

Motion: J Kalra

That the Auditors' Report and Annual Financial

November 30, 2013, be accepted as presented.

Statements for the fiscal year ending

Scientific advice for a healthy Canada Conseil scientifique pour un Canada en santé

ANNUAL GENERAL MEETING/ ASSEMBLÉE GÉNÉRALE ANNUELLE

FRIDAY, SEPTEMBER 19, 2014 / VENDREDI, 19 SEPTEMBRE 2014

AGENDA/HORAIRE

TIMEFRAME 10:10-10:15	TOPIC 1) Welcome and Approval of Agenda • Remembrance / En souvenir des disparus • Approval of Minutes / Approbation du procèsverbal Motion: That the minutes of the September 20, 2013	Supporting Material Section 1 Minutes	SPEAKER John Cairns
10:15-10:30	AGM be approved as pre-circulated. 2) Report from the President / Rapport du président		John Cairns
10:30-10:45	3) Report from the Governance Committee/ Rapport du Comité de gouvernance • Election of Officers - that Kim Raine be appointed Treasurer (2014-2016) - that Dina Brooks be appointed Discipline Director, Rehabilitation Sciences (2014-2017) - that Linda Rabeneck be appointed as Discipline Director, Medicine (2014-2017) - that Jane Green be appointed as Director-at- Large (2014-2016) Motion: That be accepted as the 2014-2015 Nomination from the Floor. Motion: T Marrie That the proposed new officers identified above be approved by the Academy for the terms indicated. Motion: T Marrie That the proposed slate of officers for 2014-2015 be	Section 2 Proposed Officers 2014- 2015	Tom Marrie
10:45-10:55	 approved by the Academy for the terms indicated. 4) Treasurer's Report/Rapport du trésorier Brief discussion of evolving approaches to financial management. Audited Statements / Rapport des vérificateurs: December 2012-November 2013; December 2013-March 31, 2014 	Section 3 Audited Statements	Jay Kalra

Motion: J Kalra

That the Auditors' Report and Annual Financial Statements for the fiscal short year, December 2013-March 31, 2014 be accepted as presented.

• Appointment of Auditors / Designation des vérificateurs

Motion: J Kalra

That the accounting firm of *Parker Prins Lebano, Chartered Accountants* be appointed auditors for the fiscal year 2014 & 2015 and that the board of directors be empowered to fix the remuneration of the Auditors.

10:55-11:05	5) Report from Fellowship Committee / Rapport du comité des membres	Section 4- Chair's Report	Carol Herbert
11:05-11:15	6) Forum 2015		
11:15-11:30	7) Report from the Standing Committee on Assessments/ Rapport du Comité permanent sur les études	Section 5 Chair's Report	Jean Gray
11:30-11:50	8) Feature Presentation: Optimizing Scopes of Practice: New Models of Care For a New Health Care System		Sioban Nelson & Jeff Turnbull
11:50-11:55	Questions		
11:55-12:15	9) Feature Presentation: <i>Improving Access to Oral Health Care: For Vulnerable People Living in Canada</i>		Paul Allison
12:15-12:20	Questions		
12:20-12:25	10) Recognition of Leadership Contributions / Reconnaissance des contributions de leadership		John Cairns
	• Janice Eng, Cy Frank, David Goltzman, Jay Kalra		
12:25-12:35	11) Future Directions / Orientations futures and Concluding Remarks / Mot de cloture		John Cairns

NEXT ANNUAL MEETING/PROCHAINE RÉUNION ANNUELLE

Thursday & Friday, September 17 & 18, 2015 / Jeudi et vendredi, 17-18 septembre 2015 Fairmont Château Laurier, Ottawa



2013 ANNUAL GENERAL MEETING

Friday, September 20, 2013 10:45-12:30 a.m. Chateau Laurier Hotel, Ottawa

1) APPROVAL OF MINUTES

Motion: Greta Cummings and Jay Kalra

That the minutes of September 21, 2012 be approved as pre-circulated.

Carried.

2) REPORT OF THE GOVERNANCE AND NOMINATING COMMITTEE

A. ELECTION OF OFFICERS

For the 2013 CAHS AGM, the Governance and Nominating Committee (Greta Cummings, Janice Eng, Cy Frank, Jocelyne Feine, Carol Herbert, Robert Sindelar, Catharine Whiteside [Chair]) recommend the following actions as proposed in the following motion.

MOTION: Catharine Whiteside and Dale Dauphinee

That the proposed slate of officers be approved and adopted by the Academy on September 20, 2013.

- that **Carol Herbert** be appointed President-elect (2013-2015)
- that **Sally Thorne** be appointed as Secretary (2013-2015)
- that Paul Allison and Wayne Hindmarsh be appointed as Health Discipline Directors (2013-2016)
- that Louise Potvin be appointed as Director at Large (2013-2015)

Carried.

MOTION: Catharine Whiteside and Martin Schechter

That, in addition to the new Officers elected, the new President (elected in 2011) and Past President, the following proposed slate of Officers be approved and adopted by the Academy on September 20, 2013.

Carried.

CAHS Officers September 2013 to September 2014

Executive

Position	Name	Institution	Discipline	Term
President	John Cairns	University of British Columbia	Medicine	2013-2015
Past President Chair, Governance and Nominating Committee	Thomas Marrie	Dalhousie University	Medicine	2013-2015
President-Elect Chair, Fellowship Committee	Carol Herbert	Western University	Medicine	2013-2015
Secretary	Sally Thorne	University of British Columbia	Nursing	2013-2015
Treasurer	Jay Kalra	University of Saskatchewan	Medicine	2012-2014

Directors

Position	Name	Institution	Discipline	Term
Discipline Director	Paul Allison	McGill University	Dentistry	2013-2016
Discipline Director	Alistair Cribb	University of Calgary	Veterinary Sciences	2012-2015
Discipline Director	Greta Cummings	University of Alberta	Nursing	2002-2015
Discipline Director	Janice Eng	University of British Columbia	Rehabilitation Sciences	2011-2014
Discipline Director	Cy Frank	University of Calgary	Medicine	2011-2014
Discipline Director	Wayne Hindmarsh	University of Toronto	Pharmacy	2013-2016
Director at Large	David Goltzman	McGill University	Medicine	2012-2014
Director at Large	Louise Potvin	University of Montreal	Social and Preventive Medicine	2013-2015

Ex Officio

Position	Name	Institution	Discipline	Term
Assessment	Paul Hebert	University of Montreal	Medicine	2013-2015
Committee				
Chair				
Foreign	Peter Singer	University of Toronto	Medicine	2013-2015
Secretary				

MOTION: DALE DAUPHINEE AND JAY KALRA

That Dr. Linda Rabeneck be nominated from the floor to join the 2013-2014 Board of Directors.

Carried.

B. SPECIAL RESOLUTION

Motion: Catharine Whiteside and Jean Gray

That the following special resolution be approved by the voting members of the Canadian Academy of Health Sciences:

Carried.

SPECIAL RESOLUTIONS OF THE MEMBERS OF CANADIAN ACADEMY OF HEALTH SCIENCES/ACADÉMIE CANADIENNE DES SCIENCES DE LA SANTÉ (the "Corporation")

Continuing the Corporation under the provisions of the *Canada Not-for-Profit Corporations Act* ("CNCA") and authorizing the Directors to apply for a Certificate of Continuance.

WHEREAS the Corporation was incorporated under Part II of the *Canada Corporations Act* by Letters Patent dated the 17th day of December, 2004;

AND WHEREAS those Letters Patent were amended by Supplementary Letters Patent dated the 22nd day of February, 2005;

AND WHEREAS it is considered to be in the best interests of the Corporation that it be continued under the CNCA pursuant to section 297.

BE IT RESOLVED AS A SPECIAL RESOLUTION THAT:

- 1. The Directors of the Corporation are hereby authorized and directed to make an application under section 297 of the CNCA to the Director for a Certificate of Continuance of the Corporation;
- 2. The Articles of Continuance (transition) of the Corporation, which have been submitted to this meeting and are annexed to these minutes as Schedule A, are hereby approved;
- 3. The General Operating By-law No.1 of the Corporation (as amended) is repealed and the new General Operating By-law No. 1, which has been submitted to this meeting and is annexed to these minutes as Schedule B, is approved and will be effective on the date that the corporation continues under the CNCA; and
- 4. Any one of the Officers and Directors of the Corporation is authorized to take all such actions and execute and deliver all such documentation, including the annexed Articles of Continuance (transition), the notice of registered office and of directors in the forms fixed by the Director, which are necessary or desirable for the implementation of this resolution.

The foregoing resolution has been approved by at least two-thirds (2/3) of the votes cast by the Organizational Members, Active Fellows, and Emeritus Fellows, each voting separately as a class.

ENACTED this 20th day of September, 2013.		
John Cairns, President	Sally Thorne, Secretary	

C NEW BY-LAWS REVISED TO COMPLY WITH LEGISLATION

French and English translations of the new bylaws were pre-circulated to the Fellows and provided in hard copy today. Dr Whiteside reviewed the new bylaws highlighting new features and providing the rationale including the removal on the cap on the number of Fellows in the Academy; the rights, discipline and termination of Fellows; importance of annual general meeting with respect to fiscal year end; quorum remains unchanged; the capacity to vote by electronic means and the understanding that if we do have a vote of corporate members any item approved will be brought to the attention of the full membership at the next AGM. It was noted that although we do not at this point have an Executive Director, the description of officers now includes provision for such a position. Should someone be appointed, this person shall be a non-voting ex officio member of the board; Changes to the standing committee include revisions to the terms of the Nominating Committee to be compliant with legislation. Operating policies relative to all CAHS standing committees will now be provided in a separate policy document that can be changed regularly as needed through motions at the Board.

Motion: Catharine Whiteside and Sally Thorne

That the new By-Laws revised to comply with legislation be approved and adopted by the Academy on September 20, 2013.

Carried.

Catharine Whiteside is commended on her exceptional leadership of this process.

3. TREASURER'S REPORT

Audited Statements for November 30, 2012 were precirculated and circulated at the meeting. The audit undertaken this year by Parker, Prins Lebano expresses the opinion that the financial statements present fairly in all material aspects, the financial position of the CAHS as at November 30 2012, and its financial performance and its cash flows for the year then ended, in accordance with Canadian generally accepted principles.

The Statement of Financial Position balance sheet indicates a consistent financial position. Net assets (unrestricted) are higher than in 2011 at \$136,525 (from \$98,335). The Statement of Operations shows a surplus of revenue over expenses of \$38,190 (from 15,367 in 2011). Revenues for the year are up significantly from \$355,238 in 2011 due to assessment activities to \$582,474. Expenses are at \$544,284 (up from 339,871 in 2011). Key highlights from the statement of operations —

- Lower membership revenues reflect fewer donations and an adjustment of doubtful accounts (failed Fellow renewals). Beginning in 2014 Membership dues will be collected much earlier in the year. The annual meeting continues to run in a deficit position but it did recover somewhat in 2012 to \$7,711 (from \$16,046 in 2011)
- Central operational expenses were significantly lower in 2012 to 38,184 (from 47,092 in 2011) as a result of the provision of services contracted with the CCA.
- Board of Director expenses are significantly lower in 2012 at \$10,128 due to a reduced number of face to face meetings and consequent travel costs.

Overall, 2012 has been a successful year for the CAHS. Our membership base of Fellows remains strong and we continue to expand our assessment activities.

Motion: Jay Kalra and John Cairns

That the Auditors' Report and Annual Financial Statements for the fiscal year ending November 30, 2012, be accepted as presented.

Carried.

2010 was the first year that Parker Prins Lebano, Chartered Accountants were appointed auditors of the CAHS and they have provided excellent service. Given the changes adopted by the membership to update our governance and ensure compliance with the Canada Not for Profit Corporations Act we will move the year end from November 30 to March 31 effective 2014. As a result we will incur a short year audit for the period December 1, 2013 to March 31, 2014.

Motion: Jay Kalra and Dale Dauphinee

That the accounting firm of Parker Prins Lebano, Chartered Accountants be appointed auditors for the fiscal year 2013 & 2014 and that the board of directors be empowered to fix the remuneration of the Auditors.

Carried.

Motion: Jay Kalra and Catharine Whiteside

That the fiscal year of the Canadian Academy of Health Sciences be officially changed to April 1 to March 31 effective 2014.

Carried.

Jay Kalra and Tom Bursey are recognized for their efforts to present a comprehensive and transparent budget.

Allison Hardisty and Tom Bursey are recognized for their ongoing support of the overall operations of the Academy.

4) REPORT FROM FELLOWSHIP COMMITTEE

We had an excellent Fellow selection process again this year. Each application was rated by two of the 16 members of the Selection Committee. On a 5-point rating scale, there were only five cases where there was a divergence of ratings ≥ 1.0 and all had a third review. 13:16 committee members were on the Fellow rating call on April 27. We had written reviews from the other three. The call took six hours and 20 minutes. We had 94 candidates (including 9 re-applications from prior years). The committee determined a number of possible cut points for admission to Fellowship. The final decision was made by the Board at its meeting on June 17, 2013. The final cut-off was a rating of 39.79 and above, which brought in 54 Fellows, 68% of those nominated, a similar percentage to that followed in the past two years.

Prior to the 2013 intake the makeup of CAHS Fellows was as follows:				
Total number of Fellows		447		
Membership Categories: Age				
<65 years	Fellow	274		
65-74 years	Senior Fellow	117		
>75 years	Emeritus	50		
n/a	Distinguished	5		
n/a	Honorary	1		
<u>Discipline</u>				
Medicine (2/3 clinicians)		359		
Nursing		29		
Pharmacy		14		
Rehabilitation		14		

Dontistry	6
Dentistry	ь
Veterinary Medicine	11
Other	14
French Language	
Laval	12
Sherbrooke	4
U Montreal	14
McGill	46

Some issues discussed at the Board meeting of June 17, 2013 and to be pursued during 2013-14 include:

- a. CVs tend to be stronger amongst the medicine nominees and they get the higher scores consequently. Do we want to alter that in any way?
- b. Do we have important gaps in expertise within CAHS?
- c. Should we address the issue of the five categories that we use to assign ratings (recognition, leadership, scholarly achievement, commitment to health sciences, distinct competencies)? They seem to work well and reflect the breadth we are looking for but it might be helpful for the board to revisit it.
- d. Review processes in regard to nomination and selection of French language nominees
- e. The IOM nomination and election process includes discipline specific quotas weighted to help manage the nominations each year. Should CAHS adopt this approach?

Allison Hardisty was recognized for expertly managing this complex process.

5) RECOGNITION OF BOARD CONTRIBUTIONS

Dale Dauphinee, Jocelyne Feine and Robert Sindelar were recognized for their outstanding contributions to the Board and the organization. Each has given a tremendous amount of volunteer time and expertise and the Academy is most grateful. Allison Hardisty was recognized for her continuing contributions to the overall operations of the organization.

6) Report from the Standing Committee on Assessments

A comprehensive report was circulated detailing the activities of the SCA along with a brief status report on ongoing assessments. New sections of the procedures manual were highlighted together with plans/proposals for improved infrastructure and communications strategies. The SCA has accomplished a lot this past year having approved three new assessment reports, received two new reports for review and having revised our procedures and worked hard on improving the central support for the SCA and its panels. We also have broken new ground with new partners on publicizing our reports and promoting public discussion via initiating national conferences or fora, including what are the next steps, after the CAHS Reports are made public. It should be part of our work to monitor and assess the impact of our efforts – namely, what have been the consequences and impacts of our assessments.

Members of the SCA are recognized for their hard work and sage advice. Tracey McKinlay and Marija Curran who staff the CAHS desk at the CCA, are thanked for their timely and helpful support throughout 2013.

The work of the Standing Committee on Assessments is critically important to the CAHS and the Academy is indebted to Dale Dauphinee for his wisdom and leadership.

7. FUTURE DIRECTIONS

John Cairns, as the incoming President, reflected on the history and mission of the Academy and outlined steps that must be taken to fully capitalize on our growth. He reviewed each of the founding objectives of the organization identifying both successes and challenges to be overcome. He spoke to assessment activities undertaken and planned and he highlighted the need to meaningfully engage the Fellows in the work of the

Academy, promote the brand of the CAHS, identify effective communications strategies and improve infrastructure support for our assessments. He spoke to a desire to see increased local activities between meetings, the development of inter-disciplinary interest groups and enhanced communications.

NEXT ANNUAL MEETING

Thursday & Friday, September 18 & 19, 2014 Chateau Laurier, Ottawa

2014 REPORT OF THE GOVERNANCE AND NOMINATING COMMITTEE

Proposed Election of CAHS Officers September 2014 to September 2015

For the 2014 CAHS AGM, the Governance and Nominating Committee (Greta Cummings, Janice Eng, Cy Frank, Jocelyne Feine, Carol Herbert, Robert Sindelar, Tom Marrie [Chair]) recommend the following actions as proposed in the following motion.

- that **Kim Raine** be appointed Treasurer (2014-2016)
- that **Dina Brooks** be appointed Discipline Director, Rehabilitation Sciences (2014-2017)
- that **Linda Rabeneck** be appointed as Discipline Director, Medicine (2014-2017)
- that **Jane Green** be appointed as Director at Large (2014-2016)

Motion: T Marrie

That the proposed new officers identified above be approved by the Academy for the terms indicated.

Motion: T Marrie

That the proposed slate of officers for 2014-2015 be approved by the Academy for the terms indicated.

Position	Name	Institution	Discipline	Term
President	John Cairns	University of British	Medicine	2013-2015
		Columbia		
Past President	Thomas Marrie	Dalhousie University	Medicine	2013-2015
Chair,				
Governance and				
Nominating				
Committee President-Elect	Carol Herbert	Western University	Medicine	2013-2015
Chair, Fellowship	Carol Herbert	western University	Medicine	2013-2013
Committee Committee				
Secretary	Sally Thorne	University of British	Nursing	2013-2015
Secretary	buny mome	Columbia	Traising	2013 2013
Treasurer	Kim Raine	University of Alberta	Medicine	2014-2016
	D	ISCIPLINE DIRECTOR – 3 YEA	AR TERM	
Discipline	Paul Allison	McGill University	Dentistry	2013-2016
Director			-	
Discipline	Alistair Cribb	University of Calgary	Veterinary Sciences	2012-2015
Director				
Discipline	Greta Cummings	University of Alberta	Nursing	2012-2015
Director	D: D 1		D 1 1 111	20112015
Discipline	Dina Brooks	University of Toronto	Rehabilitation Sciences	2014-2017
Director	I ' 1. D.1 1	III.	Matrica	2014 2015
Discipline Discipline	Linda Rabeneck	University of Toronto	Medicine	2014-2017
Director Discipline	Wayne	University of Toronto	Pharmacy	2013-2016
Director	Hindmarsh	Chiversity of Toronto	Filatiliacy	2013-2010
Director		DIRECTOR AT LARGE – 2 YEA	R TERM	
Director at Large	Jane Green	Memorial University	Medicine	2014-2016
Director at Large	Louise Potvin	University of Montreal	Social and Preventive	2013-2015
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	Nomi	NATION FROM THE FLOOR –	1 YEAR TERM	
Nomination from the Floor				
		Ex Officio		
Assessment Committee Chair	Jean Gray	Dalhousie University	Medicine	2014-2016
Committee Chair				

BIOGRAPHIES

- *Dr. Dina Brooks*: Recognized internationally as a leader in cardiorespiratory rehabilitation, Dr. Dina Brooks is the Canada Research Chair in Rehabilitation for Chronic Obstructive Pulmonary Disease. She has received many honours, from the Enid Graham Award (highest honour given to a Canadian Physiotherapist) and the Meritorious Service Award of the Lung Association to the Queen's Diamond Jubilee Medal. She is Scientific Editor of Physiotherapy Canada, a member of the CIHR Advisory Board of the Institute of Circulatory and Respiratory Health, and co-chair of the Canadian Respiratory Conference. Her innovative research has led to significant improvement in patient care and deepened our understanding of the basic mechanisms of respiratory disease.
- Dr. Jane Green has been at the fore-front of genetic research of hereditary cancers and hereditary eye diseases for 35 years. Her studies led to the discovery of novel genes in Newfoundland and Labrador families and a new understanding of pathways to development of cancer and blindness. In 1993, her research was key to identifying a major colon cancer gene and to the provision of genetic testing. Green pioneered the development of screening programs for earlier and more successful treatment of hereditary tumours. Her work has saved lives and profoundly improved health and quality of life for hundreds of Newfoundlanders.
- Dr. Linda Rabeneck is Vice President, Prevention and Cancer Control at Cancer Care Ontario. She is also a Professor of Medicine and Professor, Dalla Lana School of Public Health, at the University of Toronto and a Senior Scientist at the Institute for Clinical Evaluative Sciences in Toronto. In her current role, Dr. Rabeneck oversees Ontario's cancer screening programs. Dr. Rabeneck played a leadership role in launching ColonCancerCheck, Canada's first province-wide colorectal cancer screening program. She leads an active research program focusing on the quality and effectiveness of colorectal cancer screening. Dr. Rabeneck received her medical degree from the University of British Columbia. She completed post-graduate training in internal medicine and gastroenterology at the University of British Columbia and the University of Toronto, respectively. She received her Master's degree in Public Health from Yale University.
- *Dr. Kim Raine*: Professor, Centre for Health Promotion Studies, School of Public Health, University of Alberta Dr. Kim Raine is Professor, Centre for Health Promotion Studies, School of Public Health, University of Alberta. Trained as adietitian, her PhD is in the social sciences. She has 25 years of experience in qualitative and participatory research in nutrition and health promotion. Most of her collaborative research studying innovative interventions for promoting health is engaged scholarship with government, NGOs and communities. As a creative leader of large population health promotion research projects, she has published over 100 papers and reports, and is regularly called upon to advise policy-makers, especially in obesity prevention. She currently holds one of 15 Applied Public Health Chairs funded by CIHR and the Heart &Stroke Foundation.

FINANCIAL STATEMENTS

MARCH 31, 2014

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Professional Corporation

INDEPENDENT AUDITORS' REPORT

To the Directors of the:

CANADIAN ACADEMY OF HEALTH SCIENCES -ACADÉMIE CANADIENNE DES SCIENCES DE LA SANTÉ

Report on the Financial Statements

We have audited the accompanying financial statements of the CANADIAN ACADEMY OF HEALTH SCIENCES - ACADÉMIE CANADIENNE DES SCIENCES DE LA SANTÉ, which comprise the Statement Of Financial Position as at March 31, 2014, and the Statements Of Changes In Net Assets, Operations, and Cash Flows for the 121-day period 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 auditor's 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 auditor considers internal control relevant to the organization'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 organization'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 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 the CANADIAN ACADEMY OF HEALTH SCIENCES - ACADÉMIE CANADIENNE DES SCIENCES DE LA SANTÉ as at March 31, 2014, and its financial performance and its cash flows for the 121-day period then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Parker Prins Lebano Chartered Accountants Professional Corporation Authorized to practice public accounting by the Chartered Professional Accountants of Ontario

Ottawa, Ontario April 30, 2014

STATEMENT OF FINANCIAL POSITION AS AT MARCH 31, 2014

ASSETS	2014	2013
CURRENT Cash (Note 4) Accounts receivable (Note 5) Prepaid expenses	\$ 385,625 67,066 \$ 452,691	\$ 439,011 36,395 1,035 \$ 476,441
LIABILITIES		
CURRENT Accounts payable and accrued liabilities (Note 6) Deferred contributions (Note 7)	\$ 26,497 281,746	\$ 77,450 246,855
	308,243	324,305
NET ASSETS (Note 8)	144,448	152,136
	<u>\$ 452,691</u>	\$ 476,441
Approved by the Board:		
Director		Director

STATEMENT OF CHANGES IN NET ASSETS FOR THE 121-DAY PERIOD THEN ENDED MARCH 31, 2014 (with comparative figures for the year ended November 30, 2013)

		2014		2013	
NET ASSETS					
BALANCE, BEGINNING OF YEAR	\$	152,136	\$	136,525	
EXCESS OF REVENUE OVER EXPENSE	2 from	(7,688)	-	15,611	
BALANCE, END OF YEAR	<u>\$</u>	144,448	\$	152,136	

STATEMENT OF OPERATIONS

FOR THE 121-DAY PERIOD ENDED MARCH 31, 2014

(with comparative figures for the year ended November 30, 2013)

REVENUE Future of Canada's Healthcare assessment project Oral Health assessment project CEW assessment project Annual general meeting and forum Memberships Miscellaneous income	\$	56,517 11,854 - 23,803 354	\$ 2013 101,226 274,572 63,735 77,710 1,328
EXPENSE Oral Health assessment project Future of Canada's Healthcare System assessment project CEW assessment project Annual general meeting and forum Central operations Governance Nominations Professional fees		92,528 9,178 56,517 13,386 9,174 	 2,273 101,226 236,204 73,182 45,044 20,681 3,256 14,390
Website (DEFICIENCY) EXCESS OF REVENUE OVER EXPENSE	<u>\$</u>	2,561 100,216 (7,688)	\$ 6,704 502,960 15,611

STATEMENT OF CASH FLOWS

FOR THE 121-DAY PERIOD ENDED MARCH 31, 2014

(with comparative figures for the year ended November 30, 2013)

	<u> Lie</u>	2014	-	2013
CASH FLOWS (USED FOR) FROM OPERATING ACTIVITIES Excess of revenue over expense	\$	(7,688)	\$	15,611
Net changes in non-cash items related to operations: Accounts receivable Prepaid expenses Deferred contributions Accounts payable and accrued liabilities	-	(30,671) 1,035 34,891 (50,953)	;	20,962 (554) 48,743 (6,968)
(DECREASE) INCREASE IN CASH		(53,386)		77,794
CASH, BEGINNING OF PERIOD		439,011	93	361,217
CASH, END OF PERIOD	\$	385,625	\$	439,011

NOTES TO THE FINANCIAL STATEMENTS MARCH 31, 2014

1. NATURE OF THE ORGANIZATION

The objective of the Canadian Academy of Health Sciences - Académie canadienne des sciences de la santé is to provide assessments of and advice on key issues relevant to the health of Canadians. The principal sources of revenue are derived from the annual dues charged to members and the contributions received to conduct expert panel assessments.

The Academy is a registered charity incorporated under the laws of Canada without share capital and is exempt from income taxes.

2. FISCAL YEAR END CHANGE

The Academy has changed its fiscal year end from November 30 to March 31. The comparative figures shown in these financial statements are reflected at November 30, 2013.

3. SIGNIFICANT ACCOUNTING POLICIES

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations, and reflect the following policies:

FINANCIAL INSTRUMENTS

The organization's financial instruments consist of cash, accounts receivable and accounts payable and accrued liabilities. The book values of these financial instruments approximate their fair values due to their short-term nature. It is management's opinion the the organization is not exposed to significant interest, currency or credit risk arising from these financial instruments.

REVENUE RECOGNITION

The Academy follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. Memberships and annual meeting contributions are recognized in the year in which they apply.

4. CASH

The Academy has three interest bearing accounts: an operating account, an account for restricted funds (such as funds to be held to conduct future assessment projects), and a third inactive account, that is maintained for potential future requirements and need for segregation of funds.

5. ACCOUNTS RECEIVABLE

Accounts receivable consist of \$37,279 of 2014 Fellows dues, a \$26,905 refund for GST/HST for the year ended November 30, 2013 and a \$2,882 refund for GST/HST for the 121-day period ended March 31, 2014

NOTES TO THE FINANCIAL STATEMENTS (continued) MARCH 31, 2014

6. ACCOUNTS PAYABLE AND ACCRUED LIABILITIES

Accounts payable consist of \$20,997 in trades payable and a \$5,500 accrual for the 2014 financial audit.

7. DEFERRED CONTRIBUTIONS

Deferred contributions consist of the following amounts:

		2014	-	2013
Future of Canada's Healthcare assessment project Sodium assessment project Membership dues	\$	110,369 99,969 71,408	\$	146,886 99,969
	<u>\$</u>	281,746	\$	246,855

8. CAPITAL MANAGEMENT

As a not-for-profit organization, the Academy's operations are reliant on revenues generated annually. The Academy has accumulated unrestricted net assets over its history. A portion of the accumulated net assets is retained as working capital which may be required from time to time due to timing of revenue generation. The remaining surplus is available for use of the Academy at the Board's discretion. The Academy's net assets are not restricted.

9. COMMITMENTS

On November 1, 2012, the Academy entered into a two year contract for administrative services. The payment will be \$26,000 for the first year and \$30,000 for the second year. On December 1, 2013, the Academy entered into a one year corporate services support contract in the amount of \$1,000 per month.

FINANCIAL STATEMENTS

NOVEMBER 30, 2013

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INDEPENDENT AUDITORS' REPORT

To the Directors of:

CANADIAN ACADEMY OF HEALTH SCIENCES -ACADÉMIE CANADIENNE DES SCIENCES DE LA SANTÉ

Report on the Financial Statements

We have audited the accompanying financial statements of the CANADIAN ACADEMY OF HEALTH SCIENCES - ACADÉMIE CANADIENNE DES SCIENCES DE LA SANTÉ, which comprise the Statement Of Financial Position as at November 30, 2013, and the Statements Of Changes In Net Assets, Operations, 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 auditor's 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 auditor considers internal control relevant to the organization'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 organization'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 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 the CANADIAN ACADEMY OF HEALTH SCIENCES - ACADEMIE CANADIENNE DES SCIENCES DE LA SANTÉ as at November 30, 2013, and its financial performance and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Prills Othis Laterto

Parker Prins Lebano Chartered Accountants Professional Corporation
Authorized to practice public accounting by the Chartered Professional Accountants of Ontario

Ottawa, Ontario December 20, 2013

STATEMENT OF FINANCIAL POSITION AS AT NOVEMBER 30, 2013

ASSETS	2013	2012
CURRENT Cash (Note 4) Accounts receivable (Note 5) Prepaid expenses	\$ 439,011 36,395 1,035	\$ 361,217 57,357 481
	<u>\$ 476,441</u>	\$ 419,055
LIABILITIES		
CURRENT Accounts payable and accrued liabilities (Note 6) Deferred contributions (Note 7)	\$ 77,450 <u>246,855</u> 324,305	\$ 84,418 198,112 282,530
NET ASSETS (Note 8)	152,136	136,525
Approved by the Board:	<u>\$ 476,441</u>	\$ 419,055
Director		Director

STATEMENT OF CHANGES IN NET ASSETS FOR THE YEAR ENDED NOVEMBER 30, 2013

NET ASSETS	 2013		2012
BALANCE, BEGINNING OF YEAR	\$ 136,525	\$	98,335
EXCESS OF REVENUE OVER EXPENSE	 15,611		38,190
BALANCE, END OF YEAR	\$ 152,136	<u>\$</u>	136,525

CANADIAN ACADEMY OF HEALTH SCIENCES -ACADÉMIE CANADIENNE DES SCIENCES DE LA SANTÉ STATEMENT OF OPERATIONS FOR THE YEAR ENDED NOVEMBER 30, 2013

DESCRIPTION OF THE PROPERTY OF		2013		2012
REVENUE		101.007	•	7. 000
Future of Canada's Healthcare assessment project	S	101,226	\$	71,888
Vitamin D assessment project		_		7,354
CEW assessment project		274,572		335,588
CIMVHR assessment project		-		49,924
Annual general meeting and forum		63,735		62,738
Memberships		80,764		54,529
Miscellaneous income		1,328		453
		521,625		582,474
EXPENSE				
Oral Health assessment project		2,273		-
Future of Canada's Healthcare System assessment project		101,226		71,888
Vitamin D assessment project		· -		6,893
CEW assessment project		236,204		290,162
CIMVHR assessment project				37,756
Annual general meeting and forum		73,182		70,449
Central operations		48,098		38,184
Governance		20,681		10,128
Nominations		3,256		2,842
Professional fees		14,390		11,414
Website		6,704		4,568
		506,014		544,284
EXCESS OF REVENUE OVER EXPENSE	<u>\$</u>	15,611	\$	38,190

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED NOVEMBER 30, 2013

2 7		2013	 2012
CASH FLOWS (USED FOR) FROM OPERATING ACTIVITIE	S		
Excess of revenue over expense	\$	15,611	\$ 38,190
Net changes in non-cash items related to operations:			
Accounts receivable		20,962	(31,079)
Prepaid expenses		(554)	(7)
Deferred contributions		48,743	198,112
Accounts payable and accrued liabilities	_	(6,968)	 <u>57,900</u>
INCREASE IN CASH		77,794	263,116
CASH, BEGINNING OF YEAR		361,217	 98,101
CASH, END OF YEAR	<u>\$</u>	439,011	\$ 361,217

NOTES TO THE FINANCIAL STATEMENTS NOVEMBER 30, 2013

1. ADOPTION OF CANADIAN ACCOUNTING STANDARDS FOR NOT-FOR-PROFIT ORGANIZATIONS

Effective December 1, 2012, the organization adopted the requirements of the Canadian Institute of Chartered Accountants (CICA) Handbook - Accounting Part III, electing to adopt the new accounting framework: Canadian accounting standards for not-for-profit organizations (ASNFPO). Organizations that adopt Part III of the Handbook also adopt the accounting standards for private enterprises (ASPE; Part II of the CICA Handbook) to the extent accounting standards are not specifically addressed in Part III. These are the organization's first financial statements prepared in accordance with ASNFPO which has been applied retrospectively. The accounting policies set out in the significant accounting policy note below have been applied in preparing these financial statements for the year ended November 30, 2012, and the comparative information presented in these financial statements for the year ended November 30, 2011. Management has determined the changes to the financial statements resulting from the adoption of ASNFPO are not material and thus have not presented an opening statement of financial position as at December 1 1, 2011 (the organization's date of transition).

The organization issued financial statements for the year ended November 30, 2012 using Canadian generally accepted accounting principles prescribed by CICA Handbook - Accounting Part V. The adoption of ASNFPO had no impact on the previously reported assets, liabilities, or net assets of the organization, and accordingly, no adjustments have been recorded in the comparative statements of financial position, changes in net assets, operations, and cash flows. Certain of the organization's disclosures included in these financial statements reflect the new disclosure requirements of ASNFPO.

2. NATURE OF THE ORGANIZATION

The objective of the Canadian Academy of Health Sciences - Académie canadienne des sciences de la santé is to provide assessments of and advice on key issues relevant to the health of Canadians. The principal sources of revenue are derived from the annual dues charged to members and the contributions received to conduct expert panel assessments.

The Academy is a registered charity incorporated under the laws of Canada without share capital and is exempt from income taxes.

3. SIGNIFICANT ACCOUNTING POLICIES

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations, and reflect the following policies:

FINANCIAL INSTRUMENTS

The organization's financial instruments consist of cash, accounts receivable and accounts payable and accrued liabilities. The book values of these financial instruments approximate their fair values due to their short-term nature. It is management's opinion the the organization is not exposed to significant interest, currency or credit risk arising from these financial instruments.

NOTES TO THE FINANCIAL STATEMENTS (continued) NOVEMBER 30, 2013

3. SIGNIFICANT ACCOUNTING POLICIES (continued)

REVENUE RECOGNITION

The Academy follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. Memberships and annual meeting contributions are recognized in the year in which they apply.

4. CASH

The Academy has three interest bearing accounts: an operating account, an account for restricted funds (such as funds to be held to conduct future assessment projects), and a third inactive account, that is maintained for potential future requirements and need for segregation of funds.

5. ACCOUNTS RECEIVABLE

Accounts receivable consist of \$1,990 of 2013 Fellows dues and \$7,500 fo AGM support funds that were not collected as of November 30, 2013 and a \$26,905 refund for GST/HST for the year ended November 30, 2013.

6. ACCOUNTS PAYABLE AND ACCRUED LIABILITIES

Accounts payable consist of \$16,906 in trades payable, \$33,686 for a contract payment for the Future of Canada's Healthcare System assessment, a \$20,358 payable for GST/HST for the year ended November 20, 2013, and a \$6,500 accrual for the 2013 financial audit.

7. DEFERRED CONTRIBUTIONS

Deferred contributions consist of the following amounts:

	2013	
Future of Canada's HealthCare assessment project Sodium assessment project	\$ 146,886 99,969	
	<u>\$ 246,855</u>	\$ 198,112

8. CAPITAL MANAGEMENT

As a not-for-profit organization, the Academy's operations are reliant on revenues generated annually. The Academy has accumulated unrestricted net assets over its history. A portion of the accumulated net assets is retained as working capital which may be required from time to time due to timing of revenue generation. The remaining surplus is available for use of the Academy at the Board's discretion. The Academy's net assets are not restricted.

9. COMMITMENTS

On November 1, 2012, the organization entered into a two year contract for administrative services. The payment will be \$26,000 for the first year and \$30,000 for the second year.



Annual General Meeting, September 19, 2014 FELLOWSHIP COMMITTEE REPORT

1. MEMBERSHIP

In keeping with the Academy's new bylaws which mandate three-year terms, renewable once, for Fellowship Committee members, the membership of the Fellowship Committee was refreshed for the 2014 annual nomination and adjudication processes. Five long serving members stepped down. We are most grateful to *Drs. Michel Bergeron, Ian Bowmer, Stuart MacLeod, Annette Majnemer and Sally Thorne* for their service to this Committee.

Drs. Dina Brooks, Davy Cheng, Lesley Degner, Yves De Koninck, Walter W Rosser, Bilkis Vissandjée and Kishor Wasan were successfully elected by the Board to serve on the Fellowship Committee for renewable terms of three years effective January 2014.

The 2014 membership slate included representation of all constituencies including basic sciences and public health/health services; a mix of established and new reviewers and increased francophone representation.

2014 Membership Slate							
Name	DISCIPLINE	SERVICE					
Davy Cheng	Medicine	2014-2016					
William (Bill) Fraser	Medicine	2013-2015					
Carol Herbert (Chair)	Medicine	2014-2015					
Karen Mann	Medicine	2009-2014					
Louise Potvin	Medicine	2013-2015					
Rick Riopelle	Medicine	2013-2015					
Walter W Rosser	Medicine	2014-2016					
Yves De Koninck	Medicine Basic Sciences	2013-2015					
Andrea Baumann	Nursing	2013-2015					
Anita Molzahn	Nursing	2010-2014					
Bilkis Vissandjée	Nursing	2013-2015					
Chris McCulloch	Dentistry	2012-2014					
Robert Sindelar	Pharmacy	2010-2014					
Kishor Wasan	Pharmacy	2014-2016					
Dina Brooks	Rehabilitation	2014-2016					
Susan Harris	Rehabilitation	2011-2014					
John Fairbrother	Veterinary	2010-2014					
John Prescott	Veterinary	2010-2014					

2. PROCESS & OUTCOME

The request for nominations was released on January 5, 2014 with a deadline of Friday, March 21. Reviewer orientation teleconferences were held on March 25 and March 27, 2014. All 18 members of the committee actively participated in this year's process. Fifteen members participated in the May 3rd online discussion; the remainder provided written notes. The review process was led by Carol Herbert, supported by Allison Hardisty and file share and real-time voting technologies.

The committee reviewed 92 nominations this year which included 24 carried forward from the 2013 process (5-2012 + 19-2013) and 68 new nominations received this year. Nominees were found to be of an exceptionally high quality this year and we did not experience wide discrepancies between reviewer scores. Only four primary/secondary reviewer scores differed by 1.0+ and a third, independent, review was sought for these files. The Board reviewed the outcomes of the scoring process and determined the cut off for election at 4.2 and above bringing $\underline{50}$ (54.3%) new Fellows into the Academy this year.

Natural Breakpoint	Total	Medicine	Nursing	Pharmacy	Rehab. Sci	Dentistry	Veterinary Medicine	Public Health
4.2 and above	50 (54.3%)	44	2	0	2	0	1	1

2014 Timeframe

Nomination deadline: Friday, March 21

• Orientation teleconference: Tuesday March 25 & Thursday, March 27

• Assignments to reviewers: Sunday, March 30

Reviewer scores to be received: Friday, April 11

Assignments for additional review to reviewers: Saturday, April 12

Additional reviewer scores to be received: Friday, April 25

• FacilitatePro entry: Wednesday, April 30

Review meeting: 10:00 a.m. – 4:00 p.m. (EST) on Saturday, May 3

Prior to the 2014 intake the makeup of CAHS Fellows was as follows:

Total number o	f Fellows		500
Membership Ca	tegories:		
<u>Age</u>			
	<65 years	Fellow	296
	65-74 years	Senior Fellow	132
	>75 years	Emeritus	66
	n/a	Distinguished	5
	n/a	Honorary	1
Discipline			
	Medicine		406
	Nursing	clinical/non-	30
	Pharmacy	clinical	16
	Rehabilitation	unknown.	15
	Dentistry	Data not	7
	Veterinary Medicine	collected.	12
	Other		14

Following the 2014 selection decisions, the Committee considered a number of possible adjustments to the process, taking into consideration ideas that the Chair had brought forward at the June retreat, to be brought to the September Board meeting.

Report respectfully submitted by

Carol Herbert MD Chair

STANDING COMMITTEE ON ASSESSMENTS

2014 Report

- 1. Chair of the SCA At the 2013 CAHS meeting, Dr. Paul Hebert was appointed Chair of the SCA. However, later in the year, work commitments precluded his continuing in this role and in February, 2014, Dr. Jean Gray was invited to take on this role.
- 2. Assessments that were underway and have subsequently been released included:
 - Scopes of Practice co-chaired by Drs. Jeff Turnbull and Siobhan Nelson.
 - Oral Health of Vulnerable Populations chaired by Dr. Paul Allison
 - Drs. Cairns and Herbert handled the finalization of both of these reports and assisted with the
 dissemination. Dr. Allison organized a one-day dissemination strategy workshop in Montreal for the
 Oral Health report which was attended by Drs. Dale Dauphinee and Jean Gray from the SCA, Dr.
 Jocelyn Feine from the CAHS Communications Committee, Ms. Cate Meehan from the Canadian
 Council of Academies, Ms. Allison Hardisty from CAHS, and Drs. Jeff Turnbull and Siobhan Nelson
 representing the Scopes of Practice panel. Facilitation was provided by two expert communication
 strategists.
 - CAHS cosponsored a one-day forum on salt and cardiovascular disease as part of a larger forum sponsored by the World Heart Federation at McMaster University. A summary of the presentations is now available on the CAHS website, Dr. Matthew Stanbrook (Deputy Editor of the CMAJ) has covered the topic in two blogs on the CMAJ website, and a commentary co-authored by Drs. Stuart McLeod and John Cairns has been accepted for publication in the CMAJ.
- 3. A detailed questionnaire was distributed to all 11 previous chairs and co-chairs of CAHS assessment panels. Written responses were received from 7 and personal responses from 3. Concerns were raised by the chairs about the lack of process and infrastructure for CAHS assessments. A meeting of the SCA with most of the chairs will be held on the morning of Friday, Sept. 19 at the CAHS meeting to obtain further information and develop strategies for future assessments.
- 4. In response to the concerns raised by the panel chairs, the Procedures Manual developed by Dr. Dale Dauphinee and the SCA and adopted at the 2013 CAHS meeting has been distributed to all panel chairs for comment. Additionally, a half-time Program Director, Ms. Anne Gravel, has been hired to provide assistance and continuity to the assessment process. Ms. Gravel is fluently bilingual, has strong writing skills, and has worked as a policy analyst for the Canadian Association of Retired Persons (CARP) as well as for media and government contracts.
- 5. Assessments currently under consideration:
 - Academic recognition for team science submitted by Dr. Elizabeth Eisenhauer (Queens) and the Canadian Cancer Research Alliance. An American group has recently submitted a report to the AAMC on this topic; therefore, the SCA is considering the possibility of a "Casting in a Canadian Context" type of report after further focusing the question.
 - Assessment of monetary, fiscal, and management responsibilities related to practice education as
 organized by post secondary institutions and practice placements as provided by community
 organizations submitted by Dr. John Gilbert (UBC). Preliminary discussion of this proposal suggests
 that the question will need further refinement.