
South East Health Unit

formerly



FINANCE COMMITTEE MEETING AGENDA PACKAGE

TUESDAY, JUNE 24, 2025

**at 1:00 p.m.
Kingston Site
221 Portsmouth Avenue**

Join Zoom Meeting

<https://us06web.zoom.us/j/84153200074?pwd=3aSOPaFH9S1RLvSdtK7gyfUEW4pTV0.1>

Meeting ID: 841 5320 0074

Passcode: 285009

**To ensure a quorum we ask that you please RSVP to
heather.bruce@healthunit.org or 613-345-5685 Ext. 2248.**

South East Health Unit

formerly



FINANCE COMMITTEE AGENDA

Tuesday, June 24, 2025

1:00 p.m. (Boardroom)

Expected attendance:

In-Person: Councillor Judy Greenwood-Speers, Chair Anne-Marie Koiner, Councillor Peter McKenna, Mayor Jan O'Neill,

Virtual: Dr. Jeffrey Allin, Melanie Paradis

Officers: Dr. Piotr Oglaza, Suzette Taggart

1. **CALL TO ORDER**

2. **LAND ACKNOWLEDGEMENT**

South East Health Unit is located on the traditional territory of Indigenous peoples dating back countless generations. We would like to show our respect for their contributions and recognize the role and treaty making in what is now Ontario. Hundreds of years after the first treaties were signed, they are still relevant today.

3. **ROLL CALL**

4. **APPROVAL OF THE AGENDA**

MOTION: THAT the Finance Committee approve the agenda for June 24, 2025.

5. **APPROVAL OF THE MINUTES OF PREVIOUS MEETING**

MOTION: THAT the Finance Committee approve the minutes of the meeting held on April 16, 2025.

6. **DISCLOSURE OF PECUNIARY INTEREST AND / OR CONFLICT OF INTEREST**

7. **NEW BUSINESS**

7.1 2024 Audit Update

The legacy KFLA audit was scheduled for early February 2025, however the provincial election caused delays in receiving Ministry of Health "final" one-time funding approvals, the remaining audit activities have been rescheduled to June/July 2025. The legacy HPE audit was completed in March 2025. The legacy LGLD audit is planned for June/July 2025. The results of all three legacy audits will be presented to Board of Health/Finance Committee in August/September - date to be confirmed.

7.2 2024 Ministry of Health Annual Reconciliation Report

The template has been received by health units, due June 30, 2025.

7.3 Voluntary Merger, Year Two Budget Submission**7.4 Financial Results Package, as of May 31, 2025****7.5 Projection Update Financial Results****8. ADJOURNMENT**

MOTION: THAT this Finance Committee meeting be adjourned.

South East Health Unit

formerly



FINANCE COMMITTEE MINUTES

Wednesday, April 16, 2025

1:00 p.m.

Minutes of the meeting of the Finance Committee held at 221 Portsmouth Avenue, Kingston, ON, in-person and through MS Teams.

In attendance:

In-Person: Councillor Judy Greenwood-Speers, Councillor Anne-Marie Koiner, Councillor Peter McKenna (departed at 3:06 p.m.), Mayor Jan O'Neill

Virtual: Dr. Jeffrey Allin, Melanie Paradis (departed at 2:30 p.m.)

Officers: Dr. Piotr Oglaza, Suzette Taggart

1. **CALL TO ORDER**

Chair A. Koiner called the meeting to order at 1:04 p.m.

The group discussed the status of meeting recordings and transcripts. The transcripts are used solely to facilitate taking of the minutes which, when approved will be the official record of the meeting.

2. **TERRITORIAL ACKNOWLEDGEMENT**

Spoken by Chair A. Koiner.

3. **ROLL CALL**

Roll call was taken by Recorder, K. Thompson.

4. **APPROVAL OF THE AGENDA**

It was MOVED by Mayor J. O'Neill and SECONDED by Councillor J. Greenwood-Speers THAT the Finance Committee approve the agenda for the meeting of Wednesday, April 16, 2025.

CARRIED

5. **APPROVAL OF THE MINUTES OF PREVIOUS MEETING**

It was MOVED by Mayor J. O'Neill and SECONDED by Councillor J. Greenwood-Speers THAT the Finance Committee approve the minutes for the meeting of February 19, 2025.

CARRIED

A follow-up from the previous meeting was noted by Chair A. Koiner, confirming that the Governance Committee has determined the Chair, as an ex officio member, is a voting member of the Finance Committee. This clarification was acknowledged before moving forward.

6. **DISCLOSURE OF CONFLICT OF INTEREST**

No conflicts were declared.

7. **NEW BUSINESS**

7.1 ***Fourth Quarter for Leeds, Grenville and Lanark District Health Unit - DRAFT***

The Committee reviewed the draft Q4 financial update for the former Leeds, Grenville and Lanark District Health Unit (LGLDHU). Staff advised that the report had been delayed owing to a transition in finance personnel and the ongoing complexities associated with operating across multiple financial systems. A year-end deficit of approximately \$1.4 million was reported, which was partially offset by a transfer of \$871,000 from reserves. Staff noted that these reserves are now fully depleted. A significant variance in employee benefit costs was also identified, with actual costs reaching approximately 35 percent compared to the budgeted 28 percent. This variance is currently under review, with staff citing potential misallocations and a pending Workplace Safety and Insurance Board (WSIB) credit as factors that may impact the final figure.

Members discussed the structural nature of the deficit and cited historical underfunding as a contributing factor. The Committee also considered prior cost-saving measures, including staffing changes that had been contemplated before the merger but were ultimately not implemented. Staff confirmed that this was a strategic decision by the legacy LGLDHU Board, made in support of the merger's progression and in anticipation of transitional funding from the province.

There was further discussion regarding the potential impact of benefit package costs across the merged organization. Questions were raised regarding the approach to aligning different benefit packages across the legacy organizations. Staff clarified that a comparative review of benefit plans is underway as part of the merger process.

In addition, the Committee discussed a federal contribution of \$54,000 to the *Food for You, Food for Two* prenatal program under the Healthy Babies Healthy Children portfolio. Staff clarified that this funding was a one-time contribution, and that the program is primarily funded by the provincial Ministry of Children, Community and Social Services.

7.2 ***First Quarter Variances for South East Health Unit - DRAFT***

The Committee reviewed the draft Q1 financial report for the South East Health Unit, which showed a net surplus of approximately \$375,000. This surplus was expected, due to the reallocation of permanent staff time toward merger activities, which reduced expenses in mandatory

programs. Benefits costs were slightly elevated, consistent with expectations for the early part of the year when the Canada Pension Plan (CPP) and Employment Insurance (EI) maximums have not yet been reached. Staff noted that the reported surplus may be overstated due to the legacy KFL&A Public Health nearly 65/35 funding split, and once adjusted, the budget may be closer to breakeven.

Committee members acknowledged the staff's strong efforts in preparing a timely Q1 report amidst the complexity of operating under different financial systems. The report's indication that operating expenditures were approximately 25 percent was viewed as a positive early indicator.

A question was raised regarding higher-than-budgeted Information Technology (IT) expenses. Staff explained that significant investments were made to support integration, some of which were not covered under the merger budget due to the decision to pay off three mortgages in Year 1. Operational funds were available and used strategically to support IT infrastructure.

Staff clarified that Year 2 merger funding is not included in the current Q1 budget due to fiscal year alignment with the Ministry. A draft Year 2 merger budget has been submitted and is pending approval.

Further discussion addressed various line items:

- Expenditure recoveries reflect salary recoveries from externally funded initiatives and are expected to increase over the year.
- Employee benefit costs are expected to normalize in subsequent quarters.
- Communication costs, currently high, are being monitored and may decrease through integration efficiencies.
- Office equipment purchases are expected to be funded through merger dollars later in the year.

Members emphasized that the Q1 budget serves as a preliminary snapshot during the transition to a unified system. Continued flexibility and refinement will be necessary as integration progresses.

It was MOVED by Councillor P. McKenna and SECONDED by Mayor J. O'Neill THAT the Finance Committee receive for information:

- Item 7.1: Q4 financial report for the former Leeds, Grenville and Lanark District Health Unit-Draft, and
- Item 7.2: Q1 financial report for the South East Health Unit - Draft.

CARRIED

7.3 Annual Service Plan

A summary of the Annual Service Plan (ASP) was provided for information, supporting compliance with the provincial Public Health Accountability Framework. The ASP aligns with the Board-approved

budget and allocates FTEs to program areas. Due to the complexities of merging three legacy health units, the Ministry permitted the submission without detailed program descriptions. The ASP was submitted on March 31, and a response is pending.

Key funding requests include an additional \$260,000 for the Ontario Seniors Dental Care Program to address increased demand and rising market-driven costs for contracted services such as dentures. One-time funding was also requested to support student public health inspector practicums, reflecting the combined needs of the legacy agencies.

Staff are continuing to assess the potential impact of the new federal dental program on local service demand and will monitor how it interacts with existing provincial programs, considering differences in income eligibility thresholds.

The Committee discussed how Finance Committee documents should be shared with the full Board. There was consensus on the importance of transparency, especially in these early stages of the merged organization, with members generally supporting the idea of sharing more rather than less information. There was agreement to seek advice from the Governance Committee on a consistent and appropriate process for sharing Finance Committee materials with the Board going forward.

It was MOVED by Councillor J. Greenwood-Speers and SECONDED by Mayor J. O'Neill THAT the Finance Committee receive for information Item 7.3: Annual Service Plan briefing note.

CARRIED

7.4 Erosion of Public Health Funding

The Finance Committee held a discussion on long-term funding projections and the budget outlook for the newly merged South East Health Unit. A financial model was presented, indicating a growing structural deficit by 2030, based on assumptions of 1% annual funding increases from the province, 4% annual expense increases, and 1% annual population growth. Even with a proposed municipal/provincial funding split of 35/65, a significant deficit is anticipated. The committee agreed that the board should request participation in the Ministry of Health's upcoming review of the public health funding formula. Members emphasized the importance of approaching the Ministry with a constructive and collaborative message, highlighting the efficiencies achieved through the merger and the Board's readiness to contribute to long-term solutions. The committee stressed the need for continued fiscal prudence, particularly regarding hiring and program expansion.

It was MOVED by Mayor J. O'Neill and SECONDED by Councillor P. McKenna THAT the Finance Committee recommends THAT the Board of Health demonstrate its support for long-term, sustainable provincial public health funding by requesting participation in the

Ministry of Health's policy review of the public health funding methodology.

CARRIED

7.5 2024/2025 Year One Merger Budget and Accomplishments

A briefing note was presented outlining key accomplishments achieved through year one merger funding (April 1, 2024 to March 31, 2025). Highlights included mortgage payments for SEHU properties, including those in Smiths Falls, Kingston, and Belleville.

The agency remains focused on maintaining current service levels while navigating ongoing long-term funding pressures. Emphasis was placed on the importance of developing a clear narrative to communicate service improvements to the Ministry.

Concerns were raised regarding the human resources component, particularly the potential increase in costs related to harmonization. It was clarified that current expenditures are largely driven by legislative requirements rather than harmonization itself. A recommendation was made to reflect harmonization costs in the budget for transparency and consistency. However, it was noted that specific cost details are still under negotiation and are not yet ready for public disclosure.

It was MOVED by Councillor J. Greenwood-Speers and SECONDED by Mayor J. O'Neill THAT the Finance Committee receive for information Item 7.5: 2024/2025 Year One Merger Budget and Accomplishments briefing note.

CARRIED

7.6 Municipal Levy Discussion

The Finance Committee provided preliminary direction to staff on setting parameters for developing options related to municipal contributions and levy harmonization.

It was suggested that a business case be developed for the province to address funding disparities across regions, particularly highlighting the historical inconsistencies in provincial base funding among the legacy agencies. Members noted that rural areas may warrant enhanced funding due to unique service delivery costs and challenges such as transportation and lower population density.

The Committee discussed the need to model levy harmonization scenarios with varying percentage increases across municipalities. Emphasis was placed on ensuring fairness and equity, while avoiding disproportionate impacts on any one municipality. Members expressed concern that restricting levy increases to nominal levels (e.g., 1–2%) may unduly constrain public health service delivery, particularly in the context of rising inflation and broader municipal cost pressures. It was underscored that public health budgets require support by municipalities.

There was agreement that this discussion should be brought to the full Board to ensure an inclusive and comprehensive approach. The 65/35 funding split, as established through the Tri-Board Merger Committee process was identified as a proposed starting point for modeling. Staff were asked to develop a range of levy scenarios, including one based on a 4% annual increase, with flexibility to accommodate various timelines for achieving harmonization and to reflect differing municipal capacities.

ACTION: Staff were directed to develop model projecting continued municipal levy harmonization beyond 2027 based on the levy harmonization scenario developed through the Tri-Board Committee and included in the final business case submitted to the Ministry of Health, which had been endorsed by all three legacy boards of health.

8. **ADJOURNMENT**

It was MOVED by Mayor J. O'Neill and SECONDED by Dr. J. Allin THAT the Finance Committee be adjourned at 3:08 p.m.

CARRIED

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Finance Committee Briefing Note

To:	South East Health Unit – Finance Committee
Prepared by:	Amy Rankin, Finance Manager
Approved by:	
Date:	Tuesday, June 24, 2025
Subject:	Voluntary Merger, Year Two Budget Submission
Nature of Board Engagement	<input checked="" type="checkbox"/> For Information <input type="checkbox"/> Strategic Discussion <input type="checkbox"/> Board approval and motion required <input type="checkbox"/> Compliance with Accountability Framework <input type="checkbox"/> Compliance with Program Standards
Action Required:	Review Only
Background:	<p>The South East Health Unit has submitted to The Ministry of Health for one time funding to support year two merger activities from April 1, 2025 to March 31, 2026.</p> <p>This funding focused on supporting the following areas:</p> <ul style="list-style-type: none"> • Municipal Levy Harmonization • Salary and Benefits Harmonization • Human Resources Stabilization • Governance • Information Technology • Change Management • Communications

Strengthening Public Health Voluntary Mergers - South East

2025-26 MERGER BUDGET (FOR THE PERIOD OF APRIL 1, 2025 TO MARCH 31, 2026)

COST ITEM	Description of Budget Item/Budget Forecast Assumptions	Budget Amount	Year 2 request (estimate)	NOTES
1. Building Occupancy				
Lease Payment		-		
Mortgage Payment		-		
Travel/Accomodations - Building Occupancy (i.e. moving costs)		-		
Building Occupancy Total	-	-	3,504,334	Estimate to be discussed and revised based on reallocations in Year 1.
2. Municipal Levy Harmonization				
Please share assumptions/calculations, use separate tab or document if needed.				
Municipal Levy Harmonization		1,945,235		
Municipal Levy Harmonization Total	-	1,945,235	1,945,235	
3. Salary/Wage Harmonization				
Salary/Wage Harmonization	This covers non-union harmonization of salary and benefits, legal fees to work through PLSRTA, as well as consultant fees to assist with aligning positions across the organizations.	679,000		Will need extensive funding in year 3, as we harmonize unionized positions. No expectation this can be completed in year 2.
Salary/Wage Harmonization Total	-	679,000	3,958,638	
4. Staffing				
Please provide estimated # of FTEs per row and indicate if FTEs are new roles, backfill or severance.				
Transition (i.e. to merger related work, overtime, severance)				
Program Staff	Includes term staff to work on program harmonization, policies, procedures etc to align program work, terms will vary 9-12-18 months, as well as severences as we determine	1,270,000		
Administrative Staff	Includes merger office positions, severences, associate director roles in HR and IT to lead those individual projects, a paralegal to work on aligning contracts	1,414,000		
Stabilization (i.e. to maintain core programs, backfill)				
Program Staff	Payout of extensive LGL budget shortfall + stabilization	2,501,500		

Administrative Staff	Maintaining/backfilling IT/Accounting positions as well as Corp director while those staff are focused on merger work	309,000		
Other - Staffing		-		
Staffing Total		-	5,494,500	1,918,334 HR Transition + HR Stabilization costs

5. Governance

Education and Training - Governance	Board training and education related to bylaws and development	20,000		
Travel/Accommodations - Governance	Board travel and meeting expenses, including ALPHA conference	15,000		strategic plan moved to year 3
Other - Governance		-		
Governance Total		-	35,000	190,000

6. Information & Information Technology (I&IT)

Include further details (e.g. whether these are hardware or software costs)

Stabilization		-		
Transition	Harmonizing IT solutions beginning with Microsoft tenant at LGL, then all organizations to one tenant. Software solutions for dental, EMR's, payroll and HRIS, Hedgehog, file sharing, firewalls, security,	1,550,000		software
Consultant(s)/Purchase of Service - I&IT	Consultant to review KFLA gaps analysis and configuration issues	160,000		
I&IT Total		-	1,710,000	1,142,287

7. Project/Change Management

Team Building/Employee Engagement Activities	Host culture building events for staff of three legacy organizations	260,000		
Education and Training- Project/Change Management	Our management team needs training on areas such as leadership, change management, crucial conversations, establishing new teams, team dynamics, project management EDII (equity, diversity, inclusivity and Indigeneity), etc. This will help to ensure that managers will be able to competently assist staff through the change process. There will also be operational training required for managers and staff including IT training, policies, new HR and finance systems, etc. We will also need to train staff on navigating change.	215,000		
Consultant(s)/Purchase of Service - Project/Change Management				
		-		
Change Management Total		-	475,000	360,000

8. Communications

Consultant(s)/Purchase of Service - Communications	Branding to merge 3 health units and create a unified brand	60,000		
Materials/Public Campaign/Website	Signage, website development and expense to host meetings to encourage staff participation	140,000		
Other - Communications		-		
Communicatons Total		-	200,000	100,000
9. Other Travel and Accomodations				
Other - Travel and Accomodations (i.e. costs not captured above)	Kilometrage reimbursements/hotels as staff travel between locations to meet with staff and harmonize programs, buildings, board meetings.	101,000		
Other - Travel and Accomodations Total		-	101,000	
10. Other Professional Services				
Other - Professional Services (consultants, purchase of service)		-		
Legal Services	Allowance for additional support, and advice.	50,000		
Accounting Services	Allowance for thorough interim audit and ensure preparedness for 2025 audit and advice when required.	15,000		
Other-Professional Services Total		-	65,000	
11. Capital				Note that use of a planning grant is required to determine new space needs/options, significant renovations, and costs. Grants are a maximum of \$300,000.
Minor Capital (please provide brief description of the project)		-		
Planning Grant Activities (i.e. Consultant/Purchase of Service)		-		
Other -Capital		-		
Capital Total		-	-	
12. Other Costs (not captured above - include description for each item)				
Building Repairs and Improvements		-		
		-		
Other Total		-	-	
Grand Total		-	10,704,735	13,118,828 (2,414,093)

SOUTH EAST HEALTH UNIT
Strengthening Public Health
2025/2026 Year Two Merger Budget
For Finance Committee Review June 24, 2025

	Merger Activity	Total
REVENUES		
MINISTRY OF HEALTH		
Annual Grants and One-Time Grants	-	-
TOTAL REVENUES	-	-
EXPENSES		
1 Building Occupancy	-	-
2 Municipal Levy Harmonization	-	-
3 Salary/Wage Harmonization	29,227	29,227
4 Staff	142,293	142,293
5 Governance	1,261	1,261
6 Information Technology	25,440	25,440
7 Project/Change Management	33,066	33,066
8 Communications	-	-
9 Other - Travel and Accommodations	7,416	7,416
10 Other - Professional Services	-	-
11 Capital	-	-
TOTAL EXPENSES	238,703	238,703
SURPLUS/(DEFICIT)	- 238,703 -	238,703

Explanatory Notes - EXPENSES

3 Salary/Wage Harmonization

Includes contracting with consultant for this work.

4 Staff

Includes backfill replacement of some positions as well as merger office staff.

5 Governance

Includes Board expenses related to implementation of merger.

6 Information Technology

Includes reviewing existing systems and implementation of inspection software at legacy HPE.

7 Project/Change Management

Includes training for leadership staff as well as planning first all staff event.

9 Other - Travel and Accommodations

Includes travel between sites for team meetings.

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South East Health Unit

Financial Results Package

Prepared for
Board of Health | Finance Committee
2025-Jun-24

South East Health Unit

Statement of Operations | Ministry of Health | Mandatory Programs For the Calendar Year Ended

2025-May-31

	SEHU				
	Actuals	Budget	Variance	Annual Budget	Budget Spend %
Funding and Grants					
Provincial Funding	\$ 14,014,033	\$ 14,272,542	\$ (258,509)	\$ 34,254,100	40.91
Municipal Funding	6,035,984	6,056,500	(20,516)	14,535,598	41.53
Federal and Other	56,592	-	56,592	-	-
Total Funding and Grants	20,106,609	20,329,042	(222,433)	48,789,698	41.21
Expenses					
Employee Salaries and Wages	(13,387,365)	(13,531,884)	144,519	(32,476,521)	41.22
Employee Benefits	(4,016,210)	(3,857,145)	(159,065)	(9,257,147)	43.38
Total Employee Salaries, Wages and Benefits	(17,403,575)	(17,389,029)	(14,546)	(41,733,668)	41.70
Staff Training and Development	(69,823)	(168,846)	99,023	(405,230)	17.23
Board of Health	(7,459)	-	(7,459)	-	-
Volunteer	-	-	-	-	-
Travel	(152,954)	(214,438)	61,484	(514,650)	29.72
Building Occupancy	(1,090,388)	(664,965)	(425,423)	(1,595,918)	68.32
Office Expenses, Printing and Postage	(116,931)	(111,746)	(5,185)	(268,192)	43.60
Program Specific Materials and Supplies	(341,998)	(621,038)	279,040	(1,490,490)	22.95
Office Equipment	-	-	-	-	-
Professional and Contract Services	(156,404)	(496,292)	339,888	(1,191,100)	13.13
Municipal Charges	-	-	-	-	-
Communication Costs	(164,049)	(68,792)	(95,257)	(165,100)	99.36
Allocated Admin Costs	-	-	-	-	-
Information and Technology Equipment	(330,208)	(796,272)	466,064	(1,911,050)	17.28
Other Expenses	(7,695)	-	(7,695)	-	-
Total Operating Expenses	(19,841,484)	(20,531,418)	689,934	(49,275,398)	40.27
Expenditure Recoveries and Offset Revenue	146,914	285,708	(138,794)	685,700	21.43
Net Operating Expenses	(19,694,570)	(20,245,710)	551,140	(48,589,698)	40.53
Capital Expenditures	-	(83,333)	83,333	(200,000)	-
Net Expenses	(19,694,570)	(20,329,043)	634,473	(48,789,698)	40.37
Net Surplus (Deficit)	412,039	(1)	412,040	-	
Transfers from Reserves	-	-	-	-	
Net Surplus (Deficit) After Reserve Transfer	\$ 412,039	\$ (1)	\$ 412,040	\$ -	

South East Health Unit

Statement of Operations | Ministry of Health | Ontario Senior's Dental Care Program

For the Calendar Year Ended

2025-May-31

	SEHU				
	Actuals	Budget	Variance	Annual Budget	Budget Spend %
Funding and Grants					
Provincial Funding	\$ 1,440,381	\$ 1,439,000	\$ 1,381	\$ 3,453,600	41.71
Municipal Funding	-	-	-	-	-
Federal and Other	1,637	-	1,637	-	-
Total Funding and Grants	1,442,018	1,439,000	3,018	3,453,600	41.75
Expenses					
Employee Salaries and Wages	(252,294)	(297,039)	44,745	(712,893)	35.39
Employee Benefits	(76,115)	(91,511)	15,395	(219,624)	34.66
Total Employee Salaries, Wages and Benefits	(328,409)	(388,550)	60,141	(932,517)	35.22
Staff Training and Development	(400)	(2,083)	1,683	(5,000)	8.00
Board of Health	-	-	-	-	-
Volunteer	-	-	-	-	-
Travel	(12,731)	(14,729)	1,998	(35,350)	36.01
Building Occupancy	(28,639)	(42,250)	13,611	(101,400)	28.24
Office Expenses, Printing and Postage	-	(12,500)	12,500	(30,000)	-
Program Specific Materials and Supplies	(41,656)	(43,387)	1,731	(104,128)	40.00
Office Equipment	-	-	-	-	-
Professional and Contract Services	(850,557)	(913,752)	63,195	(2,193,005)	38.79
Municipal Charges	-	-	-	-	-
Communication Costs	(2,658)	(3,667)	1,009	(8,800)	30.20
Allocated Admin Costs	-	-	-	-	-
Information and Technology Equipment	(23,163)	(26,333)	3,170	(63,200)	36.65
Other Expenses	-	-	-	-	-
Total Operating Expenses	(1,288,214)	(1,447,251)	159,037	(3,473,400)	37.09
Expenditure Recoveries and Offset Revenue	-	8,250	(8,250)	19,800	-
Net Operating Expenses	(1,288,214)	(1,439,001)	150,787	(3,453,600)	37.30
Capital Expenditures	-	-	-	-	-
Net Expenses	(1,288,214)	(1,439,001)	150,787	(3,453,600)	37.30
Net Surplus (Deficit)	153,804	(1)	153,805	-	
Transfers from Reserves	-	-	-	-	
Net Surplus (Deficit) After Reserve Transfer	\$ 153,804	\$ (1)	\$ 153,805	\$ -	

South East Health Unit

Statement of Operations | Ministry of Children, Community and Social Services | Healthy Babies, Healthy Children For the Calendar Year Ended

2025-May-31

	SEHU				
	Actuals	Budget	Variance	Annual Budget	Budget Spend %
Funding and Grants					
Provincial Funding	\$ 1,600,120	\$ 1,525,432	\$ 74,688	\$ 3,661,035	43.71
Municipal Funding	-	-	-	-	-
Federal and Other	-	-	-	-	-
Total Funding and Grants	1,600,120	1,525,432	74,688	3,661,035	43.71
Expenses					
Employee Salaries and Wages	(1,146,947)	(1,099,496)	(47,451)	(2,638,789)	43.46
Employee Benefits	(347,601)	(313,262)	(34,339)	(751,828)	46.23
Total Employee Salaries, Wages and Benefits	(1,494,548)	(1,412,758)	(81,790)	(3,390,617)	44.08
Staff Training and Development	(2,264)	(6,291)	4,027	(15,100)	14.99
Board of Health	-	-	-	-	-
Volunteer	-	-	-	-	-
Travel	(36,136)	(43,729)	7,593	(104,950)	34.43
Building Occupancy	(17,650)	(14,187)	(3,463)	(34,047)	51.84
Office Expenses, Printing and Postage	(1,190)	(5,902)	4,712	(14,164)	8.40
Program Specific Materials and Supplies	(13,690)	(7,935)	(5,755)	(19,045)	71.88
Office Equipment	-	-	-	-	-
Professional and Contract Services	(3,053)	1,404	(4,457)	3,368	(90.65)
Municipal Charges	-	-	-	-	-
Communication Costs	(5,683)	(11,125)	5,442	(26,700)	21.28
Allocated Admin Costs	-	-	-	-	-
Information and Technology Equipment	(13,400)	(24,908)	11,508	(59,780)	22.42
Other Expenses	-	-	-	-	-
Total Operating Expenses	(1,587,614)	(1,525,431)	(62,183)	(3,661,035)	43.37
Expenditure Recoveries and Offset Revenue	4,750	-	4,750	-	-
Net Operating Expenses	(1,582,864)	(1,525,431)	(57,433)	(3,661,035)	43.24
Capital Expenditures	-	-	-	-	-
Net Expenses	(1,582,864)	(1,525,431)	(57,433)	(3,661,035)	43.24
Net Surplus (Deficit)	17,256	1	17,255	-	
Transfers from Reserves	-	-	-	-	
Net Surplus (Deficit) After Reserve Transfer	\$ 17,256	\$ 1	\$ 17,255	\$ -	

South East Health Unit

Statement of Operations | Ministry of Children, Community and Social Services | Preschool Speech and Language For the Calendar Year Ended

2025-May-31

	SEHU				
	Actuals	Budget	Variance	Annual Budget	Budget Spend %
Funding and Grants					
Provincial Funding	\$ 642,774	\$ 642,769	\$ 5	\$ 1,542,645	41.67
Municipal Funding	-	-	-	-	-
Federal and Other	-	-	-	-	-
Total Funding and Grants	642,774	642,769	5	1,542,645	41.67
Expenses					
Employee Salaries and Wages	(297,891)	(294,068)	(3,823)	(705,763)	42.21
Employee Benefits	(89,498)	(82,339)	(7,159)	(197,613)	45.29
Total Employee Salaries, Wages and Benefits	(387,389)	(376,407)	(10,982)	(903,376)	42.88
Staff Training and Development	-	-	-	-	-
Board of Health	-	-	-	-	-
Volunteer	-	-	-	-	-
Travel	(5,656)	(5,500)	(156)	(13,200)	42.85
Building Occupancy	(18,378)	(26,786)	8,408	(64,287)	28.59
Office Expenses, Printing and Postage	(2,940)	-	(2,940)	-	-
Program Specific Materials and Supplies	(11,384)	(13,232)	1,848	(31,757)	35.85
Office Equipment	-	-	-	-	-
Professional and Contract Services	(205,501)	(220,844)	15,343	(530,025)	38.77
Municipal Charges	-	-	-	-	-
Communication Costs	(1,138)	-	(1,138)	-	-
Allocated Admin Costs	-	-	-	-	-
Information and Technology Equipment	-	-	-	-	-
Other Expenses	-	-	-	-	-
Total Operating Expenses	(632,386)	(642,769)	10,383	(1,542,645)	40.99
Expenditure Recoveries and Offset Revenue	-	-	-	-	-
Net Operating Expenses	(632,386)	(642,769)	10,383	(1,542,645)	40.99
Capital Expenditures	-	-	-	-	-
Net Expenses	(632,386)	(642,769)	10,383	(1,542,645)	40.99
Net Surplus (Deficit)	10,388	-	10,388	-	
Transfers from Reserves	-	-	-	-	
Net Surplus (Deficit) After Reserve Transfer	\$ 10,388	\$ -	\$ 10,388	\$ -	

South East Health Unit

Statement of Operations | Health Canada | Substance Use and Addictions Program

For the Calendar Year Ended

2025-May-31

	SEHU				
	Actuals	Budget	Variance	Annual Budget	Budget Spend %
Funding and Grants					
Provincial Funding	\$ -	\$ -	\$ -	\$ -	-
Municipal Funding	-	-	-	-	-
Federal and Other	533,423	533,423	-	1,280,216	41.67
Total Funding and Grants	533,423	533,423	-	1,280,216	41.67
Expenses					
Employee Salaries and Wages	(33,000)	(41,667)	8,667	(100,000)	33.00
Employee Benefits	(9,900)	(12,500)	2,600	(30,000)	33.00
Total Employee Salaries, Wages and Benefits	(42,900)	(54,167)	11,267	(130,000)	33.00
Staff Training and Development	-	-	-	-	-
Board of Health	-	-	-	-	-
Volunteer	-	-	-	-	-
Travel	-	-	-	-	-
Building Occupancy	-	-	-	-	-
Office Expenses, Printing and Postage	-	-	-	-	-
Program Specific Materials and Supplies	-	-	-	-	-
Office Equipment	-	-	-	-	-
Professional and Contract Services	(479,257)	(479,257)	-	(1,150,216)	41.67
Municipal Charges	-	-	-	-	-
Communication Costs	-	-	-	-	-
Allocated Admin Costs	-	-	-	-	-
Information and Technology Equipment	-	-	-	-	-
Other Expenses	-	-	-	-	-
Total Operating Expenses	(522,157)	(533,424)	11,267	(1,280,216)	40.79
Expenditure Recoveries and Offset Revenue	-	-	-	-	-
Net Operating Expenses	(522,157)	(533,424)	11,267	(1,280,216)	40.79
Capital Expenditures	-	-	-	-	-
Net Expenses	(522,157)	(533,424)	11,267	(1,280,216)	40.79
Net Surplus (Deficit)	11,266	(1)	11,267	-	
Transfers from Reserves	-	-	-	-	
Net Surplus (Deficit) After Reserve Transfer	\$ 11,266	\$ (1)	\$ 11,267	\$ -	

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South East Health Unit

Projections Surplus (Deficit)

Prepared for the Board of Health | Finance Committee

Preparation Date 2025-Jun-20

		No Provincial Harmonization					
		2025	2026	2027	2028	2029	2030
Original Scenario							
Cost Only 72.5/27.5	\$	(4,283,540)	\$ (5,810,639)	\$ (7,412,377)	\$ (9,091,880)	\$ (10,852,393)	\$ (12,697,294)
Adjusted for Population Growth 72.5/27.5	\$	(4,283,540)	\$ (6,342,404)	\$ (8,432,608)	\$ (10,686,349)	\$ (13,067,614)	\$ (15,583,173)
Updated Scenario - Changes to Staffing Mix*							
Cost Only 72.5/27.5	\$	(4,008,633)	\$ (4,678,023)	\$ (6,245,783)	\$ (7,890,288)	\$ (9,614,753)	\$ (11,422,525)
Adjusted for Population Growth 72.5/27.5	\$	(4,008,633)	\$ (5,209,789)	\$ (7,266,014)	\$ (9,484,757)	\$ (11,829,975)	\$ (14,308,404)
Variance Savings (Increased Cost)							
Cost Only 72.5/27.5	\$	274,907	\$ 1,132,616	\$ 1,166,594	\$ 1,201,592	\$ 1,237,640	\$ 1,274,769
Adjusted for Population Growth 72.5/27.5	\$	274,907	\$ 1,132,616	\$ 1,166,594	\$ 1,201,592	\$ 1,237,640	\$ 1,274,769

*Changes to staffing mix/allocation are an ongoing exercise at SEHU, projections will be updated as new information becomes available or when decisions have been made

South East Health Unit

Projections Surplus (Deficit)

Prepared for the Board of Health | Finance Committee

Preparation Date 2025-Jun-20

		No Provincial Harmonization										
		2025	2026	2027	2028	2029	2030					
Original Scenarios												
Cost Only 75/25	\$	(5,789,935)	\$	(7,332,098)	\$	(8,949,051)	\$	(10,643,920)	\$	(12,419,954)	\$	(14,280,531)
Cost Only 72.5/27.5		(4,283,540)		(5,810,639)		(7,412,377)		(9,091,880)		(10,852,393)		(12,697,294)
Cost Only 70/30		(2,669,545)		(4,180,504)		(5,765,941)		(7,428,979)		(9,172,863)		(11,000,969)
Cost Only 65/35		930,905		(544,049)		(2,093,122)		(3,719,432)		(5,426,221)		(7,216,860)
Adjusted for Population Growth 75/25	\$	(5,789,935)	\$	(7,863,863)	\$	(9,969,282)	\$	(12,238,389)	\$	(14,635,175)	\$	(17,166,410)
Adjusted for Population Growth 72.5/27.5		(4,283,540)		(6,342,404)		(8,432,608)		(10,686,349)		(13,067,614)		(15,583,173)
Adjusted for Population Growth 70/30		(2,669,545)		(4,712,269)		(6,786,172)		(9,023,448)		(11,388,084)		(13,886,848)
Adjusted for Population Growth 65/35		930,905		(1,075,814)		(3,113,353)		(5,313,901)		(7,641,442)		(10,102,739)
Updated Scenario - Changes to Staffing Mix*												
Cost Only 75/25	\$	(5,515,028)	\$	(6,199,482)	\$	(7,782,457)	\$	(9,442,328)	\$	(11,182,314)	\$	(13,005,762)
Cost Only 72.5/27.5		(4,008,633)		(4,678,023)		(6,245,783)		(7,890,288)		(9,614,753)		(11,422,525)
Cost Only 70/30		(2,394,638)		(3,047,888)		(4,599,347)		(6,227,387)		(7,935,223)		(9,726,200)
Cost Only 65/35		1,205,812		588,567		(926,528)		(2,517,840)		(4,188,581)		(5,942,091)
Adjusted for Population Growth 75/25	\$	(5,515,028)	\$	(6,731,248)	\$	(8,802,688)	\$	(11,036,797)	\$	(13,397,536)	\$	(15,891,641)
Adjusted for Population Growth 72.5/27.5		(4,008,633)		(5,209,789)		(7,266,014)		(9,484,757)		(11,829,975)		(14,308,404)
Adjusted for Population Growth 70/30		(2,394,638)		(3,579,654)		(5,619,578)		(7,821,856)		(10,150,445)		(12,612,079)
Adjusted for Population Growth 65/35		1,205,812		56,801		(1,946,759)		(4,112,309)		(6,403,803)		(8,827,970)
Variance Savings (Increased Cost)	\$	274,907	\$	1,132,616	\$	1,166,594	\$	1,201,592	\$	1,237,640	\$	1,274,769

*Changes to staffing mix/allocations are an ongoing exercise at SEHU, projections will be updated as new information becomes available or when decisions have been made

South East Health Unit

Projections Surplus (Deficit)

Prepared for the Board of Health | Finance Committee

Preparation Date 2025-Jun-20

		Yes Provincial Harmonization											
		2025		2026		2027		2028		2029		2030	
Original Scenarios													
Cost Only 75/25	\$	(3,425,263)	\$	(4,943,779)	\$	(6,536,848)	\$	(8,207,596)	\$	(9,959,266)	\$	(11,795,235)	
Cost Only 72.5/27.5		(1,837,328)		(3,339,964)		(4,916,995)		(6,571,545)		(8,306,853)		(10,126,298)	
Cost Only 70/30		(135,968)		(1,621,591)		(3,181,438)		(4,818,632)		(6,536,412)		(8,338,152)	
Cost Only 65/35		3,659,373		2,211,703		690,189		(908,289)		(2,586,965)		(4,349,211)	
Adjusted for Population Growth 75/25	\$	(3,425,263)	\$	(5,475,544)	\$	(7,557,079)	\$	(9,802,065)	\$	(12,174,487)	\$	(14,681,114)	
Adjusted for Population Growth 72.5/27.5		(1,837,328)		(3,871,729)		(5,937,226)		(8,166,014)		(10,522,074)		(13,012,177)	
Adjusted for Population Growth 70/30		(135,968)		(2,153,356)		(4,201,669)		(6,413,101)		(8,751,633)		(11,224,031)	
Adjusted for Population Growth 65/35		3,659,373		1,679,938		(330,042)		(2,502,758)		(4,802,186)		(7,235,090)	
Updated Scenario - Changes to Staffing Mix*													
Cost Only 75/25	\$	(3,150,356)	\$	(3,811,163)	\$	(5,370,254)	\$	(7,006,004)	\$	(8,721,626)	\$	(10,520,466)	
Cost Only 72.5/27.5		(1,562,421)		(2,207,348)		(3,750,401)		(5,369,953)		(7,069,213)		(8,851,529)	
Cost Only 70/30		138,939		(488,975)		(2,014,844)		(3,617,040)		(5,298,772)		(7,063,383)	
Cost Only 65/35		3,934,280		3,344,319		1,856,783		293,303		(1,349,325)		(3,074,442)	
Adjusted for Population Growth 75/25	\$	(3,150,356)	\$	(4,342,929)	\$	(6,390,485)	\$	(8,600,473)	\$	(10,936,848)	\$	(13,406,345)	
Adjusted for Population Growth 72.5/27.5		(1,562,421)		(2,739,114)		(4,770,632)		(6,964,422)		(9,284,435)		(11,737,408)	
Adjusted for Population Growth 70/30		138,939		(1,020,741)		(3,035,075)		(5,211,509)		(7,513,994)		(9,949,262)	
Adjusted for Population Growth 65/35		3,934,280		2,812,553		836,552		(1,301,166)		(3,564,547)		(5,960,321)	
Variance Savings (Increased Cost)	\$	274,907	\$	1,132,616	\$	1,166,594	\$	1,201,592	\$	1,237,640	\$	1,274,769	

*Changes to staffing mix/allocations are an ongoing exercise at SEHU, projections will be updated as new information becomes available or when decisions have been made

South East Health Unit

Projections Surplus (Deficit)

Prepared for the Board of Health | Finance Committee

Preparation Date 2025-Jun-20

	2030			2030			
	Original Projection		Impact from Staffing Mix	Adjusted Projected Surplus (Deficit)	Original Projection		Impact from Staffing Mix
Original Scenarios							
Cost Only 75/25	\$	(14,280,531)	\$	1,274,769	\$	(13,005,762)	
Cost Only 72.5/27.5		(12,697,294)		1,274,769		(11,422,525)	
Cost Only 70/30		(11,000,969)		1,274,769		(9,726,200)	
Cost Only 65/35		(7,216,860)		1,274,769		(5,942,091)	
Adjusted for Population Growth 75/25	\$	(17,166,410)	\$	1,274,769	\$	(15,891,641)	
Adjusted for Population Growth 72.5/27.5		(15,583,173)		1,274,769		(14,308,404)	
Adjusted for Population Growth 70/30		(13,886,848)		1,274,769		(12,612,079)	
Adjusted for Population Growth 65/35		(10,102,739)		1,274,769		(8,827,970)	

*Changes to staffing mix/allocation are an ongoing exercise at SEHU, projections will be updated as new information becomes available or when decisions have been made

**Impact from Provincial Harmonization includes Municipalities maintaining the funding split ratio, ie. \$1.8m from the Province, at a 75/25 funding split, also means Municipalities contribute an extra \$0.6m

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