





Jan Dymond, Board Chair

**MESSAGE FROM JAN DYMOND, BOARD CHAIR AND  
LAURA VISSER, CHIEF EXECUTIVE OFFICER**

The 2019/20 fiscal year presented many opportunities for PACE team members, clients and partners to demonstrate our collective ability to adapt to anticipated and unanticipated changes - all while ensuring the continued delivery of the high quality services that are at the core of PACE's client commitment.

Through the year, Ontario moved ahead with its health system transformation agenda, creating fresh opportunities for PACE to strengthen and evolve relationships with both existing and new partners. The Board of Directors and Senior Leadership team developed an updated framework for partnerships and integrations to help prioritize these opportunities and to ensure PACE continues to be well positioned to nimbly create and pursue partnerships that advance the organization's vision and mission while supporting system transformation. With this as a focus, our partnership priorities included working to build relationships with each of the seven Ontario Health Teams (OHTs) developing within the PACE service delivery area and enhancing collaboration with a broad continuum of organizations that support people with disabilities in the Greater Toronto Area (GTA). We are committed to ensuring that supports for people with disabilities do not, unintentionally, become further marginalized and fragmented in the process of contributing to the advancement of provincial health system transformation.

On the organizational front, we undertook a number of changes and transitions, including the:

- Introduction of a new (and very successful) event, “PACE Variety Day”, organized and hosted by a group of PACE client volunteers with support from PACE staff.
- Implementation of the Employee Appreciation and Recognition plan developed by a working group of PACE team members, including the introduction of a new event to celebrate years-of-service milestone achievement/retirements and the introduction of appreciation celebrations across the organization.



Laura Visser, Chief Executive Officer

- Implementation of new leading practices by the Acquired Brain Injury (ABI) program which required service delivery model changes, a new staffing structure, and the first phase of the successful behaviour support partnership with West Park Healthcare Centre. The changes have had a significant, positive impact on service quality and team morale.
- Completion of a review current leading practices for Attendant Outreach service delivery in Ontario and the initial planning for a proposed new service delivery model at PACE that will improve both client experiences and work conditions for staff. Next steps will include client and staff engagement and completion of a phased implementation plan.
- Implementation of the initial components in the succession plan for Kim Knox, Director of Operations, who is retiring from PACE after 28 years of service in October 2020. This included partnering with Bellwoods Centres for Community Living to create a unique, shared Chief Financial and Information Officer (CFIO) role and, as a result, the introduction of Sue Mikulicic to the PACE Senior Leadership team to assume leadership for the finance and information management/technology.

## MESSAGE (CONT'D)

At the governance level, the Board of Directors nimbly responded to both anticipated and emerging changes and transitions this year:

- There were some changes in the board composition, with Marsha Josephs completing her three years of service on the board. We thank Marsha for her time, commitment and contributions to PACE. Also, long-time director and former board chair Bill Noble completed his third term on the Board. Bill provided PACE with unparalleled leadership – guiding the organization through several mergers as PACE pursued its strategic objective to become a leader in the sector. Since stepping down as chair two years ago, Bill has remained strongly engaged. The entire board thanks Bill for his extraordinary service.
- The Board pursued an active agenda throughout the past year, largely driven by health system transformation and the ongoing commitment to excellence in governance. Our more significant achievements included: developing the partnership framework noted above, completing a thorough legislative compliance review and updating our process for escalating client appeals.

As in most years, there were also a number of unanticipated challenges that PACE responded to successfully. This included pay equity obligations identified as a result of the organization's pay equity maintenance practices and, like all service providers, the unexpected need to respond to the COVID-19 pandemic at the end of the fiscal year. PACE's ability to respond effectively during the early stages of the pandemic is a credit to the extraordinary team work and commitment demonstrated by all members of the PACE team, the collaboration, communication and understanding received from PACE clients, and the significant support received from a number of our OHT and attendant service partners in the GTA.

Looking forward to the 2020/21 fiscal year, we anticipate that it will be another year that requires nimbleness and flexibility. We are committed to advancing our annual strategic goals, key operational priorities and continued preparation for the next Accreditation Survey in 2021. However, we recognize that the impact of COVID-19 on our capacity as an organization or on the continued advancement of the system transformation agenda cannot be fully predicted. For this reason, the Board and Senior Leadership are committed to ongoing in-year re-assessment of priorities and will defer the renewal of the PACE strategic plan to the 2021/22 fiscal year.

On behalf of the Board of Directors and the Senior Leadership Team, we sincerely thank our clients, staff, and partners for their continued contributions, collaboration and support which contributed to our successful adaptation throughout the past year. We are proud and inspired by the mutual respect, courage, teamwork and leadership that has been exemplified over the year and by the extent that collaboration has enhanced ability to rise through challenge and transition.

## WHO WE ARE

PACE is a non-profit community support service organization established in 1981 to provide support services to adults with disabilities who are committed to living independent lives. PACE provides support services to more than 226 individuals, who have a variety of disabilities including multiple sclerosis, cerebral palsy, spinal cord injuries, acquired brain injuries (ABI), muscular dystrophy and Huntington Disease (HD).



PACE STRATEGIC PLAN

Vision\_\_\_\_\_

Independence and choice – options for everyone.

Mission\_\_\_\_\_

To deliver excellent support services to people with disabilities so they can live their lives.

Values\_\_\_\_\_

**Respect**

We embrace all differences and treat every person with dignity and courtesy.

**Client Choice**

We honour each client’s right to direct their services to the extent that they can.

**Courage**

We make the choices needed to evolve and thrive.

**Integrity**

We keep our promises and meet our commitments.

**Teamwork**

We work together and with partners to provide the best client experience.

OUR  
PRIORITIES

OUR GOALS

**Deliver Top**

**Quality Services**

- Recognized by clients for consistently providing excellent and safe client experiences.

**Create the  
Strongest Team**

- Staff and management to work together as a team – demonstrating trust, healthy dialogue as well as shared commitment, accountability and results.

**Sustain  
Organizational  
Vitality**

- Maximize the amount of service that can be delivered without compromising quality.
- Achieve sustainable and optimized Human Resources.
- Enhance organizational resilience through efficient and effective corporate support.

**Demonstrate  
Service  
Leadership**

- Increase access to address unmet attendant service needs in LHINs/Ontario Health Regions.
- Evolve and expand services in response to emerging client needs and support requests.

**Provide System  
Leadership &  
Partnership**

- Increase attendant service capacity through the creation of solutions to existing system gaps.
- Actively participate in advancing integrated and population-based health care initiatives in a manner that respects PACE’s commitment to client-choice.

## PACE BY THE NUMBERS

Annual Revenue  
\$14,949,809



SUPPORTIVE HOUSING DAYS

34,200

ACQUIRED BRAIN INJURY  
SUPPORTIVE HOUSING DAYS

34,200

71,067

ATTENDANT OUTREACH  
HOURS



PACE  
Service  
Delivery

## Ages of Clients Supported

22%

18-39

54%

40-64

24%

65  
and over

## MEET LAURA

*Laura lives at the Bello Horizonte  
Supportive Housing Program.*

## Primary Client Disabilities

ACQUIRED BRAIN INJURY 24%  
\*SUPPORTIVE HOUSING & DAY PROGRAM

OTHER 23%

CEREBRAL PALSY 18%

SPINAL CORD INJURY 11%

SPINA BIFIDA 8%

HUNTINGTON DISEASE 7%

MULTIPLE SCLEROSIS 6%

STROKE 3%

226

TOTAL NUMBER  
OF UNIQUE CLIENTS  
SUPPORTED

121

ATTENDANT OUTREACH

100

SUPPORTIVE HOUSING

84

CLIENT RESOURCES

43

ACQUIRED BRAIN INJURY  
DAY PROGRAM

8

ACQUIRED BRAIN INJURY  
SUPPORTIVE HOUSING

11

HUNTINGTON DISEASE  
DROP-IN

8

HUNTINGTON DISEASE  
COMMUNITY PROGRAM

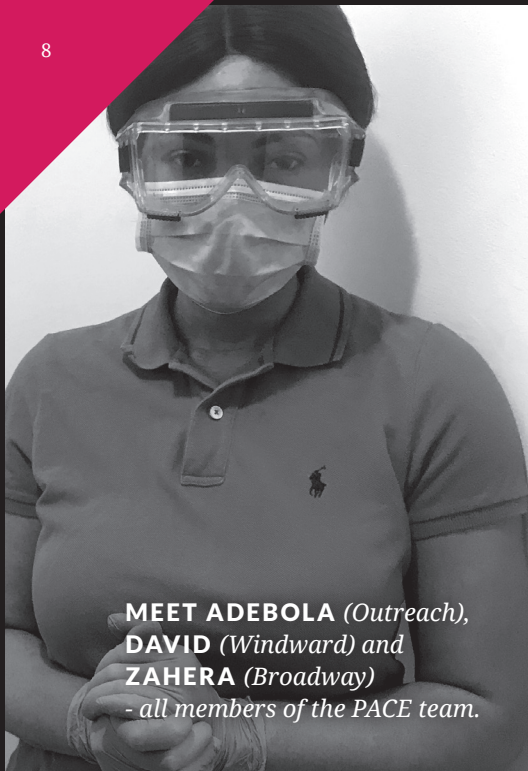


SUPPORTED BY  
A TOTAL OF

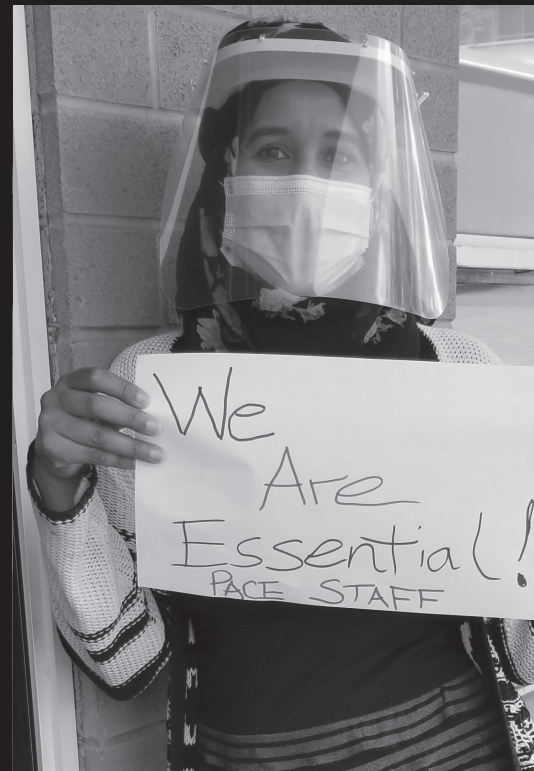
313

EMPLOYEES





**MEET ADEBOLA** (Outreach),  
**DAVID** (Windward) and  
**ZAHERA** (Broadway)  
- all members of the PACE team.



## Supportive Housing Services

The Supportive Housing Program provides essential support services to eligible individuals living in PACE's designated supportive housing locations. This program supports adults with disabilities to live independently in the community. (For a map of our locations [click here.](#))

PACE staff are available to provide support 24-hours per day seven days a week for pre-booked daily services as well as unscheduled, urgent services in all of our supportive housing sites. Clients live in their own apartments and have an independent tenant agreement with the landlord for their apartment building.

## Attendant Outreach Services

PACE provides personal support services associated with the activities of daily living at the client's home, school or workplace. These services are provided on a pre-booked basis throughout the Greater Toronto Area from 6:00 a.m. to midnight.

### Fee for Service Attendant Service Program

These personal support services are pre-scheduled on a temporary basis to meet the needs of people with disabilities. Services are purchased by private corporations, partner organizations and individuals.



## Enhanced Services

### ABI Supportive Housing Services

Supportive Housing for adults living with the effects of an acquired brain injury is provided at our Edwards Manor location. PACE provides 24-hour support to clients living in their own studio apartment within this integrated community apartment complex.

Support services include personal, general and wellness assistance. Enhanced services provided are customized to address individual life skill, cognitive and behavioural needs associated with the individuals' ABI. PACE staff work with each client to develop care plans /set goals that determine the scope of the individual supports to be provided. Clients learn or relearn ways to live independently again.

### ABI Day Programs

The ABI day programs are held at the Paula Cassin Learning Centre and offer learning opportunities/ training, recreational activities and social support. Programs are designed to meet the needs of clients and are created based on input from clients. Programs provide opportunities to learn and practice new skills and/or to “re-learn” and practice old skills and information impacted by the ABI.

Clients are partnered with Coaches, who help define clear goals, keep them on track, and provide extra support if needed. Once a client has

successfully acquired the desired skill they can apply (if they choose to) for the Community program to work with a Coach to transfer that skill to their home or community.

### ABI Community Program

Following the assessment process, recommendations, and a plan for specific individualized service needs and goals are developed. Depending on the goals that have been established, the length of the program could be 6-12 weeks long. Further assessments may be conducted on an as-needed basis. Service is provided in the home or community once or twice a week (depending on the needs).

### Enhanced Supportive Housing Program

The PACE Bello Horizonte supportive housing program location supports:

- Individuals with Huntington Disease (the supportive housing part of this program is unique in Toronto and Canada); and
- People who require enhanced services as well as personal support.

PACE staff provide information to clients to assist them to make healthy and safe decisions about their services. Also provided are life skills assistance - on such areas of focus as banking, shopping,

nutrition, social/recreational, education/volunteering. Assistance navigating the health care system and connecting with community agencies and resources is also provided to clients who want it.

### Huntington Disease (HD) Drop-in Program

This free monthly event is hosted by PACE for people living with HD and their family members to socialize and connect with other members of the HD community.

### HD Community Program

PACE provides community-based support services for adults living with the effects of HD. Services are provided in clients' homes throughout Toronto and on a pre-booked basis. Services are customized to address individual needs including physical, cognitive and psychiatric challenges that a person with HD may experience.

### Client Resource Services

PACE provides practical case management support to clients. The assistance available includes support with system navigation, finding appropriate community resources to address specific needs, and adjusting to changes associated with an evolving disability and/or ageing. PACE staff meet with clients in their home or in the community, wherever assistance is required.

## BOARD OF DIRECTORS

**Jan Dymond**  
Chair

**Asher Alkoby**  
Vice-Chair

**Luxman Paramasivam**  
Treasurer

**Laura Tamblyn Watts**  
Secretary

**Monica Bienefeld**  
Director

**Beatrise Edelstein**  
Director *(until August 2019)*

**Jennifer Jones**  
Director *(effective March 2020)*

**Marsha Josephs**  
Director

**Bill Noble**  
Past Chair

**Tracy Odell**  
Director *(until January 2020)*



### MEET MARCELO

*Marcelo lives at the Bello Horizonte Supportive Housing Program.*

## STAFF YEARS OF SERVICE

### 30 YEARS

James Clemens	<i>Bathurst</i>
Esmeralda Letts	<i>Outreach</i>
Alma Messiah	<i>Caboto</i>
Popsey Richards	<i>Caboto</i>

### 25 YEARS

Carl Ellis	<i>Bathurst</i>
Egzaw Ghebrehiwet	<i>Henry Lane</i>
Terrance Lyder	<i>Outreach</i>
Cecil Providence	<i>Caboto</i>

### 20 YEARS

Ofosuh Afrifa	<i>Broadway</i>
Sue Cockburn	<i>Head Office</i>
Anthony Domm	<i>Outreach</i>
Marjorie Mullings	<i>Outreach</i>
Dawn Nembhard	<i>Outreach</i>
Delia Palarpalar	<i>Bathurst</i>
Stephen Preston	<i>Windward</i>
Doreen Williams	<i>Windward</i>
Karen Williams	<i>Bathurst</i>
Hindia Yusuf	<i>Caboto</i>

### 15 YEARS

Lai Soon Ang	<i>Henry Lane</i>
Salve Cortez	<i>Bello Horizonte</i>
Danielle Daoust	<i>Head Office</i>
Toyin Kabowei	<i>Broadway</i>
Carol Robinson	<i>Henry Lane</i>
Opal Smith	<i>Outreach</i>

### 10 YEARS

Golda Anderson	<i>Outreach</i>
David Banayat	<i>Bello Horizonte</i>
Kimberly Gooder	<i>Head Office</i>
Helena Marques	<i>Outreach</i>
Abdul-Akeem	
Ogunniyi	<i>Bello Horizonte</i>
Radoslava	
Poliakova	<i>Head Office</i>
Carolyn Ross	<i>Head Office</i>
Mallory Woodward	<i>Edwards Manor</i>
Betelhem Yohannes	<i>Joanne Wilson</i>

### 5 YEARS

Cristina Agudo	<i>Broadway</i>
Sharon Colwell	<i>Head Office</i>
Precious Edogun	<i>Outreach</i>
Leah Fletcher	<i>Edwards Manor</i>
Georgia Francis	<i>Edwards Manor</i>
Judith Ilcio	<i>Head Office</i>
Ruzya Karpinec	<i>Outreach</i>
Hyacinth Mcleod	<i>Bathurst</i>
Sallie Morrison	<i>Head Office</i>
Luis Pereira	<i>Outreach</i>
Mykyta Putintsev	<i>PCLC</i>
Jennifer Scott	<i>Edwards Manor</i>
Kazi Shafi	<i>Edwards Manor</i>
Methusalem Talisic	<i>Joanne Wilson</i>

### RETIREES

Yvonne Anderson	<i>Outreach</i>
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Verna Nelson	<i>Bathurst</i>
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Carlyle Pascall	<i>Outreach</i>
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**To the Board of Directors of PACE Independent Living***Opinion*

We have audited the financial statements of PACE Independent Living, (the Organization), which comprise the statement of financial position as at March 31, 2020 and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Organization as at March 31, 2020, and results of its operations and its 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 Organization 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 in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

*Responsibilities of Management and Those Charged with Governance for the Financial Statements*

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian Accounting Standards for Not-for-Profit Organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charges with governance are responsible for overseeing the Organization's financial reporting process.

*Auditor's Responsibilities for the Audit of the Financial Statements*

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance





with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization'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 Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

*RSM Canada LLP*

Chartered Professional Accountants  
Licensed Public Accountants  
August 17, 2020  
Toronto, Ontario

# STATEMENT OF FINANCIAL POSITION AS AT MARCH 31, 2020

	2020	2019
<b>ASSETS</b>		
<b>Current</b>		
Cash	\$ 1,368,126	\$ 1,956,406
Contributions receivable (Note 4)	-	450,000
Accounts receivable	76,469	99,773
Prepaid expenses	42,086	52,529
	1,486,681	2,558,708
Capital assets	-	3,282
	\$ 1,486,681	\$ 2,561,990
<b>LIABILITIES</b>		
<b>Current</b>		
Accounts payable and accrued liabilities (Note 4)	\$ 1,657,292	2,365,944
Due to Ministry of Health - Local Health Integration Network	-	119,245
	1,657,292	2,485,189
<b>Deferred contributions</b>		
Expenses of future periods	45,312	289,442
Capital assets	-	3,282
	1,702,604	2,777,913
<b>NET ASSETS</b>		
Unrestricted	(215,923)	(215,923)
	\$ 1,486,681	\$ 2,561,990

Economic dependence (Note 2)  
Commitments and contingencies (Note 7)  
COVID-19 (Note 8)

Approved by the Board



Director



Director

**STATEMENT OF OPERATIONS**  
**YEAR ENDED MARCH 31, 2020**

	2020	2019
<b>Revenue</b>		
Ministry of Health		
- Local Health Integration Network (Note 5)	\$ 14,490,966	\$ 15,057,144
Other	425,588	189,801
Interest	29,973	24,262
Amortization of deferred contributions related to capital assets	3,282	11,792
	\$ 14,949,809	\$ 15,282,999
<b>Expenses</b>		
Employee salaries and wages (Note 4)	\$ 11,745,337	\$ 11,789,807
Employee benefits	2,017,704	2,145,435
Building and grounds	481,000	463,341
Supplies and sundry	473,435	542,520
Equipment	229,051	319,366
Contracted out	-	10,092
	\$ 14,946,527	\$ 15,270,561
Excess of revenue over expenses before amortization of capital assets	3,282	12,438
Amortization of capital assets	(3,282)	(11,792)
Excess of revenue over expenses	\$ -	\$ 646

STATEMENT OF CHANGES IN NET ASSETS  
YEAR ENDED MARCH 31, 2020

	2020	2019
Unrestricted net assets, beginning of year	\$ (215,923)	\$ (216,569)
Excess of revenue over expenses	-	646
Unrestricted net assets, end of year	\$ (215,923)	\$ (215,923)



**STATEMENT OF CASH FLOWS**  
**YEAR ENDED MARCH 31, 2020**

	2020	2019
<b>Cash provided by (used in)</b>		
<b>Operations</b>		
Excess of revenue over expenses	\$ -	\$ 646
Items not affecting cash		
Amortization of capital assets	3,282	11,792
Amortization of deferred contributions related to capital assets	(3,282)	(11,792)
Net changes in non-cash working capital		
Accounts receivable	23,304	2,343
Prepaid expenses	10,443	(12,397)
Contributions receivable	450,000	(450,000)
Accounts payable and accrued liabilities	(708,652)	1,028,770
Due to Ministry of Health - Local Health Integration Network	(119,245)	(114,428)
Deferred contributions relating to expenses of future periods	(244,130)	115,840
<b>Net change in cash</b>	<b>(588,280)</b>	<b>570,774</b>
<b>Cash, beginning of year</b>	<b>1,956,406</b>	<b>1,385,632</b>
<b>Cash, end of year</b>	<b>\$ 1,368,126</b>	<b>\$ 1,956,406</b>

## NOTES TO FINANCIAL STATEMENTS

### MARCH 31, 2020

#### 1. ORGANIZATION AND NATURE OF OPERATIONS

PACE Independent Living (the “Organization”) is a charity incorporated as a corporation without share capital in the Province of Ontario. The Organization provides support services to adults with disabilities.

As provided under the Local Health System Integration Act 2006, effective July 1, 2010, the Ministry of Health (“MOH”) assigned to the Local Health Integration Network (“LHIN”) all its rights, duties and obligations under its Multi-Sector Accountability Agreement (“M-SAA”) with the Health Service Providers (“HSP”). M-SAA is aligned with the MOH’s transforming agenda and will enable the LHIN to take on full responsibility for planning, funding and integrating health services in the LHIN area, which includes the HSP. The Organization is assigned into the Central LHIN and Toronto Central LHIN.

#### 2. ECONOMIC DEPENDENCE

The Organization’s principal funder is the LHIN. The funding is subject to budget review. In management’s opinion, the Organization’s ability to continue its programs is dependent on this funding.

#### 3. SIGNIFICANT ACCOUNTING POLICIES

The financial statements have been prepared by management in accordance with Canadian Accounting Standards for Not-for-Profit Organizations.

##### (a) Revenue recognition

The Organization follows the deferral method of accounting for grants and contributions.

The Organization’s programs are principally funded through LHIN under program budgets subject to annual review. Grants are received on a monthly basis from the LHIN and are recognized as revenue in the period the expenditure relating to the grant is incurred. Grants relating to expenditures to be incurred in periods subsequent to year end are recorded as deferred contributions. Grants are provided for each program of the Organization (Supportive Housing, Attendant Outreach and Acquired Brain Injury). Any expenses incurred by a program in excess of the approved grant are borne by the program.

Contributions related to the purchase of capital assets are deferred and amortized into revenue on a straight-line basis, at a rate corresponding with the amortization rate for the related capital assets.

Annually, the LHIN performs a reconciliation between the Organization’s allowable expenditures and funds paid during the previous year. The balance due to or from the LHIN for the year ended will not be determined until the LHIN has reviewed the Organization’s financial and statistical returns. The management of the Organization considers the amounts reported to include all proper adjustments for non-allowable costs.

**(b) Cash and cash equivalents**

Cash and cash equivalents include cash and term deposits with an initial maturity of 90 days or less.

**(c) Financial instruments**

Financial instruments are recorded at fair value on initial recognition. Equity instruments that are quoted in an active market are subsequently measured at fair value. All other financial instruments are subsequently recorded at cost or amortized cost, unless management has elected to carry the instruments at fair value. The Organization has not elected to carry any such financial instruments at fair value.

The financial assets subsequently measured at amortized cost include cash and cash equivalents, contributions receivable and accounts receivable. The financial liabilities measured at amortized cost include accounts payable and accrued liabilities and due to Ministry of Health - Local Health Integration Network.

Transaction costs incurred on the acquisition of financial instruments measured subsequently at fair value are expensed as incurred. All other financial instruments are adjusted by transaction costs incurred on acquisition and financing costs, which are amortized using the straight-line method.

Financial assets measured at cost or amortized cost are tested for impairment when there are indicators of impairment. The amount of a write-down, if any, is recorded in the excess of revenues over expenses. Reversals of impairment are recorded to the extent that the value has increased, up to the amount that would have been reported at the date of the reversal had the impairment not been previously recognized. The amount of the reversal is recognized in the excess of revenue over expenses.

**(d) Donated capital assets, materials and services**

Donated capital assets are recorded at fair value at the time of receipt when fair value can be reasonably estimated. Donated materials and services are not recorded.

**(e) Use of estimates**

The preparation of financial statements 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 revenue and expenses during the year. Actual results could differ from those estimates.

## NOTES TO FINANCIAL STATEMENTS

### MARCH 31, 2020

#### 4. ACCOUNTS PAYABLE AND ACCRUED LIABILITIES

The Organization had an outstanding liability relating to retroactive pay equity legislation relating to the years 2005 to 2009. There was an agreement with the applicable unions (SEIU and UNIFOR) that the amount will only be paid if and when the LHIN made funds available for this purpose. Up to and including March 31, 2018, the liability was disclosed as a contingency because the settlement with the unions was dependent upon confirmed funding. A review of the pay equity liability completed during fiscal 2019 identified potential payments of \$852,596 at March 31, 2019. In 2019, the Organization obtained confirmation of funding and therefore included the full liability amount in accounts payable and accrued liabilities. The \$450,000 contribution receivable at March 31, 2019 represented funds receivable to fund the outstanding liability and also represented the final funding required to settle this liability. The balance of \$852,596 was settled in 2020.

In 2020, the Organization determined that there were additional pay equity obligations that had not been previously identified. As a result, there are potential additional payments totalling \$819,884 that had not previously been accrued or recorded. Of this, the Organization has accrued and included in accounts payable and accrued liabilities \$451,410 at March 31, 2020. The remaining potential payment of \$368,473 will only be payable if and when the Organization has sufficient funding.

#### 5. MOH/LHIN FUNDING

	CENTRAL	TORONTO CENTRAL	NET 2020	NET 2019
Annual funding	\$ 9,039,489	\$ 5,451,477	\$ 14,490,966	\$ 14,490,950
One time funding - Complex Client Support	-	-	-	60,630
One time funding - Pay Equity	-	-	-	505,564
	\$ 9,039,489	\$ 5,451,477	\$ 14,490,966	\$ 15,057,144

#### 6. EMPLOYEE FUTURE BENEFITS

- (a) The Organization has a defined contribution pension plan which began in May 1997. The plan is for the employees of the UNIFOR, Local 40 and is administered by the Canada-Wide Industrial Pension Plan. Benefit levels can change depending on a change in the collective agreement or on the performance of the pension fund. The current year contributions made by the Organization were \$109,656 (2019 - \$97,631).
- (b) The Organization has joined a defined contribution multi-employer pension plan for employees who are members of the Local 1 Service Employees International Union commencing December 1998. It is



administered by the Nursing Home and Related Industries Pension Plan. The cost of the plan is recognized based on contributions made during the year. The current year contributions made by the Organization were \$101,029 (2019 - \$112,863).

- (c) The Organization has a Registered Retirement Savings Plan of certain employees of the Ontario Public Service Employees Union Local 593. Employees transferred as part of the new services on September 1, 2015 from Clarendon Foundation are enrolled in this plan. The current year contributions made by the Organization were \$32,932 (2019 - \$33,987).
- (d) The Organization has a defined contribution plan providing pension benefits to eligible management and administrative employees, which began on August 1, 2004. The cost of the plan is recognized based on contributions made during the year. The current year contributions made by the Organization were \$95,989 (2019 - \$100,468).

## 7. COMMITMENTS

The Organization is committed to minimum payments under operating leases for premises and office equipment as follows:

2021	\$	325,245
2022		138,198
2023		15,193
2024		3,162
Thereafter		2,898
	\$	484,696

## 8. COVID-19

On March 11, 2020, the World Health Organization assessed the coronavirus outbreak (COVID-19) as a pandemic. In Canada, the Government of Ontario declared an emergency under s 7.0.1 (1) of the Emergency Management and Civil Protection Act on March 17, 2020 with respect to COVID-19. Emergency measures enacted to combat the spread of the virus, including the implementation of travel bans, self-imposed quarantine periods and social distancing, have caused material disruption to businesses globally, resulting in an economic slowdown. The extent to which the coronavirus influences the Organization's results will depend on future developments, which are highly uncertain and cannot be predicted, including new information, which may emerge concerning the severity of the coronavirus and actions taken to contain the coronavirus or its impact, among others.

