

Mission: Deliver an outstanding patient care experience driven by a passionate commitment to excellence

BOARD OF DIRECTORS

Thursday, October 01, 2020 VIA ZOOM: 1700 hours

VIA ZOOM: 1700 hours Windsor, Ontario

| | TAB | TIME | ACTION |
|--------------------------------------------------------------------------------------|-------|------|---------------------|
| 1. CALL TO ORDER (Paniccia) | | 1700 | |
| 2. STRATEGIC PLAN 2021-2024 (Morrow) | Tab A | 1701 | |
| 3. <u>DECLARATIONS OF CONFLICT OF INTEREST</u> (Paniccia) | | 1717 | |
| 4. <u>PREVIOUS MINUTES</u> —September 03, 2020 (Paniccia) | Tab B | 1718 | MOTION (approve) |
| 5. REPORT OF THE PRESIDENT & CEO (Musyj) | Tab C | 1719 | FYI |
| 6. SCHULICH REPORT (Jacobs) | Tab D | 1740 | FYI |
| 7. FINANCIAL PRESENTATION & TREASURER'S REPORT (Allen) | Tab E | 1745 | FYI |
| 8. CONSENT AGENDA: | | | MOTION |
| Finance/Audit & Resources – Sept. 21, 2020 (Allen) | Tab F | 1755 | (accept) |
| 9. <u>CORRESPONDENCE/PRINTED MATTER:</u> • Media Report – FYI only | Tab G | 1757 | FYI |
| 10. BOARD MEMBER QUESTIONS, COMMENTS OR NOTICES OF MOTIONS (Paniccia) | | 1800 | |
| 11. <u>DATE OF NEXT REGULAR BOARD MEETING:</u> Thursday, November 05, 2020 – ZOOM | | 1801 | FYI |
| 12. <u>ADJOURNMENT</u> (Paniccia) | | 1801 | MOTION |

REGRETS ONLY TO CHERYLE CLARK, <u>Cheryle.clark@wrh.on.ca</u>, or (519) 254-5577 X56000

WRH Strategic Plan 2021-2024 Report to the Board of Directors

I. Introduction

In March, 2020 the Strategic Planning Steering Committee met to review and discuss the current Vision, Mission, Values, Strategic Directions and Initiatives with the goal of creating the new WRH Strategic Plan for 2021 – 2024. (Please see attached addendum for membership).

Prior to the pandemic the Committee was able to meet, in person, to conduct an environmental scan, identify top priorities, and provide feedback for an updated vision, mission, values, and strategic directions. The Committee also asked a small working group to provide recommendations for revised mission, values, strategic directions and initiatives statements. When in person meetings were no longer appropriate, Committee members were provided documents via email and asked to provide feedback electronically.

II. Environmental Scan

The Committee gathered information as part of the environmental scan. This included identifying significant events and forces that have impacted the organization since the last strategic plan was developed in 2016. Documents were reviewed including Accreditation Canada Reports, WRH Quality Improvement Plan, survey results from staff, professional staff, patients and families, and community partners about our strengths and weaknesses.

All this information was considered and captured during the completion of the SWOT analysis (Strengths, Weaknesses, Opportunities, and Threats). Following the initial SWOT analysis, committee members voted on what they considered the top priorities that require focused attention during the next strategic plan cycle. These priorities were used to form the basis of the revised Strategic Directions and Strategic Initiatives.

III. WRH Vision

The Committee reviewed the current Vision statement. It was decided that the current WRH Vision is still relevant and appropriate. In addition, much work has taken place to successfully engage staff and increase their knowledge and understanding of the current WRH Vision.

It is therefore recommended that the current WRH Vision be maintained.

Outstanding Care - No Exceptions!

IV. WRH Mission Statement

The Committee asked a small working group to work on revising the mission statement. The working group discussed, at length, the purpose and utility of a mission statement and how to better link it with the vision of the hospital. It was noted that, unlike the vision statement, the mission statement was not well known or well understood by staff or the community. The Committee thought the mission statement should be pragmatic and reflect how WRH will fulfill its vision and that the mission statement should reflect the purpose of the organization.

As a result, the Committee recommends the following as a concise Mission Statement:

Provide quality person-centred health care services to our community.

V. WRH Values

The Committee also discussed how to make the values 'come alive' as our entire team's commitment. Also, following the lead of other organizations, acknowledgement of the territories and lands are also included.

The Committee recommends the following Value Statements:

We respectfully acknowledge the territory that we are on today - the traditional, ancestral and contemporary lands of the Niswi, Ishkodewan, and Anishinaabeg: The Three Fires Confederacy (Ojibwe, Odawa, and Potawatomi). We acknowledge the land and the surrounding waters for sustaining us and we are committed to protecting and restoring these lands and waters from environmental degradation.

We Value:

Compassion: We show understanding and humility in our care for patients and for each other. We listen to our patients, their families, and caregivers throughout their healthcare journey. In every interaction with people in our care we have an opportunity to show empathy and kindness.

Accountability: We are transparent about the care we provide to those we serve. We honour our commitments. Taking responsibility for our actions is essential to us.

Respect: We treat others with dignity and build trust as the cornerstone of care. We collaborate with patients, families and caregivers and uphold confidentiality in all we do. We respect their autonomy to make informed care decisions. We honour diversity and inclusivity.

Excellence: We embody a culture of quality and safe person-centered care. We embrace change and innovation, with a focus on evidence-based best practice. We foster dynamic partnerships by encouraging research, learning and knowledge sharing.

VI – Strategic Directions and Initiatives

The Committee discussed revisions to strategic directions and initiatives and also gave the working team the responsibility of refining strategic directions and initiatives. This work was also based on the initial work completed by the entire Committee. The Committee also recognized that given this very unusual and challenging time, the Board may choose to revisit these Directions and Initiatives in the near future, based on the needs of our community.

<u>Strategic Directions</u> are statements that identify what the organization needs to do to address the most significant strengths, opportunities, weaknesses and threats. They define the organization's priority work and help sharpen the focus of the organization.

<u>Strategic Initiatives</u> are more focused, specific statements that are designed to clearly direct how the organization will meet their strategic directions, and ultimately fulfill their vision and mission.

The Strategic Planning Steering Committee recommends the following Strategic Directions and Initiatives as part of the 2021 -2024 Strategic Plan:

Strategic Direction #1: Strengthen the processes that drive a culture of patient safety and quality care.

- i) Integrate standardized best practices to achieve quality care and outcomes.
- ii) Lead in the development and performance of patient safety initiatives and measures.
- iii) Lead in the development of strategies and practices that support timely, flexible, sustainable, and appropriate access to care.

Strategic Direction #2: Uphold the principles of accountability and transparency.

- Utilize and share the results from the performance indicators to achieve excellence.
- ii) Cultivate, sustain, and lead a "Just Culture" across the organization.
- iii) Strengthen systems that clearly identify, support, and measure accountability throughout the organization.

Strategic Direction #3: Maintain a responsive and sustainable corporate financial strategy.

- Provide quality care in the most cost efficient way while maximizing revenue opportunities.
- ii) Provide ongoing education to the organization and community as to how the hospital is funded by the Ministry of Health through its funding formulas.
- iii) Engage the organization to identify and implement best practices within financial realities.

- iv) Identify and efficiently support and sustain core services.
- v) Develop and implement a long-term strategy for funding capital spending needs.

Strategic Direction #4: Create a dynamic workplace culture that establishes WRH as an employer of choice.

- i) Foster a respectful, safe, inclusive and collaborative work environment across the care team.
- ii) Build capacity to enhance a sustainable workforce with a focus on talent acquisition, retention, and succession planning.
- iii) Develop strategies to optimize attendance, support and nurture a healthy and engaged workforce.

Strategic Direction #5: Redefine our collaboration with external partners to build a better healthcare ecosystem*.

- i) Collaborate with local, regional, and provincial partners to deliver an innovative, seamless system of care.
- ii) Develop opportunities for education and evidence-based research to build an academic healthcare system that attracts and retains professionals from all disciplines.

(*Note: Working group felt that the previous strategic direction was very limited and did not reflect what the initiatives include. Ecosystem is a current phrase that is being used to reflect the interconnectedness among healthcare providers, patients and families.)

Strategic Direction #6: Continue the pursuit of NEW state -of- the-art acute care facilities.

- i) Design the facilities to meet or exceed the standards related to healthcare facility planning, engineering, and design.
- ii) Ensure the design incorporates leading edge practices, technologies and equipment.
- iii) Design the facilities to support excellence and innovation in healthcare research and education.
- iv) Ensure effective and meaningful participation of staff, professional staff, volunteers, patients, academic partners and the community.
- v) Maximize use of current facilities to provide the best possible patient care.
- vi) Work with the WRH Foundation to ensure that a plan is in place to raise the funds required for state-of-the-art equipment/technologies.

Appendix Strategic Planning Steering Committee- Membership

| Group | Members |
|----------------------------|------------------------------------|
| Board of Directors | Anthony Paniccia |
| | Dan Wilson |
| | Genevieve Isshak |
| | Michael Lavoie |
| | Paul Lachance |
| Senior Leadership | David Musyj |
| | Karen McCullough |
| | Dr. Wassim Saad |
| | Mark Fathers |
| | Monica Staley-Liang |
| | Rosemary Petrakos Karen Riddell |
| | Mark Ferrari |
| | Jonathan Foster |
| | Theresa Morris |
| | Theresa Mons |
| Patients and Families | Darbara Hebert |
| | Diane Marley |
| | , |
| Medical Advisory Committee | Dr. Deljit Dhanoa |
| | Dr. Greg Hasen |
| | Dr. lan Mazzetti |
| | Dr. Larry Jacobs |
| | Dr. Akram El Keilani |
| | Dr. Marguerite Chevalier |
| | Dr. Michael Winger |
| Medical Directors and | Dr. Phillip Tremblay |
| Professional Staff | Dr. Jody Stasko |
| | Dr. Ayodeji Akinlaja |
| | , , , |
| Administrative Directors & | Gina Bulcke |
| Leaders | Nicole Krywionek |
| | Gisele Seguin |
| | Adam Paglione |
| | Angela D'Alessandro |
| | Bradie Cox |
| | Dayna Eagen |
| | Erika Vitale |
| | Jessica Bennett, |
| | Laura D'Alimonte |
| | Nicole Sbrocca |

| | Priyanka Philip Mike Reinkober Linda Morrow (Facilitator) |
|-----------------------|----------------------------------------------------------------------------------------|
| Union Leadership | Donna MacInnis Richard Baillargeon Sandy Pasciuta Susan Bohnert Hamelin |
| Working Group Members | Paul Lachance Gisele Seguin Nicole Krywionek Nicole Sbrocca Linda Morrow (facilitator) |



Report of the President & CEO to the Board of Directors

Date: October 2020

Update Strategic Plan

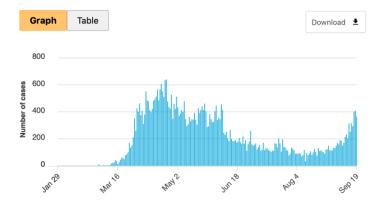
At the October Board meeting there will be a presentation on the draft 2021-2024 Strategic Plan to our Board of Directors. We will send out the report and video explaining the report after the Board meeting. As we have stated, a Strategic Plan serves as a fundamental guide to decision-making and offers a clear direction on how the hospital fulfills its Vision and Mission while living its Values. We were fortunate enough to get a substantial amount of the planning done prior to the COVID-19 pandemic. Stay tuned for more details.

Status of Wave 2 or successive Waves

Last updated: Sep 20, 2020 at 10:26 a.m.

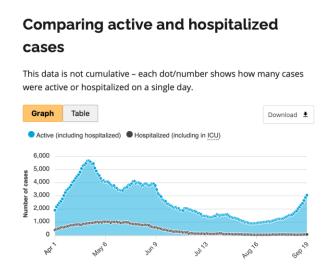
Daily new cases

This data is not cumulative – each bar/number shows how many new cases were reported on a single day.



As we prepare for an increase of COVID-19 cases, the question is posed what impact will this have on Hospital services.

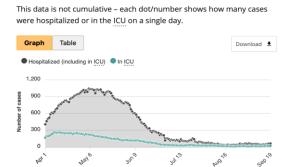
Even though we have seen a spike in COVID-19 positive cases, the number of hospitalizations has not increased – even though it is a "lagging indicator" – meaning it will follow a spike in cases by a couple weeks.



However, during the height of the Ontario COVID-19 cases in April some ~ 17% of the cases were hospitalized. As of September 20, this number of hospitalizations to positive COVID-19 cases was ~ 2%. As outlined in the attached article, it could be the result of the age of the current positive COVID-19 patients (~2/3 under 40 years of age;1/3 in their 20's even though they make up only 14% of Province's population) and also the improved work that is happening with testing and contact tracing to stop the spread to more vulnerable populations. https://apple.news/AkWo7nwVNRx67nq2LCU4TFw. As stated in the attached article, it is too early to draw definitive conclusions.

This same trend applies to ICU COVID-19 patients.

Comparing hospitalized and in-ICU cases



Since my report is written a week before the Board meeting – a week is like a lifetime in COVID-19 – see this link for up-to-date data to see if this trend continued. https://covid-19.ontario.ca/data

Fall Plan Ontario

As I am typing my report, the Province is announcing its "Fall Plan" for our healthcare system. I will be able to talk more about the Fall Plan at the actual Board meeting.

The first part of the plan was announced to promote influenza vaccinations. As healthcare workers this is the year we need to set the example for our community. In the past our vaccination rates usually land about 40%.

As stated by the Province and world leaders – getting the flu vaccine will help reduce the impact of a second wave. Having influenza cases and COVID-19 cases at the same time could be problematic for the healthcare system. We have to reduce the impact together.

Testing Testing Testing

Issues related to access to COVID-19 testing and getting timely results continue to impact our international jurisdictions.

The current "gold standard" is polymerase chain reaction (PCR). https://www.healthing.ca/diseases-and-conditions/coronavirus/nose-or-spit-the-kinds-of-covid-19-tests-and-what-we-can-count-on



There are many other concepts in the queue that are being examined to increase access and also reduce turnaround times for results.

The BC model of swishing saline and gargling is a promising one for younger folks who probably would go once for a nasal swab and never again. However, it uses PCR for the actual testing. https://bc.ctvnews.ca/gargle-test-for-covid-19-works-for-adults-as-well-as-children-researcher-says-1.5111012

Also, in the United States the antigen method has been approved for use. It allows for generally swabbing an individual's mouth and receiving immediate results. Could eventually be done at home. However, as it stands the false negative and false positive rates are high. https://www.cbc.ca/news/politics/canada-covid-19-testing-devices-1.5726686

Ontario is pushing for antigen approval. https://globalnews.ca/news/7346078/doug-ford-health-canada-rapid-covid-19-tests/

An interesting concept is what is happening at Cornell.

https://www.goodmorningamerica.com/wellness/video/cornell-university-exclusive-contained-covid-19-73163035

The background is explained here.

 $\underline{https://www.ithacajournal.com/story/news/local/2020/08/31/cornell-covid-19-testing-coronavirus-process-students/3442490001/$

Also, serological testing (anti body testing) is approved for non-diagnostic testing in Canada. It is meant to identify if you possibly had COVID-19 in the past and have some anti-bodies present. https://www.canada.ca/en/health-canada/services/drugs-health-products/covid19-industry/medical-devices/testing/serological.html





Update to WRH Board of Directors (October 1, 2020)

- Dean John Yoo is planning a visit to Windsor on November 12 and 13 (COVID permitting) for a hospital leadership and faculty meet and greet. Details to follow as they become available.
- On September 30, the School held an "Addressing Racism at the Schulich School of Medicine and Dentistry" retreat. Windsor Campus Students, Faculty and staff were invited and contributed to the discussion.
- The Windsor Campus continues to work with the University of Windsor and the WECHU in providing safe face to face learning where possible. The University of Windsor has recently announced plans to keep the vast majority of students online in the second semester.
 Medical students do have specific needs and so we will continue to plan for face to face sessions where it is important.
- Interviews for the new Windsor Campus manager were completed on September 28. We hope to announce the successful candidate soon.

Respectfully submitted,

Lawrence Jacobs, MD, FRCPC, FACP Associate Dean, Windsor Campus Schulich School of Medicine & Dentistry, Western University.



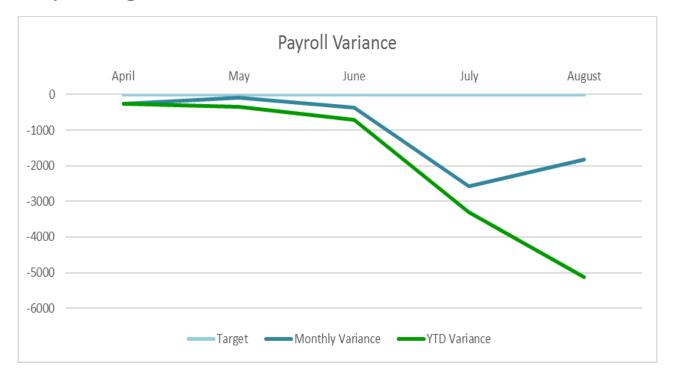


Finance/Audit & Resources Financial Presentation Board of Directors Meeting October 1, 2020

Payroll Results - \$3.3M Deficit

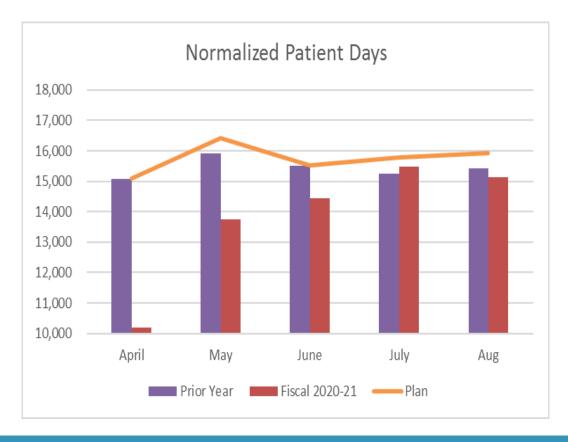
\$3.28M Pandemic Pay in July

\$3.77M Pandemic Pay in August



Volumes Patient Days

Year-to-Date Patient Days are 12% below plan



Financial Results – Hospital Operations August 31, 2020

| | Current Year Actual Budget | | | | | \$ Variance Fav/(Unfav) | % Variance Fav/(Unfav) |
|---------------------------------------------------------------------------|-------------------------------|---------|----|---------|----|----------------------------|---------------------------|
| Revenue | \$ | 224,374 | \$ | 223,686 | \$ | 688 | 0.3% |
| | | | | | | | |
| Expenses | | | | | | | |
| Salaries and Wages | \$ | 108,053 | \$ | 102,927 | \$ | (5,126) | (5.0%) |
| Employee benefits | | 27,581 | | 26,052 | | (1,529) | (5.9%) |
| Employee ben future ben. costs | | 805 | | 805 | | - | 0.0% |
| Medical staff remuneration | | 21,112 | | 21,563 | | 451 | 2.1% |
| Medical & Surgical supplies | | 13,220 | | 15,300 | | 2,080 | 13.6% |
| Drugs | | 26,278 | | 25,123 | | (1,155) | (4.6%) |
| Supplies & other expenses | | 25,290 | | 25,888 | | 598 | 2.3% |
| Long term Interest | | 614 | | 662 | | 48 | 7.3% |
| Equipment lease / rental | | 2,221 | | 993 | | (1,228) | (123.7%) |
| Equipment amortization | | 3,577 | | 3,665 | | 88 | 2.4% |
| Total Expense | \$ | 228,751 | \$ | 222,978 | \$ | (5,773) | (2.6%) |
| Surplus / (Deficit) From Hospital Operations | \$ | (4,377) | \$ | 708 | \$ | (5,085) | |
| COVID-19 related unfunded extraordinary operating expenses included above | \$ | 11,607 | | | \$ | 11,607 | |
| COVID-19 related unfunded non-ministry revenue loss included above | \$ | 4,686 | | | \$ | 4,686 | |
| YTD - Unearned Ministry volume funding | \$ | 3,300 | \$ | - | \$ | (3,300) | |
| Surplus or (Deficit) / Revenue | | -1.95% | | 0.32% | | -2.27% | |

Year-to-Date results include \$11.6M for COVID-19 extraordinary operating expenses. Revenue losses

total \$8M.

| Windsor Regional Hospital COVID-19 Expenses Year-to-Date August 2020 | | | | | | | |
|-------------------------------------------------------------------------|---------------|-----------------|--|--|--|--|--|
| | <u>Funded</u> | <u>Unfunded</u> | | | | | |
| Compensation | - | 5,383,257 | | | | | |
| Pandemic Pay | 7,004,086 | - | | | | | |
| Medical Staff Fees | 252,000 | - | | | | | |
| Med. Surg. Supplies | - | 2,636,474 | | | | | |
| Drugs | - | 70,142 | | | | | |
| Other supplies & expense | - | 1,209,149 | | | | | |
| Equipment Expenses | - | 1,390,268 | | | | | |
| Renovations | - | 917,930 | | | | | |
| Total Operating Expense | 7,256,086 | 11,607,220 | | | | | |
| | | | | | | | |
| Capital | - | \$ 2,349,425 | | | | | |
| | | | | | | | |
| Combined Total \$ | 7,256,086 | \$ 13,956,645 | | | | | |

| Windsor Regional H | lospital | | | | | | | |
|------------------------------------------------|---------------|----|-----------------|--|--|--|--|--|
| COVID-19 Revenue Loss Year-to-Date August 2020 | | | | | | | | |
| | <u>Funded</u> | | <u>Unfunded</u> | | | | | |
| Volume Based* | - | | 3,294,609 | | | | | |
| Patient Services** | - | | 3,003,787 | | | | | |
| Recoveries*** | - | | 1,682,284 | | | | | |
| Total Revenue | - | \$ | 7,980,680 | | | | | |

- * Quality Based Procedures, Neuro Services, Cardiac & Wait Time
- ** Preferred Accommodation, Co-Payment, OHIP Technical & Professional Fees, & Cosmetic Procedures
- *** Parking, Retail Food Services, Gift Shop, Leased Office Space (Physician), Patient Televisions, Print Shop & Referred In Services (Other Hospitals)

Year to Date Revenue

- Base and One-Time Funding \$3,908K favourable
 - \$2M in QBP revenue not earned as a result of elective surgery cancellations in April and May as well as lower than planned volumes from June to August
 - Operating Room volumes are 7,345 lower than planned to date
 - Remaining shortfall in neuroservices, cardiac and wait time which are all volume-based
 - One-time funding is \$7.2M favourable year to date due to:
 - Funding received for 2018/19 physician retro payments which were paid out as Medical Staff Remuneration
 - One-time funding for Pandemic Pay of \$7M
- Patient Services \$2.2M unfavourable
- Ministry Drug Reimbursements favourable \$752K
- Other Recoveries \$503K unfavourable
 - Reduction of services has effected parking and retail operations
 - Overall Revenue is favourable year to date by \$688,000

Year to Date Expenses

- Salary and Wages \$5.1M unfavourable
 - \$1.8M unfavourable in the month of August with \$3.77M attributable to the second installment of pandemic pay
 - Year-to-Date spending on COVID-19 isolation pay \$561K
 - COVID-19 Sick pay \$373K
 - Training for temporary new hires \$303K
 - \$1.63M has been paid to COVID Helpers to date
- Net Patient Services Revenue and Medical Staff Remuneration \$1.76M unfavourable due to service reductions and was only \$23K unfavourable in the month of August
- Med Surg Supplies \$2.08M Favourable
 - Savings have been incurred in the perioperative programs due to volume reductions:
 - Met Campus \$1.04M
 - Ouellette Campus \$1.8M
 - Incremental spending on Personal Protective Equipment (PPE) in the first five months of the year is \$2.05M.

Year to Date Expenses

- Drugs \$1.16M Unfavourable
 - Chemo and Renal drug expenses and recoveries are balanced
 - Retail pharmacy net drug expense to revenue is \$48,000 favourable
 - Drug expenses for clinical areas at the Met campus are \$161K under budget and at the Ouellette campus \$426K favourable year to date.
- Other Supplies and Expenses \$598K Favourable
 - Minor equipment purchases \$1,046,000 related to COVID-19
 - \$897K in one time set up costs for the St. Clair College Field Hospital
- Rental/Lease of Equipment \$1.28M Unfavourable
 - Bed rentals to ensure capacity for COVID-19 \$465K
 - Bed rentals for St. Clair College Field Hospital \$780K

Patient Access August 31, 2020

| | YTD Actual | Target | Variance |
|----------------------------|------------|--------|----------|
| Met Campus | | | |
| Acute Average LOS | 4.37 | 4.54 | 0.17 |
| Psych Average – Adolescent | | | |
| LOS | 6.99 | 6.44 | (0.55) |
| Ouellette Campus | | | |
| Acute Average LOS | 7.91 | 7.33 | (0.58) |
| Psych Average – Adult LOS | 12.59 | 12.43 | (0.16) |

Patient Volume August 31, 2020

| | Aug 2020 Actual | Aug. 2019 Actual | Variance to Prior Year |
|----------------------------------|--------------------|---------------------|------------------------|
| Met Campus | 7100001 | 710000 | 11101 1001 |
| Total Weighted Cases (estimated) | 7,588 | 10,108 | (2,520) |
| Acute Patient Days | 29,441 | 34,423 | (4,982) |
| ED Visits and Holds | 17,962 | 22,510 | (4,548) |
| Ouellette Campus | | | |
| Total Weighted Cases (estimated) | 7,609 | 10,999 | (3,390) |
| Acute Patient Days | 29,189 | 34,739 | (5,550) |
| ED Visits and Holds | 17,770 | 22,773 | (5,003) |

Organizational Health August 31, 2020

| | YTD Actual | Target | Variance |
|------------------|------------|---------|----------|
| Met Campus | | | |
| % Sick Time | 5.70% | 3.70% | (2.00%) |
| % Overtime | 2.20% | 2.30% | 0.10% |
| FTE Staffing | 1,657.6 | 1,712.3 | 54.67 |
| Ouellette Campus | | | |
| % Sick Time | 6.40% | 3.70% | (2.70%) |
| % Overtime | 4.50% | 2.30% | (2.20%) |
| FTE Staffing | 1,406.3 | 1,423.7 | 17.40 |

Red and Green year to date are showing Green/better than or Red/worse than prior month



Treasurer's Report Board of Directors

Financial Summary - August 2020 (\$000's)

| | | Aug | just 2020 Acti | uals |
|--------------------------|------|------------|----------------|------------|
| | Line | Actual | Budget | Variance * |
| Hospital Ops | | | | |
| Total Revenue | 9 | \$ 224,374 | \$ 223,686 | \$ 688 |
| Total Expense | 20 | 228,751 | 222,978 | (5,773) |
| Surplus / (Deficit) | 21 | (4,377) | 708 | (5,085) |
| Other Votes (net) | 22 | (6) | (30) | 24 |
| Other Recoveries / (Exp) | 23 | (256) | - | (256) |
| Subtotal | 24 | (4,639) | 678 | (5,317) |
| Net bldg. amortization | 25 | (673) | (740) | 67 |
| Net Surplus (Deficit) | 26 | \$ (5,312) | \$ (62) | \$ (5,250) |

| | Hospital Margin | \$ | | \$ 1, | 340 | \$ | (5,365) |
|--|-----------------|----|--|-------|-----|----|---------|
|--|-----------------|----|--|-------|-----|----|---------|

| Capital Equipment Expenditures | \$ | 8.449 | \$ | 15.383 | \$ | (6,934) |
|--------------------------------|----|-------|----|--------|----|---------|
| Oapital Equipment Expenditures | Ψ | 0,773 | ¥ | 13,303 | ÷ | (0,337) |

^{*} Variance - favourable / (unfavourable)

Operational Highlights

- 1. The operating results for the month ended August 31, 2020 resulted in a deficit of \$5,312,000 (\$4,025,000 Negative Hospital Margin) based on MoH definition. There are four significant revenue factors reflected in these, results.
- a. With respect to 2020-2021, the Ministry has committed to date to the funding that was recommended in the Optimization Review Report with the exception of the \$5 million in one time funding. Five months of this revenue has been accrued to date (\$2,083,000).
- b. Patient sevices and preferred accommodation revenue is \$3,507,000 below plan as a result of COVID-19. Diagnostic revenues are well below plan as volumes were scaled back considerably and inpatient volumes were significantly decreased as WRH created capacity for pandemic patient by cancelling elective surgeries.
- d. Recoveries are \$503,000 below plan due to decreased revenue in retail pharmacies, parking and retail food services as a result of COVID-19.
- 2. Year to date salary and wages have a negative variance of \$5,126,000 or 5.0%. The two segments of pandemic pay covering the period of April 24, 2020 to August 13, 2020 in the amount of \$7,004,000 is included in the year to date expense. These payment are funded by the Ministry of Health.
- 3. Medical/Surgical Supplies are favourable \$2,080,000 mainly due to elective surgery volumes reductions implemented to create capacity for potential COVID-19 surge.
- 4. Other Supplies and Expenses are favourable \$598,000 year to date. Prior month deficits were attributable to minor equipment purchases and renovation costs due to COVID-19 and one time set up costs for the St. Clair College Field Hospital.
- 5. Equipment lease/rental is over budget by \$1,228,000 as additional beds were rented for the St. Clair College Field Hospital and the Met and Ouellette sites in preparation for a possible surge in volumes due to the pandemic.

Penny Allen, Chair & Treasurer, Finance/Audit & Resources Committee October 1, 2020



MOTION/ACTION SHEET

From The

FINANCE/AUDIT & RESOURCES COMMITTEE MEETING <u>General Session</u>

Monday, September 21, 2020

THERE ARE NO RECOMMENDATIONS FROM THE FINANCE/AUDIT & RESOURCES
COMMITTEE



MINUTES from the meeting of the **FINANCE/AUDIT & RESOURCES COMMITTEE** *(General Session)* held on Monday, September 21, 2020 Via Zoom.

PRESENT:

Penny Allen Beth Yeh
Arvind Arya Dianne Aziz
Dr. Laurie Freeman Ian McLeod

Dr. Larry Jacobs Paul Lachance

Anthony Paniccia, Chair of the Board

REGRETS:

Sandra Boglitch

STAFF:

David Musyj Mark Fathers Heidi Zimmer Kevin Marshall Mary Macera

1.0 CALL TO ORDER

Mrs. Allen called the meeting to order at 5:20 p.m.

The proceedings were recorded by Mary Macera.

2.0 APPROVAL OF AGENDA

MOVED by Paul Lachance, SECONDED by Laurie Freeman that the General Finance/Audit & Resources Committee Agenda of Monday, September 21, 2020 be approved.

CARRIED.

3.0 CONFLICT OF INTEREST

No "Conflict of Interest" was declared.

4.0 PRESENTATIONS

There were No Presentations.

5.0 FOR APPROVAL / RECOMMENDATION

5.1 <u>Minutes of Previous Meeting – Monday, August 24, 2020</u>

The Finance/Audit & Resources Committee Minutes of the **General** Meeting of **Monday**, **August 24**, **2020** were previously circulated to all members.

MOVED by Ian McLeod, SECONDED by Arvind Arya that the General Meeting Minutes from the Finance/Audit & Resources Committee of Monday, August 24, 2020 be approved.

CARRIED.

6.0 FOR DISCUSSION

6.1 Monthly Operating Results Report – August 31, 2020 (As Appended)

Ms. Zimmer provided the financial presentation.

- ✓ The operating results for the five months ended August 31, 2020 result in a deficit of \$5,312,000 (\$4,025,000 negative hospital margin).
- ✓ There are two items to note: Operating results include \$14.9 million in higher operating costs and lost revenues attributable to COVID. WRH received funding details for the 2020-2021 fiscal year in June 2020. All was confirmed with the exception of the \$5 million in one-time funding.
- ✓ Payroll variance of \$3.3 million; includes \$7 million in pandemic pay (entirely funded by the Ministry of Health). Pandemic pay was paid out in two segments, one in July and one in August.
- ✓ Normalized Patient Days are somewhat below plan; year-to-date 12% below plan.
- ✓ \$14.9 million includes revenue loss as well. Details on the \$14.9 million were provided with those segments that are funded and those that are not; \$14.9 million in operating and \$2.3 million in capital for a total of \$17.2 million unfunded.
- ✓ LHIN has supported our (WRH) submission for expenses incurred for the field hospital. This will add another \$1.4 million for a total of \$16.2 million (this will be updated/reflected for next month).
- ✓ OBPs are \$2 million unfavourable due to volume reductions.
- ✓ Revenue base and one-time is \$3.9 million favourable.
- ✓ Patient services \$2.2 million unfavourable due to Diagnostic Imaging, Preferred Accommodations, just to name a few.
- ✓ Ministry drug reimbursements is favourable by \$752,000 (due to chemo suite and renal program).
- ✓ Other recoveries is \$503,000 unfavourable (retail services, Tim Horton's, Subway, Parking, etc.).
- ✓ Salaries and wages is \$5.1 million unfavourable; \$3.7 million for pandemic pay paid out.
- ✓ COVID isolation pay \$561,000; COVID sick \$373,000 and training for new hires is at \$373,000; \$1.63 million out to COVID helpers.

- ✓ Med/surg supplies are favourable.
- ✓ Drugs \$1.16 million unfavourable; clinical areas somewhat under budget.
- ✓ Other supplies/expenses \$598,000 favourable.
- ✓ Rental/lease of equipment unfavourable.
- ✓ Met campus psych saw some slight increases.
- ✓ Weighted cases are lower than planned at both campuses due to reduced volumes; same for patient days and ED visits (although starting to pick up).
- ✓ Sick time for both campuses improvement at both campuses over previous month.
- ✓ Overtime slightly declined in the current month at Ouellette; favourable at Met.

As part of the discussions surrounding the COVID expenses, slide 5 of Ms. Zimmer's presentation was further reviewed. Mr. Musyj wanted to clarify the revenue part which is \$4.686; \$3 million of the \$4.686 is not earned because we did not do those volumes. It was confirmed that QBPs are not included in that number. Administration will make some minor changes to the presentation to add further clarity.

Mr. Musyj commented that the government may look at our COVID expenses at the end of the year and instead of cutting a cheque for COVID expenses, they may suggest to take monies not spent on QBPs and give us \$.080 on a dollar as an example.

Total expenses for COVID is currently at \$10.2; not included is the staff costs for the field hospital of \$1.4 million. Staff working at the field hospital at the time was not additional staff; they were redeployed staff and not included in our operating costs. The theory is if the staff was not utilized at the field hospital, we would have sustained layoffs due to no volumes, so in essence, there was a cost to us to place staff in the field hospital due to COVID.

Mr. Musyj continued that he has been hearing across the province, scandalous numbers related to reimbursement requests that have been all over the map. It was suggested that on these charts moving forward to the next meeting, explanation(s) is/are to be provided for "before COVID, finance would have looked like"; we would have had a healthy surplus.

The Finance Committee was asked to digest this information and feel free to ask any questions as they come up. Mr. Musyj concluded that we will need to keep on top of this as numbers will become confusing.

In October, we will attempt to bring forth a Budget Risk Item(s) Schedule.

6.2 Health Infrastructure Renewal Fund

Mr. Marshall commented that WRH has received a letter from the Ministry of Health confirming receipt of \$1,168,227 in one-time funding for 2020-2021 Health Infrastructure Renewal Fund (HIRF).

This fund has been ongoing for over 15 years now, where funds are provided to us to complete smaller projects as part of our infrastructure; every three years a facilities assessment is done. The funds must be spent by the year-end. Last year's funds were spent on three different projects of which we would like to have these three projects finished with this year's funds. Included in the HIRF funding is \$300,000 for Exceptional Circumstances related to a specific roof replacement project.

7.0 FOR INFORMATION

7.1 Broader Public Sector Business Documents (August 27, 2020)

For the committee's information.

7.2 Ontario Health – Patient Perspective & Topline Org Structure (September 9, 2020)

For the committee's information.

7.3 President's Report (September 2020)

For the community members information.

7.4 Windsor Regional Hospital Healthcare Acronyms

> A list of WRH Healthcare Acronyms was provided to the committee members. There are a couple more that will be added to the list.

If an acronym has been missed, please feel free to contact Mary Macera.

There was no further husiness therefore Mrs. Allen adjourned the meeting at E.E.7 a.m.

8.0 DATE OF NEXT MEETING

The Finance/Audit & Resources Committee will meet on Monday, October 26, 2020 at 5:00 p.m. Via Zoom.

9.0 ADJOURNMENT

FinAudit&Resources Minutes

20200921

| There was no further business, therefore, Mrs. Allen adjourned the meeting at 5:57 p.m. | | | | | | |
|-----------------------------------------------------------------------------------------|-------------|--|--|--|--|--|
| | | | | | | |
| Mrs. Penny Allen, Chair & Treasurer | Mary Macera | | | | | |
| FinAudit&Resources Minutes | Recorder | | | | | |

Windsor Regional Hospital

Operating Results Report

For the Five Months Ended August 31, 2020

| | | (\$000's) | | | | | |
|--------------------------------|------|---------------------|----|---------|----|------------|--|
| | | August 2020 Actuals | | | | | |
| | Line | Actual | | Budget | | Variance * | |
| Hospital Ops | | | | | | | |
| Total Revenue | 9 | \$224,374 | \$ | 223,686 | \$ | 688 | |
| Total Expense | 20 | 228,751 | | 222,978 | | (5,773) | |
| Surplus / (Deficit) | 21 | (4,377) | | 708 | | (5,085) | |
| Other Votes (net) | 22 | (6) | | (30) | | 24 | |
| Other Recoveries / (Exp) | 23 | (256) | | | | (256) | |
| Subtotal | 24 | (4,639) | | 678 | | (5,317) | |
| Net bldg. amortization | 25 | (673) | | (740) | | 67 | |
| Net Surplus (Deficit) | 26 | \$ (5,312) | \$ | (62) | \$ | (5,250) | |
| | | | | | | | |
| Hospital Margin | | \$ (4,025) | \$ | 1,340 | \$ | (5,365) | |
| | | | | | | | |
| Capital Equipment Expenditures | | \$ 8,449 | \$ | 15,383 | \$ | (6,934) | |

Operation Highlights:

- The operating results for the five months ended August 31, 2020 resulted in a deficit of \$5,312,000 (\$4,025,000 Negative Hospital Margin) based on MoH definition. There are two items worth noting
 - a. Operating results include \$14.9 million in higher costs and lost revenues attributable to meeting our clinical responsibilities related to COVID-19. While the Ministry has indicated their intent to cover most of these costs, that mechanism has yet to be shared with the Ontario hospitals. Revenue losses have not yet been addressed by the MoH beyond reimbursement for services provided to uninsured residents. As a result, we have not booked any recovery at this time other than the recognition of \$252,000 for medical fees flowing under a COVID-19 funding agreement between the Ministry and the OMA. WRH has paid \$7 million for pandemic pay to employees through August 2020. We have received 75% of the total funding allocation of \$7.13 million to date. The difference has been accrued in these statements.
 - b. WRH received funding details for the 2020-2021 fiscal year on June 4, 2020. In comparing these details to what was included in our 2020-21 budget for Ministry funding (which was based on the recommendations in the Optimization Review Report), all has been confirmed with the exception of

the \$5 million in one-time funding. Assuming the Ministry will honour the recommendations in the report, we have accrued five months of this revenue in the August 2020 results (\$2,083,000). A formal follow up letter has been sent to the Ministry with respect to this one time funding amount. If we did not accrue this revenue, the deficit would be approximately \$7.4 million and the surplus for the month would be approximately \$1.3 million (COVID-19 costs included).

1. Financial Results for the Five Months ended August 31, 2020 (Statement 2)

For the five months ended August 31, 2020, the deficit after net building amortization is \$5,312,000, which is \$5,250,000 worse than plan. This represents a negative Ministry of Health Margin of \$4,025,000 (one year ago, this negative margin was \$3.5 million). Extraordinary operating expenses and revenue losses related to COVID-19 in the amount of \$14.9 million are included in this deficit. In the month of August, the COVID-19 impact was \$2.8 million. Here is a chart that shows the revenue losses and costs that have been incurred in the period April 1 to August 31, 2020 and which have been funded or not funded —

| Windsor Regional Ho | spit | al | | |
|--------------------------|------|---------------|----|------------------|
| COVID-19 Expenses Y | ear | -to-Date A | ug | ust 2020 |
| | | Funded | Į | <u> Jnfunded</u> |
| Revenue | | | | |
| Patient Services | | - | | 3,003,787 |
| Recoveries | | ¥ | | 1,682,284 |
| Total Revenue | | : | | 4,686,071 |
| Expense | | | | |
| Compensation | | - | | 4,303,856 |
| Pandemic Pay | | 7,004,086 | | ₩(|
| Medical Staff Fees | | 252,000 | | =1 |
| Med. Surg. Supplies | | | | 2,611,628 |
| Drugs | | - | | 60,001 |
| Other supplies & expense | | :- | | 950,022 |
| Equipment Expenses | | = | | 1,378,894 |
| Renovations | | | | 917,930 |
| Total Expense | | 7,256,086 | | 10,222,331 |
| Total Operating | \$ | 7,256,086 | \$ | 14,908,401 |

It should also be noted that with respect to Ministry volume based funding, we have unearned revenue for these first five (5) months of \$3.3 million as compared to \$0.8 million one year ago.

Revenue

Ministry revenue (combined base and one-time) is \$3,908,000 higher than budget. One time funding is favourable year to date, as approximately \$7 million in one time pandemic pay funding has been recognized to date. This funding is offset by wages and benefits for the two installments of pandemic pay paid to those eligible staff. Early in the fiscal year, the Ministry directed reduction in Hospital elective services and the corresponding volume reductions have reduced the amount of revenue earned for Quality Based Procedures (QBPs), wait time procedures, neuroservices and cardiac funding. As an example, for QBP funded volumes, our year to date August revenues are \$2 million lower than one year ago.

Ministry drug reimbursements have a positive variance of \$752,000 (8.2%). This revenue comes from the Cancer Centre's New Drug Funding program and the renal program. This revenue has been favourable for the last two months and offsets the corresponding drug expenses in both programs.

The preferred accommodation revenue variance is unfavourable to budget by \$1,280,000 and is tracking lower than last year by \$1,352,000. Lower occupancy due to the reduced number of elective surgeries contributes to this shortfall, as well as the Ministry of Health directive that hospitals cannot bill uninsured patients for semi-private and private accommodation during the pandemic. Previously, uninsured patients would have paid out of pocket for this accommodation. Infection prevention and control measures often require patients to be placed in private rooms and we are unable to bill for this accommodation in these circumstances.

Chronic Co-payment revenue is \$18,000 under budget due to the factors mentioned above for preferred accommodation.

Patient Services revenue variance is \$2,209,000 unfavourable (16.7%) year to date. Diagnostic revenues are well below plan, as outpatient volumes were reduced significantly due to pandemic restrictions. Inpatient volumes were reduced as elective surgeries were cancelled in order to create capacity for a potential surge in pandemic patients.

Equipment Grant amortization is \$38,000 (3.5%) higher than budget. Timing of the receipt of these grants affects their amortization.

Other Recoveries are \$503,000 unfavourable (2.8%) to budget. Similar to patient services, this revenue category was also impacted by the reduction in hospital services. Revenues were significantly reduced for parking and retail pharmacy and food operations. Parking fees for staff, physicians and visitors were reinstated in August and revenue was favourable to budget by \$30,000 for the month mainly due to the timing of the receipt of physician annual parking payments. All three retail pharmacies (Met, HIV and We Care) were balanced in terms of net drug revenue relative to drug expenses in the month of August.

Expenses

Salaries are currently over budget (unfavourable) by \$5,126,000 (5.0%) year to date with a negative variance in the month of August of \$1,825,000. The second segment of pandemic pay, which covered the period of June 20, 2020 to August 13, 2020, was paid in the month of August in the amount of \$3,777,000. As mentioned previously, one-time revenue has been recognized equal to this amount in the month of August. Although capacity is reduced and volumes have declined, there have been considerable costs incurred because of COVID-19. Year to date spending for employees in paid isolation is \$561,000, paid sick time due to COVID-19 is \$373,000 and training for temporary staff hires totalled \$303,000. In total, these temporary hires (COVID Helpers) have been paid \$1,629,000 to date. Staff who normally work in areas where volumes were reduced had been redeployed to the screening desks, the COVID-19 Community Assessment Centres and the St. Clair College (SCC) field hospital. As hospital operations return to normal continuing to staff these areas will create pressures with respect to staff availability which is being mitigated by the hiring of temporary full and part-time staff.

Employee Benefits are unfavourable to budget by \$1,529,000 (5.9%). The variance is attributable to the wage variance.

Employee Future Benefits are currently on budget.

Medical Staff Remuneration is under budget (favourable) by \$451,000 (2.1%). Reduced services in diagnostic departments has resulted in this savings, however, the associated patient services revenues are also much lower than planned.

Medical & Surgical Supplies are favourable to budget by \$2,080,000 (13.6%) year to date. The perioperative programs at both sites are favourable due to the cancellation of elective surgeries with the Met campus favourable by \$1,036,000 and Ouellette \$1,753,000. In the Diagnostic Departments, Interventional Radiology and the Cardiac Catheterization Lab are \$392,000 to date under budget because of volume decreases. Due to COVID-19, spending on Personal Protective Equipment (PPE), which is included in medical & surgical supplies expense, has increased. The incremental cost for PPE for the first five months of the fiscal year is approximately \$2,049,000. It should be noted that elective surgery cancellations affect the ability to hit QBP funded volumes and may result in funding having to be returned to the MOH at year-end. For 2020-21, no determination has yet been made regarding the Ministry's recovery policy for volume-based procedures due to COVID-19.

Drug expenses are over budget (unfavourable) by \$1,155,000 (4.6%) as the activity in the retail pharmacies, chemotherapy suite and the renal program are returning to pre-COVID-19 levels. In the month of August, drug expenses were 13% favourable at the Met Campus inpatient and outpatient departments and 15% favourable at the Ouellette Campus. Drug expenses are 16% below budget in clinical departments year to date.

Supplies and Other Expenses are favourable to budget by \$598,000 (2.3%). Included in these costs are minor equipment purchases (\$1,046,000) and one-time St. Clair College Field Hospital set up costs (\$897,000) related to COVID-19 activity. As an offset, laundry costs are lower than budget by \$156,000 and lab supply costs are \$197,000 under budget both due to lower inpatient and outpatient volumes. Referred out expenses for hip and knee replacements under the "Bundled Care" model are favourable \$393,000 to date due to the postponement of the related surgeries. These expenses relate to post-surgical services for inpatient rehabilitation, home care and outpatient physiotherapy. Utility costs are \$896,000 under budget due to the energy rebate. This rebate expires at the end of October 2020. Courier costs are \$166,000 over budget and includes the costs related to sending COVID-19 tests to London for analysis. These additional costs are being included as part of our COVID-19 cost submissions to the Ministry.

Long-term Interest expense is \$48,000 (7.3%) under budget. This is due to the interest rate on the capital loans (2.46%) being lower than budgeted (3.26%).

Equipment Lease/Rental is \$1,228,000 unfavourable to budget (123.7%). This is due to the rental of beds to increase capacity in preparation for COVID-19 and to equip the St. Clair College Field Hospital with 100 beds.

Equipment amortization is \$88,000 under budget (2.4%).

Other Votes - Other Votes are \$24,000 favourable.

Other Recoveries *I* **(Expenses)** – consistent with the year financial statement presentation. We have segregated the legal fees related to a particular legal case. Year to date August 2020, these expenses amount to \$256,000.

2. Statement of Financial Position (Statement 3)

On April 30, 2020, we received a \$35 million Ministry cash advance that must be fully repaid by the end of the fiscal year. This cash advance had reduced the need to use the line of credit, but as indicated on Statement 5, the line of credit was used for thirty-one (31) days in the month of August at an average balance of \$15,006,000. A contributing factor is the Ministry funding cash flow to date did not include the new funding for fiscal 2020-21 until the August 31, 2020 payment. Also the additional COVID-19 expenses which have yet to be reimbursed adding to the stress on the credit line. We reached out to the LHIN and will be getting an additional \$10.0 million cash advance by September 30th that will be repaid most likely in January 2021 (details to be confirmed).

Our inventory balance as at August 31 is \$6,657,000 higher than March 31 and includes \$5.3 million in masks. The remaining difference relates to bulk purchases of linen inventory, PPE and higher drug inventory related to COVID-19 preparation.

Our Ministry / CCO receivable has increased by \$8.3 million and includes \$1.8 million related to the confirmed base funding increase yet to be cash flowed along with \$2 million related to the one time funding yet to be confirmed. The remaining \$4.5 million is receivable from CCO mainly for reimbursement of qualifying drug expenses.

3. Patient Volumes (Met Campus only)

Acute care patient days are 4,982 lower than both the budget and the same period last year. Combined ED visits and holds for the year are 4,840 below budget and 4,548 fewer than last year at this time. Acute separations are 3,052 lower than plan, and are 1,215 lower than one year ago. Combined OR Inpatient and Day Surgery cases are 3,132 cases lower than plan. Ambulatory and community visits are 8,486 below plan and 8,015 lower than one year ago. Weighted cases are estimated to be 2,792 lower than plan and 2,520 lower than one year ago.

Patient Volumes (Ouellette Campus only)

Acute care patient days are 5,302 days below budget year to date and 5,550 days lower than the same period last year. Acute separations are 4,075 lower than plan and 955 lower than last year. Mental health patient days are 471 days higher than budget and the same period last year. OR Inpatient and Day Surgery cases are currently 5,524 lower than plan. ED visits and holds at Ouellette are 4,942 below budget and 5,003 lower than the prior year. Ambulatory visits are 16,466 below budget and 16,244 visits lower than prior year. Community visits are 29,011 above plan, as this includes 29,640 visits to the COVID-19 Community Assessment Centre. In the month of August, there were 9,196 visits to the Assessment Centres at the Ouellette and St. Clair campuses. Weighted cases are estimated to be 3,039 lower than plan and 3,390 less than one year ago.

Patient Volumes (St. Clair College Field Hospital only)

Acute care patient days at the St. Clair College Field Hospital are 1,568 days and 271 weighted cases. The Field Hospital was closed on June 12, 2020, but is ready to reopen on a few hours notice.

Patient Access

Acute care length of stay at Met was 4.37 days as compared to a target of 4.54 days. Lengths of stay for Ouellette acute care was 7.91 days versus a plan of 7.33. Length of stay for the adult psychiatric patients was 12.59 slightly above the plan of 12.43 days and Maryvale (adolescent psychiatry) length of stay is 6.99 compared to the target of 6.44.

4. Organizational Health

The percentage of sick time year to date for the Met Campus is 5.70%, which is over target by 2%, while overtime is .10% below the target at 2.00%.

Sick time at the Ouellette Campus is 6.40% compared to the target of 3.70%, while overtime is over target at 4.50% year to date compared to the target of 2.30%.

Some of the increase in sick time costs at both campus relates paying staff to remain home in isolation due to COVID-19. We are also assuming some of the incidental sick time is staff dealing with childcare issues.

With respect to FTEs, the Met Campus is favourable to budget by 54.7 FTE. This is comprised of a 44.4 FTE surplus in hospital operations and an 10.3 FTE surplus in Cancer Centre operations. At the Ouellette Campus, the FTE variance is favourable by 17.4 FTE.

FTEs attributable to COVID-19 additional staffing are 115.5 in total, 83.3 for hospital operations and 32.2 for the St. Clair College Field Hospital.

Statement #1
WINDSOR REGIONAL HOSPITAL
Consolidated Operating Results for the Five Months Ending August 31, 2020

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|-------------------|-----------------------|-------------------|-------------------------|-----------------------------|--------------------------------|-------------------------|--------------------|------------------|----------------------------|------------------|---------------|-------------------|------------|-------------------|---------------------------------|----------------------------|-----------------------------|---------|---------------------------|---------------------------|----------------------|---------------|-------------------------------|------------------------------------|-------|------------------------|---|------------------------------------------------------------|
| Prior Year Actual | Year End | | 401,055 | 27,770 | 22,103 | 3,620 | 47 | 32,594 | 6,550 | 43,232 | 536,971 | | 242,858 | 61,424 | 2,325 | 54,183 | 35,882 | 60,153 | 61,257 | 2,675 | 13,947 | 534,704 | 572 | 2,839 | | 6,167 | | 1 |
| Year | | | 55 \$ | 22 | 46 | 21 | 19 | 56 | 80 | 90 | 38 | | 88 | 42 | 805 | 72 | 87 | 23 | 19 | 30 | 12 | 88 | (527) | \$ (22 | | 61) \$ | | |
| Prior | Year to Date | | 168,055 | 8 | 7,9 | 1,621 | | 13,326 | 2,808 | 17,3 | 219,638 | | \$ 103,298 | 26,542 | ∞ | 22,272 | 14,887 | 23,423 | 25,9 | 1,030 | 5,8 | 223,988 | (5) | (4,877) | | (3,461) | | 3 |
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| Year End | Budget | | 411,915 | 20,003 | 22,022 | 3,696 | 42 | 31,867 | 6,456 | 42,960 | 538,961 | | 245,514 | 63,695 | 1,933 | 52,163 | 36,237 | 60,252 | 64,228 | 2,402 | 14,448 | 540,873 | | (1,912) | | 2,098 | | |
| Year | Buc | | \$ 41 | 7 | 7 | | | e | | 4 | \$ 53 | | \$ 24 | 9 | | ιΩ | ന | 9 | 9 | | - | \$ 54 | | s | | ω | | |
| ! | ast | | 915 | 203 | 322 | 3,696 | 42 | 367 | 6,456 | 960 | 361 | | 514 | 395 | 1,933 | 163 | 237 | 252 | 64,228 | 2,402 | 14,448 | 873 | , | (1,912) | | 2,098 | | |
| | Forecast | | \$ 411,915 | 20,003 | 22,022 | က် | | 31,867 | Ġ | 42,960 | \$ 538,96 | | \$ 245,514 | 63,695 | - | 52,163 | 36,237 | 60,252 | 64, | 2 | 4 | \$ 540,873 | | \$ (1, | | \$ 2, | | |
| l | | | | %9 | % | 3% | %0 | 1 %6 | 5% | %2 | 1 | | - | _ | %0 | %6 | 9%6 | %0 | - %0 | 1% | 5% | ا | | | 1 | | 1 | |
| | % | | -1.90% | 84.75% | 8.20% | -82.63% | -100.00% | -16,66% | 1.52% | -2.82% | 0.30% | | 4.96% | -5.86% | %00'0 | 2.09% | 13.59% | 4.60% | 2.50% | -123,67% | 2.52% | -2.51% | #DIV/0i | | | | | |
| | ıfav) | | (3,279) | 7,167 | 752 | (1,280) | (18) | (2,209) | 41 | (488) | 675 | | (5.107) | (1,527) | | 451 | 2,080 | (1,155) | 665 | (1,228) | 152 | (5,669) | 256 | (5,250) | | (5,365) | | 000 |
| te l | Fav/(Unfav) | | 8 | , ^ | | Ξ | 9) | 0 | 5 | | ક | | \$ | | • | | .4 | Ξ | | Ξ | | 3) | | 3) \$ | | \$ (£ | | 3 |
| Year To Date | | | | 75 | 92 | 6 | 18 | 60 | 8 | 8 | | | | | 22 | 33 | 8 | 23 | 37 | 33 | 20 | 1000 | | (62) | | | | |
| Year | Budget | | 172,522 | 8,457 | 9,176 | 1,549 | | 13,259 | 2,690 | 17.718 | 225,389 | | 102,995 | 26,065 | 805 | 21,563 | 15,300 | 25,123 | 26,587 | 993 | 6.020 | 225,451 | 1 | ۳ | | 1,340 | | |
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| | la. | | 169.243 | 15,624 | 9.928 | 269 | ı | 11,050 | 2,731 | 17.219 | 226,064 | | 108.102 | 27 592 | 805 | 21.112 | 3.220 | 6.278 | 25,922 | 2.221 | 5.868 | 231,120 | (256) | (5,312) | | (4,025) | | 000 |
| | Actual | | | | 7. | | | _ | | - | 2 | | \$ 10 | | | 7 | ٠ | N | 7 | | | \$ 23 | | 8 | | 8 | | |
| | | | 49 | Ę | | | | | | | 69 | | - | | | | | | | | | 07 | | W |] | | | |
| | | | | | Ď. | į | | | | | | | | | costs | | | | | | | | | ري د | | | | uses |
| | Ę | (s,00 | 4 | -time | Ministry Funding - Drug Reimb. | tion | | | io | | Jue | (s,00 | | | Employee ben - future ben costs | ation | polies | | nses | <u>t</u> | | ıse | euse) | 20 Net Surplus (Deficit) - \$000's | | П | | COVID-19 related unfunded extraordinary operating expenses |
| | Description | Revenue (\$000's) | - Base | -One | - Drug | modat | ent | | ortizati | | Total Revenue | Expense (\$000's) | | its | future | Medical staff remuneration | Medical & Surgical supplies | | Supplies & other expenses | Fourinment lease / rental | tion | Total Expense | exp(| ficit) | | s,00 | | d unfu erating |
| | Desc | evenu | ding | dina | ding | CCOM | myea | ices | it amo | eries | Total | xpens | | Employee benefits | ben - | aff ren | Surgic | , | other | lease | Capital amortization | Total | veries | s (De | | n - \$0 | | relate ry ope |
| ı | | ď | 7 | - E | . A | red A | 00.00 | tserv | larar | recov | | ú | | OVER | ovee | sal sta | 8 18 | ,,, | lies & | ment | 7 | 5 | reco | urplu | l | Margi | | 0-19 ı ırdina |
| | | | Ministry Funding - Base | Ministry Funding - One-time | Minist | Preferred Accommodation | Chronic co-payment | Patient services | Capital grant amortization | Other recoveries | | | Salaries | Fmp | Fmp | Medic | Medic | Drugs | Supp | For | Capit | | 20 Other recoveries (expense) | Net S | | Total Margin - \$000's | | COVID-19 related unfunded extraordinary operating expe |
| L | | | | | _ | 4 | | | | α | + | | 10 | | | 1 6 | 4 | ζ. | 19 | 17 | ά. | 6 | | _ | | ~ | | |
| | Fav/(Unfav) Budget | | (222) | 3 623 | 482 | (223) | (4) | 160 | 8 | 115 | 3,923 | | (4 828) | (678) | , , | (183) | (225) | (566) | 241 | 8 | 45 | (3,202) | (53) | 899 | | 635 | | i |
| Current Month | Fav/(But | | e. | | | | | | | | 69 | | ¥ | | | | | | | | | 89 | | s, | | မ | | |
| rrent | - | | 34 694 | 5,330 | 2,317 | 5 6 | , | 2 843 | 530 | 3 547 | 49.352 | | 22 646 | 5,338 | 161 | 4 515 | 3 027 | 5,583 | 4 996 | 200 | 150 | 47,631 | (53) | 1,668 | | ,917 | | |
| បី | Actual | | 34 | | 00 | 1 | | 0 | ĺ | " | 49 | | 22 | 1 10 |) | 4 | · m | יע | 0 4 | • | * | 47 | | ٦ | | 1 | | (|
| L | | | в | • | | | | | | | မာ | | U | • | | | | | | | | 69 | | ₩ | | ક્ક | | |

Statement #2 WINDSOR REGIONAL HOSPITAL Operating Results for the Five Months Ending August 31, 2020 Consolidated - Met and Ouellette Campuses

| | Current Month | Month | | L | | | Year To Date | ite | | i | i i | Year End | | i i | L | Prior Year Actual | Actual | |
|-----|---------------|----------------|------------------------------|----------------|-------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|-------------|-----------|---------|----------------|-------|---------------|------------|-------------------|------------|-------|
| | | Fav/(L Unap | Fav/(Unfav) to Unapproved | | Description | | i de la companya de l | Ц | Andre March | | 1000 | ָּהָלָ מַלְ | u | Constitutions | | ote Cotree | Year Tree | τ |
| | - Craa | á | 1000 | | Revenue (\$000's) | 5 | i i | | 6 | | 1000 | | | (apillo) in | <u>.</u> | 1 | 3 | 2 |
| G | 34,677 | es | (222) | - | Ministry Funding - Base | \$ 169,180 | \$ 172,439 | 6 | (3,259) | 4 | 411,645 | \$ 411,645 | 69 | 115 | ω | 167,993 \$ | \$ 400,826 | 26 |
| 6 | 5,330 | | 3,623 | 7 | Ministry Funding - One-time | 15,624 | 8,457 | 7 | 7,167 | 7 | 20,003 | 20,003 | m | , | | 8,557 | 27,770 | 2 |
| | 2,317 | | 482 | ო | Ministry Funding - Drug Reimb. | 9,928 | 9,176 | 9 | 752 | | 22,022 | 22,022 | CI. | 3 | | 7,946 | 22,103 | 03 |
| | 9 | | (223) | 4 | Preferred Accommodation | 269 | 1,549 | o | (1,280) | _ | 3,696 | 3,696 | (0 | • | _ | 1,621 | 3,620 | 50 |
| | 3 | | 4 | ß | Chronic co-payment | į | 18 | œ | (18) | | 45 | 42 | N | | - | 19 | • | 47 |
| | 2,843 | | 160 | 9 | Patient services | 11,050 | 13,259 | o o | (2,209) | <u>ო</u> | 31,867 | 31,867 | ~ | 31 | | 13,326 | 32,594 | 94 |
| | 206 | | 6) | 7 | Equipment grant amortization | 1,113 | 1,075 | 2 | 88 | | 2,580 | 2,580 | 0 | ı | | 1,226 | 2,662 | 29 |
| | 3,540 | | 109 | ∞ | Other recoveries | 17,210 | - 1 | | | 4 | 42,914 | - 1 | | 1 | | | - 1 | 20 |
| σ | 49,004 | မ | 3,916 | თ | Total Revenue | \$ 224,374 | \$ 223,686 | 9 | 688 | \$ 53 | 534,769 | \$ 534,769 | 8 | 1 | د ه | 217,982 \$ | \$ 532,772 | 72 |
| | | | | | Expense (\$000's) | | | | 3 | | | | | | | | | |
| G | 22,630 | s | (1,825) | 9 | | \$ 108,053 | \$ 102,927 | 7 \$ | | \$ 24 | 245,344 | \$ 245,344 | 4 | 1 | ω | 103,250 \$ | (1 | 20 |
| | 5,335 | | (677) | 7 | 21 - 217 | 27,581 | 26,052 | 2 | (1,529) | φ | 63,663 | 63,663 | m | * | | 26,528 | 61,387 | 187 |
| | 161 | | | 12 | | 802 | 802 | ις. | • | | 1,933 | 1,933 | m · | 1 | | 805 | 2,325 | 125 |
| | 4,515 | | (183) | 13 | | 21,112 | 21,563 | m · | 451 | ري ري | 52,163 | 52,163 | m | r | _ | 22,272 | 54,183 | 83 |
| | 3,027 | | (225) | 4 | | 13,220 | 15,300 | 0 | 2,080 | ლ (| 36,236 | 36,236 | 0 | 1 | - | 14,887 | 35,881 | 5 6 |
| | 5,583 | | (296) | 15 | | 26,278 | 25,123 | m | (1,155) | ω · | 60,252 | 60,252 | Ν, | 1 | | 23,423 | 60,153 | 53 |
| | 4,874 | | 223 | 16 | 20.0 | 25,290 | 25,888 | · ο | 298 | ω | 61,846 | 61,846 | · O | I.c. | | 25,148 | 59,414 | 4 |
| | 118 | | 4 | 17 | | 614 | 662 | 7 | 48 | | 2,234 | 2,234 | 4 | 1 | | 743 | 1,695 | 92 |
| | 206 | | ® (| 18 | | 2,221 | 883 | ღ | (1,228) | | 2,389 | 2,389 | o 1 | | | 1,030 | 2,675 | 75 |
| | 40/ | | 23 | 3 | Eduipment | | 7 | 1 | - 1 | ľ | 8,796 | - [| | E | | | | 9 |
| es) | 47,153 | s | (3,218) | 8 | Total Expense | \$ 228,751 | \$ 222,978 | œ | (5,773) | \$ 23 | 534,857 | \$ 534,857 | 8 | , | <i>-</i> Τ | 221,643 \$ | 528,859 | 629 |
| 69 | 1,851 | ø | 869 | 7 | Surplus / (Deficit) From Hospital Operations | \$ (4,377) | \$ 708 | 8 | (5,085) | φ. | (88) | (88) | \$ (8 | i | φ | (3,661) \$ | 3,913 | 13 |
| | | | | | | ار 00's) | | | | | | | | | | | | , |
| | - | | 9 | 22 | Other Votes (net) | | (30) | 6 | 24 | | (48) | (48) | 3 | ij | | (16) | ن | 13) |
| | (53) | | (53) | 23 | Other Recoveries / (Expenses) | (256) | | | (256) | | 1 | | | 1 | <u> </u> | (527) | 5. | 572 |
| | 1,799 | | 651 | 24 | Subtotal | (4,639) | 678 | 60 | (5,317) | | (136) | (136) | (9 | ï | | (4,204) | 4,472 | .72 |
| ь | (131) | | 17 | 25 | Net Building Amortization | \$ (673) | \$ (740) | (0 | 67 | \$ | (1,776) | \$ (1,776) | 3) | 1 | φ | (673) \$ | \$ (1,633) | (33) |
| G | 1,668 | s | 899 | 56 | Net Surplus (Deficit) - \$000's | \$ (5,312) | \$ (62) | 2) \$ | | \$ | (1,912) | \$ (1,912) | 2) \$ | 7 | ₩ | (4,877) \$ | 2,839 | 39 |
| 69 | 2,084 | | (2,084) | 27 | 7 | \$ 11,607 | မ | | (11,607) | <u>%_</u> | [| ω | · · · | . | | | ! | 1,629 |
| j. | | - | -]. ! | . j. | included above | | | | 1 | j. | 1 | | i | 1 | .j. | .). !-!!! | | 1 |
| ωį | 669 | S | (669) | ⁸ I | | \$ 4,686 | s | φ <u> </u> | (4,686) | ς i | , | دی | φ | , i | φ j | <u>ه آ</u> ا | į | |
| ω | 990 | w | (099) | 83 | YTD - Unearned Ministry volume funding | \$ 3,300 | | <u>.</u> . | (3,300) | <u>.</u> | 1 | 69 | | • | . <u></u> | . . | | 1,110 |
| j | | 1 | 7 | Ė | | | | 1-1- | 1 | į | | | 1 | ! | 1 | | | 7 |

WINDSOR REGIONAL HOSPITAL Operating Results for the Five Months Ending August 31, 2020 Consolidated - Met and Ouellette Campuses

| | Current Month | Month | | | Year To Date | | | Year End | | Pri | Prior Year Actual | tual |
|-----|---------------|-------------|--------------------------------------------------------------|----------------|-------------------|-------------|----------|----------|------------------|--------------|-------------------|----------|
| | | | Description | | | | | | - 1-1 | | 0. 0. | |
| Ā | Actual | Fav/(Unfav) | | Actual | Budget | Fav/(Unfav) | Forecast | Budget | Fav/(Unfav) | Year to Date | | Year End |
| | | | Financial Performance Measures | | | | | | | | | |
| ፉ | 1,917 | 635 | 1 Total Margin - \$000's | \$ (4,025) | \$ 1,340 | \$ (5,365) | \$ 2,098 | \$ 2,098 | 9 | \$ | (3,461) \$ | 6,167 |
| | 3.91% | 1.06% | 2 Total Margin - % | -1.79% | %09.0 | -2.39% | 0.39% | 0.39% | %0.0 | `` | -1.59% | 1.16% |
| | n/a | n/a | 3 Unrestricted cash - \$000's | ا ج | N/A | N/A | - 8 | N/A | N/A | | <i>د</i> ه | 411 |
| | n/a | n/a | 4 Current ratio | 0.41 | 0.40 | 0.01 | 0.40 | 0.40 | N/A | | 0.36 | 0.33 |
| ь | 233 | n/a | Capital equipment expenditures - 5a Fiscal 2020 - 21 \$000's | \$ 1,868 | \$ 3,033 | \$ 1,165 | \$ 7,279 | \$ 7,279 | Ө | 8 | 1,774 \$ | 11,829 |
| 6 | c | 0/2 | Capital equipment expenditures - PY | \$ 2470 | 241 | (2 229) | \$ 278 | \$78 | | €. | 3361 | 5 4 14 |
| • (| 7 000 1 | 3 | | | 5 | 1 | 000 | 000 | | | | 10 570 |
| Đ | 1,300 | n/a | Defined / Will ruilds Capital Flojects | + | MET CAMPIIS | N | | 1 | | ı | | 20,5 |
| | 1 759 | (338) | 1 Total Weighted Cases (est) - HIG | 7.588 | | (2.792) | 24.763 | 24.763 | | 9 | 10,108 | 24,384 |
| | 1,447 | (593) | 2 Acute separations (excl psych) | 6,738 | 9,790 | (3,052) | L. | 24,080 | | 7 | 7,953 | 19,178 |
| | 6,734 | (434) | | 29,441 | 34,423 | (4,982) | | 84,626 | | 34 | 34,423 | 82,935 |
| | 152 | 45 | 1 | 482 | 517 | (35) | 1,269 | 1,269 | 1 | | 517 | 1,198 |
| | 4,063 | (557) | 5 Emergency visits and ER holds | 17,962 | 22,802 | (4,840) | 1 54,551 | 54,551 | 1 | 22 | 22,510 | 53,032 |
| | 251 | (80) | 6 OR - Inpatient cases | 1,024 | 1,628 | (604) | 3,909 | 3,909 | 1 | | 1,659 | 3,896 |
| | 457 | (346) | 7 OR - Day Surgery cases | 1,497 | 4,025 | (2,528) | ٤ | 9,484 | 1 | က | | 9,054 |
| | 9,965 | (584) | 8 Clinic visits | 46,820 | 52,509 | (5,689) | 124,549 | 124,549 | 1 | 52 | | 123,178 |
| | 1,065 | 159 | 9 Community Services visits | 1,686 | 4,483 | (2,797) | 10,695 | 10,695 | | 4 | 4,490 | 10,135 |
| | | | 10 Variable Revenue Volumes: | | | | | | | | | |
| | 13 | 7 | (a) Hip procedures | 30 | 33 | (3) | _] | 67 | | | 36 | 8 |
| | 14 | (21) | (b) Knee procedures | 34 | 177 | (143) | 410 | 410 | 1 | | 165 | 390 |
| | 1 | 31 | (c) Pacemaker inserts | , | 1 | | - | , | | | | |
| | 536 | (3) | 11 MRI Hours of Operation | 2,639 | 2,710 | (71) | 6,364 | 6,364 | 1 | 2 | 2,618 | 6,268 |
| | 744 | 7 | 12 CT Hours of Operation | 3,668 | 3,425 | 243 | 969'8 | 8,696 | | ຕ | 3,591 | 8,604 |
| | | | Patient Access Measures & System In | em Integration | MET CAMPUS | SONLY | | | | | | |
| | 4.65 | (0.11) | 1 Acute Average LOS | 4.37 | 4.54 | 0.17 | 4.54 | 4.54 | 1 | | 4.33 | 4.32 |
| | 6.91 | (0.47) | 2 Psych Average - Adolescent LOS | 66.9 | 6.44 | (0.55) | 6.44 | 6.44 | 1 | | 5.30 | 4.74 |
| | | | Organizational Health | | MET CAMPUS | SONLY | | | | | | |
| | | | | | | | | | | | | |
| | 5.20% | N/A | 1 % Sick Time to Total Comp | 2.70% | 3.70% | -2.00% | | 3.70% | 0.00% | | 2.30% | 2.70% |
| | 3.00% | N/A | | 2.20% | 2.30% | 0.10% | | 2.30% | 0.00% | Ì | 2.10% | 2.30% |
| | 1,661.6 | NA | 3 FTE staffing (Hospital Ops Only) | 1,657.6 | 1,/12.3 | 24.7 | 1,090.1 | 1.080.1 | | 1,1 | 1,710.4 | 1,000.3 |

WINDSOR REGIONAL HOSPITAL Operating Results for the Five Months Ending August 31, 2020 Consolidated - Met and Ouellette Campuses

| | | Patient Volume Measures | | OUELLEITE CAMPUS ON | AIMPOS ON | | | | | |
|---------------|-------------|-------------------------------------|----------------|-------------------------------|-------------|----------|----------|-------------|-----------------------|----------|
| Current Month | onth | | | Year To Date | | | Year End | | Prior Year Actual | Actual |
| | | Description | | | | | | | 1 | |
| Actual | Fav/(Unfav) | | Actual | Budget | Fav/(Unfav) | Forecast | Budget | Fav/(Unfav) | Year to Date | Year End |
| 1,804 | (348) | 1 Total Weighted Cases (est) - HIG | 7,609 | 10,648 | (3,039) | 1 25,402 | 25,402 | 1 | 10,999 | 25,827 |
| 811 | (802) | 2 Acute separations (excl psych) | 3,689 | 7,764 | (4,075) | 19,043 | 19,043 | 1 | 4,644 | 11,244 |
| 6,675 | (546) | 3 Acute pat. days (excl. psych) | 29,189 | 34,491 | (5,302) | 85,253 | 85,253 | , | 34,739 | 81,548 |
| 2,080 | 160 | 4 Psychiatric - Adult patient days | 9,771 | 9,300 | 471 | 22,671 | 22,671 | | 9,300 | 22,532 |
| | t | 5 Rehab patient days | r | i, | | | | | | ı |
| 4,116 | (468) | 6 Emergency visits and ER holds | 17,770 | 22,712 | (4,942) | 54,126 | 54,126 | | 22,773 | 54,152 |
| 243 | (36) | 7 OR - Inpatient cases | 1,111 | 1,728 | (617) | 3,989 | 3,989 | - | 1,727 | 4,022 |
| 569 | (869) | 8 OR - Day Surgery cases | 1,439 | 6,346 | (4,907) | 14,953 | 14,953 | | 6,298 | 13,932 |
| 1,831 | (3,254) | | 8,399 | 24,865 | (16,466) | 60,039 | 60,039 | | 24,643 | 57,778 |
| 10,062 | 9,234 | 10 Community Services visits | 33,108 | 4,097 | 29,011 | 9,774 | 9,774 | , | 4,361 | 10,320 |
| | | 11 Variable Revenue Volumes: | | | | | | | | ě |
| ဖ | (22) | (a) Hip procedures | 31 | 144 | (113) | 333 | 333 | , | 144 | 321 |
| 20 | (20) | (b) Knee procedures | 20 | 198 | (148) | 471 | 471 | 1 | 203 | 484 |
| 21 | (1) | (c) Pacemaker inserts | . 82 | 111 | (19) | 1 265 | 265 | | 127 | 265 |
| | | 12 Cataracts | | | | | | | | |
| 79 | (349) | a) Unilateral | 129 | 2,132 | (2,003) | 5,053 | 5,053 | | 1,978 | 4,849 |
| 137 | 124 | | 191 | 65 | 126 | 154 | 154 | , | 85 | 171 |
| 568 | 34 | 13 MRI Hours of Operation | 2,685 | 2,644 | 41 | 6,307 | 6,307 | | 2,601 | 6,139 |
| 744 | 1 | 14 CT Hours of Operation | 3,668 | 3,876 | (208) | 8,776 | 8,776 | | 3,672 | 8,778 |
| | | Patient Access Measures & System In | em Integration | OUELLETTE C | CAMPUS ONL | ٨ | | | | |
| 8.23 | (06.0) | 1 Acute Average LOS | 7.91 | 7.33 | (0.58) | 7.33 | 7.33 | 1 | 7.48 | 7.25 |
| | 1 | 2 Rehab Average LOS | 1 | ٠ | 1 | | , | , | r) | 1 |
| 13.25 | (0.82) | 3 Psych Average - Adult LOS | 12.59 | 12.43 | (0.16) | 12.43 | 12.43 | - | 12.64 | 12.80 |
| | | Organizational Health | | OUELLETTE C | CAMPUS ONL | ٧ | | | | |
| | | | | | | | | | | |
| 2.60% | N/A | 1 % Sick Time to Total Comp | 6.40% | 3.70% | -2.70% | 3.70% | 3.70% | 0.00% | . 6.11% | 800.9 |
| 5.70% | N/A | 2 % Overtime to Total Comp | 4.50% | 2.30% | -2.20% | 2.30% | 2.30% | %00.0 | 4.77% | 4.50% |
| 1,416.2 | N/A | 3 FTE staffing (Hospital Ops Only) | 1,406.3 | 1,423.7 | 17.4 | 1,434.4 | 1,434.4 | | 1,461.3 | 1,431.8 |
| | | | | | | | | | | |
| | | Patient Volume Measures | | ST. CLAIR COLLEGE CAMPUS ONLY | LLEGE CAMP | ATNO SOL | | | | |
| Current Month | onth | Description | | Year To Date | | | Year End | | Prior Year Actual | Actual |
| Actual | Fav/(Unfav) | | Actual | Budget | Fav/(Unfav) | Forecast | Budget | Fav/(Unfav) | Year to Date Year End | ear End |
| | 1 | 1 Total Weighted Cases (est) - HIG | 271 | , | 271 | | , | · | | , |
| | | 2 Acute separations | 53 | | 53 | ı | | | , | ř |
| | 1 | 3 Acute patient days | 1,568 | - 16 | 1,568 | • | | 14 | | ¢ |
| | | | 29.58 | u u | (29.58) | 1 | 1 | 1 | ٠ | ï |
| 1 | N/A | 5 FTE staffing | 39.9 | , | (39.9) | ı | 1 | | ı | |
| | | | | | | | | | | |

Statement #5

Windsor Regional Hospital Summary of Investments and Bank Borrowings August 31, 2020

| | | | | | | > | |
|----------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------------|-----------------------------------------------|
| | Type of Investment | | Amount | Bank Facility Type | Amount / | Amount Authorized By The Board | Amount Used |
| Cash & Short (a) term Investment Account | General Account earning interest: 175 bps (0.70%) | at prime less | · • | 1. Credit A - Line of credit | 7,209,000 | \$ 15,000,000 | \$ 7,791,000 |
| 9 | CIBC Investment Account | earning interest at a minimum of prime less 175 bps (0.70%); max. AVBA less 10 bps. Investment Account #2 - 1.27% | ř. | Average utilization during the month (Interest rate = CIBC Prime25% (2.20%) | nterest rate = C | IBC Prime - | \$ 15,006,000 31 Days |
| | | | | 2. CIBC - Credit B - Committed Installment Loan - net of current portion of \$845,000 | i i | \$ 7,706,000 | \$ 7,706,000 Note1 |
| | | , | , | 3. CIBC - Credit C - Committed Capital Equipment Revolving Loan with interest rates of 2.46% to 3.26% - net of current portion of \$1,331,000 | \$ 2,149,000 | 6,800,000 | \$ 3,320,000 |
| | Accrued interest | | ä | 4. CIBC - Credit E - Demand Installment Loan - HIS Project | 20,941,000 | \$ 47,000,000 | 26,059,000 |
| Equity Investment | ProResp | | | 5. TD - Four Term loans with interest rates of 2.69% to 5.6% - net of current portion of \$1,380,000 Date of next rate renewal - February 15, 2022 | ą. | \$ 24,797,000 | \$ 24,797,000 |
| | | | \$ | | | | e |
| Capital Investment a/c - grant account balance | CIBC Investment Account | earning interest at a minimum of prime less 175 bps (0.95%); max. AVBA less 10 bps - 1.02% | | Other Disclosures | | | |
| Capital reserve (b) | CIBC Investment Account | earning interest at a minimum of prime less 175 bps (0.95%); max. AVBA less 10 bps - 1.02% | 6,118,000 | CIBC - re: Credit B - Committed Installment Loan - Marked to Market Value Adjustment | E | · 49 | Note 2 \$ 1,795,000 |
| Total | | | \$ 6,118,000 | Note 1 - interest rate set through 25 year interest rate SWAP agreement with an interest rate of 5.035% with fixed principal and interest payments of \$86,641 per month. Note 2 - market value adjustment reviewed at end of each quarter | year interest ra cipal and intere iewed at end of | te SWAP agre st payments of each quarter | ement with an interest \$86,641 per month. |
| | | | | | | | |

Statement # 3

WINDSOR REGIONAL HOSPITAL STATEMENT OF FINANCIAL POSITION As At August 31, 2020 (Amounts in 000's)

| August 31, 2020 March 31, 2020 | | 7,791 11,623 15,688 25,266 8,252 4,235 49,984 53,449 3,356 53,449 742 742 724 1,134 | 121,537 100,018 | 61,882 56,218 23,429 22,624 1,069 1,340 1,795 1,795 7,007 6,934 118,930 121,663 | (1,795) (1,795) (78,305) (72,992) 255,549 235,805 |
|---------------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Aug LIABILITIES AND EQUITIES | Current liabilities: | Bank overdraft Bank indebtedness Accounts payable - trade Accounts payable - Ministry Accrued liabilities Current portion of long term debt Current portion accrued benefit obligations Current portion of capital lease Ministry of Health - advance | Total current liabilities Long term liabilities: | Bank loan Accrued benefit obligations Capital lease obligations Marked to market Sick benefits payable Deferred revenue - capital grants | Remeasurement losses: Net assets: Total liabilities and net assets |
| March 31, 2020 | | 6,348 8,306 6,142 5,139 2,116 | 33,310 | 6,044 158,644 37,807 196,451 202,495 | 235,805 |
| August 31, 2020 | | 14,608 9,780 6,240 11,796 5,593 2,382 | 50,399 | 6,118 157,114 41,918 199,032 205,150 | 255,549 |
| ASSETS | Current assets: | Cash & short-term investments Accounts Rec Ministry / CCO - OHIP - Other Inventories Prepaid & deferred charges Due from related parties | Total current assets Long term assets: | Investments Property, Plant, Equipment, Net Construction in progress Total long term assets | Total assets |

Statement # 4

Windsor Regional Hospital Statement of Cash Flows For the Month Ending August 31, 2020

With Comparative Amounts For the Year Ending March 31, 2019

(Amounts in 000's)

| | August 31, 2020 | March 31, 2020 | 2020 | Mont | Month of Aug 2020 |
|----------------------------------------------------------------|-----------------|----------------|----------|------|----------------------|
| OPERATING ACTIVITIES | | | | | |
| Net Surplus/(deficit) for the period | (5,313) | 8 | 2,839 | ↔ | 1,667 |
| Add (deduct) non-cash items: Amortization of canital assets | 888 | 7 | 0.47 | | 7 |
| Loss / (Gain) on disposal | 500.5 | 2 | 7,0,0 | | |
| Amortization of deferred capital contributions | 2,731 | 9) | (6,550) | | 4,933 |
| | 3,286 | 10 | 10,236 | | 7,759 |
| Cash flow from / (used in) operating balances | 8,885 | 16 | 16,036 | | (1,521) |
| Cash provided by operating activities | 12,171 | 26 | 26,272 | | 6,238 |
| INVESTING ACTIVITIES | | | | | |
| Purchase of capital assets | 8,449 | (36 | (36,812) | | 15,354 |
| | | | 19 | | |
| FINANCING ACTIVITIES | | | | | |
| Investments held for capital purposes | (74) | | (479) | | (16) |
| Loans payable | 938 | S | 2,402 | | 298 |
| Capital grants and donations received | (5,464) | 7 | 7,841 | | (5,463) |
| Notes payable and other long term liabilities | 878 | | 2176 | | 187 |
| Cash provided by (used in) financing activities | (3,722) | 10 | 10,540 | | (4,694) |
| Net increase (decrease) in cash during the period | 16,898 | | ī | ₩ | 16,898 |
| Cash, beginning of period | | | ť | | 1 |
| Cash, end of period | 16,898 | \$ | | ₩ | 16,898 |
| | | | | | |



Media Report to the Board of Directors

Date: October 2020

The following is a summary of WRH in the news from October 2020.

Community cluster in Windsor-Essex linked to 31 COVID-19 cases: WECHU

CTV Windsor, Sept. 2, 2020

https://windsor.ctvnews.ca/community-cluster-in-windsor-essex-linked-to-31-covid-19-cases-wechu-1.5089281

WECHU identifies link among 31 COVID-19 cases

Blackburn News, Sept. 2, 2020

https://blackburnnews.com/windsor/windsor-news/2020/09/02/wechu-identifies-link-among-31-covid-19-cases/

Family parties, card games and sleepover linked to 31 COVID-19 cases

Windsor Star, Sept. 2, 2020

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Ontario nurses create haunting video of life behind the scenes

AM800, Sept. 2, 2020

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Windsor-Essex public health can now track COVID-19 through wastewater

CBC Windsor, Sept. 2, 2020

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Zero transmissions at WRH proves PPE works

Windsor Star, Sept. 2, 2020

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WRH announces additional COVID-19 testing site

AM800, Sept. 2, 2020

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Blackburn News, Sept. 2, 2020

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CTV Windsor, Sept. 2, 2020

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Local nurses union produces PTSD short film

Windsor Star, Sept. 2, 2020

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CTV Windsor, Sept. 2, 2020

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CBC Windsor, Sept. 2, 2020

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Another COVID-19 death in Windsor-Essex

Blackburn News, Sept. 2, 2020

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Another person dies, four new COVID-19 cases reported in Windsor-Essex

CTV Windsor, Sept. 3, 2020

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WRH announces additional COVID-19 testing site

AM800, Sept. 3, 2020

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WRH staff infected with COVID-19 since pandemic onset

City seeking funding assurances to take over seasonal agriculture worker COVID isolation and recovery centre

CTV Windsor, Sept. 8, 2020

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Health unit announces three new cases of COVID-19

AM800, Sept. 11, 2020

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Taking over isolation recovery centre for migrant workers unchartered waters

Windsor Star, Sept. 10, 2020

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Health unit to update face mask order soon

Blackburn News, Sept. 10, 2020

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Local health unit plans to update face covering order

AM800, Sept. 10, 2020

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Windsor Star, Sept. 10, 2020

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CTV Windsor, Sept. 10, 2020

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University of Windsor sees first COVID-19 case in student, health unit confirms

Jarvis: You can't give up when the life of your community is at stake

Windsor Star, Sept. 11, 2020

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AM800, Sept. 11, 2020

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Blackburn News, Sept. 12, 2020

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Four new COVID-19 cases reported in Windsor-Essex

CTV Windsor, Sept. 14, 2020

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Close contact blamed for four new cases of COVID-19

AM800, Sept. 14, 2020

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AM800, Sept. 14, 2020

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Review prevention protocols before opening workplaces

Blackburn News, Sept. 14, 2020

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Invest in COVID-19 prevention before second wave hits, health unit says

Windsor Star, Sept. 14, 2020

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AM800, Sept .14, 2020

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Local health unit confirms second COVID-19 community cluster

AM800, Sept. 15, 2020

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One hour turnaround: WRH to start testing for COVID locally

Windsor Star, Sept. 15, 2020

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Blackburn News, Sept. 15, 2020

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Windsor Star, Sept. 15, 2020

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Health unit warns of second COVID-19 wave

Windsor Star, Sept. 15, 2020

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1st COVID-19 case confirmed at Catholic elementary school in Windsor-Essex

CBC Windsor, Sept. 15, 2020

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CTV Windsor, Sept. 15, 2020

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AM800, Sept. 15, 2020

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WECDSB launches online tracking of COVID-19 cases in schools

CTV Windsor, Sept. 16, 2020

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CBC Windsor, Sept. 16, 2020

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New machine bringing one-hour COVID testing to WRH

AM800, Sept. 16, 2020

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WRH looks to reduce COVID-19 test turnaround time to one hour with new machine

CTV Windsor, Sept. 16, 2020

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CBC Windsor, Sept. 16, 2020

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Two Windsor restaurants and Leamington credit union added to COVID-19 exposure list

CTV Windsor, Sept. 16, 2020

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Amherstburg elementary school sees region's first student case of COVID-19

Windsor Star, Sept. 16, 2020

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School COVID-19 protocols working so far

Blackburn News, Sept. 16, 2020

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How Windsor-Essex handled its 1st case of COVID-19 at an elementary school

CBC Windsor, Sept. 16, 2020

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CBC Windsor, Sept. 16, 2020

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AM800, Sept. 17, 2020

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WRH officials encourage COVID-19 testing

AM800, Sept. 17, 2020

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Local artist to honour frontline workers with massive mural

AM800, Sept. 17, 2020

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Resident advocates introduced in Windsor-Essex career guidance initiative

Windsor Star, Sept. 17, 2020

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COVID-19 quarantine may keep us parents from seeing dying Windsor daughter

Windsor Star, Sept. 17, 2020

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Cottage trip, restaurant outing led to another COVID-19 cluster in Windsor-Essex says health unit

Windsor Star, Sept. 17, 2020

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WECHU still looking for safe consumption site location

CTV Windsor, Sept. 17, 2020

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20 COVID-19 cases linked to new cluster in Windsor-Essex

CTV Windsor, Sept. 17, 2020

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CBC Windsor, Sept. 17, 2020

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20 cases connected to new community cluster in Windsor-Essex

Blackburn News, Sept. 17, 2020

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Medical Officer of Health concerned about culture of hate, blame during pandemic

Windsor Star, Sept. 24, 2020

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Three new COVID-19 cases reported in Windsor-Essex

CTV Windsor, Sept. 24, 2020

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No Windsor-Essex pharmacies on first list for COVID-19 testing

CTV Windsor, Sept. 24, 2020

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Wait times increase for COVID-19 test results in Windsor-Essex

CTV Windsor, Sept. 24, 2020

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Video: COVID-19 tests delayed, but not testing

CTV Windsor, Sept. 24, 2020

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Ontario changing COVID-19 testing guidelines

Blackburn News, Sept. 24, 2020

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Lag in COVID-19 test turnaround

Blackburn News, Sept. 24, 2020

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Coronavirus: Toronto nurse speaks about caring for Canada's first COVID-19 patient

Global News - September 25, 2020

Clarice Shen was just three months into her new career at *Sunnybrook Health Sciences* Centre when she was assigned to care for ...

Simcoe hospital to offer drive-thru COVID-19 tests

The Hamilton Spectator - September 24, 2020

Norfolk General Hospital is busy hiring nurses as the Simcoe hospital prepares to open a drive-thru COVID-19 test centre. Vice-...

Ontario doctors urge Doug Ford to tighten restrictions again before it's too late

BlogTO - September 24, 2020

issued by the *Ontario Hospital Association* Thursday morning. The association, comprised of doctors and leaders from major ...

COVID-19 and the decolonization of Indigenous public health

Hospital News - September 24, 2020

Indigenous self-determination, leadership and knowledge have helped protect Indigenous communities in Canada during the coronavirus disease...

in *Canada* during the *coronavirus* disease 2019 (*COVID*-19) pandemic, and these principles should be incorporated ...

More testing capacity needed for kids being sent home with COVID-19 symptoms, parent says

CBC.CA News - September 24, 2020

less than a week. And while Pettigrew said he contacted the *Thunder Bay Regional Health Sciences Centre* (TBRHSC) for a test last ...

WRH prepared to second wave of COVID

AM800, Sept. 24, 2020

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2 new cases as province pushes flu shots

CBC Windsor, Sept. 23, 2020

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Jarvis: No escaping hospital question in Ward 7 byelection

Windsor Star, Sept. 22, 2020

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Reader letter: Patient grateful for recent hospital care

Windsor Star, Sept. 22, 2020

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Health unit offers new virtual learning support for teachers

Windsor Star, Sept. 22, 2020

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ESHC wants public input on possible new chemotherapy service

Windsor Star, Sept. 22, 2020

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No Windsor-Essex pharmacies on first list for COVID-19 testing

CTC Windsor, Sept. 22, 2020

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Two new COVID-19 cases reported in Windsor-Essex agri farm sector

CTV Windsor, Sept. 23, 2020

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WECHU identifies two new cases of COVID-19

Blackburn News, Sept. 23, 2020

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Two additional cases of COVID-19 in Windsor-Essex

AM800, Sept. 23, 2020

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Windsor man, 34, has this message for his peers as COVID-19 lands him in hospital

CBC Windsor, Sept. 23, 2020

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Covid-19 confusion prompts new communications strategy at GECDSB

AM800, Sept. 23, 2020

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Health unit reports no in-school COVID transmission so far

Windsor Star, Sept. 23, 2020

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Long road to recovery for COVID survivor

AM800, Sept. 22, 2020

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COVID-19 'long-haulers' hit back against non-believers

CBC Windsor, Sept. 23, 2020

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COVID-19 'long-haulers' hit back against non-believers

CBC Windsor, Sept. 21, 2020

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Windsor mayor thanks long-term care homes for work fighting COVID-19

Windsor Star, Sept. 21, 2020

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Immediate action expected for those who break new gathering limits

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Windsor Star, Sept. 21, 2020

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Mayor appeals for feds to fund city-run isolation centre for migrant workers

Windsor Star, Sept. 21, 2020

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Community group reaches milestone in creating handmade masks

Windsor Star, Sept. 21, 2020

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CTV Windsor, Sept. 21 2020

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CTV Windsor, Sept. 21, 2020

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CBC Windsor, Sept. 21, 2020

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Windsor Star, Sept. 21, 2020

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Windsor-Essex Ontario health team sends off final proposal

AM800, Sept. 18, 2020

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Canadian Slovak Villa donates 50,000 to help babies born with jaundice

Windsor Star, Sept. 18, 2020

 $\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-50000-to-help-babies-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/local-news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slovak-villa-donates-born-with-jaundice}{\frac{https://windsorstar.com/news/canadian-slo$

Jarvis: A must-read COVID-19 top-10 list

Windsor Star, Sept. 18, 2020

https://windsorstar.com/news/local-news/jarvis-a-must-read-covid-19-top-10-list

Ontario health-care worker returns home six months after testing positive for COVID-19

CBC Windsor, Sept 20, 2020

https://www.cbc.ca/news/canada/windsor/torry-robertson-lasalle-comes-home-covid-1.5730677

Cottage trip restaurant outing led to another COVID-19 cluster in Windsor-Essex says health unit

Windsor Star, Sept. 18, 2020

https://windsorstar.com/news/local-news/cottage-trip-restaurant-outing-led-to-another-covid-19-cluster-in-windsor-essex-says-health-unit/wcm/a29f55b6-7e7a-4b2b-96fc-9ddd62660334/

Reduce close contacts to keep Windsor-Essex COVID-19 numbers low says health unit

Windsor Star, Sept. 18, 2020

https://windsorstar.com/news/local-news/reduce-close-contacts-to-keep-windsor-essex-covid-19-numbers-low-says-health-unit/wcm/2b096ca2-4f4e-44de-a53f-bd15ec45f209/

Public board reports first case of COVID-19

Blackburn News, Sept. 21, 2020

https://blackburnnews.com/windsor/windsor-news/2020/09/21/public-board-reports-first-case-covid-19/

COVID-19 case reported at French Catholic school

Blackburn News, Sept. 18, 2020

https://blackburnnews.com/windsor/windsor-news/2020/09/18/covid-19-case-reported-french-catholic-school/

One new COVID-19 case reported in Windsor-Essex

Blackburn News, Sept. 20, 2020

https://blackburnnews.com/windsor/windsor-news/2020/09/20/one-new-covid-19-case-reported-windsor-essex/

Just one new case of COVID-19 Sunday

AM800, Sept. 20, 2020

https://www.iheartradio.ca/am800/news/just-one-new-case-of-covid-19-sunday-1.13538335

New COVID-19 case count drops to one: WECHU

CTV Windsor, Sept. 20, 2020

https://windsor.ctvnews.ca/new-covid-19-case-count-drops-to-one-wechu-1.5112459

Outpouring of help a lifesaver for migrant worker diagnosed with lymphoma

Windsor Star, Sept. 18, 2020

https://windsorstar.com/news/local-news/outpouring-of-help-a-lifesaver-for-migrant-worker-diagnosed-with-lymphoma

Windsor-Essex Ontario health team sends off final proposal

AM800, Sept. 18, 2020

https://www.iheartradio.ca/am800/news/windsor-essex-ontario-health-team-sends-off-final-proposal-1.13523948

Canadian Slovak Villa donates 50,000 to help babies born with jaundice

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Ontario health-care worker returns home six months after testing positive for COVID-19

CBC Windsor, Sept 20, 2020

https://www.cbc.ca/news/canada/windsor/torry-robertson-lasalle-comes-home-covid-1.5730677

Kingsville high school reports COVID-19 cases: GECDSB

CTV Windsor, Sept. 21, 2020

https://windsor.ctvnews.ca/kingsville-high-school-reports-covid-19-case-gecdsb-1.5113070

Kingsville District High School has first COVID-19 case

CBC Windsor, Sept. 21, 2020

https://www.cbc.ca/news/canada/windsor/kingsville-district-high-school-covid19-case-1.5732205

Public board reports first case of COVID-19

Blackburn News, Sept. 21, 2020

https://blackburnnews.com/windsor/windsor-news/2020/09/21/public-board-reports-first-case-covid-19/

COVID-19 case reported at French Catholic school

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One new COVID-19 case reported in Windsor-Essex

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https://windsor.ctvnews.ca/new-covid-19-case-count-drops-to-one-wechu-1.5112459

One new case of COVID-19 in Windsor-Essex as of Sunday

Windsorite.ca, Sept. 20, 2020

https://windsorite.ca/2020/09/1-new-case-of-covid-19-in-windsor-essex-as-of-sunday/

ONLINE COMMUNICATION REPORT

Social Media

WEB:

Users:

47,000 users this month, up 4.6% from last month

New Users: 66.8%

Average view time: 1 m 48 s, down 5%

How do people access the site?

Mobile: 51.5% down 7.3% Desktop: 44.9%, up 12.1% Tablet: 3.6%, down 12.2%

Top pages:

- 1) Home Page 24,657
- 2) COVID Assessment Centre 12,970
- 3) Coronavirus 10,673
- 4) Emergency Wait times 9,219
- 5) Careers 5,414
- 6) Contact Us 3,277

- 7) Pharmacy login-2,537
- 8) Pharmacy dept 2,216
- 9) COVID-19 Visitation 1,938

Top Languages other than English:

- 1) Chinese (zh.cn) 146
- 2) French 60

YOUTUBE:

Views: 3,100 views Watch Time: 162 hours

Top Videos

- 1) Guidelines for basic adult neurological observation 680 views
- 2) Cameo shout out from James Pickens Jr. -284 views
- 3) Quick Dams to prevent flooding 266 views
- 4) FIT Test Demonstration 145 views
- 5) Negative Pressure Rooms-at WRH 138

FACEBOOK: 8,308 followers +51

1,554 page views - down 34%

29,710 monthly reach - down 21%

13,914 people "engaged" on our site - commented or liked our posts this month, up 13% 20,064 videos viewed, down 19%

Top Posts:

- 1) COVID-19 Assessment Centre Open at SportsPlex 9,191 reached, 199 reactions
- 2) Suicide Prevention Day 5,171 reached, 131 reactions
- 3) Ice Cream (Anti) Social 3,494 reached, 279 reactions
- 4) Joanne Barbera-Sheehan Retires 2,619 reached, 168 reactions
- 5) COVID-Assessment Centre at SportsPlex –2,454 reached, 22 reactions

<u>INSTAGRAM – 2,688</u>

Top Posts:

- 1) Ice cream (anti)social 159 likes
- 2) Low Wait times at -36 likes
- 3) Assessment Centre opens at SportsPlex 31 likes

TWITTER:

4,016, +53 this month

Impressions: 53.6K up 2.5%%

Tweets: 33 up 13.9%

Trending topics:

- 1) Ice Cream (anti)social -3996 impressions, 118 engagements
- 2) COVID Testing at St. Clair College 3,077 impressions, 30 engagements
- 3) Joanne Barbera-Sheehan retires 2,677 impressions, 131 engagements
- 4) COVID Test available -2,668impressions, 55 engagements
- 5) World Suicide Prevention day -1,853 impressions, 52 engagements