

Via email

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May 13, 2015

Jim Borysko
Director, Regional Operations
The Canadian Red Cross, Chatham-Kent & Sarnia-Lambton Branch
416 East Street North
Sarnia ON N7T 6Y4

Dear Mr. Borysko:

Re: 2014-17 Multi-Sector Service Accountability Agreement

When the Erie St. Clair Local Health Integration Network (the "LHIN") and the Canadian Red Cross, Chatham-Kent & Sarnia-Lambton Branch (the "HSP") entered into a service accountability agreement for a three-year term effective April 1, 2014 (the "MSAA"), the budgeted financial data, service activities and performance indicators for the second and third year of the agreement (fiscal years 2015/16 and 2016/17) were indicated as "To Be Determined (TBD)". The Erie St. Clair LHIN would now like to update the MSAA to include the required financial, service activity and performance expectations for 2015/16 fiscal year to Schedules B, C, D and E.

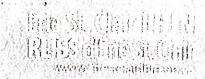
Subject to HSP's agreement, the MSAA will be amended with effect April 1, 2015, by adding the amended Schedules B, C, D and E (the "Schedules") that are included to this letter.

To the extent that there are any conflicts between the current MSAA and this amendment, the amendment will govern in respect of the Schedules. All other terms and conditions in the MSAA will remain the same.

Please indicate the HSP's acceptance of, and agreement to this amendment, by signing below and returning one copy of this letter to the accountability team at Victoria.dillon@lhins.on.ca by March 17, 2015.

If you have any questions or concerns please contact Jean Francois Gauthier by phone 1-866-231-5446 or by email jeanfrancois.gauthier@lhins.on.ca.





The Erie St. Clair LHIN appreciates your and your team's collaboration and hard work during this 2015/16 MSAA refresh process. We look forward to maintaining a strong working relationship with you.

Sincerely,

Let's Make It Happen!

Gary Switzer

Chief Executive Officer

MOHLTC/vad

Attach: Schedule B,C,D,E

AGREED TO AND ACCEPTED BY:

The Canadian Red Cross, Chatham-Kent & Sarnia-Lambton Branch By:

Tanya Elliott, Director General, Ontario

I have the authority to bind the

The Canadian Red Cross, Chatham-Kent & Sarnia-Lambton Branch

And By:

Alan Pearson, Board Chair

National Audit and Finance Committee/Member,

Ontario Community Health Committee

I have the authority to bind the

The Canadian Red Cross, Chatham-Kent & Sarnia-Lambton Branch

My 28, 2013

Ontario

Erie St. Clair Local Health
Integration Network
Réseou local d'intégration
des services de senté

Schedule B1: Total LHIN Funding

2015-2017

Health Service Provider: The Canadian Red Cross Society - Chatham-Kent/Sarnia

			CHECK ACCUMANTER		
LHIN Program Revenue & Expenses	Row #	Account: Financial (F) Reference OHRS VERSION 9.0	2014-2015 Plan Target	2015-2016 Plan Target	2016-2017 Plan Target
REVENUE LHIN Global Base Allocation		E 44000			
HBAM Funding (CCAC only)	1 2	F 11006 F 11005	\$436,939	\$855,244	\$855,244
Quality-Based Procedures (CCAC only)	3	F 11005	\$0	\$0	\$0
MOHLTC Base Allocation	4	F 11004	\$0	\$0	\$0
MOHLTC dase Allocation MOHLTC Other funding envelopes	5	F 11014	\$0 \$0	\$0	\$0
LHIN One Time	6	F 11008	\$0 \$0	\$0 \$0	\$0 \$0
MOHLTC One Time	7	F 11012	\$0	\$0	\$0
Paymaster Flow Through	8	F 11019	\$0	\$0	\$0
Service Recipient Revenue	9	F 11050 to 11090	\$246,272	\$322,052	\$322,052
Subtotal Revenue LHIN/MOHLTC	10	Sum of Rows 1 to 9	\$683,211	\$1,177,296	\$1,177,296
Recoveries from External/Internal Sources	11	F 120*	\$0	\$0	\$0
Donations	12	F 140*	\$34,015	\$35,539	\$35,539
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*]	\$47,200	\$54,744	\$54,744
Subtotal Other Revenues	14	Sum of Rows 11 to 13	\$81,215	\$90,283	\$90,283
TOTAL REVENUE FUND TYPE 2	15	Sum of Rows 10 and 14	\$764,426	\$1,267,579	\$1,267,579
EXPENSES	Fig. 1 (27)		7. 0.,.20	+ .,201,010	Ţ.,±07,070
Compensation					
Salaries (Worked hours + Benefit hours cost)	17	F 31010, 31030, 31090, 35010, 35030, 35090	\$307,739	\$643,633	\$643,633
Benefit Contributions	18	F 31040 to 31085, 35040 to 35085	\$63,382	\$125,199	\$125,199
Employee Future Benefit Compensation	19	F 305*	\$0	\$0	\$0
Physician Compensation	20	F 390*	\$0	\$0	\$0
Physician Assistant Compensation	21	F 390*	\$0	\$0	\$0
Nurse Practitioner Compensation	22	F 380*	\$0	\$0	\$0
Physiotherapist Compensation (Row 128)	23	F 350*	\$0	\$0	\$0
Chiropractor Compensation (Row 129)	24	F 390*	\$0	\$0	\$0
All Other Medical Staff Compensation	25	F 390*, [excl. F 39092]	\$0	\$0	\$0
Sessional Fees	26	F 39092	\$0	\$0	\$0
Service Costs					
Med/Surgical Supplies & Drugs	27	F 460*, 465*, 560*, 565*	\$0	\$0	\$0
Supplies & Sundry Expenses		F 4*, 5*, 6*, [excl. F 460*, 465*, 560*, 565*, 69596, 69571, 72000, 62800, 45100, 69700]	\$389,931	\$473,092	\$473,092
Community One Time Expense	29	F 69596	\$0	\$0	\$0
Equipment Expenses	30	F 7*, [excl. F 750*, 780*]	\$0	30	
	00			60	
Amortization on Major Equip. Software License & Fees	31	IF 750* 780*		\$0	\$7,000
Amortization on Major Equip, Software License & Fees Contracted Out Expense	31	F 750* , 780*	\$7,000	\$7,000	\$7,000
Contracted Out Expense	32	F 8*	\$7,000 \$0	\$7,000 \$14,481	\$7,000 \$14,481
Contracted Out Expense Buildings & Grounds Expenses	32 33	F 8* F 9*, [excl. F 950*]	\$7,000 \$0 \$2,374	\$7,000 \$14,481 \$10,174	\$7,000 \$14,481 \$10,174
Contracted Out Expense Buildings & Grounds Expenses Building Amortization	32 33 34	F 8* F 9*, [excl. F 950*] F 9*	\$7,000 \$0 \$2,374 \$0	\$7,000 \$14,481 \$10,174 \$0	\$7,000 \$14,481 \$10,174 \$0
Contracted Out Expense Buildings & Grounds Expenses	32 33 34 35	F 8* F 9*, [excl. F 950*]	\$7,000 \$0 \$2,374 \$0 \$770,426	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579
Contracted Out Expense Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2	32 33 34 35 36	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000)	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000)	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000)
Contracted Out Expense Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue	32 33 34 35 36 37	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151*	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000
Contracted Out Expense Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations	32 33 34 35 36 37	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000)	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000)	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000)
Contracted Out Expense Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue	32 33 34 35 36 37	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151*	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000	\$7,000 \$14,481 \$10,174 \$30 \$1,273,579 (\$6,000) \$6,000
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3)	32 33 34 35 36 37 38	F 8° F 9', [excl. F 950'] F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131', 141' & 151' Sum of Rows 36 to 37	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000 \$6,000 \$0
Contracted Out Expense Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/[DEFICIT] FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3	32 33 34 35 36 37 38	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0 \$36,132 \$36,132
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/IDEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/IDEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3)	32 33 34 35 36 37 38	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000 \$0 \$30,000 \$30,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0 \$36,132 \$36,132	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000 \$6,000 \$0
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1-HOSPITAL Total Revenue (Type 1)	32 33 34 35 36 37 38	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000 \$0 \$30,000 \$30,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0 \$36,132 \$36,132	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0 \$36,132 \$36,132 \$36,132
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1)	32 33 34 35 36 37 38 39 40 41	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 39 minus Row 40 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000 \$0 \$30,000 \$30,000	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0 \$36,132 \$36,132 \$36,132	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0 \$36,132 \$36,132
Contracted Out Expense Buildings & Grounds Expenses Buildings Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1	32 33 34 35 36 37 38 39 40 41	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 39 minus Row 40 F 1*	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$6,000 \$30,000 \$30,000 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$36,132 \$36,132 \$36,132	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$36,132 \$36,132 \$36,132
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES	32 33 34 35 36 37 38 39 40 41	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 39 minus Row 40 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$7,000 \$0 \$2,374 \$0 \$770,426 \$6,000 \$0 \$30,000 \$30,000 \$0 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 \$6,000 \$0 \$36,132 \$36,132 \$0 \$0 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$0 \$36,132 \$36,132 \$0 \$0 \$0
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Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 + HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES	32 33 34 35 36 37 38 39 40 41 42 43 44 45 46	F 8° F 9°, [excl. F 950°] F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37 F 1° F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40 F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43 Line 15 + line 39 + line 42 Line 16 + line 40 + line 43	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000 \$0 \$30,000 \$30,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 \$6,000 \$0 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000 \$6,000 \$36,132 \$36,132 \$36,132 \$30 \$0 \$1,309,711
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Buildings Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/[DEFICIT] FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Expenses (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres	32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 39 minus Row 40 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 42 minus Row 43 Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46 82*	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000 \$0 \$30,000 \$30,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 \$6,000 \$0 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000 \$6,000 \$36,132 \$36,132 \$36,132 \$30 \$0 \$1,309,711
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/(DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres Admin & Support Services	32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 39 minus Row 40 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 42 minus Row 43 Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$0 \$30,000 \$30,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 \$6,000 \$0 \$36,132 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711 \$1,309,711 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$36,132 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711
Contracted Out Expense Buildings & Grounds Expenses Buildings & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/(DEFICIT) FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) Total Expenses (All Funds) Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres	32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47	F 8* F 9*, [excl. F 950*] F 9* Sum of Rows 17 to 34 Row 15 minus Row 35 F 131*, 141* & 151* Sum of Rows 36 to 37 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 39 minus Row 40 F 1* F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9* Row 42 minus Row 43 Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46 82*	\$7,000 \$0 \$2,374 \$0 \$770,426 \$6,000 \$0 \$30,000 \$30,000 \$0 \$0 \$0 \$0 \$800,426 \$800,426 \$0 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 \$6,000 \$0 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711 \$1,309,711	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711 \$0
Contracted Out Expense Buildings & Grounds Expenses Building & Grounds Expenses Building Amortization TOTAL EXPENSES FUND TYPE 2 NET SURPLUS/[DEFICIT] FROM OPERATIONS Amortization - Grants/Donations Revenue SURPLUS/(DEFICIT Incl. Amortization of Grants/Donations FUND TYPE 3 - OTHER Total Revenue (Type 3) Total Expenses (Type 3) NET SURPLUS/(DEFICIT) FUND TYPE 3 FUND TYPE 1 - HOSPITAL Total Revenue (Type 1) Total Expenses (Type 1) NET SURPLUS/(DEFICIT) FUND TYPE 1 ALL FUND TYPES Total Revenue (All Funds) Total Expenses (All Funds) NET SURPLUS/(DEFICIT) ALL FUND TYPES Total Admin Expenses Allocated to the TPBES Undistributed Accounting Centres Admin & Support Services	32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47	F 8° F 9°, [excl. F 950°] F 9° Sum of Rows 17 to 34 Row 15 minus Row 35 F 131°, 141° & 151° Sum of Rows 36 to 37 F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 39 minus Row 40 F 1° F 3°, F 4°, F 5°, F 6°, F 7°, F 8°, F 9° Row 42 minus Row 43 Line 15 + line 39 + line 42 Line 16 + line 40 + line 43 Row 45 minus Row 46 82° 72 1°	\$7,000 \$0 \$2,374 \$0 \$770,426 (\$6,000) \$0,000 \$30,000 \$30,000 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0 \$0	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 \$6,000 \$6,000 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711 \$1,309,711 \$0 \$336,653	\$7,000 \$14,481 \$10,174 \$0 \$1,273,579 (\$6,000) \$6,000 \$36,132 \$36,132 \$0 \$0 \$1,309,711 \$1,309,711 \$0 \$0 \$38,633 \$1,309,711

Schedule B2: Clinical Activity- Summary

2015-2017

Health Service Provider: The Canadian Red Cross Society - Chatham-Kent/Sarnia

Service Category 2015-2016 Budget	OHRS Framework Level 3	Full-time equivalents (FTE)	Visite F2F, Tel., In House, Cont. Out	Not Uniquely Identified Service Recipient Interactions	Hours of Care In- House & Contracted Out	Inpatient/Resident Days		Attendance Days Face-to-Face	Group Sessions (# of group sessions- not individuals)	Meal Delivered Combined	Group Participant Attendances (Reg & Non-Reg)	Interactions	Service Provider Group Interactions	Mental Health Sessions
CSS In-Home and Community Services (CSS IH COM)	72 5 82*	14	19,461	0	2,520	3,285	2,154	0	0	23,880	0	0	0	0
														DVAN ETT
Service Category 2016-2017 Budget	OHRS Framework Level 3	Full-time equivalents (FTE)	Visite F2F, Tel., In- House, Cont. Out	Identified Service	House & Care In- House & Contracted Out	Inputient/Resident Days		Attendance Days Face-to-Face	Group Sessions (# of group sessions- not individuals)	Meal Delivered- Combined	Group Participant Attendances (Reg & Non-Reg)	Interactions	Service Provider Group Interactions	Mental Health Sessions

SCHEDULE C – REPORTS COMMUNITY SUPPORT SERVICES

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 Su	ıbmission (through OHFS)
2014-2015	Due Dates (Must pass 3c Edits)
2014-15 Q1	Not required 2014-15
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	Not required 2015-16
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	Not required 2016-17
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

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 Fi	nancial 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

Requirement	Due Date
French language service report through SRI	2014-15 - April 30, 2015 2015-16 - April 30, 2016 2016-17 April 30, 2017

SCHEDULE D – DIRECTIVES, GUIDELINES AND POLICIES COMMUNITY SUPPORT SERVICES

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
- 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 E2a: Clinical Activity- Detail

2015-2017

Health Service Provider: The Canadian Red Cross Society - Chatham-Kent/Sarnia

OHRS Description & Functonal	Centre	201	4-2015	2015	5-2016	201	6-2017
¹ These values are provided for information purposes only. They are not Accountable	lity Indicators.	Target	Performance Standard	Target	Performance Standard	Target	Performanc Standard
Administration and Support Services 72 1*							Otanoura
Full-time equivalents (FTE)	72 1*	1.59	n/a	1.95	n/a	1.95	n/a
Total Cost for Functional Centre	72 1*	\$156,571	n/a	\$338,653	n/a	\$338,653	n/a
CSS IH - Meals Delivery 72 5 82 10				4000,000	1,70	7556,055	11/4
Full-time equivalents (FTE)	72 5 82 10	2.75	n/a	2.45	n/a	2.45	n/a
Individuals Served by Functional Centre	72 5 82 10	630	536 - 725	375	300 - 450	375	300 - 450
Meal Delivered-Combined	72 5 82 10	23,866	22673 - 25059	23,880	22686 - 25074	23,880	22686 - 2507
Total Cost for Functional Centre	72 5 82 10	\$220,382	n/a	\$222,637	n/a		
CSS IH - Transportation - Client 72 5 82 14		4-20/502	.,,,,	\$222,037	n/a	\$222,637	n/a
Full-time equivalents (FTE)	72 5 82 14	4.15	n/a	1.70	n/a	1.70	-/-
Visits	72 5 82 14	14,461	13738 - 15184	19,461	18488 - 20434	19,461	n/a
Individuals Served by Functional Centre	72 5 82 14	1,410	1269 - 1551	870	740 - 1001	870	18488 - 2043
Total Cost for Functional Centre	72 5 82 14	\$393,473	n/a	\$171,248			740 - 1001
CSS IH - Homemaking 72 5 82 31	1230214	7555,475	11/8	\$1/1,240	n/a	\$171,248	n/a
Full-time equivalents (FTE)	72 5 82 31	0.00	n/a	5.04	n/a	5.04	T .
Hours of Care	72 5 82 31	0	0 - 0	2,520			n/a
Individuals Served by Functional Centre	72 5 82 31	0	0-0	900	2268 - 2772	2,520	2268 - 2772
Total Cost for Functional Centre	72 5 82 31	\$0	n/a	\$309.881	765 - 1035	900	765 - 1035
CSS IH - Assisted Living Services 72 5 82 45	72 3 02 31	1 40	11/4	\$303,001	n/a	\$309,881	n/a
Full-time equivalents (FTE)	72 5 82 45	0.00	n/a	5.04	n/a	5.04	т
Inpatient/Resident Days	72 5 82 45	0	0-0	3,285	2957 - 3614		n/a
Individuals Served by Functional Centre	72 5 82 45	0	0-0	9		3,285	2957 - 3614
Total Cost for Functional Centre	72 5 82 45	\$0	n/a	\$231,160	7 - 11	9	7 - 11
ACTIVITY SUMMARY	72 3 62 43	1 30	n/a	\$231,160	n/a	\$231,160	n/a
Total Full-Time Equivalents for all F/C		8.49	n/a	16.18	T	16.10	
Total Visits for all F/C		14,461	13738 - 15184	19,461	n/a	16.18	n/a
Total Hours of Care for all F/C		0	0 - 0		18488 - 20434	19,461	18488 - 20434
Total Inpatient/Resident Days for all F/C		0		2,520	2268 - 2772	2,520	2268 - 2772
Total Individuals Served by Functional Centre for all F/C			0 - 0	3,285	2957 - 3614	3,285	2957 - 3614
Total Meals Delivered for all F/C		2,040	1836 - 2244	2,154	1939 - 2369	2,154	1939 - 2369
Total Cost for All F/C		23,866 \$770,426	22673 - 25059	23,880 \$1,273,579	22686 - 25074	23,880	22686 - 25074

Schedule E1: Core Indicators 2015-2017 Health Service Provider: The Canadian Red Cross Society - Chatham-Kent/Sarnia

			*			
Performance Indicators	2014-2015 Target	Performance Standard	2015-2016 Target	Performance Standard	2016-2017 Target	Performance Standard
*Balanced Budget - Fund Type 2	\$0	Y = 0	\$6	\= 0	\$0	>=0
Proportion of Budget Spent on Administration	20.3%	16.3 - 24.4%	26.6%	21.3 - 31.9%	26.6%	21.3 - 31.9%
**Percentage Total Margin	0.00%	>= 0%	0.00%	>= 0%	0.00%	>= 0%
Percentage of Altemate Level of Care (ALC) days (closed cases)	12.0%	<13.2%	12.0%	<13.2%	12.0%	<13.2%
Variance Forecast to Actual Expenditures	0	< 5%	0	< 5%	0	< 5%
Variance Forecast to Actual Units of Service	0	< 5%	0	< 5%	0	< 5%
Service Activity by Functional Centre	Refer to Schedule E2a		Refer to Schedule E2a		Refer to Schedule E2a	
Number of Individuals Served	Refer to Schedule E2a	•	Refer to Schedule E2a	-	Refer to Schedule E2a	
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

Schedule E2d: CSS Sector Specific Indicators 2015-2017 Health Service Provider: The Canadian Red Cross Society - Chatham-Kent/Sarnia

Performance Indicators	2014-2015 Target	Performance Standard	2015-2016 Target		Performance Standard	Performance 2016-2017 Standard Target
No Performance Indicators	•	-			•	
Explanatory Indicators			The state of the s	1		
# Persons waiting for service (by functional centre)						

Schedule E3a Local: All

2015-2017

Health Service Provider: The Canadian Red Cross Society - Chatham-Kent/Sarnia

All HSPs will provide annually a report on the number of patients/clients by mother tongue, official language and aboriginal identity.

HSPs will develop a mechanism to track the language characteristics of their patients/clients to understand opportunities for culturally sensitive services, using the following questions:

- 1. Report on number of patients/clients by mother tongue and official language.
- a) Mother Tongue:
- English
- French
- Other (specify what other language is)

b) Official Language (if mother tongue is not English or French):

- English
- French
- 2. Report on number of patients/clients that identify themselves as aboriginal:
- First Nation
- Inuit
- Metis
- Non-Status
- Urban

Schedule E3 FLS Local: Non-Identified Organizations 2015-2017

Health Service Provider: The Canadian Red Cross Society - Chatham-Kent/Sarnia

opportunities to improve its responsiveness to the needs of the Francophone community. As per paragraph 8.1(c) of the agreement, the HSP will provide yearly a brief report to the LHIN that outlines how the HSP addresses the needs of its local Francophone community. The report template will be posted in SRI. For 2014-2015, the Erie St. Clair LHIN will provide the template. The HSP will also look for