

Consolidated Financial Statements of

**BRITISH COLUMBIA CANCER
AGENCY BRANCH**

Year ended March 31, 2018



May 28, 2018

Independent Auditor's Report

To the Board of British Columbia Cancer Agency Branch

We have audited the accompanying consolidated financial statements of British Columbia Cancer Agency Branch, which comprise the consolidated statement of financial position as at March 31, 2018 and the consolidated statements of operations and accumulated operating deficit, changes in net debt, cash flows, and remeasurement gains and losses for the year then ended, and the related notes, which comprise a summary of significant accounting policies and other explanatory information.

Management's responsibility for the consolidated financial statements

Management is responsible for the preparation of these consolidated financial statements in accordance with the accounting requirements of Section 23.1 of the *Budget Transparency and Accountability Act* of the Province of British Columbia, and for such internal control as management determines is necessary to enable the preparation of consolidated financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation of the consolidated financial statements 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 entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

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

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**Opinion**

In our opinion, the consolidated financial statements which comprise the consolidated statement of financial position as at March 31, 2018 and the consolidated statements of operations and accumulated operating deficit, changes in net debt, cash flows, and remeasurement gains and losses for the year then ended, and the related notes, are prepared, in all material respects, in accordance with the accounting requirements of Section 23.1 of the *Budget Transparency and Accountability Act* of the Province of British Columbia.

Emphasis of matter

Without modifying our opinion, we draw attention to note 1 to the consolidated financial statements, which describes the basis of accounting and the significant differences between such basis of accounting and Canadian public sector accounting standards. Note 18 to the consolidated financial statements discloses the impact of these differences.

Report on other legal and regulatory requirements

As required by the British Columbia Society Act, we report that, in our opinion, these principles have been applied on a basis consistent with that of the preceding year.

PricewaterhouseCoopers LLP

Chartered Professional Accountants

BRITISH COLUMBIA CANCER AGENCY BRANCH

Consolidated Statement of Financial Position
(Amounts expressed in thousands of dollars)

As at March 31, 2018

	2018	2017
Financial assets		
Cash and cash equivalents	\$ 22,145	\$ 1,809
Portfolio investments (note 2)	66	1,023
Accounts receivable (note 3)	96,705	86,732
	118,916	89,564
Liabilities		
Accounts payable and accrued liabilities (note 4)	102,079	75,818
Deferred research and designated contributions (note 5)	26,310	22,369
Debt (note 7)	71,829	72,326
Retirement allowance (note 8(a))	30,416	28,418
Deferred capital contributions (note 9)	295,660	298,285
	526,294	497,216
Net debt	\$ (407,378)	\$ (407,652)
Non-financial assets		
Tangible capital assets (note 10)	\$ 371,955	\$ 375,818
Inventories held for use (note 11)	18,750	16,692
Prepaid expenses	2,451	1,865
	393,156	394,375
Accumulated deficit		
Accumulated operating deficit	\$ (14,288)	\$ (14,300)
Accumulated remeasurement gains	66	1,023
	\$ (14,222)	\$ (13,277)

Commitments and contingencies (note 12)

See accompanying notes to consolidated financial statements.

Approved on behalf of the Board:



Director and Chair of the Board



Director

BRITISH COLUMBIA CANCER AGENCY BRANCH

Consolidated Statement of Operations and Accumulated Operating Deficit
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

	2018 Budget (note 1(n))	2018	2017
Revenues:			
Provincial Health Services			
Authority contributions	\$ 553,027	\$ 563,175	\$ 510,664
Medical Services Plan	86,443	86,926	87,049
Research and designated contributions (note 5)	73,628	67,164	71,098
Amortization of deferred capital contributions (note 9)	26,587	26,730	27,237
Other (note 13(a))	6,817	7,081	6,357
Other contributions (note 13(b))	1,164	4,329	3,499
Patients, clients and residents (note 13(c))	3,170	4,070	4,597
Recoveries from other health authorities and BC government reporting entities	-	3,603	3,129
Investment income	27	27	21
	<u>750,863</u>	<u>763,105</u>	<u>713,651</u>
Expenses (note 13(d)):			
Acute	702,893	715,358	666,184
Corporate	1,154	1,517	332
Population health and wellness	46,816	46,218	47,083
	<u>750,863</u>	<u>763,093</u>	<u>713,599</u>
Annual operating surplus	\$ -	\$ 12	\$ 52
Accumulated operating deficit, beginning of year	(14,300)	(14,300)	(14,352)
Accumulated operating deficit, end of year	\$ (14,300)	\$ (14,288)	\$ (14,300)

See accompanying notes to consolidated financial statements.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Consolidated Statement of Changes in Net Debt
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

	2018 Budget (note 1(n))	2018	2017
Annual operating surplus	\$ -	\$ 12	\$ 52
Acquisition of tangible capital assets	(21,154)	(24,164)	(19,414)
Transfer of tangible capital assets from other Agencies	-	(451)	(7)
Amortization of tangible capital assets	29,096	28,462	29,096
Net book value of disposed tangible capital assets	-	16	73
	7,942	3,875	9,800
Acquisition of inventories held for use	-	(178,614)	(139,063)
Acquisition of prepaid expenses	-	(12,097)	(9,084)
Consumption of inventories held for use	-	176,556	138,504
Use of prepaid expenses	-	11,511	11,001
	-	(2,644)	1,358
Net remeasurement losses	-	(957)	(72)
Decrease in net debt	7,942	274	11,086
Net debt, beginning of year	(407,652)	(407,652)	(418,738)
Net debt, end of year	\$ (399,710)	\$ (407,378)	\$ (407,652)

See accompanying notes to consolidated financial statements.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Consolidated Statement of Cash Flows
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

	2018	2017
Cash flows from (used in) operating activities:		
Annual operating surplus	\$ 12	\$ 52
Items not involving cash:		
Amortization of deferred capital contributions	(26,730)	(27,237)
Amortization of tangible capital assets	28,462	29,096
Net book value of disposed tangible capital assets	16	73
Retirement allowance expense	2,875	2,811
Interest expense	5,687	5,718
Interest income	(27)	(21)
	10,295	10,492
Net change in non-cash operating items (note 14)	17,585	(3,009)
Retirement allowance benefits paid	(877)	(922)
Interest received	27	21
Interest paid	(5,687)	(5,718)
Net change in cash from operating activities	21,343	864
Capital activities:		
Acquisition of tangible capital assets	(24,164)	(19,393)
Net change in cash from capital activities	(24,164)	(19,393)
Financing activities:		
Repayment of debt	(497)	(350)
Capital contributions	23,654	18,792
Net change in cash from financing activities	23,157	18,442
Increase (decrease) in cash and cash equivalents	20,336	(87)
Cash and cash equivalents, beginning of year	1,809	1,896
Cash and cash equivalents, end of year	\$ 22,145	\$ 1,809

Supplementary cash flow information (note 14)

See accompanying notes to consolidated financial statements.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Consolidated Statement of Remeasurement Gains and Losses
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

	2018	2017
Accumulated remeasurement gains, beginning of year	\$ 1,023	\$ 1,095
Unrealized losses attributable to portfolio investments	(957)	(9)
Realized gain on sale of portfolio investments	-	(63)
Accumulated remeasurement gains, end of year	\$ 66	\$ 1,023

See accompanying notes to consolidated financial statements.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

The British Columbia Cancer Agency Branch (the “Branch”) was created as a branch society of the Provincial Health Services Authority (“PHSA” or the “Authority”), a society incorporated under the *Society Act of British Columbia* on December 12, 2001 with a Board of Directors appointed by the Ministry of Health (the “Ministry”). PHSA is one of six health authorities in British Columbia (“BC”). The Branch is dependent on the Ministry to provide sufficient funds to continue operations, replace essential equipment, and complete its capital projects. The Branch is a not-for-profit organization under the *Income Tax Act* and, as such, is exempt from income and capital taxes.

The following agencies/programs (collectively referred to as “Agencies”) are also included in PHSA’s mandate:

British Columbia Centre for Disease Control and Prevention Society Branch;

British Columbia Emergency Health Services;

British Columbia Mental Health Society Branch;

British Columbia Provincial Renal Agency;

British Columbia Transplant Society Branch;

Cardiac Services British Columbia;

Children’s & Women’s Health Centre of British Columbia Branch;

Correctional Health Services; and

Forensic Psychiatric Services Commission.

The Branch provides a comprehensive cancer control program to all British Columbians, which includes prevention and early detection, treatment, and related education and research. This program is provided through the specialized facilities of the Vancouver Cancer Centre, the Abbotsford Cancer Centre, the Fraser Valley Cancer Centre, the Vancouver Island Cancer Centre, the Cancer Centre for the Southern Interior, and the Cancer Centre for the North, as well as decentralized programs for patient care. The Branch is also responsible for the operating activities of the British Columbia Cancer Research Centre.

Effective April 1, 2018, the Branch, along with the above noted branch societies, amalgamated with PHSA to form one society under the *Society Act of British Columbia*.

1. Significant accounting policies:

(a) Basis of accounting:

The consolidated financial statements have been prepared in accordance with Section 23.1 of the *Budget Transparency and Accountability Act* of the Province of BC supplemented by Regulations 257/2010 and 198/2011 issued by the Province of BC Treasury Board, referred to as the financial reporting framework (the “framework”).

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(a) Basis of accounting (continued):

The *Budget Transparency and Accountability Act* requires that the consolidated financial statements be prepared in accordance with the set of standards and guidelines that comprise generally accepted accounting principles for senior governments in Canada, or if the Treasury Board makes a regulation, the set of standards and guidelines that comprise generally accepted accounting principles for senior governments in Canada as modified by the alternate standard or guideline or part thereof adopted in the regulation.

Regulation 257/2010 requires all tax-payer supported organizations in the Schools, Universities, Colleges and Hospitals sectors to adopt Canadian public sector accounting standards ("PSAS") issued by the Public Sector Accounting Board ("PSAB") without any PS 4200 series.

Regulation 198/2011 requires that restricted contributions received or receivable are to be reported as revenue depending on the nature of the restrictions on the use of the funds by the contributors as follows:

- (i) Contributions for the purpose of acquiring or developing a depreciable tangible capital asset or contributions in the form of a depreciable tangible capital asset, in each case for use in providing services, are recorded and referred to as deferred capital contributions, and recognized in revenue at the same rate that amortization of the related tangible capital asset is recorded. The reduction of the deferred capital contributions and the recognition of the revenue are accounted for in the fiscal periods during which the tangible capital asset is used to provide services. If the depreciable tangible capital asset funded by a deferred contribution is written down, a proportionate share of the deferred capital contribution is recognized as revenue during the same period.
- (ii) Contributions externally restricted for specific purposes other than those for the acquisition or development of a depreciable tangible capital asset are recorded as deferred operating contributions or deferred research and designated contributions, and recognized in revenue in the year in which the stipulation or restriction on the contributions has been met by the Branch.

For BC tax-payer supported organizations, these contributions include government transfers and externally restricted contributions.

The accounting policy requirements under Regulation 198/2011 are significantly different from the requirements of PSAS which require that:

- government transfers, which do not contain a stipulation that creates a liability, be recognized as revenue by the recipient when approved by the transferor and the eligibility criteria have been met in accordance with PS 3410, *Government Transfers*;
- externally restricted contributions be recognized as revenue in the period in which the resources are used for the purpose or purposes specified, in accordance with PS 3100, *Restricted Assets and Revenues*; and

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(a) Basis of accounting (continued):

- deferred contributions meet liability criteria in accordance with PS 3200, *Liabilities*.

As a result, revenue recognized in the consolidated statement of operations and certain deferred capital contributions would be recorded differently under PSAS. The impact of accounting for restricted contributions in accordance with Regulation 198/2011 is disclosed in note 18.

(b) Basis of consolidation:

The Branch and the Fraser Health Authority own Abbotsford Regional Hospital and Cancer Centre Inc. ("ARHCC Inc.") in accordance with the Share Transfer Agreement whereby 102 (85%) common shares of ARHCC Inc. are held by the Fraser Health Authority and 18 (15%) common shares are held by the Branch. The Branch's interest in ARHCC Inc. is recorded on a proportional consolidation basis in these consolidated financial statements.

(c) Cash and cash equivalents:

Cash and cash equivalents include cash on hand, demand deposits and highly liquid investments that are readily convertible to known amounts of cash and that are subject to an insignificant risk of change in value. These investments generally have a maturity of three months or less at acquisition and are held for the purpose of meeting short-term cash commitments rather than for investing.

(d) Portfolio investments:

Portfolio investments include shares of publicly traded companies and are recorded at fair value. Any changes in fair value are recognized in the consolidated statement of remeasurement gains and losses.

Write-downs of investments are recognized when the loss in value is determined to be other-than-temporary. Write-downs are not reversed in the future if circumstances change.

(e) Accounts receivable:

Accounts receivable are recorded at amortized cost less an amount for valuation allowance. Valuation allowances are made to reflect accounts receivable at the lower of amortized cost and the net recoverable value when risk of loss exists. Changes in valuation allowance are recognized in the consolidated statement of operations.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(f) Asset retirement obligations:

The Branch recognizes an asset retirement obligation in the period in which it incurs a legal or constructive obligation associated with the retirement of a tangible capital asset, including leasehold improvements resulting from the acquisition, construction, development, and/or normal use of the asset.

The obligation is measured at the best estimate of the future cash flows required to settle the liability, discounted at estimated credit-adjusted risk-free discount rates. The estimated amount of the asset retirement cost is capitalized as part of the carrying value of the related tangible capital asset and is amortized over the life of the asset.

The liability is accreted to reflect the passage of time. At each reporting date, the Branch reviews its asset retirement obligations to reflect current best estimates. Asset retirement obligations are adjusted for changes in factors such as the amount or timing of the expected underlying cash flows, or discount rates, with the offsetting amount recorded to the carrying amount of the related asset.

(g) Employee benefits:

(i) Defined benefit obligations, including multiple employer benefit plans:

Liabilities, net of plan assets, are recorded for employee retirement allowance benefits and multiple employer defined long-term disability and health and welfare benefits plans as employees render services to earn the benefits.

The actuarial determination of the accrued benefit obligations uses the projected benefit method prorated on service which incorporates management's best estimate of future salary levels, other cost escalation, retirement ages of employees and other actuarial factors. Plan assets are measured at fair value.

The cumulative unrecognized actuarial gains and losses on retirement allowance benefits are amortized over the expected average remaining service period of active employees covered under the plan. The expected average remaining service period of the active covered employees entitled to retirement allowance benefits is 11 years (2017 – 11 years). Actuarial gains and losses on event-driven benefits such as long-term disability and health and welfare benefits that do not vest or accumulate are recognized immediately.

The discount rate used to measure the obligations is based on the Province of BC's cost of borrowing if there are no plan assets. Where there are plan assets, the discount rate is the rate of return on plan assets. The cost of a plan amendment or the crediting of past service is accounted for entirely in the year that the plan change is implemented.

(ii) Defined contribution plans and multi-employer benefit plans:

Defined contribution plan accounting is applied to multi-employer defined benefit plans and, accordingly, contributions are expensed when they become payable.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(g) Employee benefits (continued):

(iii) Accumulating, non-vesting benefit plans:

Benefits that accrue to employees, which do not vest, such as sick leave banks for certain employee groups, are accrued as the employees render services to earn the benefits, based on estimates of the expected future settlements.

(iv) Non-accumulating, non-vesting benefit plans:

For benefits that do not vest or accumulate, a liability is recognized when an event that obligates the Branch to pay benefits occurs.

(h) Non-financial assets:

(i) Tangible capital assets:

Tangible capital assets are recorded at cost, which includes amounts that are directly attributable to acquisition, construction, development or betterment of the asset and overhead directly attributable to construction and development. Interest is capitalized over the development period whenever external debt is issued to finance the construction and development of tangible capital assets.

The cost, less residual value, of the tangible capital assets, excluding land, is amortized on a straight-line basis over their estimated useful lives as follows:

Asset	Basis
Land improvements	20 years
Buildings	15 – 50 years
Equipment	3 – 20 years
Information systems	3 – 5 years
Leasehold improvements	Lease term to a maximum of 20 years
Vehicles	4 – 7 years

Assets under construction or development are not amortized until the asset is available for productive use.

Tangible capital assets are written down when conditions indicate that they no longer contribute to the Branch's ability to provide services, or when the value of future economic benefits associated with the tangible capital assets is less than their net book value. The write-downs of tangible capital assets are recorded in the consolidated statement of operations. Write-downs are not subsequently reversed.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(h) Non-financial assets (continued):

(i) Tangible capital assets (continued):

Contributed tangible capital assets are recorded at their fair value on the date of contribution. Such fair value becomes the cost of the contributed asset. When fair value of a contributed asset cannot be reliably determined, the asset is recorded at nominal value.

(ii) Inventories held for use:

Inventories held for use are recorded at the lower of weighted average cost and replacement cost. Cost includes the purchase price, import duties and other taxes, transport, handling and other costs directly attributable to the acquisition. Replacement cost is the estimated current price to replace the items.

(iii) Prepaid expenses:

Prepaid expenses are recorded at cost and amortized over the period during which the service benefits are received.

(i) Revenue recognition:

Under the *Hospital Insurance Act and Regulation* thereto, the Branch is funded primarily by the Province of BC in accordance with budget management plans and performance agreements established and approved by the Ministry.

Revenues are recognized on an accrual basis in the period in which the transactions or events occurred that gave rise to the revenues, the amounts are considered to be collectible and can be reasonably estimated.

Revenues related to fees or services received in advance of the fees being earned or the services being performed are deferred and recognized when the fees are earned or services are performed.

Unrestricted contributions are recognized as revenue when receivable if the amounts can be estimated and collection is reasonably assured.

Externally restricted contributions are recognized as revenue depending on the nature of the restrictions on the use of the funds by the contributors as described in note 1(a).

Volunteers contribute a significant amount of their time each year to assist the Branch in carrying out its programs and services. Because of the difficulty of determining their fair value, contributed services are not recognized in these consolidated financial statements.

Contributions of assets, supplies and services that would otherwise have been purchased are recorded at fair value at the date of contribution, provided fair value can be reasonably determined.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(i) Revenue recognition (continued):

Contributions for the acquisition of land, or contributions of land, are recorded as revenue in the period of acquisition or transfer of title.

(j) Measurement uncertainty:

The preparation of consolidated financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the disclosure of contingent liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period.

Significant areas requiring the use of estimates include the fair value of portfolio investments, the valuation of accounts receivable, the estimated useful lives of tangible capital assets, amounts to settle asset retirement obligations, contingent liabilities, the future costs to settle employee benefit obligations, and certain amounts in public-private partnership projects.

Estimates are based on the best information available at the time of preparation of the consolidated financial statements and are reviewed annually to reflect new information as it becomes available. Actual results could differ from the estimates.

(k) Foreign currency translation:

The Branch's functional currency is the Canadian dollar. Foreign currency transactions are translated at the exchange rates prevailing at the date of the transactions. Monetary assets and liabilities denominated in foreign currencies are translated into Canadian dollars at the exchange rate prevailing at the financial statement date. Any gain and loss resulting from a change in rates between the transaction date and the settlement date or statement of financial position date is recognized in the consolidated statement of operations.

(l) Financial instruments:

Upon inception and subsequent to initial recognition, derivatives and equity instruments quoted in an active market are measured at fair value. These financial instruments are identified in this note by financial asset and financial liability classification and are not reclassified into another measurement category for the duration of the period they are held.

All other financial assets and financial liabilities are measured at cost or amortized cost upon their inception and subsequent to initial recognition. Cash and cash equivalents are measured at cost. Accounts receivable are recorded at amortized cost less any amount for valuation allowance. Portfolio investments, other than equity investments quoted in an active market, are reported at cost or amortized cost less any write-downs associated with a loss in value that is other than a temporary decline. All debt and other financial liabilities are recorded using cost or amortized cost.

The classification of financial instruments is determined upon their initial recognition.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(l) Financial instruments (continued):

Financial instruments are classified as level 1, 2 or 3 for the purposes of describing the basis of the inputs used to measure the fair values of financial instruments in the fair value measurement category as described below:

Level 1	Quoted prices (unadjusted) in active markets for identical assets or liabilities.
Level 2	Market-based inputs other than quoted prices that are observable for the asset or liability either directly or indirectly.
Level 3	Inputs for the asset or liability that are not based on observable market data; assumptions are based on the best internal and external information available and are most suitable and appropriate based on the type of financial instrument being valued in order to establish what the transaction price would have been on the measurement date in an arm's length transaction.

Unrealized gains and losses from changes in the fair value of financial instruments are recognized in the consolidated statement of remeasurement gains and losses. Upon settlement, the cumulative gain or loss is reclassified from the consolidated statement of remeasurement gains and losses and recognized in the consolidated statement of operations.

Interest and dividends attributable to financial instruments are reported in the consolidated statement of operations.

All financial assets except derivatives are tested annually for impairment. When financial assets are impaired, impairment losses are recorded in the consolidated statement of operations. A write-down of a portfolio investment to reflect a loss in value is not reversed for a subsequent increase in value.

For financial instruments measured using amortized cost, the effective interest rate method is used to determine interest revenue or expense.

Transaction costs for financial instruments measured using cost or amortized cost are added to the carrying value of the financial instrument. Transaction costs for financial instruments measured at fair value are expensed when incurred.

A financial liability or its part is derecognized when it is extinguished.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(l) Financial instruments (continued):

Management evaluates contractual obligations for the existence of embedded derivatives and elects to either designate the entire contract for fair value measurement or separately measure the value of the derivative component when characteristics of the derivative are not closely related to the economic characteristics and risks of the contract itself. Contracts to buy or sell non-financial items for the Branch's normal purchase, sale or usage requirements are not recognized as financial assets or financial liabilities.

(m) Capitalization of public-private partnership projects:

Public-private partnership ("P3") projects are delivered by private sector partners selected to design, build, finance, and maintain the assets. The cost of the assets under construction is estimated at fair value, based on construction progress billings verified by an independent certifier, and also includes other costs incurred by the Branch.

The asset cost includes development and financing fees estimated at fair value, which requires the extraction of cost information from the financial model embedded in the project agreement. Interest during construction is also included in the asset cost and is calculated on the P3 asset value, less contributions received and amounts repaid, during the construction term. The interest rate used is the project internal rate of return. When available for operations, the project assets are amortized over their estimated useful lives.

Correspondingly, an obligation for the cost of capital and financing received to date, net of contributions received, is recorded as a liability and included in debt. Upon substantial completion, the private sector partner receives monthly payments over the term of the project agreement to cover the partner's operating costs, financing costs and a return of their capital.

(n) Budget figures:

Budget figures have been provided for comparative purposes and have been derived from the Branch's Fiscal 2017/2018 Budget approved by the Board of Directors on October 26, 2017 as part of the Authority's Service Plan. The budget is reflected in the consolidated statement of operations and accumulated operating deficit and the consolidated statement of changes in net debt.

(o) Newly adopted accounting standards:

Effective April 1, 2017, the Branch adopted the following new accounting standards:

- (i) PS 2200, *Related Party Disclosures*. PS 2200 defines a related party and establishes disclosures required for related party transactions. Disclosure of information about related party transactions and the relationship underlying them is required when the transactions have occurred at a value different from that which would have been arrived at if the parties were unrelated, and the transactions have, or could have, a material financial effect on the financial statements.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

1. Significant accounting policies (continued):

(o) Newly adopted accounting standards (continued):

- (ii) PS 3420, *Inter-entity Transactions*. PS 3420 establishes standards of how to account for and report transactions between public sector entities that comprise a government reporting entity from both a provider and a recipient perspective. Requirements of this standard are considered in conjunction with requirements of PS 2200.
- (iii) PS 3210, *Assets*. PS 3210 provides guidance for applying the definition of assets set out in PS 1000, *Financial Statement Concepts*, and establishes general disclosure standards for assets. Disclosure of information about the major categories of assets that are not recognized is required. When an asset is not recognized because a reasonable estimate of the amount involved cannot be made, a disclosure should be provided.
- (iv) PS 3320, *Contingent Assets*. PS 3320 defines and establishes disclosure standards for contingent assets. Contingent assets are possible assets arising from existing conditions or situations involving uncertainty. Disclosure of information about contingent assets is required when the occurrence of the confirming future event is likely.
- (v) PS 3380, *Contractual Rights*. PS 3380 defines and establishes disclosure standards for contractual rights. Contractual rights are rights to economic resources arising from contracts or agreements that will result in both an asset and revenue in the future. Disclosure of information about contractual rights is required including description of their nature and extent, and the timing.

Except for disclosure changes resulting from the adoption of PS 2200, there was no impact to the consolidated financial statements upon transition to the other standards.

2. Portfolio investments:

Portfolio investments comprise of shares of publicly traded companies and are recorded at fair value. Fair value of portfolio investments is determined with reference to the market price and is in the level 1 fair value measurement category. These shares were received by the Branch at \$0 cost as consideration in intellectual property licensing transactions.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
(Amounts expressed in thousands of dollars)

Year ended March 31, 2018

3. Accounts receivable:

	2018	2017
Drug rebates	\$ 51,065	\$ 27,498
Provincial Health Services Authority	18,075	29,993
Other grantors	13,396	10,838
Other health authorities and BC government reporting entities	8,942	12,281
Foundations and auxiliaries	4,465	2,430
Patients, clients and residents	1,488	1,375
Medical Services Plan	576	449
Federal government	451	651
Other	1,633	1,971
	100,091	87,486
Allowance for doubtful accounts	(3,386)	(754)
	\$ 96,705	\$ 86,732

4. Accounts payable and accrued liabilities:

	2018	2017
Trade accounts payable and accrued liabilities	\$ 68,975	\$ 44,269
Accrued vacation pay	15,940	15,071
Salaries and benefits payable	13,476	12,726
Long-term accounts payable	3,688	3,752
	\$ 102,079	\$ 75,818

Long-term accounts payable are long-term payment obligations in relation to the construction of Abbotsford Regional Hospital and Cancer Centre.

5. Deferred research and designated contributions:

Deferred research and designated contributions represent unspent contributions received to fund research and other activities. Contributions are received from Canadian Institute of Health Research, Canadian Cancer Society Research Institute, Genome Canada, Terry Fox Research Institute, National Institutes of Health, foundations, pharmaceutical companies and other donors, for various research projects in the fields of diagnostics, treatment and prevention, clinical trials, health promotion, and other special purpose initiatives.

BRITISH COLUMBIA CANCER AGENCY BRANCH

Notes to Consolidated Financial Statements
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Year ended March 31, 2018

5. Deferred research and designated contributions (continued):

Government transfers	2018	2017
Deferred research and designated contributions, beginning of year	\$ 620	\$ 550
Contributions received during the year	11,027	11,226
Amounts transferred to deferred capital contributions (note 9)	(84)	(142)
Amounts recognized as revenue in the year	(14,673)	(12,947)
Amounts to be received in future periods	3,651	1,933
Deferred research and designated contributions, end of year	\$ 541	\$ 620
Other contributions	2018	2017
Deferred research and designated contributions, beginning of year	\$ 21,749	\$ 21,645
Contributions received during the year	46,394	52,060
Amounts transferred to deferred capital contributions (note 9)	(2,710)	(3,523)
Amounts recognized as revenue in the year	(52,491)	(58,151)
Amounts to be received in future periods	12,827	9,718
Deferred research and designated contributions, end of year	\$ 25,769	\$ 21,749
	2018	2017
Government transfers	\$ 541	\$ 620
Other contributions	25,769	21,749
Balance, end of year	\$ 26,310	\$ 22,369

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6. Government partnerships – ARHCC Inc.:

As described in note 1, the Branch has a 15% interest in ARHCC Inc., which is recorded on a proportional consolidation basis in the Branch's consolidated financial statements. The following is the condensed supplementary financial information of ARHCC Inc. as at and for the years ended March 31:

	2018	2017
Financial assets	\$ 149,430	\$ 144,371
Liabilities	431,056	435,440
Net debt	281,626	291,069
Non-financial assets	284,205	293,648
Accumulated surplus	2,579	2,579
Revenues	61,599	63,661
Expenses	61,599	63,661

7. Debt:

	2018	2017
P3:		
Abbotsford Regional Hospital and Cancer Centre, 30 year contract to May 2038 with Access Health Abbotsford Ltd., payable in accordance with the project agreement terms including annual interest of 7.75%	\$ 55,746	\$ 56,138
BC Cancer Agency Centre for the North, 30 year contract to September 2042 with Plenary Health Prince George GP, payable in monthly payments of \$117 including annual interest of 8.09% in accordance with the project agreement terms	16,083	16,188
	\$ 71,829	\$ 72,326

Required principal repayments on P3 debt for the years ended March 31 are disclosed in note 12(d).

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8. Employee benefits:

(a) Retirement allowance:

Certain employees with ten or more years of service and having reached a certain age are entitled to receive special payments upon retirement or as specified by collective or employee agreements. These payments are based upon accumulated sick leave credits and entitlements for each year of service.

The Branch's liabilities are based on an actuarial valuation as at the early measurement date of December 31, 2015 and extrapolated to March 31, 2017 from which the service cost and interest cost components of expense for the fiscal year ended March 31, 2017 are derived. The next expected valuation will be as of December 31, 2018.

Information about retirement allowance benefits is as follows:

	2018	2017
Accrued benefit obligation:		
Severance benefits	\$ 23,521	\$ 21,879
Sick leave benefits	6,761	6,448
	30,282	28,327
Unamortized actuarial gain	134	91
Accrued benefit liability	\$ 30,416	\$ 28,418

The accrued benefit liability for retirement allowance reported on the consolidated statement of financial position is as follows:

	2018	2017
Accrued benefit liability, beginning of year	\$ 28,418	\$ 26,529
Net benefit expense:		
Current service cost	1,892	1,879
Interest expense	1,116	1,044
Amortization of actuarial gain	(133)	(112)
Net benefit expense	2,875	2,811
Benefits paid	(877)	(922)
Accrued benefit liability, end of year	\$ 30,416	\$ 28,418

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8. Employee benefits (continued):

(a) Retirement allowance (continued):

The significant actuarial assumptions adopted in measuring the Branch's accrued retirement benefit obligation are as follows:

	2018	2017
Accrued benefit obligation as at March 31:		
Discount rate	4.01%	3.86%
Rate of compensation increase	2.50%	2.50%
Benefit costs for years ended March 31:		
Discount rate	3.86%	3.93%
Rate of compensation increase	2.50%	2.50%
Expected future inflationary increases	2.00%	2.00%

(b) Healthcare Benefit Trust benefits:

The Healthcare Benefit Trust (the "Trust") administers long-term disability benefits and group life insurance, accidental death and dismemberment, extended health and dental claims ("health and welfare benefits") for certain employee groups of the Branch and other provincially funded organizations.

(i) Long-term disability and health and welfare benefits:

The Trust is a multiple employer plan with respect to long-term disability benefits initiated after September 30, 1997 and health and welfare benefits after December 31, 2014. The assets and liabilities for these long-term disability and health and welfare benefits have been segregated for PHSA, but not for individual branches of PHSA. Accordingly, the Branch participates in a multi-employer defined benefit plan for long-term disability and health and welfare benefits that is now restricted to members of PHSA.

The most recent actuarial valuation for the PHSA plan at December 31, 2017 extrapolated to March 31, 2018 indicated a deficit of \$2,347 (2017 – deficit of \$5,803). Contributions of \$6,259 (2017 – \$8,879) were expensed during the year. The PHSA plan covers approximately 6,300 active employees, of which approximately 900 are employees of the Branch (2017 – 1,800). The next expected valuation will be as of December 31, 2018.

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Notes to Consolidated Financial Statements
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8. Employee benefits (continued):

(b) Healthcare Benefit Trust benefits (continued):

(ii) Joint benefit trusts:

The 2014-2019 Health Science Professionals Bargaining Association, Community Bargaining Association and Facilities Bargaining Association collective agreements include provisions to establish joint benefit trusts ("JBTs") to provide long-term disability and health and welfare benefits to the employees covered by these agreements. Effective April 1, 2017, management of the long-term disability and health and welfare benefits being provided to these employee groups through Healthcare Benefit Trust transitioned to the JBTs. Employer contributions to the JBTs are based on a specified percentage of payroll costs.

During the year ended March 31, 2018, the Branch made the following contributions to each JBT:

		2018
Joint Facilities Benefits Trust (JFBT)	\$	2,153
Joint Health Science Benefits Trust (JHSBT)		3,357
	\$	5,510

(c) Employee pension benefits:

The Branch and its employees contribute to the Municipal Pension Plan, a multi-employer defined benefit pension plan governed by the *BC Public Sector Pension Plans Act*.

Employer contributions to the Municipal Pension Plan of \$18,722 (2017 – \$17,617) were expensed during the year. Every three years, an actuarial valuation is performed to assess the financial position of the plan and the adequacy of plan funding. The most recent actuarial valuation for the plan at December 31, 2015 indicated a funding surplus of approximately \$2,224,000. The actuary does not attribute portions of the surplus to individual employers. The plan covers approximately 193,000 active members, of which approximately 2,400 are employees of the Branch (2017 – 2,300). The next expected valuation will be as of December 31, 2018, with results available in 2019.

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9. Deferred capital contributions:

Deferred capital contributions represent externally restricted contributions and other funding received for the purchase of tangible capital assets.

	2018	2017
Deferred capital contributions, beginning of year	\$ 298,285	\$ 306,730
Capital contributions received:		
Provincial Health Services Authority	16,644	10,837
Foundations and auxiliaries	6,551	3,400
Other	459	4,555
	23,654	18,792
Transfer of tangible capital assets from other Agencies	451	-
Amortization for the year	(26,730)	(27,237)
Deferred capital contributions, end of year	\$ 295,660	\$ 298,285

Deferred capital contributions comprise the following:

	2018	2017
Contributions used to purchase tangible capital assets	\$ 295,282	\$ 298,001
Unspent contributions	378	284
	\$ 295,660	\$ 298,285

10. Tangible capital assets:

Cost	2017	Additions	Disposals	Transfers	2018
Land	\$ 35,843	\$ -	\$ -	\$ -	\$ 35,843
Land improvements	310	223	-	-	533
Buildings	402,808	-	-	8,379	411,187
Equipment	234,786	3,731	(5,891)	7,603	240,229
Information systems	22,074	568	(248)	585	22,979
Leasehold improvements	2,369	16	-	113	2,498
Vehicles	1,673	-	-	-	1,673
Construction in progress	8,421	19,109	-	(16,032)	11,498
Equipment and information systems in progress	-	517	-	(66)	451
Total	\$ 708,284	\$ 24,164	\$ (6,139)	\$ 582	\$ 726,891

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Notes to Consolidated Financial Statements
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Year ended March 31, 2018

10. Tangible capital assets (continued):

Accumulated amortization	2017	Amortization	Disposals	Transfers	2018
Land improvements	\$ 106	\$ 17	\$ -	\$ -	\$ 123
Buildings	128,777	10,524	-	-	139,301
Equipment	183,533	15,136	(5,875)	131	192,925
Information systems	17,410	2,350	(248)	-	19,512
Leasehold improvements	2,026	18	-	-	2,044
Vehicles	614	417	-	-	1,031
Total	\$ 332,466	\$ 28,462	\$ (6,123)	\$ 131	\$ 354,936

Cost	2016	Additions	Disposals	Transfers	2017
Land	\$ 35,843	\$ -	\$ -	\$ -	\$ 35,843
Land improvements	310	-	-	-	310
Buildings	395,022	-	-	7,786	402,808
Equipment	226,783	4,223	(10,953)	14,733	234,786
Information systems	21,430	256	(35)	423	22,074
Leasehold improvements	3,367	21	(1,019)	-	2,369
Vehicles	2,040	-	(367)	-	1,673
Construction in progress	14,607	11,884	-	(18,070)	8,421
Equipment and information systems in progress	2,090	3,030	-	(5,120)	-
Total	\$ 701,492	\$ 19,414	\$ (12,374)	\$ (248)	\$ 708,284

Accumulated amortization	2016	Amortization	Disposals	Transfers	2017
Land improvements	\$ 91	\$ 15	\$ -	\$ -	\$ 106
Buildings	118,390	10,387	-	-	128,777
Equipment	179,038	15,630	(10,880)	(255)	183,533
Information systems	14,811	2,634	(35)	-	17,410
Leasehold improvements	3,032	13	(1,019)	-	2,026
Vehicles	564	417	(367)	-	614
Total	\$ 315,926	\$ 29,096	\$ (12,301)	\$ (255)	\$ 332,466

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Notes to Consolidated Financial Statements
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Year ended March 31, 2018

10. Tangible capital assets (continued):

Net book value	2018	2017
Land	\$ 35,843	\$ 35,843
Land improvements	410	204
Buildings	271,886	274,031
Equipment	47,304	51,253
Information systems	3,467	4,664
Leasehold improvements	454	343
Vehicles	642	1,059
Construction in progress	11,498	8,421
Equipment and information systems in progress	451	-
Total	\$ 371,955	\$ 375,818

Tangible capital assets are funded as follows:

	2018	2017
Deferred capital contributions	\$ 295,282	\$ 298,001
Internally funded	1,156	1,739
Debt	75,517	76,078
Tangible capital assets	\$ 371,955	\$ 375,818

11. Inventories held for use:

	2018	2017
Pharmaceuticals	\$ 17,430	\$ 15,430
Medical supplies	1,320	1,262
	\$ 18,750	\$ 16,692

12. Commitments and contingencies:

(a) Construction, equipment and information systems in progress:

As at March 31, 2018, the Branch had outstanding commitments for construction and equipment in progress of \$20,520 (2017 – \$9,680).

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Notes to Consolidated Financial Statements
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Year ended March 31, 2018

12. Commitments and contingencies (continued):

(b) Contractual obligations:

The Branch has entered into various contracts for services within the normal course of operations. The estimated contractual obligations under these contracts for the years ending March 31 are as follows:

2019	\$	10,577
2020		36
	\$	10,613

(c) Operating leases:

The aggregate minimum future annual rentals under operating leases for the years ending March 31 are as follows:

2019	\$	5,016
2020		2,816
2021		1,428
2022		582
2023		80
Thereafter		421
	\$	10,343

(d) Public-private partnerships commitments:

ARHCC Inc. entered into a multi-year P3 contract with the private sector partner Access Health Abbotsford Ltd. ("AHA"). Under the agreement, AHA designed, constructed, financed and will maintain the Abbotsford Regional Hospital and Cancer Centre facilities until the end of the term of the agreement in May 2038. Payment guarantees have been provided by the Province of BC for the payment obligations to AHA.

The Branch entered into a multi-year P3 contract with the private sector partner Plenary Health Prince George GP ("Plenary Health") to build the BC Cancer Agency Centre for the North in Prince George, BC. Under the agreement, Plenary Health designed, constructed, partially financed and will maintain the facilities until the end of the term of the agreement in September 2042. Payment guarantees have been provided by the Province of BC for the payment obligations to Plenary Health.

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12. Commitments and contingencies (continued):

(d) Public-private partnerships commitments (continued):

The information presented below shows the anticipated cash outflow for future obligations under these contracts for the capital cost and financing of the asset, the facility maintenance ("FM") and the lifecycle costs. The asset values are recorded as tangible capital assets and the corresponding liabilities are recorded as debt and disclosed in note 7. FM and lifecycle payments to the private partners are contingent on specified performance criteria and include an estimation of inflation, where applicable.

	Capital and financing	FM and lifecycle	Total payments
2019	\$ 6,548	\$ 3,128	\$ 9,676
2020	6,649	3,010	9,659
2021	6,750	3,403	10,153
2022	6,794	3,317	10,111
2023	6,892	3,543	10,435
Thereafter	129,357	78,427	207,784
	\$ 162,990	\$ 94,828	\$ 257,818

Required principal repayments on P3 debt for the years ending March 31 included in capital and financing commitments above are as follows:

2019	\$ 602
2020	742
2021	902
2022	1,073
2023	1,259
Thereafter	67,251
	\$ 71,829

(e) Litigation and claims:

Risk management and insurance services for all health authorities in BC are provided by the Risk Management and Government Security Branch of the Ministry of Finance.

The nature of the Branch's activities is such that there is litigation pending or in progress at any time. With respect to unsettled claims at March 31, 2018, management is of the opinion that the Branch has valid defenses and appropriate insurance coverage in place, or if there is unfunded risk, such claims are not expected to have a material effect on the Branch's financial position. Outstanding contingencies are reviewed on an ongoing basis and are provided for based on management's best estimate of the ultimate settlement.

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Notes to Consolidated Financial Statements
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13. Statement of operations:

(a) Other revenues:

	2018	2017
Recoveries from sales of goods and services	\$ 4,935	\$ 4,403
Parking	1,383	1,340
Drug sales	225	449
Other	538	165
	<u>\$ 7,081</u>	<u>\$ 6,357</u>

(b) Other contributions:

	2018	2017
Foundations and auxiliaries	\$ 3,517	\$ 2,628
Other ministries	2	2
Federal government	-	7
Other	810	862
	<u>\$ 4,329</u>	<u>\$ 3,499</u>

(c) Patients, clients and residents:

	2018	2017
Non-residents of BC	\$ 2,872	\$ 2,781
Non-residents of Canada	443	496
Federal government	342	360
Workers' Compensation Board	304	805
Residents of BC self pay	109	155
	<u>\$ 4,070</u>	<u>\$ 4,597</u>

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Year ended March 31, 2018

13. Statement of operations (continued):

(d) The following is a summary of expenses by object:

	2018	2017
Compensation:		
Compensation	\$ 232,856	\$ 222,477
Employee benefits	39,767	35,981
	272,623	258,458
Supplies:		
Drugs and medical gases	172,824	152,129
Diagnostic	8,267	7,805
Medical and surgical	4,837	4,066
Printing, stationery and office	1,150	1,065
Laundry and linen	246	248
Food and dietary	172	146
Housekeeping	146	150
Other	2,286	2,022
	189,928	167,631
Referred-out and contracted services:		
Other health authorities and BC government reporting entities	152,715	139,336
Health and support services providers	18,279	18,218
	170,994	157,554
Research and designated expenses	67,164	71,098
Amortization of tangible capital assets	28,462	29,096
Equipment and building services:		
Equipment	8,166	7,784
Rent	5,140	4,745
Plant operations (utilities)	3,535	3,615
Building and grounds service contracts	721	606
	17,562	16,750
Sundry:		
Travel	2,098	2,195
Professional fees	835	1,156
Communication and data processing	675	718
Patient transport	11	13
Other	7,038	3,139
	10,657	7,221
Interest on debt	5,687	5,718
Net book value of disposed tangible capital assets	16	73
	\$ 763,093	\$ 713,599

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14. Supplementary cash flow information:

Net change in non-cash operating items:

	2018	2017
Accounts receivable	\$ (9,973)	\$ 13,948
Accounts payable and accrued liabilities	26,261	(18,489)
Deferred research and designated contributions	3,941	174
Inventories held for use	(2,058)	(559)
Prepaid expenses	(586)	1,917
	\$ 17,585	\$ (3,009)

15. Related entities:

(a) BC government reporting entities:

The Branch is related through common control to all Province of BC ministries, agencies, Crown corporations, school districts, health authorities, hospital societies, universities and colleges that are included in the provincial government reporting entity. Transactions with these entities, unless disclosed otherwise, are considered to be in the normal course of operations and are recorded at the exchange amount, which is the amount of consideration established and agreed to by the related parties.

Referred out and contracted services expenses, as outlined in note 13(d) are measured at the exchange amount, which is the amount established and agreed to by the related parties, and differs from fair market value.

The health authorities, hospital societies and BC Clinical Support Services provide various services to each other relating to the provision of healthcare and other support services. The related revenues and expenses are reflected in the statement of operations and are recorded on a cost recovery basis, as the entities would have otherwise delivered the services themselves. As a result, the values recorded in the financial statements approximate fair value.

(b) Foundations and auxiliaries:

The Branch has economic relationships with the BC Cancer Foundation (the "Foundation") which is responsible for fundraising activities of the Branch, the British Columbia Cancer Research Centre facility (the "Research Centre"), and the Genome Sciences Centre. The Foundation is a separate legal entity incorporated under the *Society Act of British Columbia* with separate governance structures and is a registered charity under the provisions of the *Income Tax Act of Canada*.

The financial and non-financial assets and liabilities and results from operations of the Foundation are not included in the consolidated financial statements of the Branch.

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Notes to Consolidated Financial Statements
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15. Related entities (continued):

(b) Foundations and auxiliaries (continued):

During the year, the Branch received contributions of \$21,293 (2017 – \$24,177) from the Foundation.

(c) Related party transactions with PHSA and members:

Certain administrative, finance and accounting, and human resource services are provided to the Branch by PHSA without charge. The costs of these services have not been recorded in the consolidated financial statements of the Branch.

During the year, the Branch was involved in the following related party transactions with other PHSA members:

For the year ended March 31, 2018, expenses include \$5,785 (2017 – \$5,935) resulting from transactions with other PHSA members.

The above amounts exclude transactions with PHSA which are disclosed elsewhere in these consolidated financial statements.

16. Risk management:

The Branch is exposed to credit risk, liquidity risk and foreign exchange risk from its financial instruments. Qualitative and quantitative analysis of the significant risks from the Branch's financial instruments is provided below by type of risk.

(a) Credit risk:

Credit risk primarily arises from the Branch's cash and cash equivalents and accounts receivable. The risk exposure is limited to their carrying amounts at the date of the consolidated statement of financial position.

The Branch manages credit risk by holding balances of cash and cash equivalents with a reputable top rated financial institution. The Branch periodically reviews its investments and is satisfied with the credit ratings of the financial institution.

Accounts receivable primarily consist of amounts receivable from the Ministry, PHSA, other health authorities and BC government reporting entities, patients, clients and agencies, hospital foundations and auxiliaries, grantors, etc. To reduce the risk, the Branch periodically reviews the collectability of its accounts receivable and establishes an allowance based on its best estimate of potentially uncollectible amounts. As at March 31, 2018, the amount of allowance for doubtful accounts was \$3,386 (2017 – \$754).

The Branch is not exposed to significant credit risk with respect to the amounts receivable from the Ministry, PHSA, other health authorities and BC government reporting entities. At March 31, the following accounts receivable were past due but not impaired:

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16. Risk management (continued):

(a) Credit risk (continued):

	2018	2017
30 days	\$ 668	\$ 232
60 days	231	257
90 days	86	119
Over 120 days	684	208

(b) Liquidity risk:

Liquidity risk is the risk that the Branch will not be able to meet its financial obligations as they become due. It is the Branch's intention to meet its financial obligations through the collection of current accounts receivable, cash on hand and future funding from the Ministry.

The Branch's principal source of funding is from the Ministry. The Branch is not subject to debt covenants or any other capital requirements with respect to operating funding. Funding received for designated purposes must be used for the purpose outlined in the funding letter or grant documentation. The Branch has complied with the external restrictions on the funding provided.

All of the Branch's financial assets mature within one year. The tables below show when various financial liabilities mature:

2018				
Financial liabilities	Up to 1 year	1 to 5 years	Over 5 years	Total
Accounts payable and accrued liabilities	\$ 98,424	\$ 233	\$ 3,422	\$ 102,079
Debt	602	3,975	67,252	71,829
Total financial liabilities	\$ 99,026	\$ 4,208	\$ 70,674	\$ 173,908

2017				
Financial liabilities	Up to 1 year	1 to 5 years	Over 5 years	Total
Accounts payable and accrued liabilities	\$ 72,091	\$ 190	\$ 3,537	\$ 75,818
Debt	469	3,319	68,538	72,326
Total financial liabilities	\$ 72,560	\$ 3,509	\$ 72,075	\$ 148,144

Debt pertaining to P3 projects is funded through the ongoing annual operating grants received from the Ministry.

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16. Risk management (continued):

(c) Foreign exchange risk:

The Branch's operating results and financial position are reported in Canadian dollars. As the Branch operates in an international environment, some of the Branch's financial instruments and transactions are denominated in currencies other than the Canadian dollar. The results of the Branch's operations are subject to currency transaction and translation risks.

The Branch makes and receives payments denominated in US dollars and other currencies. The currency most contributing to the foreign exchange risk is the US dollar.

Comparative foreign exchange rates as at March 31 are as follows:

	2018	2017
US dollar per Canadian dollar	\$ 0.776	\$ 0.752

The Branch has not entered into any agreements or purchased any foreign currency hedging arrangements to hedge possible currency risks, as management believes that the foreign exchange risk derived from currency conversions is not significant. The foreign currency financial instruments are short term in nature and do not give rise to significant foreign currency risk.

The carrying amounts of the Branch's foreign currency denominated financial liabilities and financial assets as at March 31 are as follows:

Financial assets	2018 US dollar	2017 US dollar
Cash	\$ 1,234	\$ -
Accounts receivable	770	2,331
Total financial assets	\$ 2,004	\$ 2,331

Financial liabilities	2018 US dollar	2017 US dollar
Accounts payable and accrued liabilities	\$ 337	\$ 200
Deferred research and designated contributions	574	2,482
Total financial liabilities	\$ 911	\$ 2,682

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Notes to Consolidated Financial Statements
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17. Comparative figures:

Certain comparative figures have been reclassified to conform to the current year's financial statement presentation.

18. Impact of accounting for restricted contributions in accordance with Restricted Contributions Regulation 198/2011:

As disclosed in the significant accounting policies note 1(a), Regulation 198/2011 requires the Branch to recognize revenue from restricted contributions for the purpose of acquiring or developing a depreciable tangible capital asset on the same basis as the related amortization expense of the tangible capital asset. As these transfers do not contain stipulations or restrictions creating a liability over the term of the expected useful life of a related tangible capital asset, PSAS would require these contributions to be recognized in revenue as a tangible capital asset is acquired or development and construction of a tangible capital asset is complete.

The impact of the departure from PSAS on the consolidated financial statements of the Branch is as follows:

As at March 31, 2016		
Decrease in accumulated operating deficit	\$	305,840
Decrease in deferred capital contributions		(305,840)
For the year ended March 31, 2017		
Decrease in annual operating surplus		(7,839)
As at March 31, 2017		
Decrease in accumulated operating deficit		298,001
Decrease in deferred capital contributions		(298,001)
For the year ended March 31, 2018		
Decrease in annual operating surplus		(2,719)
As at March 31, 2018		
Decrease in accumulated operating deficit		295,282
Decrease in deferred capital contributions		(295,282)

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19. BC Societies Act:

Effective November 28, 2016, a new Societies Act came into force in British Columbia. Under the new Act, the Branch is subject to certain new financial statement disclosure requirements. These disclosure requirements include: (a) remuneration paid to the Society's directors, (b) remuneration paid to the ten most highly paid employees and contractors of the Society who were paid at least seventy-five thousand dollars during the period, and (c) any financial assistance provided by the Society during the period that was outside the ordinary course of activities.

(a) Remuneration paid to Directors:

All directors of the Branch are also directors of PHSA. Each director of the Branch is paid a retainer as a board member of PHSA. The directors do not receive any additional retainer for their service on the board of the Branch.

(b) Remuneration paid to highest paid employees and contractors:

The ten most highly remunerated persons whose remuneration was at least seventy-five thousand dollars during the year ended March 31, 2018 received an aggregate of \$4,688 from the Branch during that period. All of these individuals are physicians.

(c) Financial assistance:

The Branch did not provide any financial assistance outside the ordinary course of activities during the year ended March 31, 2018.