

H-SAA AMENDING AGREEMENT

THIS AMENDING AGREEMENT (the "Agreement") is made as of the 1st day of April, 2016

B E T W E E N:

NORTH EAST LOCAL HEALTH INTEGRATION NETWORK (the "LHIN")

AND

Temiskaming Hospital (the "Hospital")

WHEREAS the LHIN and the Hospital (together the "Parties") entered into a hospital service accountability agreement that took effect April 1, 2008 (the "H-SAA");

AND WHEREAS pursuant to various amending agreements the term of the H-SAA has been extended to March 31, 2016;

AND WHEREAS the LHIN and the Hospital have agreed to extend the H-SAA for a further six month period to permit the LHIN and the Hospital to continue to work toward a new multi-year hospital service accountability agreement;

NOW THEREFORE in consideration of mutual promises and agreements contained in this Agreement and other good and valuable consideration, the parties agree as follows:

1.0 Definitions. Except as otherwise defined in this Agreement, all terms shall have the meaning ascribed to them in the H-SAA. References in this Agreement to the H-SAA mean the H-SAA as amended and extended.

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Ontario

Local Health Integration
Network
Réseau local d'intégration
des services de santé

The Parties have executed this Agreement on the dates set out below.

NORTH EAST LOCAL HEALTH INTEGRATION NETWORK

Signed By:

Danielle Bélanger-Corbin, Chair, on May 4, 2016

And by:

Louise Paquette, Chief Executive Officer, on May 10, 2016

Temiskaming Hospital

Signed By:

John Roswell, Acting Chair, on March 30, 2016

I have authority to bind the HSP

And by:

Margaret Beatty, President & Chief Executive Officer, on March 30, 2016

I have authority to bind the HSP

Hospital Sector Accountability Agreement 2016-2017

Facility #: 888
 Hospital Name: Temiskaming Hospital
 Hospital Legal Name: Temiskaming Hospital

2016-2017 Schedule A Funding Allocation

	Volume	(4) Allocation
Section 2: HSRF - Quality-Based Procedures		
Unilateral Cataract Day Surgery	151	\$0
Retinal Disease	0	\$0
Inpatient Neonatal Jaundice (Hyperbilirubinemia)	4	\$0
Acute Inpatient Tonsillectomy	0	\$0
Acute Inpatient Chronic Obstructive Pulmonary Disease	46	\$0
Acute Inpatient Pneumonia	44	\$0
Bilateral Cataract Day Surgery	0	\$0
Shoulder Surgery – Osteoarthritis Cuff	0	\$0
Paediatric Asthma	0	\$0
Sickle Cell Anemia	0	\$0
Cardiac Devices	0	\$0
Cardiac Prevention Rehab in the Community	0	\$0
Neck and Lower Back Pain	0	\$0
Schizophrenia	0	\$0
Major Depression	0	\$0
Dementia	0	\$0
Corneal Transplants	0	\$0
C-Section	0	\$0
Hysterectomy	0	\$0
Sub-Total Quality-Based Procedure Funding	325	\$0
Section 3: Wait Time Strategy Services ("WTS")	(2) Base	(2) Incremental/One-Time
General Surgery	\$0	\$0
Pediatric Surgery	\$0	\$0
Hip & Knee Replacement - Revisions	\$0	\$0
Magnetic Resonance Imaging (MRI)	\$0	\$0
Ontario Breast Screening Magnetic Resonance Imaging (OBSP MRI)	\$0	\$0
Computed Tomography (CT)	\$36,250	\$25,000
Other WTS Funding	\$0	\$0
Other WTS Funding	\$0	\$0
Other WTS Funding	\$0	\$0
Other WTS Funding	\$0	\$0
Other WTS Funding	\$0	\$0
Other WTS Funding	\$0	\$0
Sub-Total Wait Time Strategy Services Funding	\$36,250	\$25,000
Section 4: Provincial Priority Program Services ("PPS")	(2) Base	(2) Incremental/One-Time
Cardiac Surgery	\$0	\$0
Other Cardiac Services	\$0	\$0
Organ Transplantation	\$0	\$0
Neurosciences	\$0	\$0
Bariatric Services	\$0	\$0
Regional Trauma	\$0	\$0
Sub-Total Provincial Priority Program Services Funding	\$0	\$0

Hospital Sector Accountability Agreement 2016-2017

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2016-2017 Schedule B: Reporting Requirements

1. MIS Trial Balance		Due Date 2016-2017
Q2 – April 01 to September 30		31 October 2016
Q3 – October 01 to December 31		31 January 2017
Q4 – January 01 to March 31		31 May 2017
2. Hospital Quarterly SRI Reports and Supplemental Reporting as Necessary		Due Date 2016-2017
Q2 – April 01 to September 30		07 November 2016
Q3 – October 01 to December 31		07 February 2017
Q4 – January 01 to March 31		7 June 2017
Year End		30 June 2017
3. Audited Financial Statements		Due Date 2016-2017
Fiscal Year		30 June 2017
4. French Language Services Report		Due Date 2016-2017
Fiscal Year		30 April 2017

Hospital Sector Accountability Agreement 2016-2017

Facility #:	888
Hospital Name:	Temiskaming Hospital
Hospital Legal Name:	Temiskaming Hospital
Site Name:	TOTAL ENTITY

2016-2017 Schedule C1 Performance Indicators

Part II - ORGANIZATION HEALTH - EFFICIENCY, APPROPRIATELY RESOURCED, EMPLOYEE EXPERIENCE, GOVERNANCE			
*Performance Indicators	Measurement Unit	Performance Target 2016-2017	Performance Standard 2016-2017
Current Ratio (Consolidated - All Sector Codes and fund types)	Ratio	2.07	>= 1.96
Total Margin (Consolidated - All Sector Codes and fund types)	Percentage	2.41%	>=2.41316465865166 %
Explanatory Indicators		Measurement Unit	
Total Margin (Hospital Sector Only)	Percentage		
Adjusted Working Funds/ Total Revenue %	Percentage		

Part III - SYSTEM PERSPECTIVE: Integration, Community Engagement, eHealth			
*Performance Indicators	Measurement Unit	Performance Target 2016-2017	Performance Standard 2016-2017
Alternate Level of Care (ALC) Rate	Percentage	12.70%	<= 13.07%
Explanatory Indicators		Measurement Unit	
Percentage of Acute Alternate Level of Care (ALC) Days (Closed Cases)	Percentage		
Repeat Unscheduled Emergency Visits Within 30 Days For Mental Health Conditions (Methodology Updated)	Percentage		
Repeat Unscheduled Emergency Visits Within 30 Days For Substance Abuse Conditions (Methodology Updated)	Percentage		

Part IV - LHIN Specific Indicators and Performance targets: See Schedule C3	
Targets for future years of the Agreement will be set during the Annual Refresh process. *Refer to 2016-2017 H-SAA Indicator Technical Specification for further details.	

Hospital Sector Accountability Agreement 2016-2017

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2016-2017 Schedule C3: LHIN Local Indicators and Obligations

CLIPSP is to complete a French Language Services Designation plan and submit to the NE LHIN by March 31, 2017, with consideration to requesting official designation under the French Language Services Act.

