Information Officer
Directrice des systèmes d'information

Managers

Chefs de service

Julie Culverhouse

Material Management, Plant & Maintenance
Gestion du matériel, Installations matérielles

Stéphanie Guindon

Occupational Health Services, MDRD, Infection Control
Services de santé au travail, Distribution des fournitures médicales, Lutte contre les infections

Lise Kozlovich

(succeeded by Allison Isaac)

Home & Community Care, OTN, Specialty & Locum Clinics
Soins de santé communautaires et à domicile, Soins spécialisés et des Médecins suppléants, Télémédecine

Lucie Lamontagne

Position to be filled → Poste à combler
Bloc opératoire, Service des soins aigus, Urgence

Denise Paré

Physiotherapy, Occupational Therapy
Physiothérapie, Ergothérapie

Anne-Marie Popadynetz

(succeeded by Lise Kozlovich)

Continuing Care | *Service des soins continus*

Fred Potvin

Ambulance | *Service d'ambulance*

Sabina Reckzine

Central Admitting, Health Records, Communications
Admissions, Archives médicales, Communications

Ralph Schmidt

(succeeded by Marc-André Gravel)

Pharmacy | *Pharmacie*

Kelsey Shannon

(succeeded by Janelle Martin Edwards)

Active Care | *Service des soins actifs*

Susan Smith

Respiratory Therapy and ECG, Laboratory Services, Diagnostic Imaging
Thérapie respiratoire et ECG, Laboratoire, Imagerie médicale