

MAKING AN IMPACT

Annual Report 2014



PrimaryCare
Network
EDMONTON SOUTHSIDE



Krysta, Dr. Anatoly Dobrousin, Daina, primary care nurse, and Rafia of Canora Medical Clinic ensure patients are provided the services they need.

Table of Contents

Purpose of the report	4
Message from the Board Chairs	6-7
Message from the General Manager	8-9
Path of a Patient	10-11
Community & Patients	12-13
Staff & Physicians	14-15
Health System & Delivery of Care	16-17
Auditors' Report & Financial Statements	19-27
PCN Map & Clinic List	28-29

People living with complex and chronic diseases are at the centre of our work.

Our annual report explores Edmonton Southside PCN's achievements in supporting and caring for these patients. This year's report illustrates the impact that our PCN has on our health system, our family physicians, our staff and, most importantly, our patients.



Patient Don Siddons has increased his physical activity with the help of Moving for Health, an eight-week supervised exercise workshop.

What is a PCN?

Primary Care Networks (PCNs) are a made-in-Alberta approach to improving access to and better coordination of care for patients across the province. At Edmonton Southside PCN, a group of family doctors works with a multidisciplinary team to coordinate health services for patients. The team can comprise of nurse practitioners, primary care nurses, registered dietitians, behavioural health consultants, respiratory therapists, exercise specialists and a geriatric team collaborating together to provide primary health care to patients.

There are 41 PCNs operating throughout Alberta with more in development. More than 2,800 family physicians in Alberta are members of a PCN.

*Board of Directors and
Alberta Health Services
Governance Committee
representatives.*

*Missing: Dr. Allison
Theman, Dr. Patricia
Verones (Finance &
Audit Committee) and
Dr. Brian McPeak*

Message from the Board Chairs

As an organization, Edmonton Southside PCN has matured since its inception nine years ago. Like a child, we've tried new things, introduced new ideas, stumbled once or twice, and learned many lessons along the way. As a result, we continually grow and improve what we offer for primary care. This year was no different. This was the year to attempt a different method of engaging our stakeholders.

We had an important goal to complete a business plan that would guide us through 2017. The process of having our member physicians, staff and stakeholders create a vision and action plan for the next three years highlighted some very important advances in the maturity of the PCN. We are confident in our business model, the programs and services we provide to our patient population. We have tremendous pride across the PCN in what we do and are well-positioned to continue to deliver comprehensive, multidisciplinary team care to tens of thousands of Edmontonians.

We are an organization that is, and has always been comfortable with change and how this change impacts others. We are prepared to introduce new ideas to the clinic and to work with our member physicians to deliver the best care possible to our patient population.

This maturity was never more evident in the business planning process than when the decision was made to build upon our strengths in complex and chronic disease patient care and extend our reach into the community; to accept more responsibility for proactive and preventative care. We added patient and community involvement to our long standing practice of delivering quality, team-based care. We even changed our corporate vision to "the trusted cornerstone of a healthy community" and our

mission to "provide team-based primary care and work with our community to achieve the best health for all."

We believe the investments in family medicine and primary care through PCNs are paying dividends and that we are having a positive impact on those we serve. We are committed, as Directors, as family physicians, and as a PCN to continue to introduce better ways to make a difference in the health of our population. Like a child who grows up to become a mature adult, we accept our leadership role, look forward to the evolution of primary care and are committed to growing and changing in a constant drive to improve.



Irene Colliton, MD
Board Co-Chair



Denis Vincent, MD
Board Co-Chair



Irene Colliton, MD
Co-chair
Governance Committee

Stephanie Donaldson-Kelly
Alberta Health Services
Governance Committee

Mark Antoniuk, MD
Finance & Audit Committee

David Cox, PhD
Finance & Audit Committee

Richard Hanelt, MD
Governance Committee

Heather MacDonald
Alberta Health Services
Governance Committee

Alex McPherson, MD, PhD

Denise Campbell-Scherer, MD, PhD

Denis Vincent, MD
Co-chair

Mahmood Nizam, MD
Governance Committee

Message from the General Manager

During the nine past years, Edmonton Southside

Primary Care Network has been working to enhance the delivery of primary care and we are confident that we have made an impact in four key areas as we have grown to 53 clinics, 183 family physicians and almost 100 staff.

We have introduced multidisciplinary health teams to support the delivery of primary care. These teams of nurse practitioners, nurses, dietitians, behavioural health consultants, respiratory therapists and exercise specialists increase access to family physicians and health services. Combined, these teams saw over 70,000 patients in 2013-2014 (an increase of 21 percent from the prior year) and made an impact in the care of those with chronic and complex health problems.

We have made an impact on our member physicians and employees by strengthening our health team effectiveness. Strong, efficient and effective teams result in improved patient care. Our staff celebrated the achievement of our PCN being named one of the 2014 Best Small and Medium Employers in Canada. This award demonstrates the impact we've made on employee engagement and how our staff are committed to the PCN and its purpose.

We are delivering programs in health promotion and disease prevention such as Prescription to Get Active, which have the promise to impact the health system by increasing wellness and reducing demand for health services.

Fully 65 percent of the work done by the PCN is in support of the most complex and challenging pressures on the health system including mental health, cardiovascular disease, nutrition and weight management,

social and lifestyle issues, diabetes and seniors' care. Inside this annual report, you will read three patient stories – a sample of the impact we have made on the patients we saw this year.

You will see how a team addressed Barbara's diabetes and possibly saved her foot from amputation. How John can exercise, despite having chronic obstructive pulmonary disease, with the help of a respiratory therapist and exercise specialist. How Peter overcame the stress and depression of a cancer diagnosis with the support of a behavioural health consultant and the Changeways workshop.

Barbara, John and Peter, and thousands like them, are our main focus and where we want to make the most impact – the health of our patient population.

With the leadership of our family physicians, the commitment of our staff and the support of our partners and stakeholders, we have made a difference. We thank you for caring and working collaboratively with us to make a positive impact on the health system, on those who provide primary health services and upon those who need these services.



Doug Craig
General Manager



Jessica Schaub
Evaluation Manager

Doug Craig
General Manager

Tye Babb
Primary Care Manager

David Chamberland
Controller

Sheri Fielding
Clinical Director

Sharon Pelletier
Primary Care Manager

Ann Comeau
Primary Care Manager

Melanie Jaques
Primary Care Manager

Cheryl Barabash
Primary Care Manager

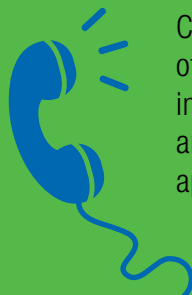
Janet Schultz
Executive Assistant

The Path of a Patient



Find a PCN family doctor near you.

Visit **edmontonareadocs.ca** to search for a PCN physician who is accepting patients.



Call the doctor's office for more information and to book an appointment.



Edmonton Southside PCN

Our team of health professionals work together with member physicians to provide services that address a myriad of health concerns across our patients' lifespans.



Our family doctors

We have over 183 family physicians across 53 clinics who work with almost 100 staff.



Respiratory
Therapist



Behavioural Health
Consultant



Group Programs



Our patients

Patients living with complex and chronic diseases are at the centre of our work.



Exercise Specialist



Nurse &
Nurse Practitioner



Registered Dietitian

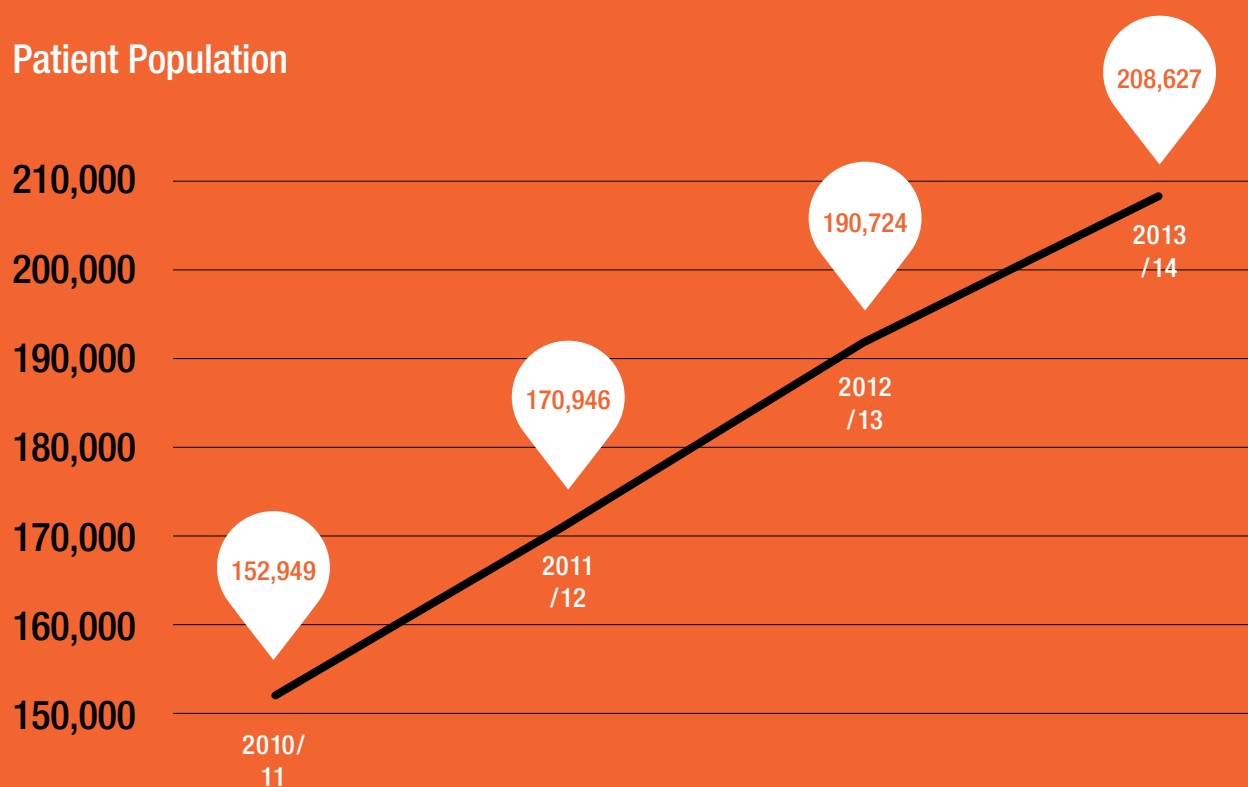


Social Worker

Dr. Aanand Shah of Dominion Medical Centres Century Park shares a laugh with patient Barbara Wolfe, nurse practitioner Donna Paradowski and primary care nurse Leah Tully.

Community & patients

Patient Population



Edmonton Southside clinicians see patients for a wide variety of reasons. The PCN aims to improve or maintain the quality of life for patients accessing PCN supports. To measure if these supports have made an impact, a standardized measurement instrument (SF-12) is used for participants attending select group classes.

In 2013-14, the tool was used with the Changeways and Managing Your Emotions group participants. Changeways is a six-week workshop that helps individuals with symptoms of depression and/or anxiety. Managing Your Emotions is a

five-week educational group that provides participants with tools to learn how to manage their emotions better.

When the participants started their first class, 92 percent of Changeways patients and 82 percent of Managing Your Emotions patients scored below the general population norms for emotional health. They are also at greater risk for depression (88 percent for Changeways and 72 percent for Managing Your Emotions) compared to the general population at 20 percent. Our results show positive changes in the quality of life for those who complete the classes.



“The circulation has gotten so much better. It wasn’t supposed to get better so I was really excited.”

In memory of Barbara Wolfe (1943-2014)

Wearing a cut open slipper exposing her wounded toes upon her arrival to Edmonton, this is the only way Barbara Wolfe was able to walk.

Barbara Wolfe arrived in Edmonton from Newfoundland in 2011 with sores on every toe, and on the verge of losing her left foot. The 70-year-old has poor circulation in her legs as a result of her diabetes, and a thyroid and heart condition, which increased the dangers of causing major damage. Barbara’s daughter managed to get her into a family doctor at Dominion Medical Centres Century Park. She needed surgery to improve the blood flow to her foot and managed to receive a quick referral. Following her surgery, Dr. Aanand Shah recommended that she see primary care nurse Leah Tully who helped monitor her diabetes. She was also referred to a

registered dietitian and who improved her eating habits. As a result, she lost 30 pounds.

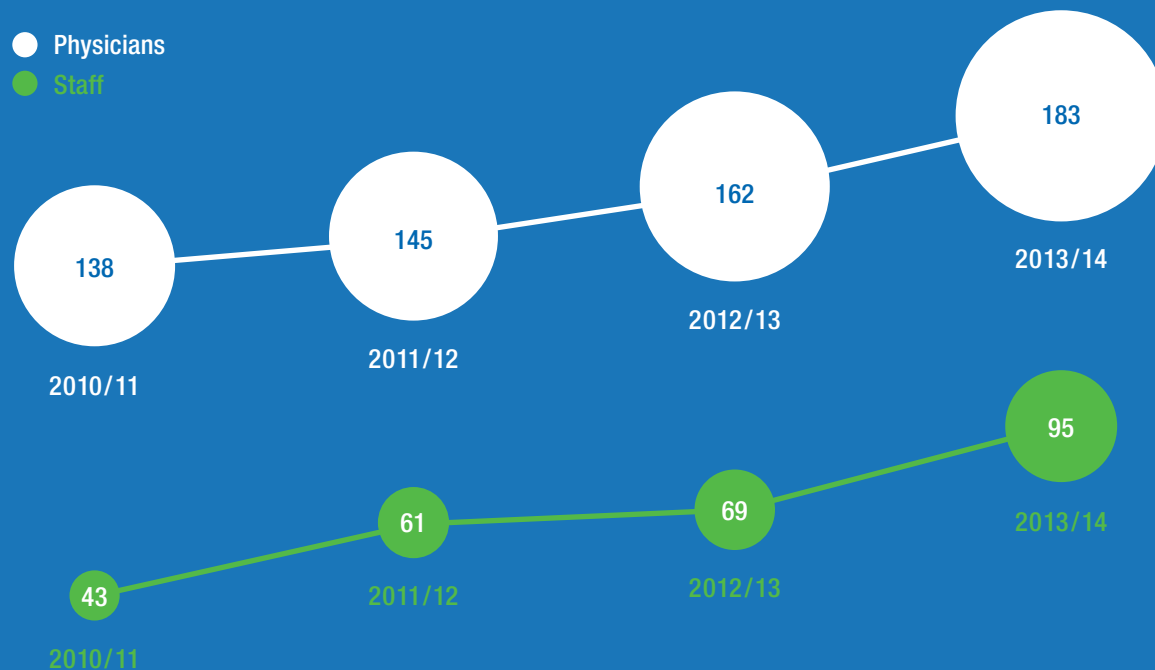
What really turned her health around was an introduction to the PCN’s High Risk Lower Leg Assessment Clinic. The clinic focuses on prevention of wounds for patients who are at risk of developing chronic disease related ulcers. The team helped Barbara with a proper shoe and stocking fitting. After her health improved, Barbara registered for Breathing for Health, an eight-week rehabilitation program that helps patients with mild to moderate chronic obstructive pulmonary disease.

Barbara credits Edmonton Southside clinicians for putting her on a path to better health. Her original month-long visit with her daughter turned into a move to Edmonton because of the care she received.

Peter, a patient who has accessed mental health services through Edmonton Southside, is proud to say he is now stress-free.

Staff & physicians

PCN physicians and employees



Edmonton Southside has grown over the last fiscal year with an increase in number of physician members and staff. As the PCN adds clinics and physicians, more staff are hired to ensure patients have a medical home where they can see all clinicians.

To establish that Edmonton Southside is on the right path, the PCN participated in the Health Team Effectiveness (HTE) program in 2012 and 2013. The better the PCN health care team is, the better it can deliver its programs and services.

The program focuses on developing and strengthening three dimensions of a team – alignment, relationships and methods. In 2012, the PCN team scored 238 and saw this number rise to 266 in 2013. Our overall scores are in the third and highest phase, which indicates that the team is functioning with interdependence and maximizing

performance. The HTE program establishes a benchmark for team performance.

In addition, the PCN was named one of the Best 50 Small and Medium Employers in Canada (BSME) for 2014. The study was conducted by Aon Hewitt and Queen's School of Business. The list of these employers is published in PROFIT Magazine.

The BSME award demonstrates that Edmonton Southside has created and sustained an attractive employment culture with low turnover and high levels of job satisfaction.

Patients are the true winners because a high functioning health team that is engaged in their work contributes to the delivery of high quality care.



“It’s a little bit of guidance in life when you need it and I felt it was a great reward.”

Peter wasn’t sure how to handle the stress he was facing from work and his personal life. As a pharmacist, he was used to solving other people’s problems. The 57-year-old was fighting depression and bladder cancer when he turned to Dyan Eybergen, a behavioural health consultant at Edmonton Southside PCN, for help.

Dyan made a significant impact on Peter’s life with strategies to set goals so what he was dealing with didn’t have to feel so overwhelming. His family physician, Dr. Rosemarie Stepanko, had prescribed anti-depressants but Peter wanted to try a different route. Dr. Stepanko referred him to Dyan who works with her patients at Lendrum Medical Clinic. Dyan suggested he read *Freeing Yourself From Anxiety* by Tamar E. Chansky.

Peter went out of his comfort zone when he registered for Changeways, a PCN group workshop that provides strategies for depression and anxiety.

He explains that he’s always been the one to fix other people’s issues as a manager and a pharmacist. Changeways showed him that it’s okay to ask for help.

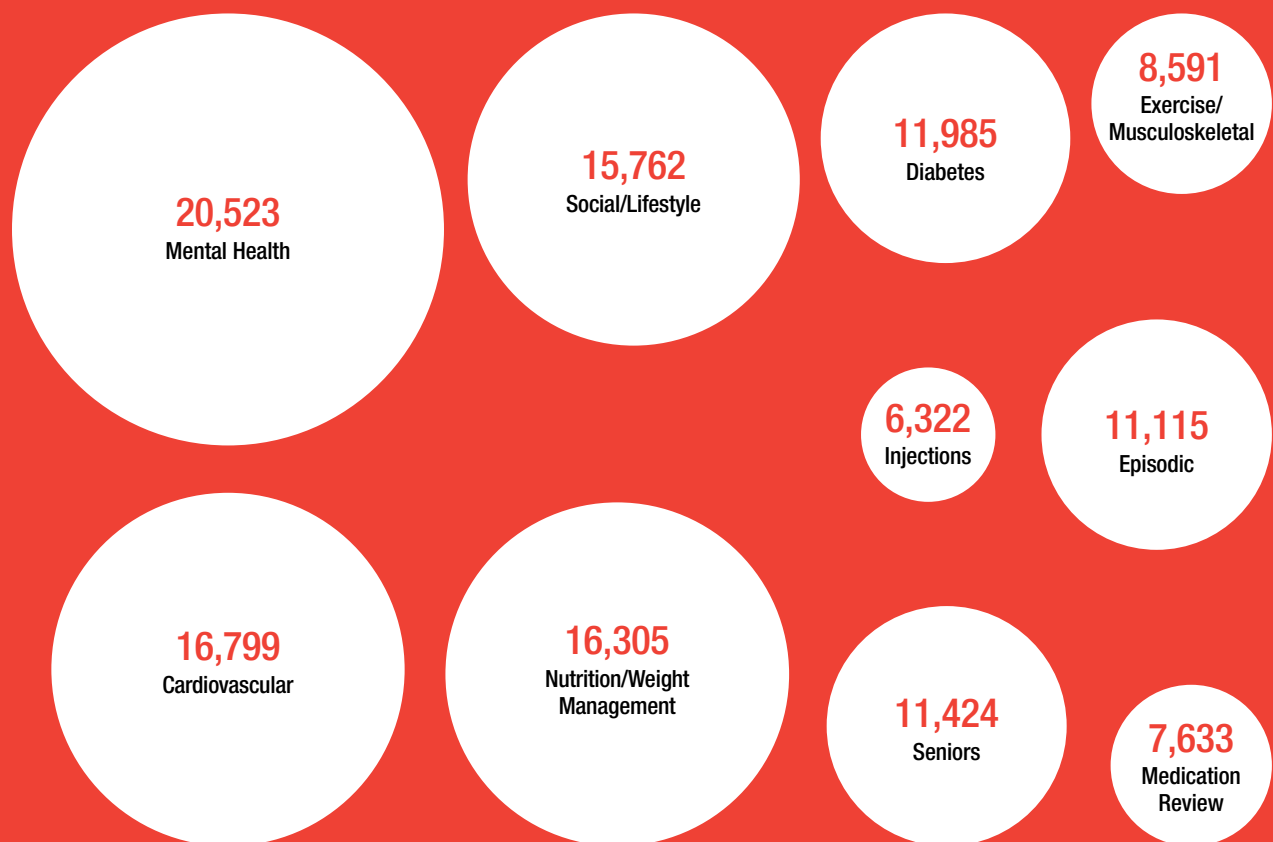
“I learned a lot of things from it like learning how to breathe. Sometimes I find myself just sitting there and slowing down my breath and relaxing. We learned that there are many people who had to go through this and they made it through. They aren’t alone and that’s a pretty big deal. With Changeways, everybody had their own issues. It’s a little bit of guidance in life when you need it and I felt it was a great reward,” says Peter.

*Exercise specialist
Sandra Pelchat
encourages John
Boyd as he goes
through a workout
routine.*

Health system & delivery of care

Team-based care

The following shows the top 10 Reasons for Encounters with a member or members of the multidisciplinary team. These numbers show the high demand for PCN services, and reflect the diversity within primary care and the complexity of the population we serve.





“Everybody has treated me wonderfully, just like royalty almost. Everyone wants to see me succeed.”

John Boyd wants to be able to walk to a mall without wheezing and stopping to catch his breath. He doesn't want to end up using a ventilator or in the hospital because of his chronic obstructive pulmonary disease (COPD).

Thanks to Edmonton Southside PCN, John, 60, is overcoming barriers to his chronic disease. He's begun exercising more and focusing on improving his eating habits.

His family doctor, Dr. Tim Yeung, first referred him to a primary care nurse, Diane North, over a year ago after he was hospitalized for his diabetes. Diane introduced John to Kirsten Goddard, a respiratory therapist, and exercise specialist Sandra Pelchat. These PCN health

care providers form a multidisciplinary team who support family doctors and their patients.

Kirsten, along with Dr. Yeung, diagnosed John with COPD. She recommended that he enroll in Breathing for Health, an eight-week workshop that focuses on educating patients with asthma and COPD on how to become more physically active.

After working with Diane, Kirsten, and Sandra, he finds his life to be different due to the exercise, diet and sleep. He feels the best he has in a long time thanks to the services provided by the PCN. “Everybody has treated me wonderfully, just like royalty almost. Everyone wants to see me succeed,” says John.

Independent Auditors' Report

To the Directors of
**1157178 Alberta Ltd. (Operating as Edmonton
Southside Primary Care Network)**

We have audited the accompanying financial statements of **1157178 Alberta Ltd. (Operating as Edmonton Southside Primary Care Network)**, which comprise the statement of financial position as at March 31, 2014 and the statements of operations, changes in net assets, and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

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

Auditors' responsibility

Our responsibility is to express an opinion on these 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 financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the

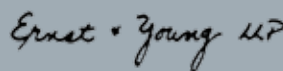
risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate 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 financial statements.

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

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of **1157178 Alberta Ltd. (Operating as Edmonton Southside Primary Care Network)** as at March 31, 2014 and the results of its operations and its cash flows for the year then ended, in accordance with Canadian accounting standards for not-for-profit organizations.

Edmonton, Canada
May 21, 2014



Chartered Accountants

STATEMENT OF FINANCIAL POSITION

As at March 31, 2014

	2014	2013
ASSETS		
Current		
Cash	\$ 620,648	\$ 5,040,594
Short-term investments [notes 3 and 6]	5,375,000	-
Accounts receivable	45,949	40,666
Prepaid expenses	80,359	77,104
	6,121,956	5,158,364
Capital assets [notes 4 and 9]	626,672	688,978
Restricted cash [note 6]	2,400,000	1,799,975
	\$ 9,148,628	\$ 7,647,317
LIABILITIES		
Current		
Accounts payable and accrued liabilities	\$ 1,405,136	\$ 515,333
NET ASSETS		
Unrestricted net assets	4,716,821	4,643,032
Internally restricted net assets [note 6]	2,400,000	1,799,975
Investment in tangible capital assets	626,671	688,977
	7,743,492	7,131,984
	\$ 9,148,628	\$ 7,647,317

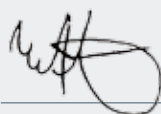
Commitments (notes 8 and 9)

See accompanying notes

Approved on behalf of the Board:



Director



Director

STATEMENT OF CHANGES IN NET ASSETS

For the year ended March 31, 2014

	2014	2013
UNRESTRICTED NET ASSETS		
Balance, beginning of year	\$ 4,643,032	\$ 2,980,939
Excess of revenue over expenses before amortization	851,912	1,803,725
Capital assets purchased, net	(178,098)	(141,657)
(Increase) decrease in internally restricted net assets	(600,025)	25
Balance, end of year	\$ 4,716,821	\$ 4,643,032
INTERNALLY RESTRICTED NET ASSETS [NOTE 6]		
Balance, beginning of year	\$ 1,799,975	\$ 1,800,000
Increase (decrease) in internally restricted net assets	600,025	(25)
Balance, end of year	\$ 2,400,000	\$ 1,799,975
INVESTMENT IN CAPITAL ASSETS		
Balance, beginning of year	\$ 688,977	\$ 756,425
Amortization of capital assets	(240,404)	(209,105)
Capital assets purchased, net	178,098	141,657
Balance, end of year	\$ 626,671	\$ 688,977

See accompanying notes

STATEMENT OF OPERATIONS

For the year ended March 31, 2014

	2014	2013
Revenue		
Alberta Health operating grants	\$ 12,001,712	\$ 10,915,627
Registry nurse contract	80,000	89,119
Program cost recovery	11,423	23,511
Other revenue	20,712	59,403
Interest income	125,108	105,451
	12,238,955	11,193,111
Expenses		
Advertising	97,656	47,125
Allowance for GST receivable	17,795	13,590
Contract services	27,544	549,408
Dues and subscriptions	47,285	42,099
Equipment purchases	22,245	40,861
Evaluation costs	103,049	50,500
Insurance	17,835	16,575
Information technology	66,600	65,658
Fees and bank charges	7,569	6,208
Management consulting fees	72,560	21,005
Office and supplies	58,174	66,904
Payments to physicians [note 5]	2,564,674	2,146,820
Professional development	71,810	25,592
Professional fees	46,487	100,793
Rent	197,511	191,429
Repairs and maintenance	1,689	3,163
Surplus reduction plan [note 9]	1,584	11,277
Telephone and communications	42,205	56,153
Travel	37,042	27,845
Wages and benefits [note 10]		
Administration	1,129,139	957,012
Health professionals	6,750,726	4,948,151
	11,381,179	9,388,168
Excess of expenses over revenue before other item	857,776	1,804,943
Loss on disposal of capital assets	(5,864)	(1,218)
Excess of revenue over expenses before amortization	851,912	1,803,725
Amortization of tangible capital assets	(226,532)	(204,062)
Amortization of intangible assets	(13,872)	(5,043)
	(240,404)	(209,105)
Excess of revenue over expenses for the year	\$ 611,508	\$ 1,594,620

See accompanying notes

STATEMENT OF CASH FLOWS

For the year ended March 31, 2014

	2014	2013
OPERATING ACTIVITIES		
Excess of revenue over expenses for the year	\$ 611,508	\$ 1,594,620
Add items not affecting cash:		
Amortization of capital assets	240,404	209,105
Loss on disposal of capital assets	5,864	1,218
	857,776	1,804,943
 Changes in non-cash working capital:		
(Increase) decrease in accounts receivable	(5,283)	107,084
(Increase) decrease in prepaid expenses	(3,255)	37,220
Increase in accounts payable and accrued liabilities	889,803	31,132
	881,265	175,436
Cash provided by operating activities	1,739,041	1,980,379
 INVESTING ACTIVITIES		
Capital assets purchased	(183,962)	(142,875)
Cash used in investing activities	(183,962)	(142,875)
 Net increase in cash and cash equivalents	1,555,079	1,837,504
Cash and cash equivalents, beginning of year	6,840,569	5,003,065
Cash and cash equivalents, end of year	\$ 8,395,648	\$ 6,840,569
 Cash and cash equivalents is comprised of:		
Cash	\$ 620,648	\$ 6,840,569
Short-term investments [note 3]	7,775,000	-
	\$ 8,395,648	\$ 6,840,569
 Supplementary cash flow information:		
Interest received	\$ 115,038	\$ 103,289

See accompanying notes

NOTES TO THE FINANCIAL STATEMENTS

March 31, 2014

1. Nature of operations

1157178 Alberta Ltd. (Operating as Edmonton Southside Primary Care Network) [the "Organization"] was incorporated on March 8, 2005 in Alberta and began operations on May 1, 2005. The Organization was established to implement a local primary care initiative with Alberta Health Services (formerly Capital Health) in accordance with the terms of agreement between Alberta Health (formerly Alberta Health and Wellness), Alberta Medical Association and Alberta Health Services for the purpose of:

- (i) increasing the proportion of Alberta residents with ready access to primary health care;
- (ii) providing coordinated 24 hour, 7 day per week management of access to appropriate primary health care services;
- (iii) increasing the emphasis on health promotion, disease and injury prevention, care of medically complex patients and care of patients with chronic disease;
- (iv) improving coordination and integration with other health care services including secondary, tertiary and long-term care through specialty care linkages to primary health care; and
- (v) facilitating the greater use of multidisciplinary teams to provide comprehensive primary health care.

The Organization currently derives the majority of its funding revenue from Alberta Health.

The Organization is registered as a not-for-profit organization and is exempt from income taxes under paragraph 149(1)(l) of the Income Tax Act (Canada).

2. Significant accounting policies

These financial statements were prepared in accordance with Part III of the Chartered Professional Accountants of Canada Handbook - Accounting Standards for Not-for-profit Organizations, which sets out generally accepted accounting principles for not-for-profit organizations in Canada and includes the significant accounting policies summarized below.

(a) Revenue recognition

Grants

Alberta Health operating grants received by the Organization are unrestricted and therefore recorded as revenue in the period in which they are received. For all other grant revenue the Organization uses the deferral method of recording revenue. Revenue is recognized in the year for which it is granted, as indicated in the specific funding agreement entered into by the Organization. Accountable revenues which have not yet been spent in accordance with funding contracts are carried over to the next fiscal period. This recognition is based on Alberta Health operating agreements with the Organization which expired on March 31, 2014. A continuance has been issued to continue operating under the terms of the prior agreement until September 30, 2014 or at such time that a new agreement is signed.

Interest

Interest income is recognized on the basis of the passage of time when collectability is reasonably assured.

NOTES TO THE FINANCIAL STATEMENTS

March 31, 2014

2. Significant accounting policies - continued

(b) Cash

Cash consists of cash on hand and balances with banks.

(c) Financial instruments

The Organization's financial instruments consist of cash, short-term investments, accounts receivable and accounts payable and accrued liabilities. Unless otherwise noted, it is management's opinion that the Organization is not exposed to significant interest, currency or credit risks arising from these financial instruments.

The fair value of these financial instruments approximates their carrying value unless otherwise noted.

(d) Capital assets

Purchased capital assets are recorded at acquisition cost. Amortization is provided annually at rates calculated to write off the assets over their estimated useful lives as follows:

Tangible

Leasehold improvements	Straight-line over the term of the lease
Office equipment	20% diminishing balance
Clinic equipment	20% diminishing balance
Computer equipment	30% - 100% diminishing balance
Clinic renovations	Straight-line over five years

Intangible

Computer software	100% diminishing balance
-------------------	--------------------------

(e) Employee future benefits

The Organization maintains a defined contribution group RRSP plan under which amounts are contributed to eligible employees' accounts. The expenditure for this plan is equal to the Organization's required contributions for the year.

3. Short-term Investments

These funds are currently being held in short-term investments, with interest rates between 1.35-1.40% being calculated per annum.

Investments	\$ 7,775,000
Less: Internally restricted cash [note 6]	<u>2,400,000</u>
Total short-term investments	<u>\$ 5,375,000</u>

NOTES TO THE FINANCIAL STATEMENTS

March 31, 2014

4. Capital assets

	2014		2013	
	Cost \$	Accumulated amortization \$	Cost \$	Accumulated amortization \$
Tangible				
Leasehold improvements	558,259	367,634	558,259	255,982
Office equipment	257,640	152,977	225,379	130,844
Clinic equipment	70,880	37,171	68,656	29,022
Computer equipment	89,249	31,981	57,530	28,010
Clinic renovations	405,817	174,239	321,891	103,922
Intangible				
Computer software	50,653	41,824	32,994	27,951
	1,432,498	805,826	1,264,709	575,731
Net book value		626,672		688,978

5. Payments to physicians

The Organization may compensate member physicians and/or their clinics for services provided to promote after hours care, and to offset the costs of supporting health professionals in their clinics, depending on the practice. Services to the Organization include Board honorariums, hourly remuneration for specific medical direction and management guidance, and payments to psychiatrists. After hours care (evenings, weekends, statutory holidays) is promoted by providing an hourly incentive payment to clinics to partially offset the additional cost of operating during these times. In addition, the Organization may provide clinics a reasonable compensation to offset the costs and possible lost revenue of providing working space in their clinics for the PCN's multidisciplinary team of professionals.

	2014	2013
Services	\$ 144,354	\$ 113,828
After hours care	1,001,078	796,198
Multidisciplinary team overhead	1,419,242	1,236,794
	\$ 2,564,674	\$ 2,146,820

6. Restricted Cash

Alberta Health requires the maintenance of cash funds sufficient to cover the obligations of the Organization should the Organization cease operations. These funds are currently invested in short-term investments [note 3]. Internally restricted net assets were increased to reflect an increase in potential obligations should the Organization cease operations.

7. Economic dependence

The Organization relies on government funding for its revenue. The Alberta Government has committed to supplying funding. Should this funding cease, the Organization would not be able to continue operations without alternate sources of revenue.

NOTES TO THE FINANCIAL STATEMENTS

March 31, 2014

8. Commitments

The Organization is committed to the following future minimum annual lease payments for office premises, expiring November 30, 2015:

2015	\$ 113,744
2016	75,829
	<hr/>
	\$ 189,573

In addition to the minimum rental payments, the Organization is also required to pay its proportionate share of operating costs.

The Organization has an information technology services agreement for the support of its information management and technology to September 30, 2014. The monthly commitment under this agreement is \$4,155 (2013 - \$3,935).

9. Surplus reduction plan

The Organization has adopted a surplus reduction plan whereby the operating fund is drawn down systematically through several separate activities. These activities include locating, planning and developing new office premises, developing multidisciplinary team space at member clinics, acquiring an Electronic Medical Record, installing Health Unlimited Television at member clinics, acquiring an enterprise license subscription for an online clinical resource tool, conducting an organizational review, and contracting two new staff to fixed term positions. The expenses related to these activities will be incurred over more than one fiscal period. The expenses relating to this program incurred include the following:

	2014	2013
Equipment purchases for member clinics	\$ 9,779	\$ 3,181
PCN renovations	1,584	8,096
Clinic renovations	83,925	70,853
	<hr/>	
	\$ 95,288	\$ 82,130

Some expenditures that were identified through the surplus reduction plan have been recorded as assets in the current year. These include the leasehold improvements from the new office premises recorded in capital assets, and the enterprise license which is being recorded over the term of the subscription as dues and subscriptions expense on the statement of operations.

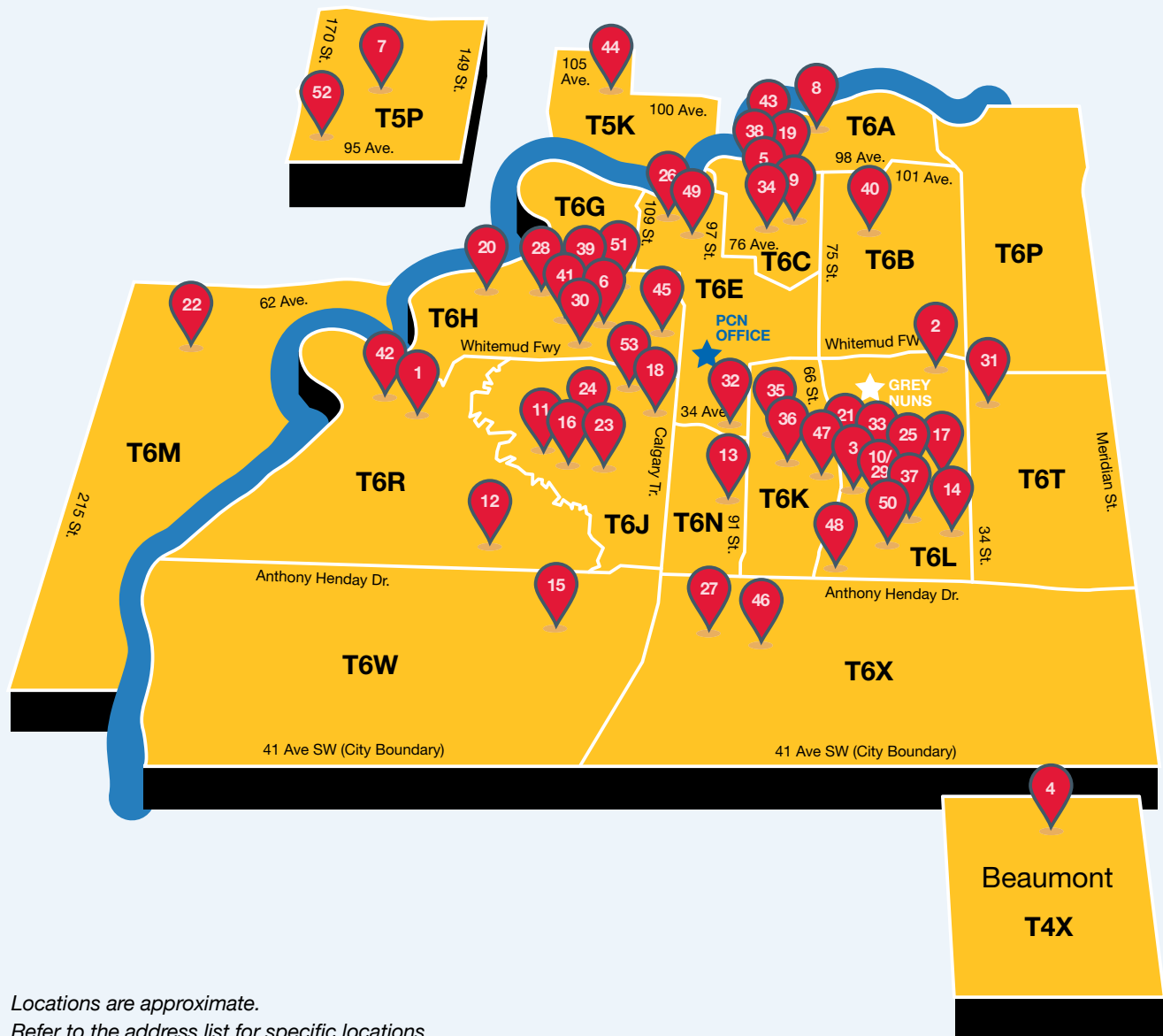
10. Group RRSP

The Organization contributes to a group RRSP an amount up to 9% of eligible employee earnings. Eligible employees are required to contribute a minimum amount equal to 1% of annual earnings. During the year, the Organization contributed \$469,318 (2013 - \$367,158) to the pension plan.

11. Comparative Figures

Certain comparative figures have been reclassified to conform to the current period's presentation.

Edmonton Southside Primary Care Network Map



Edmonton Southside Primary Care Network Clinic List

1. **Dr. Hira Ali**
600 Riverbend Square
Edmonton, AB T6R 2E3
Phone: 780.434.7234
Fax: 780.988.8903
2. **Dr. Mark Antoniuk**
4010 - 50 Street
Edmonton, AB T6L 5N3
Phone: 780.450.5646
Fax: 780.462.4406
3. **Dr. Leela Balakrishnan**
6426 - 28 Avenue
Edmonton, AB T6L 6N3
Phone: 780.462.3491
Fax: 780.461.2650
4. **Beaumont Family Medical Associates**
#4, 5102 - 49 Avenue
Beaumont, AB T4X 1E4
Phone: 780.929.5400
Fax: 780.929.2126
5. **Bonnie Doon Medical Clinic**
8808 - 92 Street
Edmonton, AB T6C 3R1
Phone: 780.469.7147
Fax: 780.469.3871
6. **Bradstock Medical Clinic**
#101, 11020 - 53 Avenue
Edmonton, AB T6H 0S4
Phone: 780.434.0939
Fax: 780.434.0939
7. **Canora Medical Clinic**
14924 Stony Plain Road
Edmonton, AB T5P 3X8
Phone: 780.443.0300
Fax: 780.443.0059
8. **Capilano Medical Clinic**
7905 - 106 Avenue
Edmonton, AB T6A 1H7
Phone: 780.465.0951
Fax: 780.395.7878
9. **Cité Francophone**
#138, 8627 - 91 Street
Edmonton, AB T6C 3N1
Phone: 780.450.8635
Fax: 780.401.3104
10. **Dr. Amathul Danial**
#105B, 2603 Hewes Way
Edmonton, AB T6L 6W6
Phone: 780.490.7427
Fax: 780.461.6548
11. **Dominion Medical Centres Century Park**
2383 - 111 Street
Edmonton, AB T6J 5E5
Phone: 780.436.0020
Fax: 780.436.0603
12. **Dominion Medical Centres Mactaggart**
5966 Mullen Way
Edmonton, AB T6R 0S9
Phone: 780.801.1220
Fax: 780.801.1225
13. **Dominion Medical Centres Parsons**
9122 - 23 Avenue
Edmonton, AB T6N 1H9
Phone: 780.801.3360
Fax: 780.801.3366
14. **Edge Centre Walk-in Clinic**
4275 - 23 Avenue
Edmonton, AB T6L 5Z8
Phone: 780.540.2727
Fax: 780.428.2228.
15. **Ellerslie Medical Centre**
11140 Ellerslie Road SW
Edmonton, AB T6W 1A2
Phone: 780.391.1880
Fax: 780.391.1766
16. **Ermineskin Medical Clinic**
#301, 2377 - 111 Street
Edmonton, AB T6J 5E5
Phone: 780.436.8731
Fax: 780.434.8732
17. **EveryDay Medical Clinic**
2704 - 48 Street
Edmonton, AB T6L 6B8
Phone: 587.520.8788
Fax: 587.520.7970
18. **Gateway Medical Clinic**
#950, 3803 Calgary Trail
Edmonton, AB T6J 5M8
Phone: 780.436.7240
Fax: 780.436.8142
19. **Good Samaritan Seniors Clinic**
9534 - 87 Street
Edmonton, AB T6C 3J1
Phone: 780.440.8274
Fax: 780.469.6495
20. **Grandview Heights Medical Clinic**
12313 - 63 Avenue
Edmonton, AB T6H 1R4
Phone: 780.437.1968
Fax: 780.438.4395
21. **Grey Nuns Family Medicine Centre**
2927 - 66 Street
Edmonton, AB T6K 4C1
Phone: 780.342.1470
Fax: 780.490.0953
22. **Hawkstone Medical Clinic**
18332 Lessard Road
Edmonton, AB T6M 2W8
Phone: 780.486.3461
Fax: 780.486.0087
23. **Heritage Lane Medical Centre**
10835 - 23 Avenue
Edmonton, AB T6J 7B5
Phone: 780.424.6490
Fax: 780.425.4920
24. **Heritage Medical Clinic**
#105, 2841 - 109 Street
Edmonton, AB T6J 6B7
Phone: 780.436.3790
Fax: 780.434.8378
25. **Hewes Medical Clinic**
6143B - 28 Avenue
Edmonton, AB T6L 5N6
Phone: 780.490.7770
Fax: 780.490.7771
26. **Justik Medical Clinic**
8225 - 105 Street
Edmonton, AB T6E 4H2
Phone: 780.432.0211
Fax: 780.439.9349
27. **Dr. Amit Kumar**
#102, 9404 Ellerslie Road SW
Edmonton, AB T6X 0K6
Phone: 780.466.8064
Fax: 780.466.8095
28. **Lendrum Medical Clinic**
5526 - 111 Street
Edmonton, AB T6H 3E9
Phone: 780.436.3422
Fax: 780.436.3441
29. **Drs. Li and Yu Medical**
#206, 2603 Hewes Way
Edmonton, AB T6L 6W6
Phone: 780.462.4210
Fax: 780.462.4214
30. **Maguire Medical Clinic**
#206, 11044 - 51 Avenue
Edmonton, AB T6H 5B4
Phone: 780.434.7335
Fax: 780.434.0437
31. **Meadowbrook Medical Clinic**
3905 - 34 Street
Edmonton, AB T6T 1L5
Phone: 780.448.1166
Fax: 780.448.2830
32. **Medical Clinics of Edmonton**
9216 - 34 Avenue
Edmonton, AB T6E 5P2
Phone: 780.966.4300
Fax: 780.930.1947
33. **Mediclinic - Mill Woods**
#103, 6203 - 28 Avenue
Edmonton, AB T6L 6K3
Phone: 780.462.9316
Fax: 780.462.7332
34. **Mediclinic - Mill Creek**
9116 - 82 Avenue
Edmonton, AB T6C 0Z5
Phone: 780.465.0521
Fax: 780.465.0436
35. **Millbourne Mall Medical Centre**
Suite 115,
Millbourne Market Mall,
7609 - 38 Avenue
Edmonton, AB T6K 3L6
Phone: 587.521.2022
Fax: 587.521.2023
36. **Millbourne Road Medical Clinic**
131 Millbourne Road East
Edmonton, AB, T6K 1P6
Phone: 780.462.4229
Fax: 780.462.3315
37. **Millwoods Family Clinic**
#104, 2551 Hewes Way
Edmonton, AB T6L 6W6
Phone: 780.462.2767
Fax: 780.463.7025
38. **Montgomery Medical Clinic**
9212 - 95 Avenue
Edmonton, AB T6C 1Z7
Phone: 780.465.4954
Fax: 780.466.4675
39. **Dr. Govindan Nair**
#214, 11044 - 51 Avenue
Edmonton, AB T6H 0L4
Phone: 780.436.8671
Fax: 780.436.7409
40. **Ottewell Medical Clinic**
6138 - 90 Avenue
Edmonton, AB T6B 0P2
Phone: 780.468.6409
Fax: 780.469.1261
41. **Pleasantview Medical Clinic**
11028 - 51 Avenue
Edmonton, AB T6H 0L4
Phone: 780.434.5129
Fax: 780.434.9992
42. **Riverbend Retirement Residence**
103 Rabbit Hill Court
Edmonton, AB T6R 2V3
43. **St. Thomas Community Health Centre**
9040 - 84 Avenue
Edmonton, AB T6C 1E4
Phone: 780.434.2778
Fax: 780.466.8702
44. **Dr. Ralph Sinn**
Suite 806, 10050 - 112 Street
Edmonton, AB T5K 2J1
Phone: 587.985.2846
Fax: 780.452.9142
45. **Dr. Grant Strong**
#1, 10407 - 51 Avenue
Edmonton, AB T6H 0K4
Phone: 780.436.8071
Fax: 780.435.6034
46. **Summerside Medical Clinic**
#6, 1109 Summerside Drive SW
Edmonton, AB T6X 0H5
Phone: 780.249.2727
Fax: 780.466.2726
47. **Tawa Medical Centre**
3015 - 66 Street
Edmonton, AB T6K 4B2
Phone: 587.523.6334
Fax: 587.523.6335
48. **Town Centre Family Clinic**
#320, 6203 - 28 Avenue
Edmonton, AB T6L 6K3
Phone: 780.462.8120
Fax: 780.461.9437
49. **Dr. Tris Trethart**
10145 - 81 Avenue
Edmonton, AB T6E 1W9
Phone: 780.433.7401
Fax: 780.433.0481
50. **Urban Medical Clinic**
5619 - 23 Avenue
Edmonton, AB, T6L 7B9
Phone: 780.757.9547
Fax: 780.757.9546
51. **Victoria Medical Centre**
6915 - 109 Street
Edmonton, AB T6H 3B7
Phone: 780.433.7211
52. **West End Medical Clinic**
#M7, 9509 - 156 Street
Edmonton, AB T5P 4J5
Phone: 780.756.3300
Fax: 780.756.3301
53. **Whitemud Crossing Medical Clinic**
#127, 4211 - 106 Street
Edmonton, AB T6J 6L7
Phone: 780.435.7555
Fax: 780.436.0582



TOP: (Top, left) Alice Belair, Marcy Figas, Brendan Klug, Laura Miller, (bottom, left) Phyllis Footz, Mary Whale and Brittany Faux are members of our geriatric team.

BOTTOM LEFT: Registered dietitian Lalitha Taylor showed youth at Youth Empowerment & Support Services how to make a healthy tuna casserole.

BOTTOM RIGHT: Tye Babb and Shelina Merali-Tate are two of six primary care managers at Edmonton Southside PCN.



***We would love to hear your feedback
about our annual report:***

fluidsurveys.com/surveys/edmontonsouthsidepcn/annual-report-feedback



2014
**Best Small
and Medium
Employers**
in Canada

By Ann Hewitt, Queen's School of Business

Edmonton Southside Primary Care Network
#200, 9808 - 42 Avenue, Edmonton, AB T6E 5V5
Phone: 780.395.2626

edmontonsouthsidepcn.ca