



Annual Report 2021–2022

Eastern Ontario Regional Laboratory Association

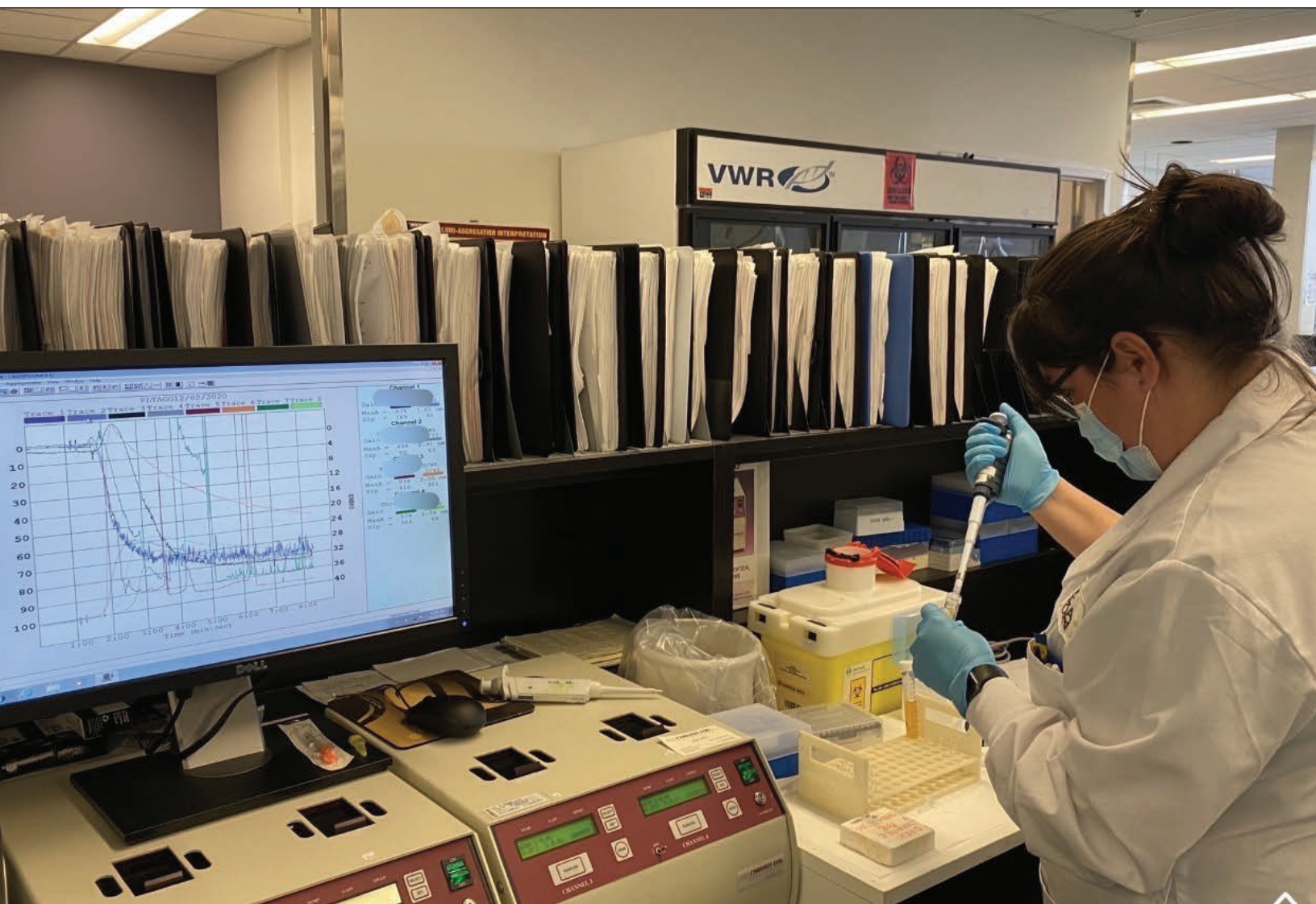


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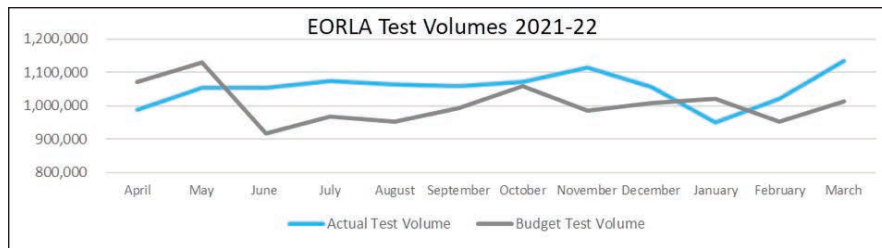
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CEO Message 2022

We are facing challenges at every turn: a pandemic, severe staff shortages in our labs and hospitals, and temporary directives to suspend some procedures which has resulted in a large backlog of patients waiting for care. And with more medical laboratory professionals retiring and leaving the profession than graduating from our college and university programs, our staffing shortages will not be alleviated for many years. Despite all our challenges our EORLA team has demonstrated its commitment to patient care and I want to recognize and praise their dedication.

Last year our team delivered 12,635,705 laboratory tests and 628,600 COVID-19 PCR tests. During the year we had two directives from Ontario Health that suspended some healthcare procedures, but our members' hospitals remained full, and we exceeded our original test budget by over half a million tests.

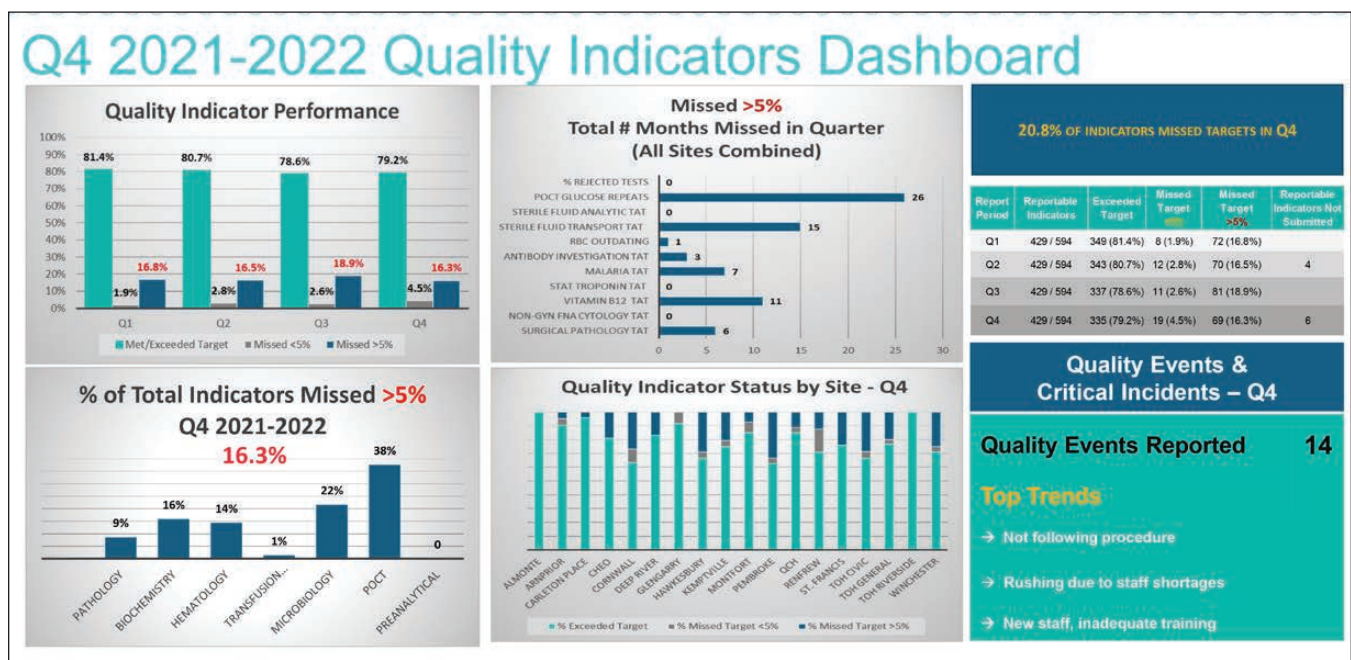
Figure 1



Our COVID-19 testing team managed through many changes to testing guidance and fluctuating volumes. Overall, we provided our member hospitals and assessment centres with a less than 24-hour turnaround time from collection to results. With the many different waves and variants, we saw positivity numbers range between 1% and 30%.

Providing high-quality tests for our member hospitals and patients is our purpose. The Q4 Quality Indicator Performance was higher than Q3. Despite staffing challenges, our team has stabilized our quality performance levels and our new courier contract has new routes and schedules designed to help address turnaround time misses and improve the reporting time for our members.

Figure 2



Last year, 5 of our laboratories were assessed by Accreditation Canada Diagnostics (ACD) with very positive results. During the year, EORLA and ACD agreed to a unified assessment process rather than individual assessments. In June 2022 ACD will perform a unified assessment for 13 EORLA laboratories. In the future, every four years ACD will assess all EORLA's laboratories in a unified manner. This will be a great benefit and improvement for both EORLA and ACD.

EORLA's Employee Engagement Survey was conducted between February 14 and March 2, 2022. A 69% response rate was the highest response rate since the surveys began. Engagement levels are up in 13 of the 15 categories. While we have made good progress, employees have told us that we need for focus on the four areas of Senior Leadership, Organizational Vision, Innovation and Work-Life Balance.

A summary of our results is below:

Figure 3

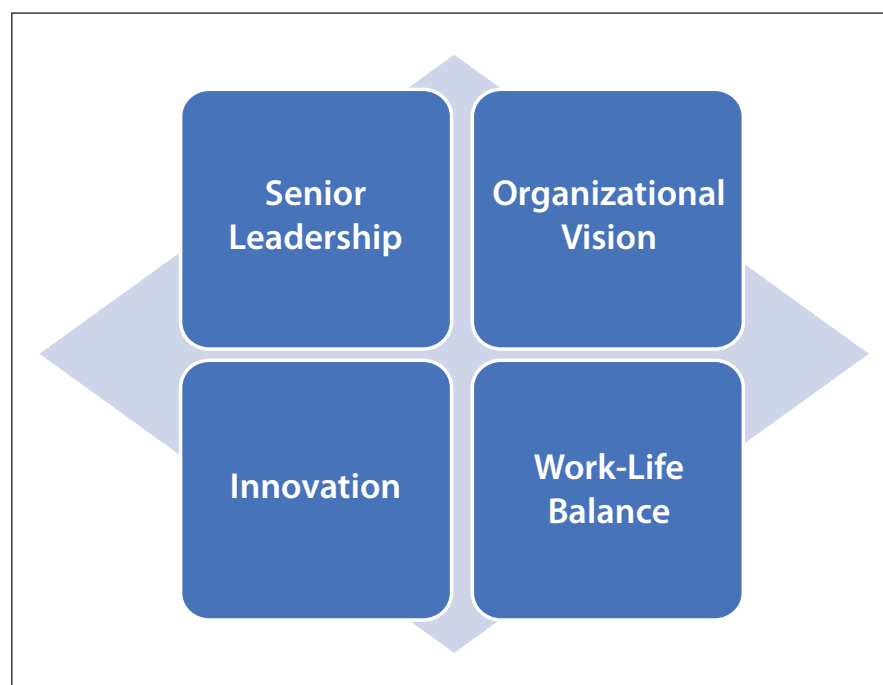
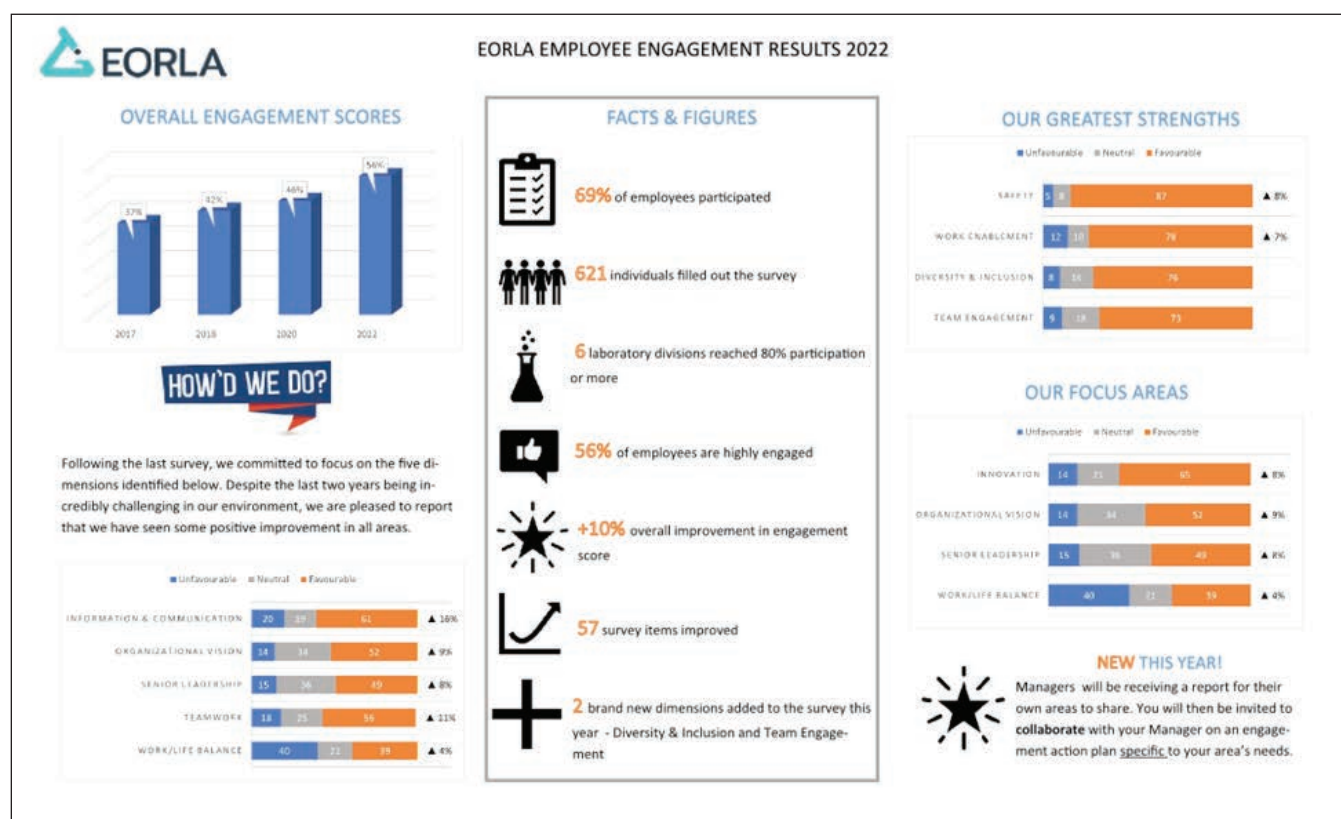


Figure 4



Improving our staffing levels and filling vacant positions remains a priority. Last year we continued to have success in hiring, however we also had an increase in staff turnover due to the end of temporary assignments in our Virology Lab. The challenges of the pandemic remain and our focus for next year will be to continue to work on staffing challenges and to become more innovative in our staffing solutions. The staffing key metrics for 2021-22 include:

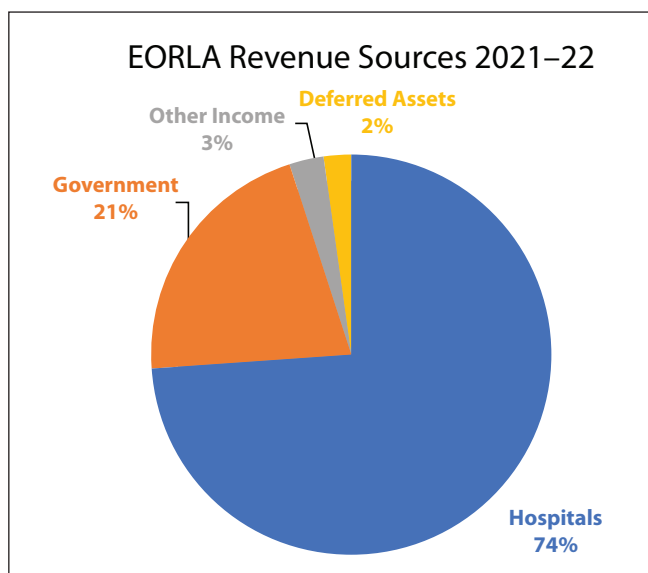
- Total employee headcount of 887
- 138 New Hires
- 118 employees either left EORLA or retired
- Average retirement age 61
- 19.6% of EORLA staff are eligible to retire

A number of impressive achievements for EORLA in 2021 included: board approval to proceed with the RFP phase for the 8-year, \$30M Anatomical Pathology Modernization project, and the launch and secondment of 10 laboratory staff to the EPIC Beaker project which will be implemented in 8 of our member hospitals in November of 2022.

Financially, 2021–22 was a positive year for EORLA. We had an operating surplus that met with our proposed annual budget and a surplus from efficient management of our COVID-19 testing. All surpluses are re-invested into operations for new equipment and projects.

Three years ago, EORLA’s strategic plan had a new objective to “Pursue Measured Growth” to augment member revenue and diversify our revenue sources. During that time, EORLA has increased non-member revenues by \$32M and revenues from members has decreased from 93% to 74% of total. COVID-19 funding directly from the Government of Ontario in 2020–21 was \$27M.

Figure 5



Last year at this time we were hopeful that the worst of the pandemic was over and we would return to a sense of normal. Let’s all wish for a “new” normal for 2022-23 and for the patients of our member hospitals to continue to receive the health care they need. I know the EORLA team is looking forward to the return of normal and is ready to support our members to meet the challenges ahead.

Jeffrey Dale

EORLA Board Chair Message 2022

Congratulations, félicitations to EORLA on its tenth anniversary. Over the past decade, the passionate dedication of staff, the support of member hospitals, and the oversight of EORLA board members has earned remarkable achievements.

As board chair, I have been and will continue to be impressed with the talents of the EORLA team. Managing skilfully through a 2-year pandemic is proof of devotion to community wellbeing, to say nothing of how exceptional people conquer exceptional circumstances. Staff shortages, supply chain woes, ever-changing Ministry of Health directives, and the complexity of patient care were managed superbly by each of EORLA's eighteen laboratories.

Board members marvelled at the stories of their dedication, self-sacrifice, willingness to work overtime, and to postpone well-earned vacation to ensure EORLA's laboratories remained open and responsive to member hospitals and the community. And yet the board is mindful of how the challenges of the past year, especially with acute staffing shortages, has tested the team's wellness.

The vitality and health of EORLA's most precious asset –the many who serve daily to deliver timely, curated patient care– is a priority for both the board and member hospitals. And while the shortage of skilled laboratory professionals remains unresolved, management is committed to providing employees with needed rest and recovery until relief arrives.

As the global pandemic shifted and swirled, the board stood squarely behind management's effort to keep operations moving forward, including the advancement of EORLA's strategic priorities. CEO Jeffrey Dale and his team contracted new business, brought forward potential business opportunities, and advanced the business case for anatomical pathology modernization –all while handling, during peak periods of contagion, as many as 4,500 daily COVID-19 tests.

This past year also presented a significant change in senior leadership. Admittedly, choosing a successor for Chief of Staff Dr. John Veinot was no easy task. And yet the process to select Dr. Vidhya Nair, balancing the requirements of EORLA, CHEO and our partner University of Ottawa, was thoughtful and

professionally executed. The board and member hospitals thank John for a decade of sardonic humour, strong leadership, and dogged dedication, as well as extend an enthusiastic welcome to Dr. Nair. Vidhya's consultative style and focus on balancing clinical service, academic achievement, and research opportunity has, in just six months, added powerfully to EORLA's leadership team.

Over eighteen months, the board also has been working with member hospitals to negotiate the renewal of members' agreements. In every phase of renewal negotiations, member hospitals have expressed support and appreciation for the service EORLA provided over the past 10 years. I am confident that the changes to members' agreements will be minor, each change an improvement to communications, governance, and board oversight. It is anticipated that by April 1, 2023, renewed agreements will be executed by all members hospitals and board.

As the board charts the journey beyond the pandemic, EORLA navigates with the guidance of a talented, dedicated group of directors. In particular, my bias notwithstanding, community-member directors continue to bring a valued perspective to board deliberations. EORLA has been well served by such insight. Also, I extend gratitude to my colleagues Laurel Murray, chair of the Finance and Administration Committee, Drs. Jeremy Grimshaw and Lindy Samson, chair and vice chair of the Patient Safety and Quality Committee, and board vice chair Cameron Love for their support, leadership, and sage advice over many years.

And finally, to not express my deep regard for the talents and poise of EORLA CEO Jeffrey Dale, whose grit was tested daily and ever-increasingly during the pandemic, would find me guilty of an inexcusable omission. I, and dare say the board, sleep soundly knowing that Jeffrey is at EORLA's helm.

On behalf of the board, I extend my gratitude to all members of the executive leadership team and to all employees for their dedication. Their professionalism and commitment to healthcare excellence has and will forever be the reason for EORLA's many successes.

Patrick Dion

Chief of Staff Report

Dear colleagues,

As I reflect upon my first year as Chief of Staff, I am genuinely grateful to all of you for your support over these last twelve months. 2021–2022 has been a uniquely challenging year, as the COVID-19 pandemic has continued to impact not only the functioning of the organization but virtually every aspect of our daily lives. I would like to commend all of you for your resilience and flexibility during these uncertain and trying times.

I would like to thank the Regional Discipline Leads as they continued to maintain a high quality of patient care despite the numerous challenges. Our Regional Discipline Leads are Anatomical Pathology – Dr. Harman Sekhon; Microbiology – Dr. Marc Desjardins; Biochemistry – Dr. Julie Shaw; Hematopathology & Molecular Pathology – Dr. Michael Rutherford; Transfusion Medicine – Dr. Hakan Buyukdere; Lab Director Preanalytical – Dr. Dan Lin. In addition, I wish to thank Dr. Ivan Blasutig, the Site Chief and Lab director of CHEO, Dr. Cherif Ibrahim – Chief and Laboratory Medical Director at QCH, Dr. Neil Davis – Department Chief, Cornwall Hospital, and Dr. Nicolas Delatour – Department Chief, Montfort Hospital. I also thank Dr. Chris McCudden, the Deputy Chief of Staff, the Lab directors, and the Lab consultants of our outreach program.

With regards to educational programs, as a testament to the excellence of our postgraduate education program, the Anatomical Pathology Program successfully filled three positions in the first CaRMs iteration, and the pass rate of our residents was once again 100% this year. The Medical Microbiology Program also was successful in filling the one CaRMs position. I want to thank the Program Directors, Dr. Bibianna Purgina and Dr. Nadia Sant, for their excellent leadership. A special thanks to our Vice-Chairs, Dr. Chris McCudden, Dr. Alfredo Walker, and Dr. Antonio Giulivi, for advancing our educational mandate in education and research. We are also incredibly proud to announce the launch of the PGY6 fellowship program in Forensic Pathology under the able leadership of Dr. Alfredo Walker. We held

our inaugural PALM Departmental CME event in April, sponsored by EORLA and uOttawa. In addition, the Pathology and Laboratory Medicine Grand Rounds are continuing with a combination of talks from medical and scientific staff and operations staff.

This year, we welcomed 8.5 FTE new staff members to our clinical faculty, including 5.5 FTE Anatomical pathologists, 1 Hematopathologist, 1 Clinical Microbiologist, and 1 Medical Microbiologist. We wish them a successful career at EORLA. We also saw many of our faculty applying for promotions. We had five faculty promoted last year and five faculty members applying for promotions this year. Many staff and faculty members were deserving of significant honors, awards, and recognition, including the following:

Association of Directors of Anatomic and Surgical Pathology Autopsy Award from the United States and Canadian Academy of Pathology (USCAP) (Tanner May Jack – Resident, Staff Supervisors – Dr. Chris Milroy and Dr. Jacqueline Parai)

Dr. Marc Desjardins – the 2022 winner of the “Distinguished Microbiologist Service Award” from the Canadian College of Microbiologists

Dr. Ron Booth – CSCC Award for Outstanding Contribution to Clinical Chemistry. Presented as a mark of recognition of outstanding achievement in and contribution to the field of clinical chemistry.

Dr. Julie Shaw – CSCC Award for Innovation in Laboratory Medicine. Presented to the Point of Care Testing Special Interest Group, which Julie Chairs, for outstanding accomplishment through innovation in clinical chemistry, pathology, or laboratory medicine.

In closing, I wish to thank once again all of you for your incredible contributions over the year. As the Chief of Staff of EORLA, I look forward to working with you in the coming year. I will count on each of you for your continued support and perseverance.

**Regards,
Dr. Vidhya Nair**



Meeting the challenges of a global pandemic

Our response

On March 11, 2020, the World Health Organization (WHO) declared COVID-19 a global pandemic and EORLA was prepared to do its part. In fact, EORLA staff had been monitoring the developing situation in China and held a meeting in early January 2020 to start planning for the inevitable arrival of COVID-19 in our part of the world.

EORLA provided COVID-19 PCR testing to all member hospitals/hospital-based assessment centres and many long-term care and retirement homes in the Champlain Region. As part of the provincial laboratory network, EORLA also provided some additional testing for other sites across the province when needed.

The EORLA laboratory was not set up for this kind of high-volume testing and a significant investment of \$40 million of provincial funding was used for equipment and supplies in order to provide almost 1.5 million COVID-19 tests (to date) for our region.

The purchase of new, high-throughput, high-capacity instrumentation (extractors and thermocyclers) began in April 2020, with a total of six new units added by the fall of 2020; the last two of which were fully automatic so that no extra staff was required.

At its peak in spring 2021, testing reached 5,000 samples in a single day and overall averaged 4,000-4,500 tests per day during COVID-19 waves (almost 20,000 per week). Pre-COVID testing volume was approximately 25,000 to 30,000 molecular virology tests per year.

Supplies that were purchased included reagents, extraction kits, PCR kits and consumables such as plastic plates, pipette tips, buffers, etc. While sourcing those supplies was very challenging at the beginning of the pandemic, EORLA's foresight in choosing diverse instrumentation platforms limited the impact of supply issues.

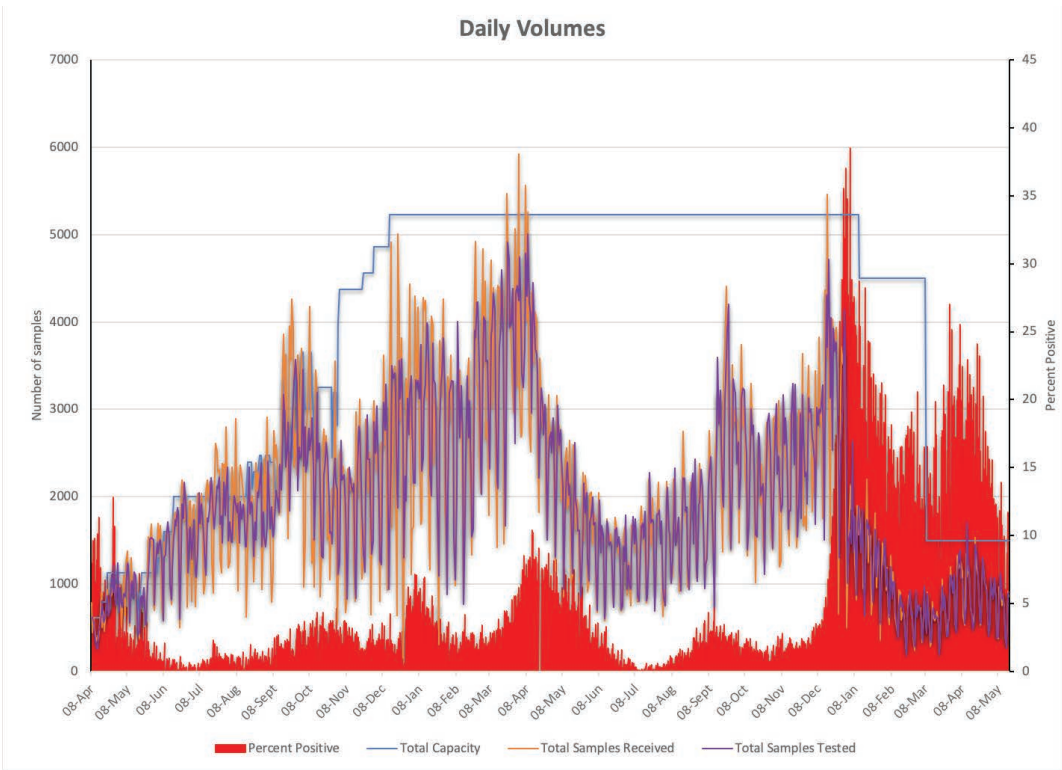
In addition to COVID-19 testing, the EORLA team stepped up to assemble and distribute almost one million COVID-19 test kits over more than a year until the hospital supply chain was able to provide the necessary items through regular hospital procurement and distribution systems.

Adding to the frontline laboratory work, the response to the COVID-19 pandemic required a collaborative effort between many different organizations. EORLA was involved in the management of positive cases and reporting to hospitals, regional Public Health Units, the Ministry of Health and the Ontario Laboratory Information System (OLIS).

EORLA has also been part of the Regional Testing Taskforce that helped to manage the planning, implementation and communication of our COVID-19 testing options, and part of the Ontario Health Diagnostics Network planning group that has helped to guide the public, hospital and community labs through five waves of this pandemic.

The human resources required to accomplish all of this was another facet of the COVID-19 response.

Testing and positive volumes



Our people

For EORLA, the real COVID-19 story is about our people... those who stepped up and stepped in to build our virology unit of seven into a COVID-19 testing team of more than 80 staff able to meet the demand at the height of the pandemic.

Some staff were redeployed from general microbiology and molecular microbiology labs to the COVID-19 lab. Others came from different divisions and sites across the EORLA network that were essentially shut down because their services were suspended or not being used during COVID-19. The third source of staffing was the recruitment of Medical Laboratory Technologists and Technicians, as well as university graduates experienced in molecular techniques, who played a pivotal role troubleshooting and keeping the lab functioning.

With this reinforced workforce, EORLA's COVID-19 team established 24/7 operations to provide our members with a turnaround time of less than 24 hours from swabbing to results.

Our IT staff developed daily reports, dashboards, equipment interfaces and new electronic reporting systems that provided information on site testing volumes, positivity rates and turnaround times.

All EORLA staff dedicated themselves to working through issues caused by the pandemic. Delays in physician visits meant that many patients were very sick by the time they received care and this, in turn, made our hospital cases highly complex. At the same time, isolation protocols for staff infections and contacts made an existing shortage of staff even more difficult.



Mike Wilson, left, Charge Technologist in our Deep River District Hospital Lab, is just one of many examples of the sacrifices that our staff across EORLA sites made to keep our labs open and our member hospitals functioning throughout the pandemic. Throughout this past year, with many staff off due

to COVID-19 and other health challenges, Mike worked numerous double shifts and extended shifts to help keep DRDH functioning. In December of 2021, Mike covered the lab exclusively for 11 days in a row. This type of effort has played out in EORLA labs everywhere and is appreciated by both fellow team members and our Hospitals.

The resilience staff has shown has been remarkable, working overtime, extra shifts, cancelling vacations and taking assignments in new areas to get the job done. They have been very supportive of one another throughout an extremely challenging time.

As we enter the third year of the pandemic, we are hopeful that the worst is behind us and that we have a more stable and sustainable situation for 2022–23.



Dr. Marc Desjardins, Division Head and Regional Lead, Division of Microbiology, with one of the new, high throughput extractors for RT-PCR.



Lynda Farant and others work on a Saturday to make up COVID-19 test kits.



EORLA Reflections— A decade of success

On April 1, 2022, EORLA celebrated its 10-year anniversary! As we embarked upon this major milestone, we recognized that it is because of the amazing people that make up #teamEORLA that we have been able to achieve so much over this past decade. The dedication, commitment, and pride you show in your day-to-day support of patient care and to your colleagues is second to none.

Our team is the key to our success. Thus, it has been a priority for EORLA to implement initiatives that engage and support staff. We have made a concerted effort to ensure a healthy, positive workplace for all, including the creation of:

- A Human Resources Business Partner Model
- Standardized Huddle Boards across EORLA to ensure ongoing communication
- A Healthy Workplace Committee
- Employee Engagement Surveys to help us learn and find opportunities to improve
- Robust recruiting initiatives
- A dedicated EORLA IT/IS department to provide support to our staff and our members.

So many of the successes that #teamEORLA has achieved would not have been possible without your loyalty, hard work, and support. As we reflect on some of those successes, think back with pride to the role you played in reaching these milestones.

The provision of consistent service is due in large part to regionalization and standardization of turnaround times, policies and procedures, reporting and more:

- Creation of a standardized Quality Manual and regional Safety Manual
- Regionalization of the Anatomical Pathology Laboratory
- Automation and regionalization of the Microbiology Reference Laboratory

- Standardization of clinical practices across laboratory sites
- Implementation of a Blood Distribution Program
- Implementation of LEAN projects across the organization
- In Common Laboratories (ICL) collaborative partnership in which EORLA both receives and sends referred work
- Implementation of a standardized regional Outreach program to provide medical and scientific support to all members
- Migration of various Hospital Information Systems/Laboratory Information Systems
- Established Continuous Quality Improvement Committees with projects based on our strategic plan.

This kind of success does not happen without making significant investments. More than \$49 million of capital expenditures over the last 10 years means our facilities are up to date and equipped with the newest technology and systems. This allows laboratory staff to perform day-to-day work efficiently and effectively while patients benefit from the safety and quality of our laboratory testing. Some of the major purchases include:

- New biochemistry and hematology analyzers across the region
- OMNI Document Management System implementation, which ties in to accreditation, standardization across the region, quality initiatives, etc.
- Regional Pathology Laboratory Information System (LIS)
- Lab results reporting to OLIS (Ontario Laboratory Information System) repository for point-of-care access.

The collaborative efforts of EORLA and our members to use resources carefully, cost effectively and sustainably have resulted in a low 1.1% average cost increase annually in spite of increasing labour costs and greater complexity of patient diagnostics and treatments, and development of the Molecular Oncology Diagnostics Laboratory.

A prime example of EORLA's innovative resource management is the implementation of the Blood Distribution Program to redeploy blood products between sites before they expire. It's a win-win-win, saving resources, reducing costs, and helping to maintain a safe supply of products for patients.

We are also proud of the implementation of regional laboratory stewardship initiatives.

It was also important to develop the EORLA brand, a strategic plan to guide us, as well as our mission, vision and values. In 2020, we rebranded, for a modern look and feel, with a new logo, revamped website, and a better social media presence that has 3,300 followers. In addition, we onboarded a new client, Bruyere, to EORLA in April 2021.

Reflecting on the past 10 years, one of the biggest challenges EORLA has faced since its inception has taken place over the last

two years. EORLA staff, undaunted by the magnitude of what was required, persevered through a global pandemic. The benefits of integration/working as a region really shone through and the proof is in the numbers: approximately 1 million COVID-19 test kits distributed across the region to support member testing centres, and a remarkable 1.50 million COVID-19 tests completed to date by #teamEORLA!

Added to all of these significant undertakings, individual EORLA labs across the region achieved successful laboratory accreditation by the Institute for Quality Management in Healthcare (now Accreditation Canada Diagnostics [ACD]) and consolidated accreditation will occur in 2022!

These are some highlights among numerous accomplishments we can proudly say we have achieved as a team in our first 10 years. As we look towards the next decade, we anticipate another long list of successes!

2012–2022 by the numbers



\$41 million in Research Grants accessed

880 Medical/Scientific Publications
co-authored by EORLA staff



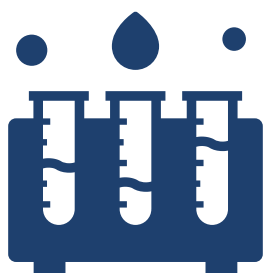
132 Pathology and Laboratory
Medicine (PALM) Grand Rounds
learning sessions held for staff



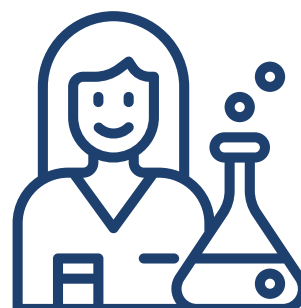
408 Medical Students have
rotated through EORLA over
the 10-year period



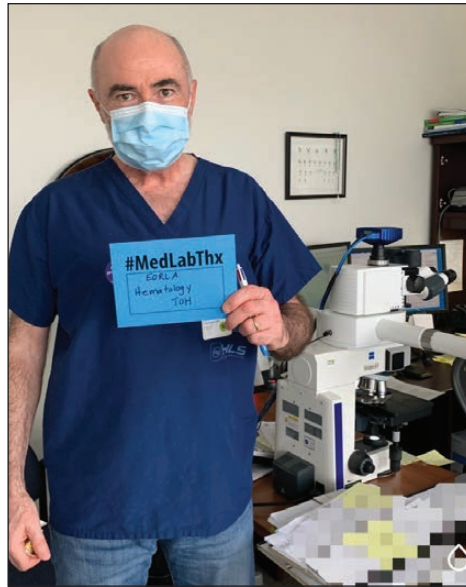
\$2 million of
economies realized by
members for the Regional
Microbiology Reference
Laboratory

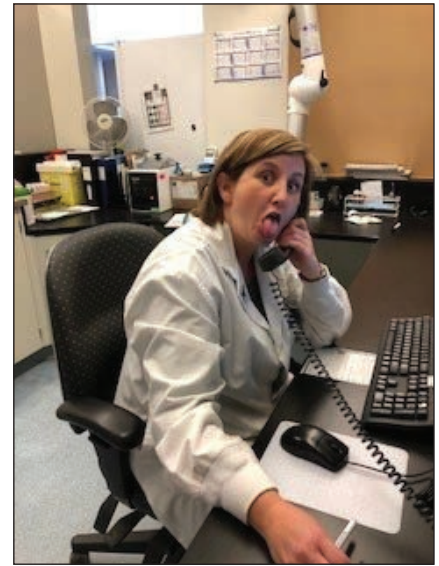


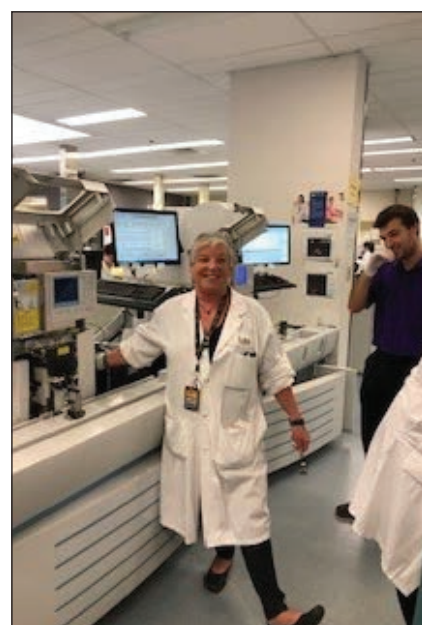
130,000,000 patient specimens
processed = 13 million annually!



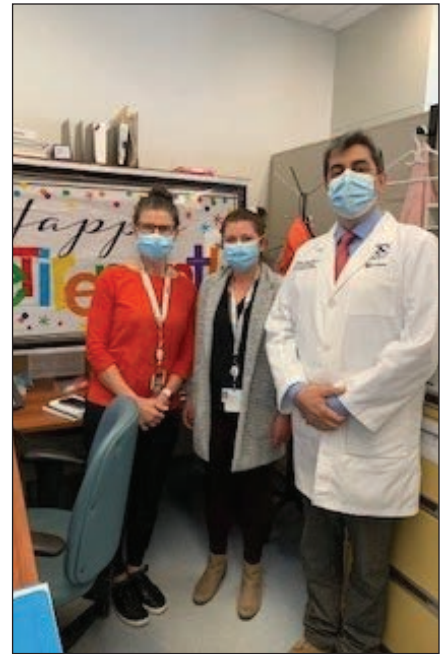
800+ staff providing
comprehensive testing
services

















The next 10 years

As remarkable as our accomplishments over the past 10 years have been, EORLA will continue to seek opportunities to expand and improve. Plans for the future include exciting initiatives that will positively impact our staff, patients, members and partners.

Our people are our most valuable asset and our top priority. EORLA's past accomplishments and what we will achieve in the future is due to your hard work. In the years ahead, we will maintain our focus on improving the work life balance of our staff and making EORLA a top employer in Canada.

Across our EORLA sites we will continue to consolidate Laboratory Information Systems and standardize test menus. Ten years ago, EORLA started with 14 diverse systems across our sites which have been reduced to six.

We are excited to be involved in the work to develop the new CIVIC Campus Lab into a state-of-the-art reference lab to support all of our members. The work has already begun and will continue for next couple years with go-live planned for 2028.

New state-of-the art labs and standardization will help EORLA to reach our goal of becoming a leader in Ontario for the implementation of innovative testing approaches for both new and existing laboratory testing. We will accomplish this by:

- new molecular technologies in all of our disciplines to complement and enhance current testing.
- implementing utilization and quality initiatives with a focus on improving patient care and reducing duplication and harm.
- modernizing our Anatomical Pathology service with new processes, automation, robotics, digital pathology and machine learning.
- developing innovative approaches to managing our laboratories through what is expected to be long-term staffing shortages for MLTs and Laboratory Physicians and Scientists.

Our plan for the future also includes expansion of EORLA's core testing services beyond our current members to bring in new clients, and become a provincial and national centre for specialized testing (i.e., Mass Spectrometer, Neurofilament Light, molecular and genetics).

On an administrative level we will be signing a renewed Membership Agreement and Service Levels by March 2023. A new Governance Structure will allow the board and committees to include more CFOs and Contract Executives.

We'll continue to demonstrate the financial and operational effectiveness of the EORLA model with provincial partners that will best align provincial funding with the realities of hospital and community medical testing.

In the immediate future, EORLA will maintain the equipment and supplies to support up to 3,000 COVID-19 tests per day. Working with Ontario Health we are planning to continue to provide 24-hour testing with less than 24-hour turnaround times.

EORLA labs are also preparing for high-volume testing that will be generated in our member hospitals as collectively we address the backlog of surgeries, procedures and clinical visits that have been delayed over the past two years. That might be an even bigger challenge to everyone in healthcare, as we shift our focus to addressing the backlog and returning our inpatient and outpatient services to normal.

Considering our past accomplishments and the goals set out for the next 10 years, EORLA is well positioned to achieve our Vision to be *the leading provider of laboratory medicine, contributing to excellence in patient care.*

Grants 2021–2022

Name	Source	Amount	Date
Beaulieu-Bergeron, Melanie	Academic Health Science Centre (AHSC) Alternative Funding Plan (AFP) Innovation Grant	\$104,924	2022–2023
	Joan Sealy Trust for Cancer Research	\$50,000	2022–2023
Berardi, Philip	OICR/OMPRN	\$45,500	2019–2021
	Joan Sealy Trust	\$50,000	2020–2022
De Nanassy, Joseph	Genome Canada - LSARP	\$ 9,111,566	2018–2022
El Demellawy, Dina	PALM Enrichment Fund	\$9,000.00	2020–2021
	Research Growth Award		
	CIHR-NSERC	\$160,697	2020–2023
	CIHR	\$795,559	2020–2021
Leung, Elaine	Canadian Blood Services, Blood Efficiency Accelerator Award Program	\$130,000	2020–2021
	CHAMO Innovation Awards	\$104,924	2022–2023
McCudden, Christopher	CIHR	\$155,000	2019–2021
	CIHR	\$504,900	2018–2022
Purgina, Bibianna	PALM Grant	\$3003	2021
	Cancer Research Society	\$120,000	2021–2022
Sant, Nadia	BMT biome	\$48,000	2021
	OMA	\$2,500	2021
Sekhon, Harman	Genome Canada Grant	\$2,020,134	2016–2021
Woulfe, John	Canadian Institutes of Health Research	\$152,235 per year	2017–2022
	New Frontiers in Research Fund	\$125,000 per year	2020–2022
	Jean Sealy Trust	\$36,010	2020–2021
Zhang, Wandong	CIHR	\$1,000.000	2020–2022

2021 Publications

1. Zainularifeen Abduljaleel, Faisal A. Al-Allaf, **Syed A. Aziz**. Peptides-based vaccine against SARS-nCoV-2 antigenic fragmented synthetic epitopes recognized by T cell and γ -cell initiation of specific antibodies to fight the infection. *Bio-des.Manuf.* (2021). <https://doi.org/10.1007/s42242-020-00114-3>
2. Mehnaz Tanveer & **Syed A. Aziz**. Role of COVID19 Genotype in Pathogenesis. *Int. j. endorsing health sci. Res.* Vol 9, Issue 2 (2021)
3. **Syed A. Aziz** & Kaneez Fatima Shah. Analysis of SARS-CoV-2 and Predictig next spillover of its more contagious variant. *Int. J. Endorsing Health Sci. Res.* Vol p, Issue 3 (2021)
4. **Basak, A** and S. Basak. Unique nCoV-2019 (COVID 19) spike glycoprotein processing by host protease: Analysis and Implication on infection. *Current Proteomics*, 18 (2), 98-105, 2021. <http://doi.org/10.2174/1570164617999200612115218>.
5. **Basak, A**, Preface, *Current Proteomics*, 18(1), 1-1, 2021. <http://doi.org/10.2174/157016461801201204091515>.
6. **Basak, A**, J. Vaijanathappa and S. Basak. Prevention of the Severity of COVID-19 Infection Using Lipid-lowering Natural Products to Target hPCK9. *Coronavirus*, 2, 1-10, 2021. <http://doi.org/10.2174/2666796702666210329141042>
7. **Basak, A** and S. Basak. Protein self assembly and aggregation in Health and Disease, *Current Proteomics*, 18, xxx, 2021, DOI: 10.2174/1570164618666210223160742.
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Financial Statements of

**EASTERN ONTARIO
REGIONAL LABORATORY
ASSOCIATION INC.**

Year ended March 31, 2022

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

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Year ended March 31, 2022

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INDEPENDENT AUDITORS' REPORT

To the Members of Eastern Ontario Regional Laboratory Association Inc.

To the Board of Governors of Trustees/Board of Directors of the Eastern Ontario Regional Laboratory Association

Opinion

We have audited the financial statements of the Eastern Ontario Regional Laboratory Association, which comprise:

- the statement of financial position as at March 31, 2022
- the statement of operations for the year then ended
- the statement of changes in net assets for the year then ended
- the statement of cash flows for the year then ended
- and notes to the financial statements, including a summary of significant accounting policies

(Hereinafter referred to as the “financial statements”).

In our opinion, the accompanying financial statements, present fairly, in all material respects, the financial position of the Eastern Ontario Regional Laboratory Association as at March 31, 2022 and its results of operations, its changes in net assets and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the “**Auditors’ Responsibilities for the Audit of the Financial Statements**” section of our auditors’ report.

We are independent of the Eastern Ontario Regional Laboratory Association in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada and we have fulfilled our other responsibilities in accordance with these requirements.

KPMG LLP, an Ontario limited liability partnership and member firm of the KPMG global organization of independent member firms affiliated with KPMG International Limited, a private English company limited by guarantee. KPMG Canada provides services to KPMG LLP.



We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

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

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Those charged with governance are responsible for overseeing the Eastern Ontario Regional Laboratory Association's financial reporting process.

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion.

Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists.

Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial statements.

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

We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion.



Page 3

The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Eastern Ontario Regional Laboratory Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the Eastern Ontario Regional Laboratory Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

A handwritten signature in black ink that reads 'KPMG LLP'. The signature is written in a cursive, stylized font and is underlined with a single horizontal stroke.

Chartered Professional Accountants, Licensed Public Accountants

Ottawa, Canada

June 28, 2022

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

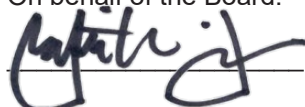
Statement of Financial Position

March 31, 2022, with comparative information for 2021

	2022	2021
Assets		
Current assets:		
Cash	\$ 28,753,131	\$ 5,087,955
Due from member hospitals (note 2)	1,405,068	865,077
Taxes recoverable	1,758,147	3,723,792
Other receivables	1,756,240	11,158,447
Prepaid expenses	696,069	994,010
	<u>34,368,655</u>	<u>21,829,281</u>
Due from member hospitals (note 2)	1,444,101	1,501,609
Prepaid occupancy costs (note 2)	4,896,320	5,092,220
Capital assets (note 3)	13,916,897	16,979,753
Funds held in trust (note 4)	413,215	493,725
	<u>\$ 55,039,188</u>	<u>\$ 45,896,588</u>
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 14,378,538	\$ 10,600,463
Due to The Ottawa Hospital - operations (note 2)	7,380,010	6,182,212
Due to The Ottawa Hospital - capital (note 2)	3,153,777	3,933,777
Due to member hospitals (note 2)	2,778,944	2,048,613
Deferred revenue (note 5)	170,887	414,708
	<u>27,862,156</u>	<u>23,179,773</u>
Employee future benefits (note 6(a))	5,266,000	5,122,000
Deferred capital contributions (note 7)	2,394,780	8,175,428
Funds held in trust (note 4)	413,215	493,725
	<u>35,936,151</u>	<u>36,970,926</u>
Net assets:		
Unrestricted surplus (deficiency)	7,580,920	121,337
Invested in capital assets	11,522,117	8,804,325
	<u>19,103,037</u>	<u>8,925,662</u>
Contingencies (note 10)		
	<u>\$ 55,039,188</u>	<u>\$ 45,896,588</u>

See accompanying notes to financial statements.

On behalf of the Board:



Chairman



Director

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Statement of Operations

Year ended March 31, 2022, with comparative information for 2021

	2022	2021
Revenue:		
Medical laboratory services	\$ 118,026,747	\$ 114,680,627
Government of Ontario contributions	34,126,446	34,003,330
Other income	4,099,617	2,249,890
Amortization of deferred capital contributions (note 7)	2,463,006	2,341,521
	158,715,816	153,275,368
Expenses:		
Salaries and wages	71,555,073	71,127,371
Medical and scientific remuneration	24,284,721	24,339,381
Supplies	41,015,640	42,181,465
Referred out services	2,179,144	2,063,228
Amortization of capital assets	6,182,174	5,831,847
Courier and delivery	2,086,013	1,399,320
Professional services	1,039,776	789,364
Amortization of prepaid occupancy costs	195,900	195,900
	148,538,441	147,927,876
Excess of revenue over expenses	\$ 10,177,375	\$ 5,347,492

See accompanying notes to financial statements.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Statement of Changes in Net Assets

Year ended March 31, 2022, with comparative information for 2021

	Investment in capital assets	Unrestricted (deficiency)	Total 2022	Total 2021
Balance, beginning of year	\$ 8,804,325	\$ 121,337	\$ 8,925,662	\$ 3,578,170
Excess of revenue over expenses	—	10,177,375	10,177,375	5,347,492
Purchase of capital assets	3,119,318	(3,119,318)	—	—
Amortization of capital assets	(6,182,174)	6,182,174	—	—
Deferred capital contributions received (note 7)	3,317,642	(3,317,642)	—	—
Amortization of deferred capital contributions (note 7)	2,463,006	(2,463,006)	—	—
Balance, end of year	\$ 11,522,117	\$ 7,580,920	\$ 19,103,037	\$ 8,925,662

See accompanying notes to financial statements.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Statement of Cash Flows

Year ended March 31, 2022, with comparative information for 2021

	2022	2021
Cash provided by (used for):		
Operating activities:		
Excess of revenue over expenses	\$ 10,177,375	\$ 5,347,492
Items not involving cash:		
Amortization of capital assets	6,182,174	5,831,847
Amortization of deferred capital contributions (note 7)	(2,463,006)	(2,341,521)
Amortization of prepaid occupancy costs	195,900	195,900
Net increase in employee future benefits liability	144,000	168,200
Change in non-cash operating working capital items:		
Increase (decrease) in due from member hospitals	(482,483)	1,578,217
Decrease (increase) in taxes recoverable	1,965,645	(1,371,922)
Decrease (increase) in other receivables	9,402,207	(10,943,213)
Decrease (increase) in prepaid expenses	297,941	(71,666)
Increase in accounts payable and accrued liabilities	3,778,075	3,044,653
Increase (decrease) in deferred revenue	(243,821)	359,756
Increase in due to member hospitals	730,331	1,298,452
Increase (decrease) in due to The Ottawa Hospital - operations	1,197,798	(14,670)
	30,882,136	3,081,525
Investing activities:		
Purchase of capital assets	(3,119,318)	(4,517,963)
Financing activities:		
Decrease in long-term due to/from member hospitals	—	(776,212)
Decrease in due to The Ottawa Hospital - capital	(780,000)	(1,560,000)
Deferred capital contributions received (returned) (note 7)	(3,317,642)	6,247,347
	(4,097,642)	3,911,135
Net increase in cash during the year	23,665,176	2,474,697
Cash, beginning of year	5,087,955	2,613,258
Cash, end of year	\$ 28,753,131	\$ 5,087,955

See accompanying notes to financial statements.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements

Year ended March 31, 2022

Eastern Ontario Regional Laboratory Association Inc. ("EORLA") was incorporated on April 15, 2003, as a shared services corporation without share capital. The member hospitals voluntarily joined EORLA to foster continued and increased cooperation between members and to support the integration of laboratory service in the region. EORLA is an integrated hospital laboratory network with sixteen acute care hospital facilities having on-site laboratories configured to meet program needs while referring specialized services to regional laboratory sites.

These financial statements reflect the assets and liabilities and results of operations of EORLA. They do not include the assets, liabilities or operations of its member hospitals, which, although associated, are separately managed, and report to separate Boards of Directors. Note 2 provides details on related party transactions.

1. Significant accounting policies:

The financial statements have been prepared by management in accordance with the Canadian public sector accounting standards including the 4200 standards for government not-for-profit organizations and include the following significant accounting policies:

(a) Revenue recognition:

EORLA follows the deferral method of accounting for contributions for not-for-profit organizations.

Operating grants are recorded as revenue in the period to which they relate. Where a portion of a grant relates to a future period, it is deferred and recognized in that subsequent period.

Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured.

Externally restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Contributions restricted for the purchase of capital assets are deferred and amortized into revenue on a straight-line basis, at rates corresponding with the amortization rates for the related capital assets.

Revenue derived from laboratory services are recognized when services are rendered.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

1. Significant accounting policies (continued):

(b) Financial instruments:

EORLA's financial instruments consist of cash, accounts receivable and accounts payable and accrued liabilities.

EORLA's financial instruments are measured as follows:

Cash	Fair value
Due from member hospitals	Amortized cost
Taxes recoverable	Amortized cost
Other receivables	Amortized cost
Funds held in trust	Fair value
Accounts payable and accrued liabilities	Amortized cost
Due to The Ottawa Hospital – operations	Amortized cost
Due to The Ottawa Hospital – capital	Amortized cost
Due to member hospitals	Amortized cost

Unrealized changes in fair value are recognized in the statement of remeasurement gains and losses until they are realized. When the financial instrument is derecognized, the unrealized gains and losses previously recognized in the statement as remeasurement gains and losses are reversed and recognized in the statement of operations. Unrealized changes in the fair value of the financial asset of Funds held in trust is recorded in the corresponding liability.

Financial instruments are adjusted by transaction costs incurred on acquisition and financing costs, which are amortized using the straight-line method.

All financial assets are assessed for impairment on an annual basis. When a decline is determined to be other than temporary, the amount of the loss is reported in the statement of operations and any unrealized gain is adjusted through the statement of remeasurement gains and losses.

EORLA does not have any amounts to record on the statement of remeasurement gains and losses and therefore this statement has not been included in these financial statements.

(c) Prepaid occupancy costs:

Prepaid occupancy costs are amortized on a straight-line basis over 40 years.

(d) Capital assets:

Purchased capital assets, other than minor equipment, are recorded at cost. Minor equipment replacements are expensed in the year of replacement. Computer hardware and software under development and construction in progress are capitalized until placed in service, at which point they will be amortized.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

1. Significant accounting policies (continued):

(d) Capital assets (continued):

Capital assets are reviewed for impairment whenever events or changes in circumstances indicate that their carrying amount may not be recoverable. When a capital asset no longer contributes to EORLA's ability to provide services, its carrying amount is written down to its residual value.

Construction in progress is not amortized until the project is complete and the assets come into use. Capital assets are amortized on a straight-line basis over their expected useful lives as follows, other than instruments purchased for performing COVID-19 tests, which are amortized over a 2-year useful life.

Computer hardware and software	5 to 10 years
Major equipment	5 to 10 years
Lab renovation	20 years

(e) Employee future benefits:

EORLA provides defined retirement and other future benefits for substantially all retirees and employees. These future benefits include life insurance and health care benefits.

EORLA accrues its obligations for employee benefit plans as the employees render the services necessary to earn the benefits. The cost of non-pension post-retirement and post-employment benefits earned by employees is actuarially determined using the projected benefit method pro-rated on service and management's best estimate of retirement ages of employees and expected health care costs.

Adjustments arising from plan amendments, including past service costs, are recognized in the year that the plan amendments occur. Actuarial gains or losses are amortized over the average remaining service period of active employees.

The average remaining service period of active employees covered by the employee benefit plan is 12.0 years (2021 - 12.0 years).

EORLA is an employer member of the Healthcare of Ontario Pension Plan, which is a multi-employer, defined benefit pension plan. EORLA has adopted defined contribution plan accounting principles for this Plan because insufficient information is available to apply defined benefit plan accounting principles.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

1. Significant accounting policies (continued):

(f) Funds held in trust:

EORLA holds resources and makes disbursements on behalf of certain third party groups. EORLA has no discretion over such transactions; hence, resources received are reported as liabilities, not revenue, and subsequent distributions are reported as decreases to the liability, not expenses.

(g) Use of estimates:

The preparation of these financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the period. Actual results could differ from these estimates. These estimates are reviewed annually and, as adjustments become necessary, they are reported in the periods in which they become known. The most significant estimates used in preparing these financial statements include the assumptions underlying the employee future benefit liability

2. Related party transactions:

The Ottawa Hospital entered into an agreement with the Ministry of Health of Ontario (previously Ministry of Health and Long-Term Care of Ontario) to construct a regional laboratory, including investment in capital equipment. The Ottawa Hospital completed the project in September 2006 at a total cost of \$25,375,812. EORLA's share of the project's total cost was \$7,833,777 and is accounted for as prepaid occupancy costs. In return for this capital investment, EORLA is permitted to occupy the premises at The Ottawa Hospital, General Campus, under the provisions set out in the related agreements. The accumulated amortization as at March 31, 2022 is \$2,937,457 (2021 - \$2,741,557).

The amount due to The Ottawa Hospital - capital, bears interest at prime and is payable on demand.

EORLA is related to all member hospitals due to the composition of its Board of Directors. Unless otherwise stated, transactions occur in the normal course of operations and are recorded at fair value.

Medical laboratory services are invoiced to member hospitals at pre-established rates.

The long-term receivable from members is non-interest bearing with no fixed terms of repayment.

The amount due to The Ottawa Hospital – operations, bears interest at a rate of 3.1% (2021 - 3.1%) with no fixed term of repayment.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

2. Related party transactions (continued):

Billing adjustment and member assessment:

Effective March 31, 2016, EORLA entered into an agreement with one of its members to repay \$4,330,470 related to the billing adjustment over a five-year period. The amount bears interest at prime minus 0.25% and requires EORLA to make annual principal payments of \$866,094. The balance due to the member hospital as at March 31, 2022 is \$Nil (2021 - \$866,094).

3. Capital assets:

	Cost	Accumulated amortization	2022 Net book value	2021 Net book value
Computer hardware and software	\$ 18,434,465	\$ 17,069,476	\$ 1,364,989	\$ 2,729,982
Equipment	29,246,587	19,093,554	10,153,033	12,640,797
Lab renovation	2,445,061	579,484	1,865,577	1,146,486
Construction in progress	533,298	—	533,298	462,488
	\$ 50,659,411	\$ 36,742,514	\$ 13,916,897	\$ 16,979,753

Cost and accumulated amortization of capital assets at March 31, 2021 amounted to \$47,540,093 and \$30,560,340, respectively.

4. Funds held in trust:

Funds held in trust are held in EORLA's bank account and represent education funds held in trust for third parties (employees).

5. Deferred revenue:

	Balance, beginning of year	Funds/ interest received	Funds used	Balance, end of year
EORLA Operation Education	\$ 37,483	\$ —	\$ 547	\$ 36,936
Other	377,225	85,951	329,225	133,951
	\$ 414,708	\$ 85,951	\$ 329,772	\$ 170,887

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

6. Employee future benefits:

(a) Non-pension benefits:

EORLA offers a defined benefit plan which provides extended health care and dental insurance benefits to certain of its employees and extends this coverage to the post-retirement period. The most recent actuarial valuation of employee future benefits was completed as at March 31, 2022. As at March 31, 2022, EORLA's liability associated with the benefit plan is as follows:

	2022	2021
Accrued benefit obligation	\$ 4,133,027	\$ 4,404,700
Unamortized experience gains	1,132,973	717,300
Employee future benefit liability	\$ 5,266,000	\$ 5,122,000

EORLA's defined benefit plan is not funded, resulting in a plan deficit equal to the accrued benefit obligation. The significant actuarial assumptions adopted in estimating EORLA's accrued benefit obligation are as follows:

	2022	2021
Discount rate to determine accrued benefit obligation	3.89%	3.21%
Dental cost increases	3.75%	3.50%
Extended health care cost escalations	5.75%	7.50%
Expected average remaining service life of employees	12.0 years	12.0 years

The employee future benefit liability change for the year ended March 31, 2022 is \$144,000 (2021 - \$168,200). This amount is comprised of:

	2022	2021
Current service cost	\$ 237,700	\$ 247,300
Amortization experience gains	(64,000)	(47,700)
Benefit payments	(172,100)	(176,700)
Interest on accrued benefit obligation	142,400	145,300
	\$ 144,000	\$ 168,200

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

6. Employee future benefits (continued):

(b) Pension:

Substantially all of the employees of EORLA are members of the Healthcare of Ontario Pension Plan (the "Plan"), which is a multi-employer defined benefit pension plan available to all eligible employees of the participating members of the Ontario Hospital Association. Contributions to the Plan made during the year by EORLA on behalf of its employees amounted to \$5,757,413 (2021 - \$5,672,841) and are included in the statement of operations.

In consultation with its actuaries, pension expense is based on Plan management's best estimates of the amount required to provide a high level of assurance that benefits will be fully represented by fund assets at retirement, as provided by the Plan. The funding objective is for employer contributions to the Plan to remain a constant percentage of employees' contributions.

Variances between actuarial funding estimates and actual experience may be material and any differences are generally to be funded by the participating members. The most recent triennial actuarial valuation of the Plan as at December 31, 2021 indicates the plan is fully-funded.

7. Deferred capital contributions:

	Balance, beginning of year	Contributions /returned	Amortization	Balance, end of year
eHealth - OLIS funding	\$ 2,648,194	\$ —	\$ 1,364,991	\$ 1,283,203
Microscope	16,417	—	—	16,417
MOH COVID-19 capital funding	5,510,817	3,317,642	1,098,015	1,095,160
	\$ 8,175,428	\$ 3,317,642	\$ 2,463,006	\$ 2,394,780

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

8. Bank indebtedness:

EORLA has an available line of credit of \$10,000,000 with its corporate bankers, of which no amount was drawn against at March 31, 2022 (2021 - \$Nil). This line of credit is unsecured and bears interest at prime less 0.25%.

9. Financial instruments:

Establishing fair value:

The following classification system is used to describe the basis of the inputs used to measure the fair values of financial instruments in the fair value measurement category:

Level 1 – Unadjusted quoted market prices in active markets for identical assets or liabilities;

Level 2 – Observable or corroborated inputs, other than Level 1, such as quoted prices for similar assets or liabilities in inactive markets or market data for substantially the full term of the assets or liabilities; and

Level 3 – Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of these assets and liabilities.

Cash and funds held in trust are a Level 1 hierarchy. There have been no movements between levels during the year.

Risk management:

EORLA is exposed to various financial risks through its transactions in financial instruments.

Credit risk:

Credit risk relates to the potential that one party to a financial instrument will fail to discharge an obligation and incurs a financial loss. EORLA is exposed to credit risk on its accounts receivable. Management does not believe it is exposed to any significant credit risk due to the nature of the counterparties of its receivables.

Liquidity risk:

Liquidity risk is the risk EORLA will not be able to meet its financial obligations when they come due. EORLA manages its liquidity risk by forecasting cash flows from operations and anticipating investing and financing activities and maintaining credit facilities to ensure it has sufficient available funds to meet current and foreseeable financial requirements.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

9. Financial instruments (continued):

Market risk:

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate as a result of market factors. Market factors include three types of risk: interest rate risk, currency risk and other price risk.

EORLA believes it is not subject to significant interest rate, foreign currency or other price risks arising from its financial instruments.

There have been no significant changes from the previous year in the exposure to risk on policies, procedures and methods used to measure credit risk.

10. Contingencies:

The nature of EORLA's activities are such that there may be litigation pending or in prospect at any time. With respect to claims as at March 31, 2022, management believes EORLA has valid defenses and appropriate insurance coverage in place. In the event any claims are successful, management believes that such claims are not expected to have a material effect on EORLA's financial position.

A group of healthcare organizations formed the Healthcare Insurance Reciprocal of Canada ("HIROC"), of which EORLA is a member. HIROC is registered as a Reciprocal pursuant to provincial Insurance Acts which permit persons to exchange with other persons reciprocal contracts of indemnity insurance. HIROC facilitates the provision of liability insurance coverage to healthcare organizations in the provinces and territories where it is licensed. Subscribers pay annual premiums, which are actuarially determined, and are subject to assessment for losses in excess of such premiums, if any, experienced by the group of subscribers for the year in which they were a subscriber. No such assessments have been made to March 31, 2022.

11. Comparative information:

Certain 2021 comparative information has been reclassified to conform with the financial statement presentation adopted for 2022.

EASTERN ONTARIO REGIONAL LABORATORY ASSOCIATION INC.

Notes to Financial Statements (continued)

Year ended March 31, 2022

12. Impact of Coronavirus COVID-19 pandemic:

In March of 2020, the COVID-19 outbreak was declared a pandemic by the World Health Organization and has had a significant financial, market and societal impacts.

Management has been forthright in undertaking certain strategies and actions to respond to the COVID-19 outbreak. The health and safety of all staff has been reinforced as the priority for EORLA. Management has taken the following actions:

- implemented work-from-home requirements for employees, suspended travel and events, shifted face-to-face meetings to digital methods.

Financial statements are required to be adjusted for events occurring between the date of the financial statements and the date of the auditors' report which provide additional evidence relating to conditions that existed at year-end. Management has assessed the financial impacts and there are no additional adjustments required to the financial statements at this time.

The ultimate duration and magnitude of the pandemic's impact on EORLA's operations and financial position is not known at this time. These impacts could include a decline in future cash flows, changes to the value of assets and the liabilities and changes the use of accumulated net assets to sustain operations. An estimate of the future financial effect of this pandemic is not predictable at this time.

