

Schedule A2: Population and Geography

2018-2019

Health Service Provider: Community Care Peterborough

Client Population

Community Care Peterborough is a multi-service organization providing a range of health & community support programs which promote health, independent living and quality of life. Our programs target seniors and adults with special needs including frailty, multiple care needs & chronic conditions, physical & developmental disabilities, cognitive and mental health issues, low income & at risk of losing their independence. Personal care, homemaking, home help & maintenance, transportation, meals (in home & community), security checks, care planning, volunteer visiting, access to primary care, falls prevention & exercise, respite care and caregiver support sustain and enhance independence, improve health, reduce social isolation & facilitate seamless transitions between primary care & other health/social services. The majority of our clients access more than one service. Needs differ from urban/rural perspective. Working closely with specific cultural communities such as Syrian refugees. No significant local francophone community serviced but agency has one bilingual employee to assist in situations where French is spoken. Also, collaborating with Indigenous leaders, providers, and clients of Hiawatha & Curve Lake. Specialized telephone service, Front Row to Go, FM systems available.

Geography Served

The Peterborough region has a total census population of approximately 135,000 residents, with 78,700 people residing in the City of Peterborough, 54,870 in the County Townships, and 1,365 in the two First Nations. Located 125 kms north east of Toronto, the Peterborough region has both urban & rural areas, and includes the County of Peterborough (made up of eight townships - Asphodel-Norwood, Douro-Dummer, Cavan Monaghan, Havelock-Belmont-Methuen, North Kawartha, Otonabee-South Monaghan, Selwyn and Trent Lakes), the City of Peterborough, and the Hiawatha & Curve Lake First Nations. People over the age of 65 account for approximately 20% of the Peterborough region's total population.

Community Support Services are offered from staffed offices and program locations in Apsley, Ennismore, Buckhorn, Havelock, Lakefield, Millbrook, Norwood & Peterborough (Keene area is covered as well). Each local office is staffed by one or two employees and a team of volunteers with the exception of the Administration & Peterborough service offices.

Office hours: 8:30 am to 4:00 pm Monday to Friday in Peterborough & Lakefield and 9:00 am to 3:00 pm in other local offices in the County.

While services are generally arranged for during office hours, services are provided outside office hours as well including transportation, friendly visiting and telephone security checks. An on-call system is available for weekends and outside office hours. Community Care makes every attempt to be accessible for clients, most offices are accessible with the exception of Havelock and Millbrook.

Schedule B1: Total LHIN Funding
2018-2019

Health Service Provider: Community Care Peterborough

LHIN Program Revenue & Expenses	Row #	Account: Financial (F) Reference OHS VERSION 10.0	2018-2019 Plan Target
REVENUE			
LHIN Global Base Allocation	1	F 11006	\$1,494,552
HBAM Funding (CCAC only)	2	F 11005	\$0
Quality-Based Procedures (CCAC only)	3	F 11004	\$0
MOHLTC Base Allocation	4	F 11010	\$0
MOHLTC Other funding envelopes	5	F 11014	\$0
LHIN One Time	6	F 11008	\$0
MOHLTC One Time	7	F 11012	\$0
Paymaster Flow Through	8	F 11019	\$0
Service Recipient Revenue	9	F 11050 to 11090	\$479,500
Subtotal Revenue LHIN/MOHLTC	10	Sum of Rows 1 to 9	\$1,974,052
Recoveries from External/Internal Sources	11	F 120*	\$0
Donations	12	F 140*	\$255,343
Other Funding Sources & Other Revenue	13	F 130* to 190*, 110*, [excl. F 11006, 11008, 11010, 11012, 11014, 11019, 11050 to 11090, 131*, 140*, 141*, 151*]	\$332,493
Subtotal Other Revenues	14	Sum of Rows 11 to 13	\$587,836
TOTAL REVENUE	FUND TYPE 2	15	Sum of Rows 10 and 14
			\$2,561,888
EXPENSES			
Compensation			
Salaries (Worked hours + Benefit hours cost)	17	F 31010, 31030, 31090, 35010, 35030, 35090	\$1,515,663
Benefit Contributions	18	F 31040 to 31085 , 35040 to 35085	\$254,632
Employee Future Benefit Compensation	19	F 305*	\$0
Physician Compensation	20	F 390*	\$0
Physician Assistant Compensation	21	F 390*	\$0
Nurse Practitioner Compensation	22	F 380*	\$0
Physiotherapist Compensation (Row 128)	23	F 350*	\$0
Chiropractor Compensation (Row 129)	24	F 390*	\$0
All Other Medical Staff Compensation	25	F 390*, [excl. F 39092]	\$0
Sessional Fees	26	F 39092	\$0
Service Costs			
Med/Surgical Supplies & Drugs	27	F 460*, 465*, 560*, 565*	\$0
Supplies & Sundry Expenses	28	F 4*, 5*, 6*, [excl. F 460*, 465*, 560*, 565*, 69596, 69571, 72000, 62800, 45100, 69700]	\$460,818
Community One Time Expense	29	F 69596	\$0
Equipment Expenses	30	F 7*, [excl. F 750*, 780*]	\$0
Amortization on Major Equip, Software License & Fees	31	F 750* , 780*	\$28,775
Contracted Out Expense	32	F 8*	\$126,000
Buildings & Grounds Expenses	33	F 9*, [excl. F 950*]	\$176,000
Building Amortization	34	F 9*	\$0
TOTAL EXPENSES	FUND TYPE 2	35	Sum of Rows 17 to 34
			\$2,561,888
NET SURPLUS/(DEFICIT) FROM OPERATIONS	36	Row 15 minus Row 35	\$0
Amortization - Grants/Donations Revenue	37	F 131*, 141* & 151*	\$0
SURPLUS/DEFICIT Incl. Amortization of Grants/Donations	38	Sum of Rows 36 to 37	\$0
FUND TYPE 3 - OTHER			
Total Revenue (Type 3)	39	F 1*	\$341,329
Total Expenses (Type 3)	40	F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$341,329
NET SURPLUS/(DEFICIT)	FUND TYPE 3	41	Row 39 minus Row 40
			\$0
FUND TYPE 1 - HOSPITAL			
Total Revenue (Type 1)	42	F 1*	\$0
Total Expenses (Type 1)	43	F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$0
NET SURPLUS/(DEFICIT)	FUND TYPE 1	44	Row 42 minus Row 43
			\$0
ALL FUND TYPES			
Total Revenue (All Funds)	45	Line 15 + line 39 + line 42	\$2,903,217
Total Expenses (All Funds)	46	Line 16 + line 40 + line 43	\$2,903,217
NET SURPLUS/(DEFICIT)	ALL FUND TYPES	47	Row 45 minus Row 46
			\$0
Total Admin Expenses Allocated to the TPBEs			
Undistributed Accounting Centres	48	82*	\$0
Plant Operations	49	72 1*	\$0
Volunteer Services	50	72 1*	\$0
Information Systems Support	51	72 1*	\$0
General Administration	52	72 1*	\$555,592
Other Administrative Expenses	53	72 1*	\$0
Admin & Support Services	54	72 1*	\$555,592
Management Clinical Services	55	72 5 05	\$0
Medical Resources	56	72 5 07	\$0
Total Admin & Undistributed Expenses	57	Sum of Rows 48, 54, 55-56 (included in Fund Type 2 expenses above)	\$555,592

Schedule B2: Clinical Activity- Summary

2018-2019

Health Service Provider: Community Care Peterborough

Service Category 2018-2019 Budget	OHRIS Framework Level 3	Full-time equivalents (FTE)	Visits F2F, Tel., In-Home, Cont. Out	Not Uniquely Identified Service Recipient Interactions	Hours of Care In-Home & Contracted Out	Inpatient/Resident Days	Individuals Served by Functional Centre	Attendance Days	Group Sessions (# of group sessions- not individuals)	Meal Delivered- Combined	Group Participant Attendances (Reg & Non-Reg)	Service Provider Interactions	Service Provider Group Interactions	Mental Health Sessions
CSS In-Home and Community Services (CSS IH COM)	72.5 82*	25.73	62,960	0	2,400	0	10,755	91,740	0	38,900	0	0	0	0

Schedule C: Reports

Community Support Services

2018-2019

Health Service Provider: Community Care Peterborough

Only those requirements listed below that relate to the programs and services that are funded by the LHIN will be applicable.

A list of reporting requirements and related submission dates is set out below. Unless otherwise indicated, the HSP is only required to provide information that is related to the funding that is provided under this Agreement. Reports that require full entity reporting are followed by an asterisk “*”.

OHRS/MIS Trial Balance Submission (through OHFS)	
2014-15	Due Dates (Must pass 3c Edits)
2014-15 Q1	<i>Not required 2014-15</i>
2014-15 Q2	October 31, 2014
2014-15 Q3	January 31, 2015
2014-15 Q4	May 30, 2015
2015-16	Due Dates (Must pass 3c Edits)
2015-16 Q1	<i>Not required 2015-16</i>
2015-16 Q2	October 31, 2015
2015-16 Q3	January 31, 2016
2015-16 Q4	May 31, 2016
2016-17	Due Dates (Must pass 3c Edits)
2016-17 Q1	<i>Not required 2016-17</i>
2016-17 Q2	October 31, 2016
2016-17 Q3	January 31, 2017
2016-17 Q4	May 31, 2017
2017-18	Due Dates (Must pass 3c Edits)
2017-18 Q1	<i>Not required 2017-18</i>
2017-18 Q2	October 31, 2017
2017-18 Q3	January 31, 2018
2017-18 Q4	May 31, 2018
2018-19	Due Dates (Must pass 3c Edits)
2018-19 Q1	<i>Not required 2017-18</i>
2018-19 Q2	October 31, 2018
2018-19 Q3	January 31, 2019
2018-19 Q4	May 31, 2019

Supplementary Reporting - Quarterly Report (through SRI)	
2014-15	Due five (5) business days following Trial Balance Submission Due Date
2014-15 Q2	November 7, 2014
2014-15 Q3	February 7, 2015
2014-15 Q4	June 7, 2015 – Supplementary Reporting Due
2015-16	Due five (5) business days following Trial Balance Submission Due Date
2015-16 Q2	November 7, 2015
2015-16 Q3	February 7, 2016
2015-16 Q4	June 7, 2016 – Supplementary Reporting Due
2016-17	Due five (5) business days following Trial Balance Submission Due Date
2016-17 Q2	November 7, 2016
2016-17 Q3	February 7, 2017
2016-17 Q4	June 7, 2017 – Supplementary Reporting Due

Schedule C: Reports

Community Support Services

2018-2019

Health Service Provider: Community Care Peterborough

2017-18	Due five (5) business days following Trial Balance Submission Due Date
2017-18 Q2	November 7, 2017
2017-18 Q3	February 7, 2018
2017-18 Q4	June 7, 2018 – Supplementary Reporting Due
2018-19	Due five (5) business days following Trial Balance Submission Due Date
2018-19 Q2	November 7, 2018
2018-19 Q3	February 7, 2019
2018-19 Q4	June 7, 2019 – Supplementary Reporting Due

Annual Reconciliation Report (ARR) through SRI and paper copy submission*

(All HSPs must submit both paper copy ARR submission, duly signed, to the Ministry and the respective LHIN where funding is provided; soft copy to be provided through SRI)

Fiscal Year	Due Date
2014-15	June 30, 2015
2015-16	June 30, 2016
2016-17	June 30, 2017
2017-18	June 30, 2018
2018-19	June 30, 2019

Board Approved Audited Financial Statements *

(All HSPs must submit paper copy Board Approved Audited Financial Statements, duly signed, to the Ministry and the respective LHIN where funding is provided.)

Fiscal Year	Due Date
2014-15	June 30, 2015
2015-16	June 30, 2016
2016-17	June 30, 2017
2017-18	June 30, 2018
2018-19	June 30, 2019

Declaration of Compliance

Fiscal Year	Due Date
2013-14	June 30, 2014
2014-15	June 30, 2015
2015-16	June 30, 2016
2016-17	June 30, 2017
2017-18	June 30, 2018
2018-19	June 30, 2019

Community Support Services – Other Reporting Requirements

Requirement	Due Date	
French Language Service Report	2014-15	April 30, 2015
	2015-16	April 30, 2016
	2016-17	April 30, 2017
	2017-18	April 30, 2018
	2018-19	April 30, 2019

Schedule D: Directives , Guidelines and Policies

Community Support Services

2018-2019

Health Service Provider: Community Care Peterborough

Only those requirements listed below that relate to the programs and services that are funded by the LHIN will be applicable.

• Personal Support Services Wage Enhancement Directive, 2014
• 2014 Addendum to Directive to LHINs: Personal Support Services Wage Enhancement
• 2015 Addendum to Directive to LHINs: Personal Support Services Wage Enhancement
• 2016 Addendum to Directive to LHINs: Personal Support Services Wage Enhancement
• Community Financial Policy, 2016
• Policy Guideline for CCAC and CSS Collaborative Home and Community-Based Care Coordination, 2014
• Policy Guideline Relating to the Delivery of Personal Support Services by CCACs and CSS Agencies, 2014
• Protocol for the Approval of Agencies under the Home Care and Community Services Act, 2012
• Assisted Living Services for High Risk Seniors Policy, 2011 (ALS-HRS)
• Community Support Services Complaints Policy (2004)
• Assisted Living Services in Supportive Housing Policy and Implementation Guidelines (1994)
• Attendant Outreach Service Policy Guidelines and Operational Standards (1996)
• Screening of Personal Support Workers (2003)
• Ontario Healthcare Reporting Standards – OHRS/MIS – most current version available to applicable year
• Guideline for Community Health Service Providers Audits and Reviews, August 2012

Schedule E1: Core Indicators

2018-2019

Health Service Provider: Community Care Peterborough

Performance Indicators	2018-2019 Target	Performance Standard
*Balanced Budget - Fund Type 2	\$0	>=0
Proportion of Budget Spent on Administration	21.7%	<=26%
**Percentage Total Margin	0.00%	>= 0%
Variance Forecast to Actual Expenditures	0.0%	< 5%
Variance Forecast to Actual Units of Service	0.0%	< 5%
Service Activity by Functional Centre	Refer to Schedule E2a	-
Number of Individuals Served	Refer to Schedule E2a	-
Alternate Level of Care (ALC) Rate	12.7%	<13.97%

Explanatory Indicators
Cost per Unit Service (by Functional Centre)
Cost per Individual Served (by Program/Service/Functional Centre)
Client Experience
Percentage of Alternate Level of Care (ALC) days (closed cases)

* Balanced Budget Fund Type 2: HSP's are required to submit a balanced budget

** No negative variance is accepted for Total Margin

Schedule E2a: Clinical Activity- Detail

2018-2019

Health Service Provider: Community Care Peterborough

OHRs Description & Functional Centre		2018-2019	
		Target	Performance Standard
* These values are provided for information purposes only. They are not Accountability Indicators.			
Administration and Support Services 72 1*			
Full-time equivalents (FTE)	72 1*	7.59	n/a
Total Cost for Functional Centre	72 1*	\$555,592	n/a
CSS IH - Service Arrangement/Coordination 72 5 82 05			
Full-time equivalents (FTE)	72 5 82 05	1.55	n/a
Visits	72 5 82 05	2,300	2070 - 2530
Individuals Served by Functional Centre	72 5 82 05	1,475	1328 - 1623
Total Cost for Functional Centre	72 5 82 05	\$93,818	n/a
CSS IH - Case Management 72 5 82 09			
Full-time equivalents (FTE)	72 5 82 09	3.60	n/a
Visits	72 5 82 09	8,100	7695 - 8505
Individuals Served by Functional Centre	72 5 82 09	1,650	1485 - 1815
Total Cost for Functional Centre	72 5 82 09	\$276,830	n/a
CSS IH - Meals Delivery 72 5 82 10			
Full-time equivalents (FTE)	72 5 82 10	3.85	n/a
Individuals Served by Functional Centre	72 5 82 10	900	765 - 1035
Meal Delivered-Combined	72 5 82 10	38,900	37344 - 40456
Total Cost for Functional Centre	72 5 82 10	\$520,328	n/a
CSS IH - Social and Congregate Dining 72 5 82 12			
Full-time equivalents (FTE)	72 5 82 12	4.38	n/a
Individuals Served by Functional Centre	72 5 82 12	3,420	3078 - 3762
Attendance Days	72 5 82 12	91,740	88988 - 94492
Total Cost for Functional Centre	72 5 82 12	\$265,891	n/a
CSS IH - Transportation - Client 72 5 82 14			
Full-time equivalents (FTE)	72 5 82 14	8.25	n/a
Visits	72 5 82 14	32,200	30912 - 33488
Individuals Served by Functional Centre	72 5 82 14	1,830	1647 - 2013
Total Cost for Functional Centre	72 5 82 14	\$578,557	n/a
CSS IH - Comb. PS/HM/Respite Services 72 5 82 35			
Full-time equivalents (FTE)	72 5 82 35	1.00	n/a
Hours of Care	72 5 82 35	2,400	2160 - 2640
Individuals Served by Functional Centre	72 5 82 35	600	510 - 690
Total Cost for Functional Centre	72 5 82 35	\$58,156	n/a
CSS IH - Emergency Response Support Services 72 5 82 55			
Full-time equivalents (FTE)	72 5 82 55	2.35	n/a
Visits	72 5 82 55	560	476 - 644
Individuals Served by Functional Centre	72 5 82 55	560	476 - 644
Total Cost for Functional Centre	72 5 82 55	\$151,178	n/a
CSS IH - Visiting - Social and Safety 72 5 82 60			
Full-time equivalents (FTE)	72 5 82 60	0.75	n/a
Visits	72 5 82 60	19,800	18810 - 20790
Individuals Served by Functional Centre	72 5 82 60	320	256 - 384

Schedule E2a: Clinical Activity- Detail

2018-2019

Health Service Provider: Community Care Peterborough

OHS Description & Functional Centre		2018-2019	
		Target	Performance Standard
* These values are provided for information purposes only. They are not Accountability Indicators.			
Total Cost for Functional Centre	72 5 82 60	\$61,538	n/a
ACTIVITY SUMMARY			
Total Full-Time Equivalentents for all F/C		33.32	n/a
Total Visits for all F/C		62,960	61071 - 64849
Total Hours of Care for all F/C		2,400	2160 - 2640
Total Individuals Served by Functional Centre for all F/C		10,755	10217 - 11293
Total Attendance Days for all F/C		91,740	88988 - 94492
Total Meals Delivered for all F/C		38,900	37344 - 40456
Total Cost for All F/C		\$2,561,888	n/a

Schedule E2d: CSS Sector Specific Indicators

2018-2019

Health Service Provider: Community Care Peterborough

Performance Indicators	2018-2019 Target	Performance Standard
No Performance Indicators	-	-

Explanatory Indicators
Persons waiting for service (by functional centre)

Schedule E3a Local: All 2018-2019

Health Service Provider: Community Care Peterborough

Cultural Sensitivity Obligation

- To better serve Francophone citizens, Indigenous peoples, and new Ontarians, the Central East LHIN supports its Health Service Providers (HSPs) in the advancement of the highest-quality Health care system which improves access to appropriate and culturally-safe care through Sub-regional planning and community engagement for any patient, regardless of race, ethnicity, culture or language capacity.
- HSPs will report to the Central East LHIN on the status and progress of culturally-safe training initiatives demonstrating commitment to this priority.

French Language Services Obligation

- Designated HSPs, will continue to provide health services to the public in French in accordance with the provisions of the French Language Service Act (FLSA) and work towards maintaining French Language Service (FLS) capacity.
- Identified HSPs will develop and implement an FLS plan, provide health services to the public in French in accordance with existing FLS capacity, and work towards improving FLS capacity for designation.
- Non-designated and non-identified HSPs, will develop and implement a plan to address the needs of its local Francophone community including the provision of information on local health services available in French.
- With respect to French Language Services, all HSPs will provide a mandatory report to the LHIN, in accordance with Section 22 of LHSIA. The report will outline how the HSP addresses the needs of its local Francophone community, and identify the capacity of the HSP to provide those services.

Indigenous Peoples* Obligation

- Together with the LHIN, HSPs will:
- Increase the number of Indigenous professionals working in the healthcare field;
 - Ensure the retention of Indigenous healthcare providers in Indigenous communities; and
 - Provide cultural competency training for all healthcare professionals.

In support of these obligations, HSPs will report to the Central East LHIN on programs and initiatives that demonstrate a commitment to this priority through completion of the LHIN's Cultural Safety monitoring template by March 31st each year.

*Indigenous Peoples include First Nations, Inuit, Metis and members of these communities living within any Sub-region of the Central East LHIN.

**Schedule E3a Local: All
2018-2019**

Health Service Provider: Community Care Peterborough

Health Link Communities Obligation

The HSP will support the Health Link approach to care by:

- Identifying complex vulnerable patients;
- Implementing and maintaining Coordinated Care Plans (CCPs) which:
 - o Are developed with the patient and caregiver;
 - o Involve two or more health care professionals, with one being from outside the HSP; and,
 - o Contain an action plan for one or more health concerns identified by the patient and/or caregiver.
- Ensuring patient transitions are coordinated and seamless throughout the health care system; and,
- Supports the work of the Coordinated Care Working Group of the Planning Table within the Sub-region.

Sub-region Planning Obligation

HSPs will support the Central East LHIN's Sub-region planning mandate by:

- Updating and maintaining their Healthline profiles;
- Identifying and tracking clients by Sub-region;
- Collaborating with the LHIN and Sub-region stakeholders to address health needs, identify gaps and implement strategies to improve patient experience and outcomes; and
- Engaging in Sub-region initiatives and activities as required.

Schedule F: Project Funding

2018-2019

Health Service Provider: Community Care Peterborough

Project Funding Agreement Template

Note: This project template is intended to be used to fund one-off projects or for the provision of services not ordinarily provided by the HSP. Whether or not the HSP provides the services directly or subcontracts the provision of the services to another provider, the HSP remains accountable for the funding that is provided by the LHIN.

THIS PROJECT FUNDING AGREEMENT (“PFA”) is effective as of [insert date] (the “Effective Date”) between:

XXX LOCAL HEALTH INTEGRATION NETWORK (the “LHIN”)

- and -

[Legal Name of the Health Service Provider] (the “HSP”)

WHEREAS the LHIN and the HSP entered into a service accountability agreement dated [insert date] (the “SAA”) for the provision of Services and now wish to set out the terms of pursuant to which the LHIN will fund the HSP for [insert brief description of project] (the “Project”);

NOW THEREFORE in consideration of their respective agreements set out below and subject to the terms of the SAA, the parties covenant and agree as follows:

1.0 Definitions. Unless otherwise specified in this PFA, capitalized words and phrases shall have the meaning set out in the SAA. When used in this PFA, the following words and phrases have the following meanings:

“**Project Funding**” means the funding for the Services;

“**Services**” mean the services described in Appendix A to this PFA; and

“**Term**” means the period of time from the Effective Date up to and including [insert project end date].

2.0 Relationship between the SAA and this PFA. This PFA is made subject to and hereby incorporates the terms of the SAA. On execution this PFA will be appended to the SAA as a Schedule.

3.0 The Services. The HSP agrees to provide the Services on the terms and conditions of this PFA including all of its Appendices and schedules.

4.0 Rates and Payment Process. Subject to the SAA, the Project Funding for the provision of the Services shall be as specified in Appendix A to this PFA.

Schedule F: Project Funding

2018-2019

Health Service Provider: Community Care Peterborough

Project Funding Agreement Template

5.0 Representatives for PFA.

(a) The HSP's Representative for purposes of this PFA shall be [insert name, telephone number, fax number and e-mail address.] The HSP agrees that the HSP's Representative has authority to legally bind the HSP.

(b) The LHIN's Representative for purposes of this PFA shall be: [insert name, telephone number, fax number and e-mail address.]

6.0 Additional Terms and Conditions. The following additional terms and conditions are applicable to this PFA.

(a) Notwithstanding any other provision in the SAA or this PFA, in the event the SAA is terminated or expires prior to the expiration or termination of this PFA, this PFA shall continue until it expires or is terminated in accordance with its terms.

(b) [insert any additional terms and conditions that are applicable to the Project]

IN WITNESS WHEREOF the parties hereto have executed this PFA as of the date first above written.

[insert name of HSP]

By:

[insert name and title]

[XX] Local Health Integration Network

By:

[insert name and title]

Schedule F: Project Funding

2018-2019

Health Service Provider: Community Care Peterborough

Project Funding Agreement Template

APPENDIX A: SERVICES

1. DESCRIPTION OF PROJECT
2. DESCRIPTION OF SERVICES
3. OUT OF SCOPE
4. DUE DATES
5. PERFORMANCE TARGETS
6. REPORTING
7. PROJECT ASSUMPTIONS
8. PROJECT FUNDING

8.1 The Project Funding for completion of this PFA is as follows:

8.2 Regardless of any other provision of this PFA, the Project Funding payable for the completion of the Services under this PFA is one-time finding and is not to exceed [X].

Schedule G: Declaration of Compliance

2018-2019

Health Service Provider: Community Care Peterborough

DECLARATION OF COMPLIANCE

Issued pursuant to the M-SAA effective April 1, 2014

To: The Board of Directors of the [insert name of LHIN] Local Health Integration Network (the "LHIN"). Attn: Board Chair.

From: The Board of Directors (the "Board") of the [insert name of HSP] (the "HSP")

Date: [insert date]

Re: April 1, 2017 –March 31, 2018 (the "Applicable Period")

Unless otherwise defined in this declaration, capitalized terms have the same meaning as set out in the M-SAA between the LHIN and the HSP effective April 1, 2014.

The Board has authorized me, by resolution dated [insert date], to declare to you as follows:

After making inquiries of the [insert name and position of person responsible for managing the HSP on a day to day basis, e.g. the Chief Executive Office or the Executive Director] and other appropriate officers of the HSP and subject to any exceptions identified on Appendix 1 to this Declaration of Compliance, to the best of the Board's knowledge and belief, the HSP has fulfilled, its obligations under the service accountability agreement (the "M-SAA") in effect during the Applicable Period.

Without limiting the generality of the foregoing, the HSP has complied with:

- (i) Article 4.8 of the M-SAA concerning applicable procurement practices;
- (ii) The *Local Health System Integration Act, 2006*; and
- (iii) The *Public Sector Compensation Restraint to Protect Public Services Act, 2010*.

[insert name of Chair], [insert title]