HSAA AMENDING AGREEMENT

THIS AMENDING AGREEMENT (the "Agreement") is made as of the 1st day of April, 2019 **BETWEEN:**

SOUTH WEST LOCAL HEALTH INTEGRATION NETWORK

(the "LHIN")

AND

LISTOWEL 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, 2018 (the "HSAA");

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 HSAA. References in this Agreement to the HSAA mean the HSAA as amended and extended.
- 2.0 Amendments.
- 2.1 Agreed Amendments. The HSAA is amended as set out in this Article 2.
- 2.2 Amended Definitions.

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

C.4. PCOP Targeted Funding and Volumes

HSAA AMENDING AGREEMENT - 2019- 20 SCHEDULES

- 2.3 Term. This Agreement and the HSAA will terminate on March 31, 2020.
- **3.0 Effective Date**. The amendments set out in Article 2 shall take effect on April 1, 2019. All other terms of the HSAA 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.

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6.0	Entire Agreement . This Agreement constite Parties with respect to the subject matter contall prior oral or written representations and account of the subject matter contains and account or written representations.	tained in this Agreement and supersedes
	IN WITNESS WHEREOF the Parties have e set out below.	executed this Agreement on the dates
	SOUTH WEST LOCAL HEALTH INTEGR	ATION NETWORK
	Ву:	
		DATE
	Andrew Chunilall, Acting Board Chair	
	And by:	
		DATE
	Renato Discenza, Interim Chief Executive	Officer
	LISTOWEL MEMORIAL HOSPITAL	
	By: Penny Mulvey	<u>April 3 2019</u>
	Penny Mulvey, Board Chair	
-	And by:	Apr - 3/2019

Karl Ellis, President and Chief Executive Officer

Facility #:

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Hospital Name:

Listowel Memorial Hospital

Hospital Legal Name:

Listowel Memorial Hospital

2019-2020 Schedule A Funding Allocation

	20	19-2020
	[1] Estimated	Funding Allocation
Section 1: FUNDING SUMMARY		
LHIN FUNDING	[2] Base	
LHIN Global Allocation (Includes Sec. 3)	\$14,834,653	
Health System Funding Reform: HBAM Funding	\$0	7
Health System Funding Reform: QBP Funding (Sec. 2)	\$0	
Post Construction Operating Plan (PCOP)	\$0	[2] Incremental/One-Time
Wait Time Strategy Services ("WTS") (Sec. 3)	\$0	\$0
Provincial Program Services ("PPS") (Sec. 4)	\$0	\$0
Other Non-HSFR Funding (Sec. 5)	\$1,779,509	\$0
Sub-Total LHIN Funding	\$16,614,162	\$0
NON-LHIN FUNDING		
[3] Cancer Care Ontario and the Ontario Renal Network	\$78,000	7
Recoveries and Misc. Revenue	\$2,407,209	
Amortization of Grants/Donations Equipment	\$740,010	
OHIP Revenue and Patient Revenue from Other Payors	\$1,466,177	-
Differential & Copayment Revenue	\$339,436	1
Sub-Total Non-LHIN Funding	\$5,030,832	-

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2019-2020 Schedule A Funding Allocation

		2019-202	0	-
[1]	Estimate	d Funding	Allocation	

	[1] Es	timated Funding Allo	cation
Section 2: HSFR - Quality-Based Procedures	Volu	ıme [4] Alie	ocation
Acute Inpatient Stroke Hemorrhage	1 6	s s	60
Acute Inpatient Stroke Ischemic or Unspecified	0	\$	0
Acute Inpatient Stroke Transient Ischemic Attack (TIA)			0
Stroke Endovascular Treatment (EVT)			0
Hip Replacement BUNDLE (Unilateral)			0
Knee Replacement BUNDLE (Unilateral)		<u>_</u>	0
Acute Inpatient Primary Unilateral Hip Replacement			0
Rehabilitation Inpatient Primary Unlilateral Hip Replacement		<u> </u>	0
Elective Hips - Outpatient Rehab for Primary Hip Replacement		<u>-</u>	0
Acute Inpatient Primary Unilateral Knee Replacement		T	
Rehabilitation Inpatient Primary Unlilateral Knee Replacement			
Elective Knees - Outpatient Rehab for Primary Knee Replacement	1 <u> </u>	· · · · · · · · · · · · · · · · · · ·	-
Acute Inpatient Primary Bilateral Joint Replacement (Hip/Knee)	0 0		
Rehab Inpatient Primary Bilateral Hip/Knee Replacement			
Rehab Outpatient Primary Bilateral Hip/Knee Replacement			
Acute Inpatient Hip Fracture		\$	
Knee Arthroscopy		\$	
Acute Inpatient Congestive Heart Failure		\$	
Acute Inpatient Chronic Obstructive Pulmonary Disease	0	\$	
Acute Inpatient Pneumonia	0		
Acute Inpatient Non-Cardiac Vascular Aortic Aneurysm excluding Advanced Pathway	0	\$	
Acute Inpatient Non-Cardiac Vascular Lower Extremity Occlusive Disease	0	\$	
Acute Inpatient Tonsillectomy	0	\$(
Unilateral Cataract Day Surgery	0	\$1	
Retinal Disease		\$(
Non-Routine and Bilateral Cataract Day Surgery	0	\$(-
Corneal Transplants	0	\$(•
Non-Emergent Spine (Non-Instrumented - Day Surgery)	0	\$(
Non-Emergent Spine (Non-Instrumented - Inpatient Surgery)	0	\$(
Non-Emergent Spine (Instrumented - Inpatient Surgery)	0	\$6	
Shoulder (Arthroplasties)	0	\$0	
Shoulder (Reverse Arthroplasties)	0	\$0	
Shoulder (Repairs)	0	\$0	
Shoulder (Other)	0	\$(
Sub-Total Quality Based Procedure Funding	0	\$(_

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2019-2020 Schedule A Funding Allocation

			119-2020 Funding Allocation
Section 3: Wait Time Strategy Services ("WTS")		[2] Base	[2] Incremental Base
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)		\$0	\$0
Sub-Total Wait Time Strategy Services Funding		\$0	\$0
Section 4: Provincial Priority Program Services ("PPS")		[2] Base	[2] Incremental/One-Time
Cardiac Surgery		\$0	\$0
Other Cardiac Services	1000	\$0	\$0
Organ Transplantation		\$0	\$0
Neurosciences	111	\$0	\$0
Bariatric Services	111	\$0	\$0
Regional Trauma		\$0	\$0
Sub-Total Provincial Priority Program Services Funding		\$0	\$0
Section 5: Other Non-HSFR	111	[2] Base	[2] Incremental/One-Time
LHIN One-time payments	-111	\$0	\$0
MOH One-time payments	-1111	\$0	\$0
LHIN/MOH Recoveries	-11 f	\$0	+ **
Other Revenue from MOHLTC	-111	\$1,779,509	4
Paymaster	-111	\$0	4
Sub-Total Other Non-HSFR Funding	-111 	\$1,779,509	\$0
Section 6: Other Funding	19 L TH		
Info. Only. Funding is already included in Sections 1-4 above)	la r	[2] Base	[2] incremental/One-Time
Grant in Lieu of Taxes (Inc. in Global Funding Allocation Sec. 1)	18	\$0	\$0
[3] Ontario Renal Network Funding (Inc. in Cancer Care Ontario Funding Sec. 4)	111 h	\$0	\$0
Sub-Total Other Funding	11 t	\$0	\$0
[1] Estimated funding allocations.			
[2] Funding allocations are subject to change year over year.		M. 1741 : 14	
[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. QBF the BOND policy.	Fund	ding is not base fundi	ng for the purposes of

Facility #:

Hospital Name: Hospital Legal Name:

Listowel Memorial Hospital Listowel Memorial Hospital

2019-2020 Schedule B: Reporting Requirements

1. MIS Trial Balance	
Q2 – April 01 to September 30	31 October 2019
Q3 - October 01 to December 31	31 January 2020
Q4 - January 01 to March 31	31 May 2020
2. Hospital Quartery SRI Reports and Supplemental Reporting as Necessary	
Q2 – April 01 to September 30	07 November 2019
Q3 - October 01 to December 31	07 February 2020
Q4 – January 01 to March 31	7 June 2020
Year End	30 June 2020
3 Auditod Einemaiol Statements	

30 June 2020

4. French Language Services Report

Fiscal Year

Fiscal Year

30 April 2020

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Hospital Legal Name:

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Site Name:

TOTAL ENTITY

2019-2020 Schedule C1 Performance Indicators

*Performance Indicators	Measurement Unit	Performance Target 2019-2020	Performance Standard 2019-2020
90th Percentile Emergency Department (ED) length of stay for Non-Admitted High Acuity (CTAS I-III) Patients	Hours	N/A	N/A
90th Percentile Emergency Department (ED) length of stay for Non-Admitted Low Acuity (CTAS IV-V) Patients	Hours	N/A	N/A
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for Hip Replacements	Percent	N/A	N/A
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for Knee Replacements	Percent	N/A	N/A
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for MRI	Percent	N/A	N/A
Percent of Priority 2, 3 and 4 Cases Completed within Access Targets for CT Scans	Percent	TBD	TBD
Readmissions to Own Facility within 30 days for selected HBAM Inpatient Grouper (HIG) Conditions	Percent	11.2%	<= 12.3%
Rate of Hospital Acquired Clostridium Difficile Infections	Rate	0.00	<=0.15
Explanatory Indicators	Measurement Unit		
90th Percentile Time to Disposition Decision (Admitted Patients)	Hours		
Percent of Stroke/TIA Patients Admitted to a Stroke Unit During Their Inpatient Stay	Percent		
Hospital Standardized Mortality Ratio (HSMR)	Ratio		
Rate of Ventilator-Associated Pneumonia	Rate		
Central Line Infection Rate	Rate		
Rate of Hospital Acquired Methicillin Resistant Staphylococcus Aureus Bacteremia	Rate		
Percent of Priority 2, 3, and 4 cases completed within Access targets for Cardiac By-Pass Surgery	Percentage		
ercent of Priority 2, 3, and 4 cases completed within Access targets for Cancer Surgery	Percentage		
ercent of Priority 2, 3 and 4 Cases Completed within Access Targets for Cataract Surgery	Percentage		

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Listowel Memorial Hospital

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Site Name:

TOTAL ENTITY

2019-2020 Schedule C1 Performance Indicators

*Performance Indicators	Measurement Unit	Performance Target 2019-2020	Performance Standard 2019-2020
Current Ratio (Consolidated - All Sector Codes and fund types)	Ratio	1.34	>= 1.21
Total Margin (Consolidated - All Sector Codes and fund types)	Percentage	(0.68%)	>= -0.68%
Explanatory Indicators	Measurement Unit		
Total Margin (Hospital Sector Only)	Percentage		
Adjusted Working Funds/ Total Revenue %	Percentage		

*Performance Indicators	Measurement Unit	Performance Target 2019-2020	Performance Standard 2019-2020
Alternate Level of Care (ALC) Rate	Percentage	12.70%	<= 14.0%
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	Percentage		
Repeat Unscheduled Emergency Visits Within 30 Days For Substance Abuse Conditions	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 2019-2020 H-SAA Indicator Technical Specification for further details.

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2019-2020 Schedule C2 Service Volumes

Clinical Activity and Patient Services	Measurement Unit	Performance Target 2019-2020	Performance Standard 2019-2020
Ambulatory Care	Visits	11,300	>= 8,475 and <= 14,125
Complex Continuing Care	Weighted Patient Days	5,410	>= 4,599 and <= 6,222
Day Surgery	Weighted Cases	175	>= 131 and <= 219
Elderly Capital Assistance Program (ELDCAP)	Patient Days	0	
Emergency Department	Weighted Cases	650	>= 553 and <= 748
Emergency Department and Urgent Care	Visits	15,500	>= 11,625 and <= 19,378
Inpatient Mental Health	Patient Days	0	-
Inpatient Rehabilitation Days	Patient Days	0	-
Total Inpatient Acute	Weighted Cases	830	>= 706 and <= 955

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2019-2020 Schedule C3: LHIN Local Indicators and Obligations

		1945	A CONTRACTOR OF THE CONTRACTOR	
Indicator	Baseline (4-Quarters): Q3-Q2	F19/20 Target	Target Description	Corridor (Target + 10%)
Percentage of Conservable Bed Days **	46.6%	35.0%	(25% Improvement	e. ec. 72
The percentage of unplanned acute inpatient readmissions to own facility within 30 days of				
discharge,	9.2%	8.3%	10% Improvement	N/A

^{**} ICES definition: Conservable Bed Days has been defined by ICES as "the number of days that might be conserved if a hospital decreased the adjusted average length of stay (LOS) from existing levels to the benchmark levels"

(# of discharges where actual length of stay exceeds expected length of stay / total # of discharges) over a defined period of time

^{**} Percentage of Conservable Bed Days Calculation: