

2008-15 H-SAA AMENDING AGREEMENT

THIS AMENDING AGREEMENT (the "Agreement") is made as of the 1st day of July, 2014

B E T W E E N:

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

AND

CAMPBELLFORD MEMORIAL 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 June 30, 2014;

AND WHEREAS the LHIN and the Hospital have agreed to extend the H-SAA for a further nine month period to permit the LHIN and the Hospital to continue to work toward a multi-year H-SAA;

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.

2.0 Amendments.

2.1 Agreed Amendments. The H-SAA is amended as set out in this Article 2.

2.2 Amended Definitions.

(a) The following terms have the following meanings.

"**Schedule**" means any one of, and "**Schedules**" means any two or more as the context requires, of the Schedules appended to this Agreement, including the following:

- Schedule A: Funding Allocation
- Schedule B: Reporting
- Schedule C: Indicators and Volumes
 - C.1. Performance Indicators
 - C.2. Service Volumes
 - C.3. LHIN Indicators and Volumes

2.3 Term. This Agreement and the H-SAA will terminate on March 31, 2015.

- 3.0 Effective Date.** The amendments set out in Article 2 shall take effect on April 1, 2014. All other terms of the H-SAA shall remain in full force and effect.
- 4.0 Governing Law.** This Agreement and the rights, obligations and relations of the Parties will be governed by and construed in accordance with the laws of the Province of Ontario and the federal laws of Canada applicable therein.
- 5.0 Counterparts.** This Agreement may be executed in any number of counterparts, each of which will be deemed an original, but all of which together will constitute one and the same instrument.
- 6.0 Entire Agreement.** This Agreement constitutes the entire agreement between the Parties with respect to the subject matter contained in this Agreement and supersedes all prior oral or written representations and agreements.

IN WITNESS WHEREOF the Parties have executed this Agreement on the dates set out below.

CENTRAL EAST LOCAL HEALTH INTEGRATION NETWORK

By:

ORIGINAL SIGNATURE ON FILE

JUN 18 2014

Wayne Gladstone, Chair

Date

And by:

ORIGINAL SIGNATURE ON FILE

JUN 18 2014

Deborah Hammons, CEO

Date

CAMPBELLFORD MEMORIAL HOSPITAL

By:

ORIGINAL SIGNATURE ON FILE

June 11/14

Date

Jill Stewart, Chair

And by:

ORIGINAL SIGNATURE ON FILE

June 9, 2014

Date

Brad Hilker, President & CEO

Hospital Sector 2014-2015

Facility #:	624
Hospital Name:	Campbellford Memorial Hospital
Hospital Legal Name:	Campbellford Memorial Hospital

2014-2015 Schedule A: Funding Allocation

Intended Purpose or Use of Funding	2014-2015 Target	
	Estimated ¹ Funding Allocation	
¹FUNDING SUMMARY		
Other LHIN Allocations- Global Funding	Base²	
Health System Funding Reform (HSFR) HBAM Funding (Includes Mitigation)*	\$13,307,772	
Health System Funding Reform (HSFR) QBP Funding (Section 1 below)*	\$0	Allocation ² /One-Time ²
Wait Time Strategy Services ("WTS") (Section 2 below)*	\$0	\$0
Provincial Program Services ("PPS") (Section 3 below)*	\$0	\$0
Other Non-HSFR LHIN Funding (Section 4 below)	\$0	\$0
Post Construction Operating Plan (PCOP)	\$0	\$0
Total 14/15 Estimated Funding Allocation	\$13,307,772	\$0
⁴Section 1: Health System Funding Reform - Quality-Based Procedures	Rate	Allocation⁴
Cancer- Surgery	TBD	\$0
Cancer- Colposcopy	TBD	\$0
Cardiac- Aortic Valve Replacement	TBD	\$0
Cardiac- Coronary Artery Disease	TBD	\$0
Cataracts- Bilateral	TBD	\$0
Cataracts- Unilateral	TBD	\$0
Chemotherapy Systemic Treatment	TBD	\$0
Chronic Obstructive Pulmonary Disease	TBD	\$0
Congestive Heart Failure	TBD	\$0
Endoscopy	TBD	\$0
Hip Replacement- Inpatient Rehabilitation for Unilateral Primary	TBD	\$0
Hip Replacement- Unilateral Primary	TBD	\$0
Knee Replacement- Inpatient Rehabilitation for Unilateral Primary	TBD	\$0
Knee Replacement- Unilateral Primary	TBD	\$0
Non-Cardiac Vascular- Aortic Aneurysm (AA)	TBD	\$0
Non-Cardiac Vascular Lower Extremity Occlusive Disease (LEOD)	TBD	\$0
Orthopaedics- Hip Fracture	TBD	\$0
Orthopaedics- Knee Arthroscopy	TBD	\$0
Paediatric- Neonatal Jaundice (Hyperbilirubinemia)	TBD	\$0
Paediatric- Tonsillectomy	TBD	\$0
Respiratory- Pneumonia	TBD	\$0
Stroke- Transient Ischemic Attack (TIA)	TBD	\$0
Stroke- Hemorrhage	TBD	\$0
Stroke- Ischemic or Unspecified	TBD	\$0
Vision Care- Retinal Disease	TBD	\$0

*Funding allocations will be updated after confirmation from MOHLTC.

Hospital Sector 2014-2015

Facility #: 624
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 Hospital Legal Name: Campbellford Memorial Hospital

2014-2015 Schedule A: Funding Allocation

Section 2: Wait Time Strategy Services ("WTS")		Base ²	One-Time ²
General Surgery		TBD	TBD
Pediatric Surgery		TBD	TBD
Hip & Knee Replacement - Revisions		TBD	TBD
Magnetic Resonance Imaging (MRI)		TBD	TBD
Ontario Breast Screening Magnetic Resonance Imaging (OBSP MRI)		TBD	TBD
Computed Tomography (CT)		TBD	TBD
Other WTS Funding		TBD	TBD
Section 3: Provincial Program Services ("PPS")		Base ²	One-Time ²
Cardiac Surgery		\$0	\$0
Other Cardiac Services		\$0	\$0
Organ Transplantation		\$0	\$0
Neurosciences		\$0	\$0
Bariatric Services		\$0	\$0
Regional Trauma		\$0	\$0
Section 4: Other Non-HSFR Funding		Base ²	One-Time ²
LHIN One-time payments			\$0
MOH One-time payments			\$0
LHIN/MOH Recoveries		\$0	
Other Revenue from MOHLTC		\$0	
Paymaster		\$0	
Other Funding (Not included in the Summary above)		Base ²	One-Time ²
Grant in Lieu of Taxes		\$0	\$5,625
Cancer Care Ontario ³		\$0	\$0
Ontario Renal Funding ³		\$0	\$0

* Targets for Years 2 and 3 of the agreement will be determined during the annual refresh process.

⁽¹⁾ Estimated funding allocations are subject to appropriation and written confirmation by the LHIN.

⁽²⁾ Funding allocations are subject to change year over year.

⁽³⁾ Funding provided by Cancer Care Ontario, not the LHIN.

⁽⁴⁾ All QBP Funding is fully recoverable in accordance with Section 5.6 of the H-SAA. QBP Funding is not base funding for the purposes of the BOND policy. The Quality Based Procedures allocations above includes Mitigation funding for 2014-2015.

Hospital Sector 2014-2015

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2014-2015 Schedule B: Reporting Requirements

1. MIS Trial Balance		Due Date 2014-2015	Due Date 2015-2016	Due Date 2016-2017
Q2 – Apr 01 to Sept 30		31-Oct-2014	31-Oct-2015	31-Oct-2016
Q3 – Oct 01- to Dec 31		31-Jan-2015	31-Jan-2016	31-Jan-2017
Q4 – Jan 01 to March 31		31-May-2015	31-May-2016	31-May-2017
2. Hospital Quarterly SRI Reports and Supplemental Reporting as Necessary		Due Date 2014-2015	Due Date 2015-2016	Due Date 2016-2017
Q2 – Apr 01 to Sept 30		07-Nov-2014	07-Nov-2015	07-Nov-2016
Q3 – Oct 01- to Dec 31		07-Feb-2015	07-Feb-2016	07-Feb-2017
Q4 – Jan 01 to March 31		30-Jun-2015	30-Jun-2016	30-Jun-2017
Year End 2014-2015		30-Jun-2015	30-Jun-2016	30-Jun-2017
3. Audited Financial Statements		Due Date		
Fiscal Year				
2014-15		30-Jun-2015		
2015-16		30-Jun-2016		
2016-17		30-Jun-2017		
4. French Language Services Report		Due Date		
Fiscal Year				
2014-15		30-Apr-2015		
2015-16		30-Apr-2016		
2016-17		30-Apr-2017		

Hospital Sector 2014-2015

Facility #:	624
Hospital Name:	Campbellford Memorial Hospital
Hospital Legal Name:	Campbellford Memorial Hospital
Site Name:	TOTAL ENTITY

2014-2015 Schedule C1: TOTAL ENTITY Performance Indicators

Part I - PATIENT EXPERIENCE: Access, Effective, Safe, Person-Centered

Performance Indicators	Measurement Unit	2014-2015 Performance Target	**2014-2015 Performance Standard
90th Percentile Emergency Room (ER) Length of Stay for Admitted Patients	Hours	13.9	<= 15.5
90th Percentile ER Length of Stay for Non-Admitted Complex (CTAS I-III) Patients	Hours	6.45	<= 7.1
90th Percentile ER Length of Stay for Non-Admitted Minor Uncomplicated (CTAS IV-V) Patients	Hours	4.0	<= 4.4
Cancer Surgery: % Priority 4 cases completed within Target (84 Days)	Percent	0.0%	
Cardiac Bypass Surgery: % Priority 4 cases completed within Target	Percent	0.0%	
Cataract Surgery: % Priority 4 cases completed within Target (182 Days)	Percent	0.0%	
Joint Replacement (Hip): % Priority 4 cases completed within Target (182 Days)	Percent	0.0%	
Joint Replacement (Knee): % Priority 4 cases completed within Target (182 Days)	Percent	0.0%	
Diagnostic Magnetic Resonance Imaging (MRI) Scan: % Priority 4 cases completed within Target (28 Days)	Percent	0.0%	
Diagnostic Computed Tomography (CT) Scan: % Priority 4 cases completed within Target (28 Days)	Percent	90.0%	>= 80
Rate of Ventilator-Associated Pneumonia	Rate	N/A	
Central Line Infection Rate	Rate	N/A	
Rate of Hospital Acquired Clostridium Difficile Infections	Rate	0.29	<= .35
Rate of Hospital Acquired Vancomycin Resistant Enterococcus Bacteremia	Rate	0.00	
Rate of Hospital Acquired Methicillin Resistant Staphylococcus Aureus Bacteremia	Rate	0.00	

Explanatory Indicators	Measurement Unit
30-Day Readmission Of Patients With Stroke Or Transient Ischemic Attack (TIA) To Acute Care For All Diagnoses.	Percentage
Percent Of Stroke Patients Discharged To Inpatient Rehabilitation Following An Acute Stroke Hospitalization.	Percentage
Percent Of Stroke Patients Admitted To A Stroke Unit During Their Inpatient Stay.	Percentage
Hospital Standardized Mortality Ratio (HSMR)	Ratio
Readmissions Within 30 Days For Selected Case Mix Groups (CMGS)	Percentage

Part II - ORGANIZATIONAL HEALTH: Efficient, Appropriately Resourced, Employee Experience, Governance

Performance Indicators	Measurement Unit	2014-2015 Performance Target	**2014-2015 Performance Standard
Current Ratio (Consolidated – all sector codes and fund types)	Ratio	0.43	>=.41
Total Margin (Consolidated – all sector codes and fund types)	Percentage	>=0	>=0

Explanatory Indicators	Measurement Unit
Total Margin (Hospital Sector Only)	Percentage
Adjusted Working Funds	Amount
Adjusted Working Funds / Total Revenue %	Percentage

Note: Targets subject to renegotiation based on 2014/15 LHIN MLPA Targets.

Hospital Sector 2014-2015

Facility #:	624
Hospital Name:	Campbellford Memorial Hospital
Hospital Legal Name:	Campbellford Memorial Hospital
Site Name:	TOTAL ENTITY

2014-2015 Schedule C1: TOTAL ENTITY Performance Indicators

Part III - SYSTEM PERSPECTIVE: Integration, Community Engagement, eHealth			
Performance Indicators	Measurement Unit	2014-2015 Performance Target	**2014-2015 Performance Standard
Percentage of Acute Alternate Level of Care (ALC) Days (closed cases)	Percentage	12.80%	<=14.1
Provincial Explanatory Indicators		Measurement Unit	
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 2014-2015			
* Targets for Year 2 and 3 of the Agreement will be set during the Annual Refresh process			
**Refer to 2014-17 H-SAA Indicator Technical Specification for further details.			

Hospital Sector 2014-2015

Facility #: 624
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2014-2015 Schedule C2: Service Volumes

Part I - Global Volumes

	Measurement Unit	2014-2015 Performance Target	2014-2015 Performance Standard
Ambulatory Care	Visits	4,300	>= 3,225.
Complex Continuing Care	Weighted Patient Days	0	-
Day Surgery	Weighted Visits	220	>= 165. and <= 275.
Elderly Capital Assistance Program (ELDCAP) **	Inpatient Days	0	-
Emergency Department	Weighted Cases	810	>= 688.5 and <= 931.5
Emergency Department and Urgent Care **	Visits	20,050	>= 15,037.5
Inpatient Mental Health	Weighted Patient Days	0	-
Inpatient Mental Health	Days	0	-
Inpatient Rehabilitation	Days	0	-
Rehabilitation Separations	Days	0	-
Total Inpatient Acute	Weighted Cases	1,600	>= 1440. and <= 1760.

Part II - Hospital Specialized Services

	Measurement Unit	2014-2015 Primary	2014-2015 Revision
Cochlear Implants	Cases	0	0

	Measurement Unit	2014-2015 Base	2014-2015 Incremental
Cleft Palate	Cases	0	0
HIV Outpatient Clinics	Visits	0	
Sexual Assault/Domestic Violence Treatment Clinics	# of Patients	0	

** Not negotiated.

Hospital Sector 2014-2015

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2014-2015 Schedule C2: Service Volumes

Part III - Wait Time Volumes

	Measurement Unit	2014-2015 Base	2014-2015 Incremental
General Surgery	Cases	124	TBD
Paediatric Surgery	Cases	0	TBD
Hip & Knee Replacement - Revisions	Cases	0	TBD
Magnetic Resonance Imaging (MRI)	Total Hours	0	TBD
Ontario Breast Screening Magnetic Resonance Imaging (OBSP MRI)	Total Hours	0	TBD
Computed Tomography (CT)	Total Hours	1,715	TBD

Part IV - Provincial Programs *

	Measurement Unit	2014-2015 Base	2014-2015 Incremental
Cardiac Surgery	Cases	TBD	0
Cardiac Services - Catheterization	Cases	TBD	
Cardiac Services- Interventional Cardiology	Cases	TBD	
Cardiac Services- Permanent Pacemakers	Procedures	TBD	
Automatic Implantable Cardiac Defib's (AICDs)- New Implants	# of New Implants	TBD	
Automatic Implantable Cardiac Defib's (AICDs)- Replacements	# of Replacements	TBD	
Automatic Implantable Cardiac Defib's (AICDs)- Replacements done at Supplier's request	# of Replacements	TBD	
Automatic Implantable Cardiac Defib's (AICDs)- Manufacturer Requested ICD Replacement Procedure	Procedures	TBD	
Organ Transplantation	Cases	TBD	2014-2015 Revision
Neurosciences	Procedures	TBD	0
Regional Trauma	Cases	TBD	
Number of Forensic Beds- General	Beds	TBD	
Number of Forensic Beds- Secure	Beds	TBD	
Number of Forensic Beds- Assessment	Beds	TBD	
Bariatric Surgery	Procedures	TBD	
Medical and Behavioural Treatment	Cases	TBD	

* Volumes will be updated after confirmation from MOHLTC.

Hospital Sector 2014-2017

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2014-2015 Schedule C2: Service Volumes

Part V - Quality Based Procedures *

	Measurement Unit	2014-2015 Volume
Cancer- Surgery	Volume	TBD
Cancer- Colposcopy	Volume	TBD
Cardiac- Aortic Valve Replacement	Volume	TBD
Cardiac- Coronary Artery Disease	Volume	TBD
Cataracts- Bilateral	Volume	TBD
Cataracts- Unilateral	Volume	TBD
Chemotherapy Systemic Treatment	Volume	TBD
Chronic Obstructive Pulmonary Disease	Volume	TBD
Congestive Heart Failure	Volume	TBD
Endoscopy	Volume	TBD
Hip Replacement- Inpatient Rehabilitation for Unilateral Primary	Volume	TBD
Hip Replacement- Unilateral Primary	Volume	TBD
Knee Replacement- Inpatient Rehabilitation for Unilateral Primary	Volume	TBD
Knee Replacement- Unilateral Primary	Volume	TBD
Non-Cardiac Vascular- Aortic Aneurysm (AA)	Volume	TBD
Non-Cardiac Vascular Lower Extremity Occlusive Disease (LEOD)	Volume	TBD
Orthopaedics- Hip Fracture	Volume	TBD
Orthopaedics- Knee Arthroscopy	Volume	TBD
Paediatric- Neonatal Jaundice (Hyperbilirubinemia)	Volume	TBD
Paediatric- Tonsillectomy	Volume	TBD
Respiratory- Pneumonia	Volume	TBD
Stroke- Transient Ischemic Attack (TIA)	Volume	TBD
Stroke- Hemorrhage	Volume	TBD
Stroke- Ischemic or Unspecified	Volume	TBD
Vision Care- Retinal Disease	Volume	TBD

* Volumes will be updated after confirmation from MOHLTC.

Hospital Sector 2014-2015

Facility #: 624
 Hospital Name: Campbellford Memorial Hospital
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2014-2015 Schedule C3: Local Indicators and Obligations

LHIN Priority Performance Indicator	Performance Target	Performance Standard
Orthopaedic Quality Indicators - Hip and Knee Replacement Surgery Average Length of Stay (Days)	N/A	N/A
Length of stay for patients who will be discharged directly home from acute care.		
Orthopaedic Quality Indicators - Hip and Knee Replacement Surgery Proportion of Patients Discharged Home (%)	N/A	N/A
Rate of patients discharged directly home from acute care.		
ALC Throughput Ratio	1.10	N/A
Rate of ALC patients discharged in a given time period in proportion to the number of ALC patients designated in a given time period.		
Repeat Unscheduled Emergency Visits Within 30 Days for Mental Health Conditions (%)	10.0	≤ 11.0
Percent of repeat emergency visits following a visit for a mental health condition. A visit is counted as a repeat visit if it is for a mental health condition and occurs within 30 days of an index visit for a mental health condition. This indicator is presented as a proportion of all mental health emergency visits.		
Repeat Unscheduled Emergency Visits Within 30 Days for Substance Abuse Conditions (%)	10.0	≤ 11.0
Percent of repeat emergency visits following a visit for a substance abuse. A visit is counted as a repeat visit if it is for a substance abuse condition, and occurs within 30 days of an index visit for a mental health condition. This indicator is presented as a proportion of all mental health emergency visits.		
Readmissions Within 30 Days for Selected CMGs - CHF (%)	8.00	≤ 8,80
CMG 1: The number of patients readmitted to any facility for non-elective inpatient care. This is compared to the number of expected non-elective readmissions using data from all Ontario acute hospitals.		
Readmissions Within 30 Days for Selected CMGs - COPD (%)	8.00	≤ 8,80
CMG 2: The number of patients readmitted to any facility for non-elective inpatient care. This is compared to the number of expected non-elective readmissions using data from all Ontario acute hospitals.		
2014/15 DEP Funding	Diabetes Education Program: 2014/15 funding and related performance requirements will be communicated upon the finalization of negotiations and reflected in Schedule C3 during the Q1 H-SAA schedule refresh process.	