

Schedule A2: Population and Geography

2014-2017

Health Service Provider: WEST ELGIN COMMUNITY HEALTH CENTRE

Client Population

The West Elgin Community Health Centre team works with our communities and our partners to provide accessible, high quality health care, health promotion and community support services. The total population in our catchment area of Dutton/Dunwich and West Elgin is 9000. According to the 2011 census, 16% of the population is under age 15 and 18% are over age 65. Over 88% of the people listed English as their mother tongue, followed by Portuguese at 2.6%. Only 1.4% listed French and none identified an Aboriginal language as their mother tongue. According to the most recent data about our clinical clients, they are 43% male. By age they are comparable with other CHCs although our seniors aged 65+ at 15.4% exceeds the provincial average of 13.5%. While not experiencing the extreme poverty of other CHCs (17.1% in the lowest income quintile vs. 34% provincially, the vast majority of our clinical clients are in the second and third lowest income quintiles 73.4%, and very few in the upper two quintiles (9.5%). Approximately half our clinical clients have medium comorbidities, 15% have high and 36.6% have low. Overall, our SAMI score of 1.8 indicates that our clients are approximately 80% more complex than those of a typical family physician. Therefore they require more resources to care for them. Each year we serve more than 1,800 clients in our medical clinic and 2,100 more clients through our community programs. Most of our non-clinical programs focus on two target age groups: children up to age 12 and seniors. We believe that the social determinants of health including housing, education, food and the environment all play a role in health and well-being and we address these areas with each client we serve. We also believe that language, literacy, poverty and geography shouldn't get in the way of receiving great care. □

Geography Served

Our team provides primary health care, illness prevention and health promotion services, as well as range of community programs to the residents of Dutton/Dunwich and West Elgin. This is the area bounded by the Thames River to the North, Lake Erie to the South, the Dutton-Dunwich/Southwold Town Line to the East and the Chatham-Kent county line to the West.

The Centre also has two Diabetes Education teams that provide care to clients across Elgin County.

Our main site is located at 153 Main St in West Lorne. This is open Monday to Friday from 8:30 am to 5:00 pm. Additionally, the Centre is open Tuesday and Thursday evenings until 9:00 pm.

The Community Support Services for Seniors and Supportive Housing Programs operate out of "the Hub" on Munroe Street in West Lorne. CSS hours are the same as the main Centre. The SH program operates from 6:00 am to 10:00 pm with overnight on call at three sites in Dutton and West Lorne.

The satellite diabetes office in Aylmer is open Monday to Friday 8:00 to 4:00 and flexes hours in the evening to accommodate client needs. They also provide pre-diabetes care at the East Elgin Family Health Team site.

The Centre also provides nurse practitioner, nursing, social worker, chiropody and diabetes support in partnership with an independent family physician at the Dutton Medical Centre.

Additional programs are delivered at various sites across the catchment, including the town of Rodney.

**Schedule B1: Total LHIN Funding
2016-2017**

Health Service Provider: West Elgin Community Health Centre

LHIN Program Revenue & Expenses	Row #	Account: Financial (F) Reference OHSR VERSION 9.0	2016-2017 Plan Target
REVENUE			
LHIN Global Base Allocation	1	F 11006	\$5,051,796
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	\$63,800
Subtotal Revenue LHIN/MOHLTC	10	Sum of Rows 1 to 9	\$5,115,596
Recoveries from External/Internal Sources	11	F 120*	\$200
Donations	12	F 140*	\$0
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*]	\$0
Subtotal Other Revenues	14	Sum of Rows 11 to 13	\$200
TOTAL REVENUE	FUND TYPE 2	15	Sum of Rows 10 and 14
			\$5,115,796
EXPENSES			
Compensation			
Salaries (Worked hours + Benefit hours cost)	17	F 31010, 31030, 31090, 35010, 35030, 35090	\$1,954,725
Benefit Contributions	18	F 31040 to 31085, 35040 to 35085	\$426,595
Employee Future Benefit Compensation	19	F 305*	\$0
Physician Compensation	20	F 390*	\$892,419
Physician Assistant Compensation	21	F 390*	\$0
Nurse Practitioner Compensation	22	F 380*	\$442,621
Physiotherapist Compensation (Row 128)	23	F 350*	\$92,000
Chiropractor Compensation (Row 129)	24	F 390*	\$0
All Other Medical Staff Compensation	25	F 390*, [excl. F 39092]	\$535,925
Sessional Fees	26	F 39092	\$0
Service Costs			
Med/Surgical Supplies & Drugs	27	F 460*, 465*, 560*, 565*	\$6,500
Supplies & Sundry Expenses	28	F 4*, 5*, 6*, [excl. F 460*, 465*, 560*, 565*, 69596, 69571, 72000, 62800, 45100, 69700]	\$564,129
Community One Time Expense	29	F 69596	\$0
Equipment Expenses	30	F 7*, [excl. F 750*, 780*]	\$34,752
Amortization on Major Equip, Software License & Fees	31	F 750*, 780*	\$0
Contracted Out Expense	32	F 8*	\$14,240
Buildings & Grounds Expenses	33	F 9*, [excl. F 950*]	\$151,889
Building Amortization	34	F 9*	\$156,647
TOTAL EXPENSES	FUND TYPE 2	35	Sum of Rows 17 to 34
			\$5,272,443
NET SURPLUS/(DEFICIT) FROM OPERATIONS	36	Row 15 minus Row 35	(\$156,647)
Amortization - Grants/Donations Revenue	37	F 131*, 141* & 151*	\$156,647
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*	\$0
Total Expenses (Type 3)	40	F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$0
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	\$5,272,443
Total Expenses (All Funds)	46	Line 16 + line 40 + line 43	\$5,272,443
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*	\$367,486
Volunteer Services	50	72 1*	\$0
Information Systems Support	51	72 1*	\$123,335
General Administration	52	72 1*	\$609,882
Admin & Support Services	53	72 1*	\$1,100,703
Management Clinical Services	54	72 5 05	\$0
Medical Resources	55	72 5 07	\$0
Total Admin & Undistributed Expenses	56	Sum of Rows 46-50 (included in Fund Type 2 expenses above)	\$1,100,703

Schedule B2: Clinical Activity- Summary
2016-2017

Health Service Provider: West Elgin Community Health Centre

Service Category 2016-2017 Budget	OHRIS Framework Level 3	Full-time equivalents (FTE)	Visits F2F, Tel./In-House, Contr. Out	Not Uniquely Identified Service Recipient Interactions	Hours of Care In-House & Contracted Out	Inpatient/Resident Days	Individuals Served by Functional Centre	Attendance Days Face-to-Face	Group Sessions (# of group sessions-not individuals)	Meal Delivered-Combined	Group Participant Attendances (Reg & Non-Reg)	Service Provider Interactions	Service Provider Group Interactions	Meal Health Sessions
Primary Care- Clinics/Programs	72 5 10*	25.29	0	0	0	0	4,869	0	136	0	1,155	23,448	0	0
Health Promotion and Education	72 5 50	5.69	0	0	0	0	375	0	145	0	2,000	1,000	0	0
CSS In-Home and Community Services (CSS IH COM)	72 5 82*	13.82	6,900	0	0	8,030	1,152	4,800	0	3,500	0	0	0	0

Schedule C: Reports Community Health Centres

2016-2017

Health Service Provider: West Elgin Community Health Centre

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

Supplementary Reporting - Quarterly Report (through SRI)	
2014-2015	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 SRI Reporting Due
2015-2016	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 SRI Reporting Due
2016-2017	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 SRI Reporting Due

Schedule C: Reports Community Health Centres

2016-2017

Health Service Provider: West Elgin Community Health Centre

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 ARR	June 30, 2015
2015-16 ARR	June 30, 2016
2016-17 ARR	June 30, 2017

Board Approved Audited Financial Statements *

Fiscal Year	Due Date
2014-15	June 30, 2015
2015-16	June 30, 2016
2016-17	June 30, 2017

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

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

Quality Improvement Plan

The HSP will submit annually a Quality Improvement Plan to Health Quality Ontario that is aligned with this Agreement and supports local health system priorities. A copy of the QIP is to be provided to the LHIN at the time it is submitted to HQO.

Planning Period	Due Date
April 1, 2016 – March 31, 2017	April 1, 2016
April 1, 2017 – March 31, 2018	April 1, 2017

Schedule C: Reports Community Support Services

2016-2017

Health Service Provider: West Elgin Community Health Centre

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)	
2014-2015	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

Supplementary Reporting - Quarterly Report (through SRI)	
2014-2015	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
2015-2016	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
2016-2017	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

2016-2017

Health Service Provider: West Elgin Community Health Centre

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 ARR	June 30, 2015
2015-16 ARR	June 30, 2016
2016-17 ARR	June 30, 2017

Board Approved Audited Financial Statements *

Fiscal Year	Due Date
2014-15	June 30, 2015
2015-16	June 30, 2016
2016-17	June 30, 2017

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

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

Schedule D: Directives , Guidelines and Policies Community Health Centres

2016-2017

Health Service Provider: West Elgin Community Health Centre

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

- | |
|---|
| • Community Financial Policy, 2015 |
| • *Community Health Centre Guidelines November 2013 V1.1 |
| • Ontario Healthcare Reporting Standards – OHRS/MIS - most current version available to applicable year |
| • Model of Health and Wellbeing - May 2013 |
| • *Community Health Centre Guidelines November 2013 V1.1 |
| • Guideline for Community Health Service Providers Audits and Reviews, August 2012 |

***Community Health Centre Guidelines**

A “Community Health Centre Guidelines” document has been completed by representatives from Community Health Centres, LHINs, AOHC and the MOHLTC. The purpose of the guide is to provide critical information to CHCs and LHINs in the areas of:

- Historical information
- Best practice
- Administrative guidance

The guide is intended to be a “living” document to be updated during the life of the current agreement at a mutually agreeable schedule to all parties to ensure that it remains current and a valuable reference document for the CHC sector and LHINs. ***It must be noted that the document is considered a guide only for informational purposes and is not a contractual requirement.***

Schedule D: Directives , Guidelines and Policies Community Support Services

2016-2017

Health Service Provider: West Elgin Community Health Centre

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 |
| ▪ Community Financial Policy, 2015 |
| ▪ 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, 1994, 2015 |
| ▪ 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

2016-2017

Health Service Provider: West Elgin Community Health Centre

Performance Indicators	2016-2017 Target	Performance Standard
*Balanced Budget - Fund Type 2	\$0	≥0
Proportion of Budget Spent on Administration	20.9%	≤25.1%
**Percentage Total Margin	0.00%	≥ 0%
Percentage of Alternate Level of Care (ALC) days (closed cases)	N/A	-
Variance Forecast to Actual Expenditures	0	< 5%
Variance Forecast to Actual Units of Service	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	N/A	-
Explanatory Indicators		
Cost per Unit Service (by Functional Centre)		
Cost per Individual Served (by Program/Service/Functional Centre)		
Client Experience		
Budget Spent on Administration- AS General Administration 72 1 10		
Budget Spent on Administration- AS Information Systems Support 72 1 25		
Budget Spent on Administration- AS Volunteer Services 72 1 40		
Budget Spent on Administration- AS Plant Operation 72 1 55		
* 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

2016-2017

Health Service Provider: West Elgin Community Health Centre

OHRs Description & Functional Centre		2016-2017	
		Target	Performance Standard
¹ 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*	5.38	n/a
Total Cost for Functional Centre	72 1*	\$1,100,703	n/a
Clinics/Programs - General Clinic 72 5 10 20			
Full-time equivalents (FTE)	72 5 10 20	13.29	n/a
Individuals Served by Functional Centre	72 5 10 20	2,400	2160 - 2640
Total Cost for Functional Centre	72 5 10 20	\$1,804,744	n/a
Service Provider Interactions	72 5 10 20	14,139	13432 - 14846
Clinics/Programs - Therapy Clinic - Foot Care 72 5 10 40 20			
Full-time equivalents (FTE)	72 5 10 40 20	1.00	n/a
Individuals Served by Functional Centre	72 5 10 40 20	509	433 - 585
Total Cost for Functional Centre	72 5 10 40 20	\$96,941	n/a
Service Provider Interactions	72 5 10 40 20	2,314	2083 - 2545
Clinics/Programs - Therapy Clinic - Nutrition 72 5 10 40 45			
Full-time equivalents (FTE)	72 5 10 40 45	0.90	n/a
Individuals Served by Functional Centre	72 5 10 40 45	200	160 - 240
Group Sessions	72 5 10 40 45	35	28 - 42
Total Cost for Functional Centre	72 5 10 40 45	\$72,533	n/a
Group Participant Attendances	72 5 10 40 45	250	200 - 300
Service Provider Interactions	72 5 10 40 45	245	196 - 294
Clinics/Programs - Therapy Clinic - Physiotherapy 72 5 10 40 50			
Full-time equivalents (FTE)	72 5 10 40 50	1.00	n/a
Individuals Served by Functional Centre	72 5 10 40 50	200	160 - 240
Group Sessions	72 5 10 40 50	5	4 - 6
Total Cost for Functional Centre	72 5 10 40 50	\$97,000	n/a
Group Participant Attendances	72 5 10 40 50	25	20 - 30
Service Provider Interactions	72 5 10 40 50	1,200	1080 - 1320
Clinics/Programs - Therapy Clinic - Counselling 72 5 10 40 60			
Full-time equivalents (FTE)	72 5 10 40 60	3.10	n/a
Individuals Served by Functional Centre	72 5 10 40 60	260	208 - 312
Group Sessions	72 5 10 40 60	36	29 - 43
Total Cost for Functional Centre	72 5 10 40 60	\$297,829	n/a
Group Participant Attendances	72 5 10 40 60	430	344 - 516
Service Provider Interactions	72 5 10 40 60	1,950	1755 - 2145
Clinics/Programs - Chronic Disease Clinic 72 5 10 50			
Full-time equivalents (FTE)	72 5 10 50	1.00	n/a
Individuals Served by Functional Centre	72 5 10 50	300	240 - 360
Group Sessions	72 5 10 50	40	32 - 48
Total Cost for Functional Centre	72 5 10 50	\$125,000	n/a
Group Participant Attendances	72 5 10 50	200	160 - 240
Service Provider Interactions	72 5 10 50	600	510 - 690

Schedule E2a: Clinical Activity- Detail

2016-2017

Health Service Provider: West Elgin Community Health Centre

OHRS Description & Functional Centre		2016-2017	
		Target	Performance Standard
¹ These values are provided for information purposes only. They are not Accountability Indicators.			
Clinics/Programs – Chronic Disease Clinic - Diabetes Clinic 72 5 10 50 20			
Full-time equivalents (FTE)	72 5 10 50 20	5.00	n/a
Individuals Served by Functional Centre	72 5 10 50 20	1,000	900 - 1100
Group Sessions	72 5 10 50 20	20	16 - 24
Total Cost for Functional Centre	72 5 10 50 20	\$418,727	n/a
Group Participant Attendances	72 5 10 50 20	250	200 - 300
Service Provider Interactions	72 5 10 50 20	3,000	2700 - 3300
Health Prom/Educ. & Com.Dev. – Community Engagement and Capacity Building 72 5 50 14			
Full-time equivalents (FTE)	72 5 50 14	3.09	n/a
Individuals Served by Functional Centre	72 5 50 14	250	200 - 300
Group Sessions	72 5 50 14	50	40 - 60
Total Cost for Functional Centre	72 5 50 14	\$259,410	n/a
Group Participant Attendances	72 5 50 14	500	425 - 575
Service Provider Interactions	72 5 50 14	550	468 - 633
Health Prom/Educ.& Com. Dev – Personal Health and Wellness 72 5 50 45			
Full-time equivalents (FTE)	72 5 50 45	2.60	n/a
Individuals Served by Functional Centre	72 5 50 45	125	100 - 150
Group Sessions	72 5 50 45	95	76 - 114
Total Cost for Functional Centre	72 5 50 45	\$194,283	n/a
Group Participant Attendances	72 5 50 45	1,500	1350 - 1650
Service Provider Interactions	72 5 50 45	450	360 - 540
CSS IH - Meals Delivery 72 5 82 10			
Full-time equivalents (FTE)	72 5 82 10	0.35	n/a
Individuals Served by Functional Centre	72 5 82 10	70	56 - 84
Meal Delivered-Combined	72 5 82 10	3,500	3150 - 3850
Total Cost for Functional Centre	72 5 82 10	\$53,858	n/a
CSS IH - Social and Congregate Dining 72 5 82 12			
Full-time equivalents (FTE)	72 5 82 12	0.40	n/a
Individuals Served by Functional Centre	72 5 82 12	470	376 - 564
Attendance Days Face-to-Face	72 5 82 12	4,800	4320 - 5280
Total Cost for Functional Centre	72 5 82 12	\$30,262	n/a
CSS IH - Transportation - Client 72 5 82 14			
Full-time equivalents (FTE)	72 5 82 14	1.20	n/a
Visits	72 5 82 14	4,200	3780 - 4620
Individuals Served by Functional Centre	72 5 82 14	140	112 - 168
Total Cost for Functional Centre	72 5 82 14	\$99,218	n/a
CSS IH - Assisted Living Services 72 5 82 45			
Full-time equivalents (FTE)	72 5 82 45	11.87	n/a
Inpatient/Resident Days	72 5 82 45	8,030	7629 - 8432
Individuals Served by Functional Centre	72 5 82 45	22	18 - 26
Total Cost for Functional Centre	72 5 82 45	\$619,263	n/a

Schedule E2a: Clinical Activity- Detail

2016-2017

Health Service Provider: West Elgin Community Health Centre

OHRs Description & Functional Centre		2016-2017	
		Target	Performance Standard
¹ These values are provided for information purposes only. They are not Accountability Indicators.			
CSS IH - Caregiver Support 72 5 82 50			
Visits	72 5 82 50	1,200	1080 - 1320
Individuals Served by Functional Centre	72 5 82 50	350	280 - 420
Total Cost for Functional Centre	72 5 82 50	\$997	n/a
CSS IH - Visiting - Social and Safety 72 5 82 60			
Visits	72 5 82 60	1,500	1350 - 1650
Individuals Served by Functional Centre	72 5 82 60	100	80 - 120
Total Cost for Functional Centre	72 5 82 60	\$1,675	n/a
ACTIVITY SUMMARY			
Total Full-Time Equivalents for all F/C		50.18	n/a
Total Visits for all F/C		6,900	6555 - 7245
Total Inpatient/Resident Days for all F/C		8,030	7629 - 8432
Total Individuals Served by Functional Centre for all F/C		6,396	6076 - 6716
Total Attendance Days for all F/C		4,800	4320 - 5280
Total Group Sessions for all F/C		281	225 - 337
Total Meals Delivered for all F/C		3,500	3150 - 3850
Total Group Participants for all F/C		3,155	n/a
Total Service Provider Interactions for all F/C		24,448	23226 - 25670
Total Cost for All F/C		\$5,272,443	n/a

Schedule E2b: CHC Sector Specific Indicators

2016-2017

Health Service Provider: West Elgin Community Health Centre

Performance Indicators	2016-2017 Target	Performance Standard
Cervical Cancer Screening Rate (PAP tests)	73.0%	≥58.4%
Colorectal Screening Rate	64.0%	≥51.2%
Inter-professional Diabetes Care Rate	94.0%	≥75.2%
Influenza Vaccination Rate	58.0%	≥46.4%
Breast Cancer Screening Rate	55.0%	≥44.0%
Periodic Health Exam Rate (Applicable to 2014-15 only)	N/A	-
Vacancy Rate (For NPs and Physicians- Replaced in 2015-16 with Retention Rate)	N/A	-
Retention Rate (For NPs and Physicians)	90.0%	≥72.0%
Access to Primary Care	43.0%	≥38.7%

**Schedule E3a Local: All
2016-2017**

Health Service Provider: West Elgin Community Health Centre

TheHealthline.ca

All South West LHIN community sector Health Service Providers agree to regularly update, and annually review April 1st, site specific programs and services information, as represented within the thehealthline.ca website.

Review Obligations

Annually review/update HSP specific content on thehealthline.ca

Indigenous Cultural Safety Training

A training plan to identify and track the number of staff that register and complete the Indigenous Cultural Safety (ICS) training course is required and can be completed at this link:

<https://www.surveymonkey.com/r/ICCTraining>.

Reporting Obligations

Health Service Providers are required to submit a tracking sheet annually on the number of staff that have taken ICS training by June 30, 2016 (for 15/16 progress) and June 30, 2017 (for 16/17 progress). The tracking template is available on the South West LHIN website here:

<http://www.culturalcompetency.ca/training/ontario>

Schedule F: Project Funding

2016-2017

Health Service Provider: West Elgin Community Health Centre

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

2016-2017

Health Service Provider: West Elgin Community Health Centre

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

2016-2017

Health Service Provider: West Elgin Community Health Centre

Project Funding Agreement Template

5.0 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

2016-2017

Health Service Provider: West Elgin Community Health Centre

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: [insert date range - April 1, 201X –March 31, 201x] (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]