

Connect Inspire Educate

2018-2019 Annual Report

Mission, Vision, Values

Mission

Connect, inspire, and educate digital health professionals who are creating the future of health in Canada.

Vision

Catalyze the digital health community, incubate knowledge, and advocate for professional members and the industry.

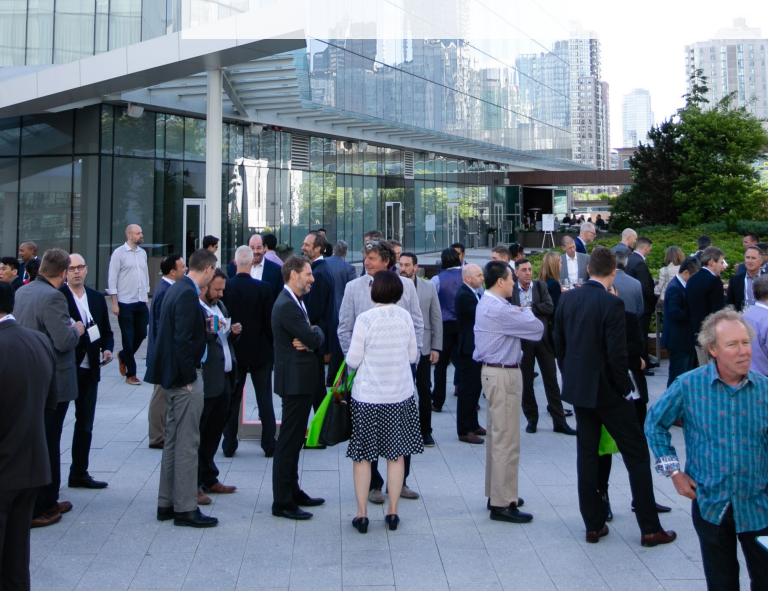
Values

While our mission and vision are evolving to reflect changes in our industry, our values remain the same. The association:

- Demonstrates leadership by introducing innovation that accelerates the transformation of health service delivery
- Values collaboration through sharing of health informatics and digital health knowledge and experience with others
- Recognizes the diversity of our membership
- Remains committed to continuous learning
- Is guided by professionalism, integrity and ethics
- Responds to and serves the needs of the members and the health system

National & Tradeshow - 30, 2010 OUVER, B

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Board of Directors



Shiran Isaacksz President and Board Chair



Angela Copeland Vice-President



Gillian Sweeney Secretary-Treasurer



Leon Salvail Past President



Dr. Raza Abidi Director



Hélène Clément Director



Keltie Jamieson Director



Shannon Malovec Director



Mary Sanagan Director



Ted Scott Director

Management Team



Mark Casselman Chief Executive Officer



Shannon Bott Executive Director, Operations

From the President

Supporting real connections in a digital world

My position as Digital Health Canada Board President gives me a bird's-eye view of the growth and activity taking place in the association right now. Digital Health Canada is currently experiencing membership growth and strong regional conference attendance in Vancouver (Ahead of the Curve), Calgary (Digital Health Canada/ANHIX Conference), and Toronto (UpOnDIGITAL Update on Ontario Digital Health). We have a new association partner – Hacking Health – and new member chapters in Atlantic Canada and British Columbia, with more to come.

e-Health is growing, too. Exhibit space at this year's e-Health Conference and Tradeshow sold out quickly, and a number of new sponsors from a wide variety of sectors jumped on board early. Nomination submissions for the Canadian Health Informatics (CHIA) Awawrds broke records, and the robust conference program is the result of a higher-than-ever number of digital health professionals submitting abstracts for consideration. I am already looking forward to next year, when we will be celebrating e-Health's 20th birthday in Vancouver.

Digital Health Canada strives to offer good value to members, and the development of new programs and services (Regional Chapters, the revamped Education Resource Guide coming this summer, and a new education delivery program, to name only a few) is a priority for the team that keeps the association running.

REASONS FOR GROWTH

I think we can attribute the association's growth to a few different factors:

- The professional landscape in which we operate is unique. Perhaps more than any other industry today (except maybe the auto industry – self-driving cars are in our future), digital health and healthcare are undergoing rapid change and growth. None of us can predict what the landscape will look like in five or ten years. Joining a professional association is just a smart way to stay prepared in a world where change is constant and inevitable
- We strive to make real connections in a digital world. Connecting face-to-face with peers in other regions can be hampered by time constraints and travel budgets, but it's important that we learn from professionals facing similar innovation challenges and build on each other's successes as we work toward improving healthcare for all Canadians.
 Digital Health Canada is introducing Regional Chapters (Atlantic Canada and BC to start) and adding more local events to nurture strong professional networks across Canada.

Digital Health Canada has reinvented itself more than once in the last 40+ years and will continue to seek out programs that provide value to members throughout the 2019-2020 membership year. Like our members, Digital Health Canada is poised for growth and willing to innovate in the face of change.

Here's to a great 2019-2020 Membership Year,

Shiran Isaacksz

President and Board Chair

Board Development Committee Report

Meet your 2019-2020 Digital Health Canada Board

As Chair of the Board Development Committee (BDC), it is my pleasure to introduce the new Directors on the 2019 - 2020 Digital Health Canada Board.

This year we had four open Board positions with 17 candidates standing for election. I would like to extend a sincere thank-you and hearty congratulations to all who ran for a position, as well as the members who nominated them. Thank you also to those of you who took the time to consider the slate of candidates and cast your vote. I am pleased to report that we had 455 members voting this year.

Our committee had three volunteers act as scrutineers this year: Linda Blair, Elizabeth Keller, and Glenn Short. The scrutineers tested the election platform and were comfortable with the system and the results.

The BDC conducted its business by teleconferences and emails between January and April 2019. The committee confirms that the following guidelines were met.

- 1. Call for Nominations was open to all Digital Health Canada members.
- 2. Election open and close dates were publicized in advance of the election.
- 3. All candidates had their applications posted on the Digital Health Canada website.
- 4. The nomination and election process was clearly defined and posted on the Digital Health Canada site.
- 5. The BDC had access to the official results in order to ratify the election.

6. All nominees were contact by phone or via email after the election was ratified, and told whether they were elected or not.

I am pleased to report that you, the Digital Health Canada members, elected **Karla Avery**, **Dr. Jonathan Choy, Angela Copeland** and **Shiran Isaacksz**. These individuals will officially assume their duties with the 2019 - 2020 Board immediately following the Annual General Meeting, taking place May 27, 2019 in Toronto in conjunction with the e-Health 2019 Conference. Congratulations and welcome!

MEET YOUR 2019 – 2020 DIGITAL HEALTH CANADA BOARD

- Shiran Isaacksz, President
- · Leon Salvail, Past-President (ex-officio)
- Dr. Syed Sibte Raza Abidi
- Karla Avery
- Dr. Jonathan Choy
- Hélène Clément
- Angela Copeland
- Keltie Jamieson
- Shannon Malovec
- Mary Sanagan

On a personal note, I would like to thank Linda Blair, Elizabeth Keller and Glenn Short for their assistance on the Board Development Committee. Thanks also to Shannon Bott and her team at the National Office who oversaw the election process.

Respectively submitted,

Leon Salvail

Chair, Board Development Committee

Secretary-Treasurer's Report

Digital Health Canada had an active and successful year!

Digital Health Canada had an active and successful year! We were building momentum in all areas and programs and ended the year with very good results. The Audited Financial Statements are available for member review on pages 7 – 17 and reflect the fiscal year that just concluded.

Digital Health Canada realized a profit of \$19,511. Overall revenues were up \$147,434. Membership revenues were up 6.5% ending the year with a record 2833 members and conferences and events revenues were up 16.8% representing a profitable eHealth 2018 and increased attendance at all events through the year. Digital Health Canada continued to find ways to manage expenses.

The Balance Sheet remains strong with Members' Equity of \$379,570 as of March 31, 2019. This includes both reserved and unreserved operating funds. The Steven Huesing Scholarship Fund ended the year with \$16,483 and is a separate protected component of the Members' Equity.

The Finance and Audit (F&A) Committee is an integral part of Digital Health Canada, overseeing the audit process, the development of the Digital Health Canada annual budget and any large expenditures. The F&A Committee was comprised of three Board members and one additional member-at-large, who worked with the CEO and Executive Director, Operations to oversee the financial management and financial accountability of the association. This committee is chaired by the Secretary-Treasurer. I extend my thanks to **Keltie Jamieson, Mary Sanagan** and **Michael Whitt** for their participation on this committee.

OVERVIEW OF 2019 - 2020 BUDGET

The Board has taken into account the results of the past year in setting a budget for 2019-2020. Our future stability and growth will come from investing appropriately in our programs to provide value to members. This includes continued support of our current members and member experience and continued membership growth; the credential program and related training and education, managing the product lifecycle of our thought leadership products, delivering value through our e-Health Conference and events, and developing new valued products and services for our members and stakeholders.

The Board has approved a budget for 2019 – 2020, with total revenues of approximately \$1.48 million and total expenditures at approximately \$1.49 million. Digital Health Canada is projecting a shortfall of just over \$4,000 for the year. The Finance and Audit Committee and Board have also approved an additional \$67,500 in capital investment in innovations from retained earnings. The capital investment will focus on innovations around IT including a updating the Digital Health Canada digital platform, online education, virtual offerings and membership database.

Respectively submitted,

Gillian Sweeney Secretary-Treasurer

From the CEO

We are closing out a successful 2018-19 membership year with strong momentum going into 2019-2020. Digital Health Canada delivered impact with members and the industry in 2018-19 - thanks to the efforts of our members, volunteers, staff team, board of directors, and partners.

The past year was particularly noteworthy given that this was our first full year operating under the name Digital Health Canada (since modernizing our brand in Q3 of 2017-18). Our members and volunteers set out daily to build the future of health in Canada with passion, creativity, compassion, and innovation. It is our mission to connect, inspire, and educate Canadian professionals and empower their efforts to deliver better health in a digital world. Thank you to our members – you are a constant source of inspiration and positive energy driving our association forward.

Thank you to the board for your leadership and support over the past year. Your leadership has been instrumental in so many areas including the launch of our first two regional chapters (Atlantic Canada and British Columbia) and the initiation of our 2020-2023 strategic planning work. You are outstanding champions for our association, our members, and our industry.

KEY HIGHLIGHTS

Key highlights that you'll note in the presentation of our year-end Operations Report include:

• Membership growth: overall membership is at 2,833 marking a 13% increase over last year

Celebrating success in 2018-19

(2,501) and a 29% increase since we launched the 2017-2020 Strategic Plan two years ago. Our current membership body is our largest and most diverse in terms of member organization type, roles, and segments in organization history;

- Member impact & engagement: CHIEF Executive Forum membership surpassed 150 individual members in 2018-19; Communities of Action engagement more than doubled this year with 199 volunteers active in developing thought leadership resources (250+ resource downloads) to share with peers across Canada; 150+ students participating in online, ondemand, and custom education programs, with 21 faculty volunteers engaged; 30 webinars delivered to 40-75 attendees through 2018-19; 750+ members attended regional events and meetups in 2018-19.
- Digital Health Canada Team: our team has grown stronger through 2018-19 through experience, team workshops, and a commitment to continuous learning and improvement. It is a pleasure to work with colleagues that are passionate about delivering value to our membership and the industry – Amanda, Eileen, Jenny, Shanthini, Vanessa, and Shannon. Our team is set to grow in 2019-2020 with net new roles posted this summer.
- Strong financial position: the balance sheet is healthy with a strong reserve fund. Per board recommendations, an investment of \$67,500 on new capital projects to deliver innovative infrastructure for members has been included in 2019-2020 budget.

MONITORING ENVIRONMENTAL SHIFTS

In 2018-19 we delivered impact to our stakeholders via opportunities resulting from our modernized brand, growing membership body, and expanded events and programs. However, management and board continue to monitor subtle yet significant shifts that may affect long-term health and member impact of the association, including:

- increasing competition for attention in events, content, and networking – the field is getting crowded;
- digital health and health informatics not seen as a specialization by some – the field is broadening quickly as many players move into health;
- some public sector care delivery organizations and governments implementing change and transformation agendas may narrow focus and resources in the near-term, and can have unintended consequences on networking, knowledgesharing, and education programs.

Our current strategy has the Association well positioned to deal with opportunities and challenges and deliver value to members. As we move forward with the 2020-2023 strategic plan, it will be important to challenge our current thinking and underlying assumptions to explore future threats and opportunities for Digital Health Canada. Over the next four months we will capture information, insights, and ideas from across our diverse membership and stakeholder groups via online membership survey, member feedback forums, and strategic planning facilitated discussions.

BUILDING ON OUR MOMENTUM FOR CONTINUOUS IMPROVEMENT IN 2 019-2020 AND BEYOND

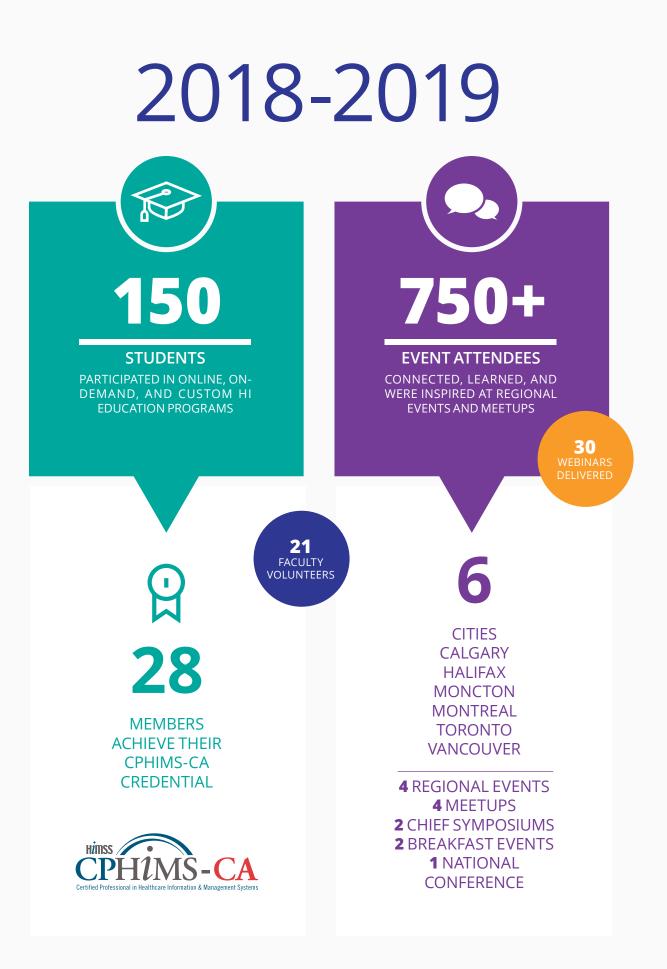
Our team has developed a strong plan and budget for operations in 2019-2020 that will build on our current momentum and deliver impact in this third and final year of our 2019-2020 strategic plan. We will drive further innovation to members via the "Implement Digital Business Platform" element of our Strategic Plan, including: online education platform and certificate program, digital content and podcasts, new member management software, and virtual event capability.

I am looking forward to an excellent year ahead with you! I'd like to thank you for your passion and commitment to our profession in 2018-19. As a member of Digital Health Canada, you are building the future of health in our digital world. Thank you for your continued effort to connect, inspire, and educate your peers across Canada.

Kind regards,

Mark Casselman Chief Executive Officer





Independent Auditors' Report

To the Members of **Digital Health Canada** Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of Digital Health Canada, which comprise the statement of financial position as at March 31, 2019, and the statements of operations, changes in net assets and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Digital Health Canada as at March 31, 2019, 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.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of Digital Health Canada in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

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

Management is responsible for the preparation and fair presentation of 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.

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

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

KRIENS~LAROSE, LLP

Chartered Professional Accountants Licensed Public Accountants

Financials

Statement of Financial Position

as at March 31, 2019

Current Assets	2019	2018
Cash	\$ 171,447	\$ 153,519
Investments (NOTE 2)	376,824	145,752
Accounts receivable	45,469	196,884
Prepaid expenses - conference	32,500	33,250
Prepaid expenses - other	11,894	12,310
	\$ 638,134	\$ 541,715
Current Liabilities	2019	2018
Accounts payable and accrued liabilities	\$ 138,588	\$ 76,628
Government remittances payable	2,270	13,137
Deferred revenue (NOTE 3)	101,223	76,898
	\$ 242,081	\$ 166,663
Net Assets	2019	2018
Unrestricted net assets	\$ 379,570	\$ 360,059
Scholarship Fund (NOTE 4)	16,483	14,993
	\$ 396,053	\$ 375,052
	\$ 638,134	\$ 541,715

Statement of Changes in Net Assets

for the year ended March 31, 2019

Current Assets	restricted let Assets	Sch	olarship Fund	2019 Total	2018 Total
Balance, beginning of year	\$ 360,059	\$	14,993	\$ 375,052	\$ 363,922
Excess (deficiency) of revenues over expenses for the year	19,511		_	19,511	10,626
Funds received	_		1,490	1,490	504
Balance, end of year	\$ 379,570	\$	16,483	\$ 395,053	\$ 375,052

Statement of Cash Flows

for the year ended March 31, 2019

CASH WAS PROVIDED BY (USED IN):				
OPERATING ACTIVITIES		2019		2018
Cash receipts from Conference and Events	\$	550,560	\$	471,201
Cash receipts from Membership Services		694,855		503,774
Cash receipts from Training and Education		125,721		84,871
Cash receipts from Thought Leadership		49,782		49,453
Scholarship Fund		1,490		504
Cash paid to suppliers and employees	(1,173,408)		(984,758)
Change in cash and equivalents		249,000		125,045
Cash and equivalents, beginning of year		299,271		174,226
Cash and equivalents, end of year		548,271		299,271
Cash and equivalents consist of the following:				
Cash		171,447		153,519
Investments		376,824		145,752
	\$	548,271	\$	299,271

Statement of Operations

for the year ended March 31, 2019

Revenues	2019	2018
Conference and Events (NOTE 5)	\$ 550,560	\$ 471,201
Membership Services	519,115	492,219
Training and Education	125,721	84,871
Thought Leadership	49,782	49,453
	\$ 1,245,178	\$ 1,097,744
Expenses	2019	2018
Membership Services	\$ 493,248	\$ 464,683
Conference and Events	398,285	317,906
Training and Education	226,337	216,071
Thought Leadership	107,797	84,568
Corporate Services	—	3,890
	\$ 1,225,667	\$ 1,087,118
DEFICIENCY (EXCESS) OF REVENUES OVER		
EXPENSES FOR THE YEAR	19,511	10,626

Notes to the Financial Statements

for the year ended March 31, 2019

PURPOSE OF THE ORGANIZATION

Digital Health Canada, previously known as COACH: Canada's Health Informatics Association, was incorporated on October 25, 1976 as a not for profit organization without share capital under the Canada Not-for-profit Corporations Act. The mission of Digital Health Canada (the 'Organization') is to promote understanding and adoption of health informatics within the Canadian health system through professional development, advocacy and a strong and diverse membership. The Organization is a not-for-profit organization under section 149(1) of the Income Tax Act (Canada) and as such, is exempt from the payment of corporate income taxes.

1. SIGNIFICANT ACCOUNTING POLICIES.

The financial statements were prepared in accordance with Canadian accounting standards for not-for-profit organizations in Part III of the CPA Handbook and include the following significant accounting policies:

Financial Instruments

The Organization initially measures its financial assets and liabilities at fair value. The Organization subsequently measures all its financial assets and financial liabilities at amortized cost. Changes in fair value are recognized in the statement of operations. Financial assets measured at amortized cost include cash and accounts receivable. Financial liabilities measured at amortized cost include accounts payable.

Use of Estimates

The preparation of financial statements in accordance with Canadian accounting standards for not-forprofit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the reporting date and the reported amounts of revenues and expenses for the reporting period. Actual results could differ from these estimates. These estimates are reviewed periodically and adjustments are made, as appropriate, in the statement of operations in the year they become known.

Cash and Cash Equivalents

Cash and cash equivalents consist of cash on hand and fixed income investments with maturities of less than 90 days.

Investments

Investments include all investments with original maturities greater than three months but less than one year. Investments are classified as held for trading and are recorded at market value.

Prepaid Expenses

Prepaid expenses are recorded for goods and services being received in the next fiscal year but paid for in the current fiscal year.

Revenue Recognition

The organization 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.

All revenues, with the exception of interest, are recognized as revenue when received or receivable, if the amount to be received can be reasonably estimated and collection is reasonably assured.

Amounts received in advance of the year of service are recorded as deferred revenue, and subsequently recorded as revenue in the year of service.

Interest is recognized as income when received.

The unrealized gain or loss on investments, being the difference between book value and fair value, is included in the statement of operations. Transaction costs are expensed as incurred.

Donated Property and Services

During the year voluntary services were provided. Because these services are not normally purchased by the Organization, and because of the difficulty of determining their fair value, donated services are not recognized in these statements.

2. INVESTMENTS

The investments consist of the following:

	2019	2018
Investment savings account; interest payable based on market rates	\$376,824	\$123,777
Guaranteed investment certificate; .9%, maturing March 4, 2019	_	21,975
	376,824	145,752

The Organization's investment policy states that 100% of the investments are to be invested in instruments backed by either the Federal or Provincial Governments or the Canadian Deposit Insurance Corporation.

3. DEFERRED REVENUE

Represents membership fees received in advance of the year of membership.

4. SCHOLARSHIP FUND

The purpose of the scholarship fund is to provide financial assistance to students to pursue postsecondary studies in health informatics. As at March 31, 2019, \$16,483 (2018: \$14,993) of the cash held by the Organization are committed to the Scholarship fund.

5. ANNUAL CONFERENCE

The annual conference revenue represents the organization's share of the net surplus from the conference. The total conference revenue in the March 31, 2019 fiscal year was \$1,344,014 (March 31, 2018 fiscal year: \$1,497,186) and total conference expenses in the March 31, 2019 fiscal year were \$805,798 (March 31, 2018 fiscal year: \$1,017,290).

The conference is hosted by three parties: Digital Health Canada, CIHI and Canada Health Infoway. There is a 1 year agreement in place. The revenue split for 2019 is Digital Health Canada 80%, CIHI 10% and Infoway 10%.

6. COMMITMENTS

The Organization is committed to a one-year contract with International Conference Services for management of the

annual conference for 2019. The annual obligation under the contract is \$197,000 for 2019. In addition, International Conference Services is paid a profit share of 20% of any surplus in excess of \$400,000.

7. FINANCIAL INSTRUMENTS

The Organization is exposed to various risks through its financial instruments. The following presents the Organization's risk exposures and concentrations at March 31, 2019.

Credit risk is the risk that one party to a financial instrument will fail to discharge an obligation and cause the other party to incur a financial loss. The Organization's credit risk would occur with their accounts receivable. Actual exposure to credit losses has been minimal in prior years. The allowance for doubtful accounts is \$0 (2018: \$0).

Liquidity Risk is the risk the Organization will encounter difficulties in meeting obligations associated with financial liabilities. The Organization is exposed to this risk mainly in respect of its accounts payable. The Organization expects to meet these obligations as they come due by generating sufficient cash flow from operations. There has been no change in the risk assessment from the prior period.

Market Risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risks: currency risk, interest rate risk and other price risk.

Currency Risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. The Organization is not exposed to foreign currency risk.

Interest Rate Risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The Organization has a low interest rate risk.

Other Price Risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices (other than those arising from interest rate risk or currency risk), whether those changes are caused by factors specific to the individual financial instrument or its issuer, or factors affecting all similar financial instruments traded in the market. The Organization is not exposed to other price risk.

Lifetime Members

Bill Childs
Trevor Cradduck^{CST} (2008–10)
Bill Dartnell (1996–98)
Dr. Robert Filler^{CST} (2000–02)
John Flint (1980–82)
Neil Gardner (2012–14)
Kathryn Hannah (1990–92)
Al Haskell* (1986–88)
Chris Helyar (1994–96)
John Hendriks (1988–90)
Melville Hodge
Dr. Max House^{CST}*

Steven Huesing* (1975–78) Dr. Penny Jennett^{CST} (2002–04) Pat Jeselon (1998–2000) Lydia Lee (2010–12) Shelagh Maloney (2006–08) John McKenna (1984–86) Linda Miller (2008–10) Judy Moran-Fuke (1982–84) Don Newsham (2004–06) Robb Palmer Laurie Poole^{CST} (2006–08) Denis Protti (1978–80) Gil Sampson (2002–04) John Schinbein Dr. Richard Scott^{CST} (2004–06) Brendan Seaton (2000–02) Colin Shanks David Shires Brian Shorter (1992–94) Dr. Mo Watanabe^{CST} (1998–2000) Robert Zuckerman*

The term of office for Past President is indicated in brackets
 Canadian Society for Telehealth
 Deceased

Congratulations new credential holders!

Donna Alfoja Sheyi Badmos Florence Beach Damian ClaydonPlatt Christiane Constant Darren Ditto Don Doiron Echo Enns Angela Ghiz Francisco Grajales Omer Gulzar Kevin Hick Kyungsuk Faith Ko Christina Tran Lam Matthew Leduc John Ling Vishal Malik Amita McNeil Alexander Mitchell Andrew Nemirovsky Tasleem Nimjee Sherman Quan Dan Rhodes Sarabjit Singh Cynthia Startup Kelly Steffens Sonia Stepa Laura White



Thank you!

THANK YOU to our volunteers. Your time and talents in the past year benefit the digital health profession as well as all Digital Health Canada members.

Board of Directors Faculty Education Committee Board Committee Advisory Committees Community of Action Working Groups CHIEF Executive Forum Working Groups Awards Adjudication Committee Election Scrutineers Event Plenary Committees Students Emerging Professionals THANK YOU to our meeting hosts. The following member organizations generally donated office space that made it possible for the Digital Health Canada National Office Staff to meet weekly throughout 2018-2019.





Connect Inspire Educate

Digital Health Canada connects, inspires, and educates the digital health professionals creating the future of health in Canada. Our members are a diverse community of accomplished, influential professionals working to make a difference in advancing healthcare through information and technology. Digital Health Canada fosters network growth and connection; brings together ideas from multiple segments for incubation and advocacy; supports members through professional development at the individual and organizational level; and advocates for the Canadian digital health industry.

For more information, visit **digitalhealthcanada.com**.



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