

BOARD OF DIRECTORS MEETING OPEN SESSION

Thursday, October 30, 2025 5:30 pm – La Verendrye General Hospital / Webex

AGENDA

Item	Description								
1.	Call to Order – 5:30 pm – Indigenous Acknowledgment & Reading of the Mission Statement								
	1.1 Quorum								
	1.2 Conflict of Interest and Duty								
2.	Consent Agenda								
	2.1 Board Minutes – September 25, 2025 * Pg 4								
	2.2 Board Chair & Senior Leadership General Report – D. Clifford, H. Gauthier, D. Harris, C. Larson, J. Ogden, Dr. L. Keffer * Pg 8								
	2.3 Governance Committee Report – B. Norton								
	2.4 Audit & Resources Committee Report – B. Norton * Pg 10								
	2.5 Quality Safety Risk Committee Report – M. Kitzul								
	2.6 Auxiliary Reports * Pg 13								
3.	Motion to Approve the Agenda								
4.	Patient / Resident Safety Moment								
5.	Business Arising - None								
6.	New Business - None								
7.	Opportunity for Public Participation								
8.	Move to In-Camera								
9.	Other Motions/Business								
10.	Date and Location of Next Meeting: November 27, 2025								
11.	Termination								

^{*} denotes attached in board package / **denotes circulated under separate cover / *** denotes previously distributed



BOARD OF DIRECTORS MEETING ANTICIPATED MOTIONS – OPEN SESSION

Thursday, October 30, 2025

3.	Motion to Approve the Agenda	THAT the RHC Board of Directors approve the Agenda as circulated/amended
8.	Move to In-Camera	THAT the RHC Board of Directors move to in camera session at (time)
9.	Other Motions/Business	
11.	Termination	THAT the RHC Board of Directors meeting be terminated at (time)

Indigenous Acknowledgment:

Riverside acknowledges that the place we are meeting today is on the traditional lands of the Anishinaabeg people, within the lands of Treaty 3 Territory, as well as the home to many Métis.

VISION

Caring, Together

MISSION

Improving The Health of Our Communities

VALUES

Progressive • Integrity • Caring • Accountable

STRATEGIC PILLARS

ONE RIVERSIDE

Supporting a consistent and enabling organizational culture

INVESTING IN THE PEOPLE WHO SERVE

Creating a plan to strategically leverage human resources

TOMORROW'S RIVERSIDE TODAY

Making investments today, to support Riverside tomorrow

STRIVING TO EXCEL IN EQUITY, DIVERSITY & INCLUSION

We will support EDI in all we do



RIVERSIDE HEALTH CARE FACILITIES INC. MINUTES OPEN SESSION

Date of Meeting: September 25, 2025 **Time of Meeting:** 5:30 pm

Location of Meeting: Webex / LVGH Board Room

PRESENT: H. Gauthier M. Kitzul* Dr. L. Keffer D. Clifford

K. Lampi E. Bodnar Dr. K. Arnesen D. Pierroz
A. Beazley* D. Loney* M. Jolicoeur *via Webex

STAFF: B.Booth, C. Larson, D. Harris, J. Ogden

REGRETS: B. Norton

GUESTS: C. Vandenbrand, S. LaBelle, L. Balanko-Dickson*, K. Pierroz*

1. CALL TO ORDER:

D. Clifford called the meeting to order at 5:30 pm. B. Booth recorded the minutes of this meeting. D. Clifford read the Indigenous Acknowledgment and the Mission Statement. D. Clifford welcomed everyone and reminded all of the virtual meeting etiquette. Round table introductions took place.

1.1 Quorum

D. Clifford shared there was 1 regret. Quorum was present.

1.2 Conflict of Interest

No conflict of interest or duty was declared.

2. CONSENT AGENDA

The Chair asked if there were any items to be removed from the consent agenda to be discussed individually. There were no items removed.

3. MOTION TO APPROVE THE AGENDA:

It was.

MOVED BY: D. Pierroz SECONDED BY: K. Lampi

THAT the Board approves the Agenda as circulated.

CARRIED.

4. Patient / Resident Safety Moment

H. Gauthier noted there will be two stories shared this evening. J. Ogden and D. Harris shared the following patient stories highlighting the following:

D. Harris shared the following on behalf of Kelli Bolen, Manager of Community Support Services:

This story is regarding a client diagnosed with Amyotrophic Lateral Sclerosis (ALS), a progressive neurodegenerative disease that affects nerve cells in the brain and spinal cord, leading to loss of muscle control. Due to the advanced stage of the condition, the client is confined to a wheelchair and requires full assistance with mobility and transfers. The client currently resides in a private home, but the home lacks an accessible bathroom. As the client's condition has advanced, they have become fully dependent on a Hoyer lift for transfers and requires a two-person assist for daily activities. A Hoyer lift is a mechanical

device designed to safely lift and transfer individuals with limited or no mobility, reducing the risk of injury to both the client and caregivers.

Prior to the COVID-19 pandemic, Riverside provided a community bathing program that catered to individuals with complex care needs, offering services in a facility setting across the district (Rainycrest, Rainy River and Emo Health Centres). However, due to public health restrictions during the pandemic, the program was temporarily put on hold. Since the pandemic, ongoing staffing challenges have continued to limit the availability of this service, particularly for clients requiring specialized equipment and two-person assistance.

This client's specific needs requires a fully accessible bathing facility, two trained staff for safe use of a Hoyer lift, and reliable transportation which could not be met through standard programming. The lack of trained staff available to deliver these services presented a significant gap, leaving the client without a reliable bathing solution. In response to this urgent need, the Client Care Coordinator and the Manager of Community Support Services stepped in to provide direct support. They coordinated weekly bathing/shower services for the client at Rainycrest, arranged transportation with Riverside Medically Stable Patient Transfer with back up transportation on the Handi-van. Both individuals are trained in the proper usage of the lift, ensuring the client's safety during the transfers. Weekly bathing support began on a trial basis, with services provided every Tuesday. The program has been running successfully for weeks, and the client has expressed deep gratitude for the service, viewing each session as a highlight of the client's week, helping to maintain dignity and hygiene.

The establishment of an accessible bathing program within the district is a public service act that provides safe, assisted bathing or showering for individuals in the community that cannot do so at home for any number of issues. This type of program enhances mental well-being and provides for social connection. When functional decline prevents an individual from doing the most basic of activities, the impacts can be devastating. Programs such as this have been shown to reduce anxiety and depression and increase a sense of normality. By coordinating healthcare services, Riverside continues to impact the lives of those within our communities.

Discussion took place around others using this service. Diana confirmed that this service is accessed by others in the community. It was also confirmed that Riverside provides the staff for this client.

J. Ogden shared the following story on behalf of Ashley Stamler our Specialty & Diagnostic Shuttle Travel Attendant – Riverside Transportation:

How Transportation Changes Lives in the Rainy River District:

Every day, I see firsthand how our transportation program makes a profound difference for people who would otherwise be left without safe, reliable access to care. These are just a few of the stories that show how lives are changed through the services we provide.

One day at LaVerendrye General Hospital, I was taking a discharged patient home via Medically Stable Patient Transport (MSPT) when I ran into a family friend of hers in the hospital. As we started chatting, it became clear that this woman was stranded, she had no way to get back to her home in Rainy River, nearly 100 KM away. She had no idea our service even existed. Once I explained MSPT to her, she was thrilled. That same day, I was able to take her home safely, with a stop at the pharmacy. Since then, she has continued to use both MSPT and our Specialty & Diagnostic (S&D) shuttle to Thunder Bay for vital appointments.

Another patient, recovering from knee surgery, needed weeks of physiotherapy but had no way to get there from her remote community. With our service, she was able to travel regularly to Emo and back, completing her rehabilitation and regaining her mobility.

Dental care is another challenge in our area. One woman endured months of tooth pain because she couldn't drive or find a ride to Fort Frances. After seeing one of our posters in her building, she called and booked a ride. She finally got the treatment she needed, her pain was gone, and she shared how life-

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changing it was to simply have a way to get there.

For some, transportation means much more than convenience, it means independence. A man from Rainy River who lost his leg has been traveling back and forth to Thunder Bay for prosthetic fittings. Without the S&D shuttle, these appointments would be out of reach. He often jokes that once he's fitted, he'll be able to "play hopscotch again." Behind the humor is a deep sense of gratitude for the chance to rebuild his life.

These stories are only a small glimpse of the impact our transportation program has on the Rainy River District. Every ride represents someone gaining access to care, dignity, and independence. With expanded funding, we can continue to bridge the gap for people who have no other options and ensure that no one is left behind simply because of where they live. Equitable access to healthcare is possible, but only if we are given the resources to sustain and grow this vital program.

J. Ogden noted she has a radio clip from a happy user of the service and will share with the Board via email. She confirmed that this program has proven to be vital and are hope is to expand it. Discussion took place around fees. J. Ogden confirmed there is a small fee for the service and noted people can still submit a travel grant. She shared the transportation service can pick of people from the west end of the district and transport them to Fort Frances to catch the S&D bus to go to Thunder Bay for appointments. Further discussion took place regarding feedback to date on the service and J. Ogden confirmed it has been positive, it has been noted that staff are helpful, and it is a great program. J. Odgen further shared our MSPT has been helpful with assisting ambulance services as well. Thunder Bay has also provided positive acknowledgement. J. Ogden noted booking rides can occur daily and the S&D bus runs Tuesday, Wednesday and Thursdays each week. The bus has the ability at all times to call for help if needed. Satellite access provides a level of safety. J. Ogden confirmed the bus has Starlink and also has a tracing device system. She further noted we are trying to secure Ministry funding to continue the service. J. Ogden shared the Rainy River District Ontario Health Team provided funding initially for the bus.

D. Clifford thanked D. Harris and J. Ogden for sharing their stories.

5. BUSINESS ARISING:

There was no business arising.

6. NEW BUSINESS:

6.1 <u>Board Member Consolidated Confidentiality, Accountability & Roles & Responsibility Statement</u> <u>-Annual Signing</u>

D. Clifford reviewed the circulated reminding members this is signed annually and needs to be returned to B. Booth as soon as possible.

7. OPPORTUNITY FOR PUBLIC PARTICIPATION

D. Clifford asked L. Balanko-Dickson, Fort Fraces Times, if there were questions regarding the Open Session agenda. L. Balanko-Dickson noted there were none.

8. MOVE TO IN-CAMERA:

It was,

MOVED BY: E. Bodnar SECONDED BY: M. Jolicoeur

THAT the Board go in-camera at 5:57 pm.

CARRIED.

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9.	OTHER MOTIONS/BUSINESS:	
	There was no other motions/business.	
10.	DATE AND LOCATION OF NEXT MEETING:	
	October 30, 2025	
11.	TERMINATION:	
	It was,	
	MOVED BY: D. Loney	
	THAT the meeting be terminated at 8:39 pm.	CARRIED.
Chair		Secretary/Treasurer

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Board Chair, Chief of Staff & Senior Leadership Report – October 2025 Open Session

Strategic Pillars & Directions

<u>Investing in Those Who Serve - Strategically Leveraging our Human Resources</u>

AIDET

The AIDET framework is intended to support health care staff in effectively communicating with patients and is a patient tool acronym that stands for Acknowledge, Introduce, Duration, Explanation, and Thank you.

AIDET framework:

- Acknowledge Greet the patient by name, make eye contact, smile, and acknowledge any family members
 present.
- Introduce State your name and your role in caring for the patient.
- Duration Give the patient an estimated timeframe for the procedure or visit.
- Explanation Clearly explain what will happen step-by-step, what the patient should expect, and answer any
 questions they may have.
- Thank You Thank the patient for their time and cooperation, ask if they need anything else before you leave, and thank family members for their support.

While this tool has been in use at RHC for a handful of years now and is an active part of orientation it has been determined that a corporate wide refresh training as well as inclusion in annual education will further embed this patient, resident, and client friendly approach across the continuum of care.

One Riverside - Promoting a Consistent and Empowering Culture

OHT Consultants

RHC hosted Western Management Consultants (WMC) for a district tour via the Specialist and Diagnostic bus. WMC was contracted to review strengths and gaps in service for the RRDOHT. An informal Q & A followed in our board room where transparent discussion was held on challenges, gaps, and partner relationships.

Tomorrow's Riverside Today - Investing Today to Support Tomorrow

• Siemens Site Visit

Siemens representatives visited both LVGH and Rainy River on October 15, 2025, to review locations for the MRI as well as the new Radiology units. In addition to the site representative, an engineering representative attended from Siemens. As part of the visit construction/renovation requirements were identified for the radiology rooms and analysis of the proposed MRI location was conducted. No significant issues were identified.

Meditech Expanse Change Management

Recent discussions with our management team revealed a few areas of concern with the regional change management plan for Meditech Expanse at RHC. As a result, having routine onsite change management by the change management lead for our organization was identified as a priority. Our risk management leadership recently outlined the following benefits of this change in onsite presence to the regional representative:

- Time spent at RHC will develop an understanding for our organization and processes.
- Enhanced opportunity to familiarize yourself with our 3 acute care sites.
- Meeting with staff and Senior Management Executive's to promote the program, offering support as required.
- An avenue for staff to develop a working relationship with the change management lead.
- Opportunity for increased awareness of progress and challenges being faced by various teams.
- Opportunity to ensure ongoing promotion of this positive change and identification of the benefits of the project to all internal stakeholders.
- Promotion of more frequent staff informal engagements increased feedback.

RHC has been assigned a Northeast Twin Site – our twin is West Parry Sound. The twin sites in the Northeast have already implemented Meditech Expanse and are therefore available to assist us in navigating this change management effort.

Health & Wellness

A Health and Wellness Showcase is being held at the Fort Frances High School on November 3, 2025. Along with our OHT partners, RHC will be participating in the showcase.



Board Chair, Chief of Staff & Senior Leadership Report – October 2025 Open Session

Striving To Excel in Equity, Diversity & Inclusion (EDI)

Accessibility

The 2025 RHC Accessibility report has been completed and is being reviewed prior to submission. The recently updated accessibility policy and list of current barriers (Accessibility Plan) was updated and is available on our website. The areas of focus are employment/HR, information and communication, customer service training, and physical environment.

Cultural Awareness Training

In-person cultural awareness training by Robet Horton for staff will begin October 28, 2025, at the Rendezvous. Additional sessions are already booked for November 4, 27 and December 11. RHC will continue to book these sessions into 2026 to ensure that all staff are able to benefit from the in-person training.

Municipal Meetings

Municipal meetings were held on October 1, 2025. Responses to written questions received were provided to the municipalities. At our last meeting with the Fort Frances area contingent it was recommended we schedule a 2-hour meeting with all the representatives rather than have three catchment area meetings. We agreed to trying this new format and have included a 3rd hour for any area specific issues to be discussed.

• Nate Leipciger Site Visit

Riverside Health Care hosted Nate Leipciger at LaVerendrye General Hospital on October 22, 2025, and provided a tour of the hospital. Mr. Leipciger is a Holocaust survivor and accomplished engineer whose firm played an instrumental role in the design and construction of several Riverside facilities, including the Rainy River and Emo Health Centres, and major projects at LVGH. His lifelong commitment to remembrance, education, and humanitarian advocacy continues to inspire communities across Canada.

Thank you to the Riverside Team for their submissions, they are invaluable in the preparation of this report.

Respectfully Submitted,
Diane Clifford, Board Chair
Dr. Lucas Keffer, Chief of Staff
Diana Harris, Chief Nursing Executive
Carla Larson, Chief Financial, Information & Technology Officer
Joanne Ogden, Quality Assurance & OHT Executive Lead
Henry Gauthier, President & CEO
RHC Directors, Managers & Supervisors



Audit & Resources Committee Report – October 2025

2.4.1 Financial Report – September 2025 *



Operating Revenue & Expense Summary April 1, 2025 to Septeber 30, 2025

2025-2026 YTD Budget Adjusted Budget (with

2025-2026 YTD

Agency Costs)

April 1, 2025 to March 31,

2026

Adjusted Annual Budget

(with Agency Costs)

Annual Budget

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			Fund T	ype 1 - OH Fun	ded - Hospital	Services				
REVENUE										
OH - Base Funding	A-1	\$33,784,517	\$33,959,137	\$16,938,539	\$17,026,088	\$16,783,821	(\$154,718)	(\$242,267)	-0.46%	-0.71%
QBP Funding	A-2	\$1,078,300	\$1,078,300	\$540,627	\$540,627	\$888,952			32.30%	32.30%
Other Funding (19*) - Bundled Care, Hospice,										
Oncology Drug Reimbursement	A-3	\$2,496,065	\$2,496,065	\$1,251,452	\$1,251,452	\$1,211,636	(\$39,816)	(\$39,816)	-1.60%	-1.60%
OH - One Time Funding	A-4	\$625,127	\$625,127	\$313,420	\$313,420	\$417,163	\$103,743	\$103,743	16.60%	16.60%
MOHLTC - One Time Funding	A-5	\$354,426	\$354,426	\$177,699	\$177,699	\$170,256	(\$7,443)	(\$7,443)	-2.10%	-2.10%
Other Revenue MOHLTC - HOCC	A-6	\$847,404	\$847,804	\$424,863	\$425,063	\$502,330	\$77,467	\$77,267	9.14%	9.11%
Paymaster	A-7	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
Cancer Care Ontario	A-8	\$12,722	\$12,722	\$6,378	\$6,378	\$5,688	(\$690)	(\$690)	-5.43%	-5.43%
Recoveries & Miscellaneous	A-9	\$2,467,200	\$2,467,200	\$1,236,980	\$1,236,980	\$959,850	(\$277,130)	(\$277,130)	-11.23%	-11.23%
Amortization of Grants/Donations Equipment	A-10	\$731,350	\$731,350	\$366,677	\$366,677	\$375,502	\$8,825	\$8,825	1.21%	1.21%
OHIP Revenue & Patient Revenue from Other		ψ. σ. 1,σσσ	4.0.,000	4000,011	φοσο,σ	******	70,020	70,020		
Payors	A-11	\$2,284,781	\$2,284,781	\$1,145,520	\$1,145,520	\$1,176,110	\$30,590	\$30,590	1.34%	1.34%
Differential & Copayment	A-12	\$932,877	\$932,877	\$467,716	\$467,716	\$455,353		(\$12,364)	-1.33%	-1.33%
TOTAL REVENUE	A-13	\$45,614,769	\$45,789,789	\$22,869,870	\$22,957,620	\$22,946,661	\$76,791	(\$10,959)	0.17%	-0.02%
EXPENDITURES										
EXPENDITORES	1 1									
Compensation - Salaries & Wages	A-14	\$26,077,132	\$26,077,132	\$13,074,288	\$13,074,288	\$11,448,175	(\$1,626,112)	(\$1,626,113)	-6.24%	-6.24%
Compensation - Purchased Service	A-15	\$572,660	\$2,572,660	\$287,114	\$1,289,854	\$3,916,423		\$2,626,569	633.76%	102.10%
Benefit Contributions	A-16	\$7,301,597	\$7,301,597	\$3,660,801	\$3,660,801	\$3,035,857	(\$624,943)	(\$624,944)	-8.56%	-8.56%
Future Benefits	A-17	\$71,000	\$71,000	\$35,597	\$35,597	\$14,640		(\$20,957)	-29.52%	-29.52%
Medical Staff Remuneration	A-18	\$2,604,262	\$2,604,262	\$1,305,698	\$1,305,698	\$1,621,096	\$315,398	\$315,398	12.11%	12.11%
Nurse Practitioner Remuneration	A-19	\$544,665	\$544,665	\$273,079	\$273,079	\$365,920	\$92,841	\$92,841	17.05%	17.05%
Supplies & Other Expenses	A-20	\$8,626,606	\$8,626,606	\$4,325,120	\$4,325,120	\$4,360,734	\$35,614	\$35,614	0.41%	0.41%
Amortization of Software Licenses & Fees	A-21	\$195,887	\$253,324	\$98,212	\$127,009	\$110,017	\$11,805	(\$16,992)	6.03%	-6.71%
Medical/Surgical Supplies	A-22	\$1,435,851	\$1,435,851	\$719,892	\$719,892	\$743,635	\$23,743	\$23,743	1.65%	1.65%
Drugs & Medical Gases	A-23	\$2,825,169	\$2,825,169	\$1,416,455	\$1,416,455	\$1,251,294		(\$165,161)	-5.85%	-5.85%
Amortization of Equipment	A-24	\$1,264,810	\$1,264,810	\$634,138	\$634,138	\$636,997	\$2,859		0.23%	0.23%
Rental/Lease of Equipment	A-25	\$252,174	\$252,174	\$126,432	\$126,432	\$108,487	` ´	(\$17,945)	-7.12%	-7.12%
Bad Debts	A-26	\$175,000		\$87,740	\$87,740	\$100,000			7.01%	7.01%
TOTAL EXPENSE	A-27	\$51,946,813	\$54,004,250	\$26,044,566	\$27,076,103	\$27,713,276			3.21%	1.18%
SURPLUS/(DEFICIT)	A-28	(\$6,332,044)	(\$8,214,461)	(\$3,174,696)	(\$4,118,483)	(\$4,766,615)	(\$1,591,918)	(\$648,131)	25.14%	7.89%

Overall Change

Adjusted Budget

(with Agency

Costs)

Overall Change

2025-2026 YTD Actual

YTD Actual

Percent (%)

Over(Under) YTD

Budget

YTD Actual Percent

(%) Over(Under) YTD

Adjusted Budget (with

Agency Costs)

			Fund	I Type 1 - OH Fur	nded - Rainy Rive	r Clinic				
REVENUE										
MOH Funding	B-1	\$2,920,208	\$2,920,208	\$1,464,104	\$1,464,104	\$1,567,228	\$103,124	\$103,124	3.53%	3.53%
Nurse Practitioner Funding thru RHC	B-2	\$122,853	\$122,853	\$61,595	\$61,595	\$61,425	(\$170)	(\$170)	-0.14%	-0.14%
Recoveries & Miscellaneous	B-3	\$0	\$0	\$0	\$0	\$1,321	\$1,321	\$1,321	#DIV/0!	#DIV/0
TOTAL REVENUE	B-4	\$3,043,061	\$3,043,061	\$1,525,699	\$1,525,699	\$1,629,974	\$104,275	\$104,275	3.43%	3.43%
EXPENDITURES										
Rainy River Clinic Salaries	B-5	\$295,497	\$295,497	\$148,153	\$148,153	\$149,193	\$1,039	\$1,039	0.35%	0.35%
Rainy River Clinic Benefits	B-6	\$76,272	\$76,272	\$38,240	\$38,240	\$40,584	\$2,343	\$2,343	3.07%	3.07%
Physician Remuneration	B-7	\$2,095,122	\$2,095,122	\$1,050,431	\$1,050,431	\$1,192,023	\$141,591	\$141,591	6.76%	6.76%
Physician Travel	B-8	\$190,066	\$190,066	\$95,293	\$95,293	\$110,769	\$15,475	\$15,475	8.14%	8.149
Nurse Practitioner Expenditures	B-9	\$226,026	\$226,026	\$113,323	\$113,323	\$73,391	(\$39,931)	(\$39,931)	-17.67%	-17.67%
Other Sundry	B-10	\$8,112	\$8,112	\$4,067	\$4,067	\$7,404	\$3,337	\$3,337	41.14%	41.14%
Rainy River Clinic Rent Rainy River Clinic Software	B-11 B-12	\$75,758	\$75,758	\$37,983	\$37,983	\$23,355 \$33,256	(\$14,627) (\$4,952)	(\$14,627) (\$4,952)	-19.31% -6.50%	-19.31% -6.50%
TOTAL EXPENSE	B-12	\$76,208 \$3,043,061	\$76,208 \$3,043,061	\$38,208 \$1,525,699	\$38,208 \$1,525,699	\$1,629,974	\$104,275	\$104,275	3.43%	3.43%
SURPLUS/(DEFICIT)	B-14	\$0	\$0	\$0	\$0	(\$0)	(\$0)	(\$0)	#DIV/0!	#DIV/0
		ı	Fund Type 2 - OH	Funded - Counse	elling & Non Prof	it Housing Progr	ams			
			ntal Health - Case		_					
TOTAL REVENUE	C-1	\$2,529,663	\$2,529,663	\$1,268,297	\$1,268,297	\$1,236,139	(\$32,158)	(\$32,158)	-1.27%	-1.27%
TOTAL EXPENSE	C-2	\$2,529,663	\$2,529,663	\$1,268,297	\$1,268,297	\$1,250,693	(\$17,604)	(\$17,604)	-0.70%	-0.70%
SURPLUS/(DEFICIT)	C-3	\$0	\$0	\$0	\$0	(\$14,554)	(\$14,554)	(\$14,554)	#DIV/0!	#DIV/0
	<u> </u>		Fund Type 3 - Ot	har Miniatru/Aga	nov Eunded Ne	n Haanital Camii				
					ncy Funded - No ipportive Housin					
TOTAL REVENUE	D-1	\$684,845	\$684,845	\$343,361	\$343,361	\$224,282	(\$119,079)	(\$119,079)	-17.39%	-17.39%
TOTAL EXPENSE	D-1	\$684,845	\$684,845 \$684,845	\$343,361	\$343,361	\$224,282	(\$110,076)	(\$110,076)	-16.07%	-16.07%
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SURPLUS/(DEFICIT)	D-3	\$0	\$0			(\$9,003)	(\$9,003)	(\$9,003)	#DIV/0!	#DIV/0!
			Fund Type 2 - Ol	•			es			
	1				ng, Adult Day, Me	<u> </u>	(2.22.2.2)	(2.22.2.2)		
TOTAL REVENUE	E-1	\$3,201,384	\$3,201,384	\$1,605,077	\$1,605,077	\$1,498,428	(\$106,649)	(\$106,649)	-3.33%	-3.33%
TOTAL EXPENSE	E-2	\$3,201,384	\$3,201,384	\$1,605,077	\$1,605,077	\$1,725,545	\$120,468	\$120,468	3.76%	3.76%
SURPLUS/(DEFICIT)	E-3	\$0	\$0	\$0	\$0	(\$227,117)	(\$227,117)	(\$227,117)	#DIV/0!	#DIV/0
			F	und Type 2 - OH	Funded - RainyC	rest				
				Long T	erm Care					
TOTAL DEVENUE		445.000.505	A45 AAA 505	47 000 000	********	AT 540 054	(0470.040)	(0470.040)	4.400/	4.400
TOTAL REVENUE	F-1	\$15,330,585 \$9,265,810	\$15,330,585 \$10,013,462	\$7,686,293	\$7,686,293	\$7,513,351 \$5,562,669	(\$172,943) \$917,071	(\$172,943) \$542,221	-1.13% 9.90%	-1.13 % 5.41%
Compensation Purchased Service	F-2 F-3	\$9,265,810	\$10,013,462 \$781,103		\$5,020,448 \$391,622	\$5,562,669 \$1,346,189	\$917,071 \$1,346,189	\$542,221 \$954,567	9.90% #DIV/0!	122.21%
Benefits	F-4	\$2,580,947	\$2,580,947	\$1,294,009	\$1,294,009	\$1,251,919	(\$42.090)	(\$42.090)	-1.63%	-1.63%
Nurse Practitioner	F-5	\$149,394	\$417,394	\$74,902	\$209,269	\$201,214	\$126,312	(\$8,055)	84.55%	-1.93%
Medical Staff Remuneration	F-6	\$50,096	\$50,096	\$25,117	\$25,117	\$16,355	(\$8,762)	(\$8,762)	-17.49%	-17.49%
Supplies	F-7	\$1,669,915	\$1,669,915	\$837,245	\$837,245	\$860,035	\$22,790	\$22,790	1.36%	1.36%
Service Recipient Specific Supplies	F-8	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0
Sundry	F-9	\$1,404,535	\$1,669,535	\$704,192	\$837,055	\$736,856	\$32,664	(\$100,199)	2.33%	-6.00%
•	F 46							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		00.000
Equipment Contracted Out	F-10 F-11	\$572,484 \$61,561	\$672,484 \$61,561	\$287,026 \$30,865	\$337,163 \$30,865	\$93,848 \$1,714	(\$193,178) (\$29,151)	(\$243,315) (\$29,151)	-33.74% -47.35%	-36.18% -47.35%
Building & Grounds	F-11	\$62,735	\$01,501		\$30,865	\$1,714 \$186,999	\$155,546	\$77,833	247.94%	35.75%
TOTAL EXPENSE	F-13	\$15,817,478	\$18,134,232	\$7,930,407	\$9,091,957	\$10,257,798	\$2,327,392	\$1,165,841	14.71%	6.43%
SURPLUS/(DEFICIT) including unfunded										
liabilities	F-14	(\$486,893)	(\$2,803,647)	(\$244,113)		(\$2,744,448)	(\$2,500,335)	(\$1,338,784)	513.53%	47.75%
Less: Unfunded Future Benefits	F-15	\$0	\$0		\$0	(\$37,803)	(\$37,803)	(\$37,803)	#DIV/0!	#DIV/0
Less: Unfunded Amortization Expense	F-16	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0
SURPLUS/(DEFICIT) excluding unfunded liabilities	F-17	(\$486,893)	(\$2,803,647)	(\$244,113)	(\$1,405,664)	(\$2,782,251)	(\$2,538,138)	(\$1,376,587)	521.29%	49.10%
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Operating Surplus(Deficit) - Hospitals & Long Term Care ONLY		(\$6,818,937)	(\$11,018,108)	(\$3,418,809)	(\$5,524,147)	(\$7,548,866)				
Total Operating Margin - Hospitals Long Term Care ONLY	s &	-11.19%	-18.03%	-11.19%	-18.03%	-24.78%				



Auxiliary Report - October 2025

Emo	
No Report.	
La Verendrye General Hospital	
No Report.	
Rainycrest	
No Report.	

Rainy River

The Rainy River Health Centre Auxiliary met on October 3, 2025, with the following highlights:

- Discussion took place regarding the pledge commitment for capital equipment for our hospital.
 The two items discussed were the Vital Signs machine at a cost of \$7,500 and two Broda chairs
 at a cost of \$13,000. It was decided that the Vital Signs machine would serve more patients in
 long-term care, therefore we pledged to fundraise \$3,000.00 toward the purchase of this
 equipment.
- Our auxiliary will participate in the Active Living Fair to be held on October 30, 2025. We have one table for Tuck Shop sales and information.
- We will be participating in a Vendor's Market at the Legion in Rainy River on October 18, 2025, to sell Tuck Shop items and quilt tickets.
- Holly Kaemingh will be invited to our November meeting.
- Our Christmas Bazaar will be held on December 6, 2025. An invitation will be extended to Riverside board members to attend our fundraising event.