



NORTHERN HEALTH  
FOUNDATION

# ANNUAL REPORT 2020

For the fiscal year ended December 31, 2020

## BOARD OF DIRECTORS – 2020

The Northern Health Foundation’s (“NHF”) Directors for the 2020 fiscal year were:

Carrie Atkinson, The Pas, MB	Susan Lambert, The Pas, MB
Douglas Lauvstad, The Pas, MB	Brent Lethbridge, Flin Flon, MB
Christopher Matechuk, Thompson, MB	Scott Hamel, Flin Flon, MB
Margot Gray, Flin Flon, MB	Anthony McInnis, Thompson, MB
Helga Bryant, Flin Flon, MB	Brian Duncalfe, The Pas, MB
Twyla Storey, Flin Flon, MB	

The 2020 Board of Directors extends a huge thank you to all the communities for the outstanding support we received throughout this fiscal year. The mission of the NHF is to be an independent agency whose purpose is to receive and maintain funds to apply to meeting the needs of the Northern Health Region. The Foundation relies on donations from individuals, organizations and businesses as well as from monies raised during events and through community fundraising initiatives. These donations help us fund a variety of purchases, programs and projects for all who are served by the Northern Health Region.

The support and trust we receive from our donors are our greatest asset. Thank you for allowing us the privilege of managing your gifts to improve patient care in the Northern Health Region.

## FINANCIAL STATEMENTS

The financial statements for the year ending December 31, 2020 were approved by the Board and are attached to this report.

## WHAT HAPPENED IN 2020?

- With the pandemic and the various, changing restrictions throughout the year, not much happened with fundraising and promoting for the Foundation.
- Hiring of a part time administrative assistant who began in December.
- Continued work on recruitment of new board members.

## LOOKING FORWARD- WHAT ARE OUR PLANS FOR 2021?

The NHF will be:

- Increasing fundraising opportunities.
- Increasing their attention to seeking new Board Members to sit on the Northern Health Foundation Board of Directors.
- Support the needs of the patients and staff in the Northern Health Region through increased attention to matching donations with needs of clinical areas through enhanced processes in collaboration with leadership of the Northern Health Region.

**THE NORTHERN HEALTH FOUNDATION**  
**FINANCIAL STATEMENTS**  
**YEAR ENDED DECEMBER 31, 2020**

**THE NORTHERN HEALTH FOUNDATION**

**YEAR ENDED DECEMBER 31, 2020**

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# KENDALL & PANDYA

Chartered Professional Accountants

Partners: David Kendall, FCPA, FCA\*  
Manisha Pandya, CPA, CA\*  
\* Operating as professional corporations

## INDEPENDENT AUDITOR'S REPORT

To the Directors of The Northern Health Foundation

### Report on the Financial Statements

#### *Opinion*

We have audited the accompanying financial statements of The Northern Health Foundation, which comprise the statement of financial position as at December 31, 2020, and the statements of operations and changes in net assets and cash flows for the year then ended and a summary of significant accounting policies and other explanatory information.

In our opinion, the financial statements present fairly, in all material respects, the financial position of The Northern Health Foundation as at December 31, 2020 and its operations 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 The Northern Health Foundation in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities with the these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

#### *Management's Responsibility for the Financial Statements*

Management is responsible for the preparation and fair presentation of these 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 The Northern Health Foundation'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 The Northern Health Foundation or to cease operations, or has no realistic alternative to do so.

Those charged with governance are responsible for overseeing the The Northern Health Foundation's financial reporting process.

#### *Auditors' Responsibility 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 aggregate, they could be expected to influence the economic decisions of users taken on the basis of these financial statements.

Flin Flon & Thompson, MB

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As part of an audit in accordance with Canadian 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 The Northern Health Foundation'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 The Northern Health Foundation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our audit report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause The Northern Health Foundation 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 underlying transactions and events in a manner that achieves fair presentation.

We communicated with those charged with governance regarding, amount other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Flin Flon, Manitoba  
May 26, 2021

  
KENDALL & PANDYA  
CHARTERED PROFESSIONAL ACCOUNTANTS

# THE NORTHERN HEALTH FOUNDATION

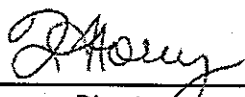
## Statement of Financial Position


As at December 31, 2020

(Unaudited)

		2020	2019
<b>ASSETS</b>			
<b>Current Assets</b>			
Cash and short term investments		\$785,265	\$659,284
Accounts receivable			\$57,656
<b>Total Assets</b>		<b>\$785,265</b>	<b>\$716,940</b>
<b>LIABILITIES</b>			
<b>Current Liabilities</b>			
Accounts payable & accrued liabilities		\$45,653	\$0
<b>NET ASSETS</b>			
Restricted funds:	Flin Flon	\$92,443	\$90,091
	The Pas	\$61,101	\$60,075
	Thompson	\$262,197	\$263,914
	Other communities	\$37,037	\$33,595
Unrestricted funds	General	\$286,834	\$269,265
		<u>\$739,612</u>	<u>\$716,940</u>
<b>Total Liabilities and Equity</b>		<b>\$785,265</b>	<b>\$716,940</b>

Approved by the Board:

  
 \_\_\_\_\_  
 Director

  
 \_\_\_\_\_  
 Director

\_\_\_\_\_  
 May 26, 2021  
 Date

\_\_\_\_\_  
 May 26, 2021  
 Date



# THE NORTHERN HEALTH FOUNDATION

## Statement of Operations

For the Fiscal Year Ending December 31, 2020

(Unaudited)

		2020	2019
<b>REVENUE</b>			
Donations received:	Flin Flon	\$221,280	\$294,368
	The Pas	\$20,589	\$61,911
	Thompson	\$82,856	\$283,753
	Other Communities	\$7,260	\$33,595
	General	\$579	\$243,934
Realized capital gains apportioned to income			\$0
Investment income		\$37,887	\$7,050
<b>TOTAL REVENUE</b>		<b>\$370,450</b>	<b>\$924,611</b>
<b>EXPENDITURES</b>			
<b>Grants</b>			
Northern Health Region:	Flin Flon	\$218,928	\$204,278
	The Pas	\$19,563	\$1,837
	Thompson	\$84,572	\$19,838
	Other Communities	\$3,818	\$0
<b>Total Grants</b>		<b>\$326,881</b>	<b>\$225,952</b>
Administration and other expenses		\$20,897	\$4,297
<b>TOTAL EXPENDITURES</b>		<b>\$347,778</b>	<b>\$230,249</b>
<b>EXCESS OF REVENUE OVER EXPENDITURES</b>		<b>\$22,672</b>	<b>\$694,362</b>

**THE NORTHERN HEALTH FOUNDATION**

**Statement of Changes in Net Assets**

For the Fiscal Year Ending December 31, 2020

	Restricted Funds				Unrestricted Funds		(Unaudited)
	Flin Flon	The Pas	Thompson	Other Communities	General	2020	2019
Beginning Balance	\$90,091	\$60,075	\$263,914	\$33,595	\$269,265	\$716,940	\$22,578
Surplus (Deficit)	2,353	1,026	(1,717)	3,441	17,569	22,672	694,362
<b>Ending balance</b>	<b>\$92,443</b>	<b>\$61,101</b>	<b>\$262,197</b>	<b>\$37,037</b>	<b>\$286,834</b>	<b>\$739,612</b>	<b>\$716,940</b>

# THE NORTHERN HEALTH FOUNDATION

## Statement of Cash Flow

For the Fiscal Year Ending December 31, 2020

	(Unaudited)	
	2020	2019
<b>OPERATING ACTIVITIES</b>		
Excess of revenue over expenditures	\$22,672	\$694,362
Changes in non-cash working capital items:		
Receivables	\$57,656	-\$57,656
Liabilities	\$45,653	-\$1,000
Grant commitments	\$0	\$0
	<u>\$125,981</u>	<u>\$635,706</u>
<b>OTHER ACTIVITIES</b>	\$0	\$0
<b>NET INCREASE IN CASH POSITION</b>	\$125,981	\$635,706
<b>CASH AND SHORT-TERM INVESTMENTS, BEGINNING OF YEAR</b>	<u>\$659,284</u>	<u>\$23,578</u>
<b>CASH AND SHORT-TERM INVESTMENTS, END OF YEAR</b>	<u>\$785,265</u>	<u>\$659,284</u>

Cash and cash equivalents consist of cash on hand and balances with banks, and investments in money market instruments. Cash and cash equivalents included in the cash flow statement comprise the following balance sheet amounts:

Cash	<u>\$785,265</u>	<u>\$659,284</u>
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# THE NORTHERN HEALTH FOUNDATION

## NOTES TO FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2020

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### 1. NATURE OF ORGANIZATION

The foundation is a charitable organization of volunteers dedicated to health services and betterment, in the Northern Manitoba region. The foundation is a charitable organization for income tax purposes.

### 2. SIGNIFICANT ACCOUNTING POLICIES

#### REVENUE RECOGNITION

The organization recognizes its receipts of revenue when received or receivable if the amount to be received can be reasonably estimated and collection if reasonably assured. Investment income is recognized as revenue when earned.

#### CAPITAL ASSETS

The organization does not own any capital assets. Minor office equipment used in the operation has a limited useful life of one year and is written off as an expense in the year of acquisition.

#### FINANCIAL INSTRUMENTS

i. The organization initially measures its financial assets and liabilities at fair value adjusted by, in the use of a financial instrument that will not be measured subsequently at fair value, the amount of transaction costs directly attributable to the instrument.

The organization subsequently measures all its financial assets and liabilities at amortized cost, except for investments in equity instruments that are quoted in an active market, which are measured at fair value. Changes in fair value are recognized in the statements of operations in the period incurred.

Financial assets measured at amortized cost include cash and term deposits.

Financial liabilities measured at amortized cost include accounts payable and accrued liabilities.

#### ii. Impairment

At the end of each reporting period The Northern Health Foundation assesses whether there are any indications that a financial asset measured at amortized cost may be impaired. Objective evidence of impairment includes observable data that come to the attention of the organization, including but not limited to the following events: significant financial difficulty of the issuer; a breach of contract such as a default or delinquency in interest or principal payments or bankruptcy or other financial reorganization proceedings.

When there is an indication of impairment, the organization determines whether a significant adverse change has occurred during the period in the expected timing or amount of future cash flows from the financial asset.

When the organization identifies a significant adverse change in the expected timing or amount of future cash flows from a financial asset, it reduces the carrying amount of the asset to the highest of the following:

i) the present value of the cash flow expected to be generated by holding the asset discounted using

# THE NORTHERN HEALTH FOUNDATION

## NOTES TO FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2020

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- a current market rate of interest appropriate to the asset,
- ii) the amount that could be realized by selling the asset at the statement of financial position date and
- iii) the amount the organization expects to realize by exercising its rights to any collateral held to secure repayment of the asset net of all necessary to exercise those rights.

The carrying amount of the asset is reduced directly or through the use of an allowance amount. The amount of the reduction is recognized as an impairment loss in the statement of operations.

When the extent of impairment of a previously written-down asset decreases and the decrease can be related to an event occurring after the impairment was recognized, the previously recognized impairment loss is reversed to the extent of the improvement directly or by adjusting the allowance account. The amount of the reversal is recognized in the statements of operations in the period the reversal occurs.

### MANAGEMENT ESTIMATES

The preparation of the financial statements in conformity with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. These estimates are reviewed periodically, and, as adjustments become necessary, they are reported in earnings in the period in which they become known.

### 3. COMPARATIVE FIGURES

The prior period figures are unaudited.

### 4. FINANCIAL INSTRUMENTS

The organization's financial instruments consist of cash, term deposits and accrued liabilities.

Fair value of financial instruments

The fair value of cash, term deposits and accrued liabilities approximate their carrying value due to their nature or capacity for prompt liquidation.

Currency, interest rate and market risk

The organization is exposed to currency risk, interest rate risk, and market risk. Currency risk refers to the risk that the fair value of a financial instrument will fluctuate due to changes in foreign exchange rates. The organization is not exposed to currency risk as it does not conduct in or hold any foreign currency. Interest rate risk refers to the risk that the fair value of a financial instrument will fluctuate due to changes in market interest rates. The organization does not hold any interest bearing liabilities. Lastly, market risk refers to the risk that the fair value of a financial instrument will fluctuate because of changes in market prices whether those changes are caused by factors specific to the individual instrument or its issuer or factors affecting all instruments traded in the market. The organization is not exposed to market risk because the mutual funds held are guaranteed.

Credit risk

Credit risk is the risk that one party to a financial instrument will fail to discharge an obligation and

# THE NORTHERN HEALTH FOUNDATION

## NOTES TO FINANCIAL STATEMENTS

YEAR ENDED DECEMBER 31, 2020

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cause the other party to incur a financial loss or if there is a concentration of transactions carried out with the same party. The organization is currently not in any position where related parties are involved or any other such instances where they are exposed to credit risk.

### Liquidity risk

Liquidity risk is the risk that an entity will encounter difficulty in meeting a demand for cash or fund its obligations as they come due or liquidate assets in a timely manner at a reasonable price. At this time, the organization has more than adequate current assets to cover its current liabilities, therefore liquidity risk is minimal.

### Other price risk

Other price risk includes the risk that future cash flows associated with a monetary financial instrument will fluctuate in amount. Given the organization's financial instruments are primarily short term in nature, other price risk is low.