AMENDING AGREEMENT

THIS AMENDING AGREEMENT (the "Agreement") is made as of the 1st day of April, 2010

BETWEEN:

SOUTH WEST LOCAL HEALTH INTEGRATION NETWORK (the "LHIN")

AND

South Huron Hospital Association (the "Hospital")

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

AND WHEREAS given economic uncertainties, funding allocations by the Ministry of Health and Long-Term Care which form the basis for the negotiation of the 2010-12 H-SAA have not yet been confirmed;

AND WHEREAS the OHA, LHINs and the Ministry of Health and Long-Term Care have agreed to adjust the H-SAA process for 2010/11, as set out in the letter dated February 1, 2010 and attached as Appendix A;

AND WHEREAS the parties acknowledge a mutual commitment to pursuing needed operational efficiencies over the course of the agreement;

AND WHEREAS the LHIN and the Hospital have agreed to extend the H-SAA for a third year;

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.
- 2.0 Amendments.
- 2.1 <u>Agreed Amendments</u>. The Parties agree that the H-SAA shall be amended as set out in this Article 2.
- 2.2 <u>Title and Headers</u>. The Parties agree that the title of the H-SAA and the headers within the H-SAA shall be amended by deleting "2008-2010" and replacing it with "2008-2011."

2.3 <u>Definitions</u>. The definition for HAPS in Article 2.1 shall be amended with the addition of the following text immediately after "2009-2010" and before the semi-colon:

"and the Board approved hospital accountability planning submission provided by the Hospital to the LHIN for the Fiscal Year 2010-2011"

- 2.4 <u>Term.</u> The reference to "2010" in Article 3.3, shall be deleted and replaced with "March 31, 2011".
- 2.5 <u>Planning Cycle.</u> The words "for Fiscal Years 2010/11 and 2011/12" in Article 7.1 shall be deleted.

2.6 Schedules.

- (a) Schedule A shall be deleted and replaced with the Schedule A attached to this Agreement.
- (b) Schedule B shall be supplemented with the addition of Schedule B-1 attached to this Agreement.
- (c) Schedule C shall be supplemented with the addition of Schedule C-1 attached to this agreement.
- (d) Schedule D shall be supplemented with the addition of Schedule D-1 attached to this agreement.
- (e) Schedule E shall be supplemented with the addition of Schedule E-1 attached to this agreement.
- (f) Schedule F shall be supplemented with the addition of Schedule F-1 attached to this agreement.
- (g) Schedule G shall be supplemented with the addition of Schedule G-1 attached to this agreement.
- (h) Schedule H shall be supplemented with the addition of Schedule H-1 attached to this agreement.
- 2.7 Renegotiation of Schedules The Parties agree that it is their intention to negotiate and to further amend the Schedules following the announcement of funding allocations by the Ministry of Health and Long-Term Care. It is recognized that a waiver to the balanced budget obligation may need to be negotiated.
- 3.0 Effective Date. The Parties agree that the amendments set out in Article 2 shall take effect on April 1, 2010. All other terms of the H-SAA, including but not limited to current funding levels and those provisions in Schedule A-H not amended by s. 2.6, above, 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 together with Schedules A, B-1, C-1, D-1, E-1, F-1, G-1 and H-1, 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.

By: Jewe Woolcott, Chair (Acting)

And by: Maurit Maurit Maurit Date

Michael Barrett, Chief Executive Officer

South Huron Hospital Association

By: Feb 25, 2010

Debra Hunt, President and Chief Executive Officer

Schedule A Planning and Funding Timetable

OBLIGATIONS

Part I - Funding Obligations	Party	Timing
Announcement of multi-year funding allocation (confirmation of 2008/09 Schedule C funding, reinforcement of 2009/10 Schedule C funding)	LHIN	The later of June 30, 2008 or 14 days after confirmation from the Ministry of Health and Long Term Care
Announcement of multi-year funding allocation (confirmation of 2009/10 Schedule C funding)	LHIN	The later of June 30, 2009 or 14 days after confirmation from the Ministry of Health and Long Term Care
Announcement of multi-year funding allocation (confirmation of 20010/11 Schedule C funding)	LHIN	The later of June 30, 2010 or 14 days after confirmation from the Ministry of Health and Long Term Care

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Part II - Planning Obligations	Party	Timing
Announcement of 2010/11 planning target for hospital planning purposes	LHIN	The later of June 30, 2008 or 14 days after confirmation from the Ministry of Health and Long Term Care
Publication of the Hospital Annual Planning Submission Guidelines for 2010-12	LHIN	No later than June 30, 2009
Announcement of multi-year funding allocation (reaffirm 2010/11 and announce 2011/12 planning targets for 2010-12 HSAA negotiations)	LHIN	The later of June 30, 2009 or 14 days after confirmation from the Ministry of Health and Long Term Care
Indicator Refresh (including detailed hospital calculations)	LHIN (in conjunction with MOHLTC)	No later than November 30, 2009
Refresh related Schedules for 2010-11	Hospital/LHIN	No later than February 26, 2010
Sign 1 year extension to the 2008/10 H-SAA	Hospital/LHIN	No later than March 31, 2010
Announcement of multi-year funding allocation for 2010/11 and announce, if possible, planning targets for 2011/14 HSAA negotiations)	LHIN	14 days after confirmation from the Ministry of Health and Long Term Care
Submission of Hospital Annual Planning Submission for 2010-11	Hospital	6 weeks from LHIN confirmation of financial allocation
Publication of the Hospital Annual Planning Submission Guidelines for 2011/14	LHIN	No later than June 30, 2010
Announcement of multi-year planning targets for 2011/14 HSAA negotiations)	LHIN	14 days after confirmation from the Ministry of Health and Long Term Care
Submission of Hospital Annual Planning Submission for 2011-14	Hospital	No later than October 31, 2010
Indicator Refresh (including detailed hospital calculations)	LHIN (in conjunction with MOHLTC)	No later than November 30, 2010
Refresh the Hospital Annual Planning Submission for 2011- 14 and related Schedules	Hospital/LHIN	No later than January 31, 2011
Sign 2011-14 Hospital Service Accountability Agreement	Hospital/LHIN	No later than February 28, 2011

Obligation Timeline Diagram

Definitions:

Planning Target = For negotiations

Confirm = Confirm signed agreement amounts after appropriation of monies by the Legislature of Ontario

			F	unding Year	•			
	06/07	07/08	08/09	09/10	10/11	11/12	1 <i>2/</i> 13	13/14
:		2007/08 HAA	2	2008-11 H-SA	A			
June 06	Confirm Schedule C Funding	Planning Target	Planning Target					
June 07		Confirm Schedule C Funding	Planning Target (Oct)	Planning Target (Oct)				
Feb. 08			Negotiated Schedule C Funding	Negotiated Schedule C Funding	· · · · · · · · · · · · · · · · · · ·			
June 08			Confirm Schedule C Funding	Reaffirm Schedule C Funding	Planning Target			
June 09				Confirm Schedule C Funding	Planning Target			
Feb. 10					Negotiated Schedule C Funding			
June 10				:	Confirm Schedule C Funding			

Funding Obligations are shaded

Planning Obligations are not shaded

Schedule B-1 Performance Obligations for 10/11

- 1.0 PERFORMANCE CORRIDORS FOR SERVICE VOLUMES AND PERFORMANCE INDICATORS
- 1.1 The provisions of Article 1 of Schedule B apply in fiscal year 10/11 with all references to Schedule D being read as referring to Schedule D-1.
- 2.0 PERFORMANCE CORRIDORS FOR PERFORMANCE INDICATORS
- 2.1 The provisions of Article 2 of Schedule B apply in fiscal year 10/11 subject to the following amendments:
 - (a) sub articles 2.2, 2.3 and 2.6 shall be deleted; and
 - (b) all references to Schedule D shall be read as referring to Schedule D-1.
- 3.0 PERFORMANCE OBLIGATIONS WITH RESPECT TO NURSING ENHANCEMENT/CONVERSION
- 3.1 The provisions of Article 3 of Schedule B apply in fiscal year 10/11with all references to Schedule D being read as referring to Schedule D-1.
- 4.0 PERFORMANCE OBLIGATIONS WITH RESPECT TO CRITICAL CARE
- 4.1 The provisions of Article 4 of Schedule B apply in fiscal year 10/11 subject to the following amendments:
 - (a) references to "2008/09" and "2009/10" shall be read as referring to "2010/11".
 - (b) all references to Schedule E shall be read as referring to Schedule E-1.
- 5.0 PERFORMANCE OBLIGATIONS WITH RESPECT TO POST CONSTRUCTION OPERATING PLAN FUNDING AND VOLUME
- 5.1 The provisions of Article 5 of Schedule B apply in fiscal year 10/11, subject to the following amendments:
 - (a) references to Schedule F shall be read as referring to Schedule F-1;
 - (b) references to "2008/09 and 09/10" shall be read as referring to 2010/11.
- 6.0 PERFORMANCE OBLIGATIONS WITH RESPECT TO PROTECTED SERVICES
- The Performance Obligations set out in Article 6 of Schedule B apply in fiscal year 10/11, subject to the following amendments:
 - (a) All references to Schedule D or Schedule G shall be read as referring to Schedules D-1 and G-1 respectively; and
 - (b) All references to "2008/09 and 09/10" shall be read as referring to "2010/11"
- 7.0 PERFORMANCE OBLIGATIONS WITH RESPECT TO WAIT TIME SERVICES
- 7.1 The Performance Obligations set out in Article 7 of Schedule B apply to fiscal year 10/11

with all references to Schedules A, G, or H being read as referring to Schedules A-1, G-1 or H-1 respectively.

8.0 REPORTING OBLIGATIONS

- 8.1 The reporting obligations set out in Article 8 of Schedule B apply to fiscal year 10/11.
- 8.2 The following reporting obligations are added to Article 8 of Schedule B:
 - (a) French Language Services. If the Hospital is required to provide services to the public in French under the provisions of the French Language Services Act, the Hospital will be required to submit a French language implementation report to the LHIN. If the Hospital is not required to provide services to the public in French under the provisions of the French Language Service Act, it will be required to provide a report to the LHIN that outlines how the Hospital addresses the needs of its local Francophone community."
 - (b) Supplemental Reporting Template for Initiatives. If the Hospital is in receipt of Aging at Home funding, the Hospital is required to complete the Supplemental Report on a quarterly basis and submit using the Web Enabled Reporting System (WERS).
 - (c) Quarterly Status Report. For all new initiatives funded by the South West LHIN, the Hospital is required to complete the Quarterly Status Report and submit directly to the LHIN.

9.0 LHIN SPECIFIC PERFORMANCE OBLIGATIONS

- 9.1 Except where specifically limited to a given year, the obligations set out in Article 9 of Schedule B apply to fiscal 10/11. Without limiting the foregoing, waivers or conditional waivers for 08/09 and 09/10 do not apply to 10/11.
- 9.2 The following provisions are added to Article 9 of Schedule B
 - (a) The Hospital is expected to proceed with the implementation of the Operational Efficiencies as identified in the hospital's Management Planning and Risk Report.

lospital Multi-Year Funding Allocation	Schedule C1 2010/11				
Hospital South Huron Hospital Association					
Fac # 655 (although the control of t	p (20 to 11 Plan	ing Alecation Continue			
	0,541,400	ELITERATE AND PRINT SATISFACTOR OF THE PRINT			
Operating Base Funding					
Multi-Year Funding Incremental Adjustment					
Other Funding		·			
Funding adjustment 1.(-)					
Funding adjustment 2 (1) Funding adjustment 3 (1)					
Funding adjustment 4.()					
Funding Adjustment 5 (Incontinence Supplies) Funding Adjustment 6 (*)					
Other Items Prior Years: Payments					
Critical Care Stategles Schedule E.					
PCOP: Schedule F					
PCOP					
Stable Priority Services: Schedule G					
Chronic Kidney Disease					
Cardiac catherization					
Provincial Strategies Schedule G Organ Transplantation					
Endovascular dorlic aneurysm repair.					
Electrophysiology studies EPS/ablation Parculaneous coronary intervention (PCI)					
Implantable cardiac defibrillators (ICD) Dally noctumal home hemodialysis	•				
Provincial peritoneal dialysis initiative					
Newborn screening program					
Specialized Hospital Services: Schedule G					
Cardie: Rehabilitation Visudyne Therapy					
Total Hip and Knee (tent Replacements (Non-WTS)					
Magnetic Resonance Imaging Regional Trauma					
Regional & District Stroke Centres Sexual Assault/Domestic Violence Treatment Centres					
Provincial Regional Genetic Services					
HIV Outpatient Clinics Hemophillac Ambulatory Clinics					
Permanent Cardiac Pacemaker Services					
Provincial Resources Bone Marrow Transplant					
Adult Interventional Cardiology for Congenital Heart Defects					
Cardiac Laser Lead Removals Pulmonary Thromboendarterectomy Services					
Thoraccabdominal Aortic Aneurysm Repairs (TAA)					
Health Results (Wait Time Strategy): Schedule H					
Selected Cardiac Services Total Hip and Knee John Replacements					
Calaract Surgeries					
Magnelic Resonance Imaging (MRI) Computed Tomography (CT)					
Total Additional Base and One Time Funding	O	0			
	6,64	.400			
Total Allocation	0,04				

Allocations not provided in this schedule for 2010/11 will be provided to bospitale in subsequent planning cycles. Hospitals should assume, for planning purposes, funding for similar volumes for Priority Services in out-years.

pital South Huron Hospita	I Association		TOTAL TOTAL PARTY STATE AND ASSESSED.	Markotti (Adija Salah Kata)
G# 655				
		2010/13	2010/11	
iobal Volumes	Units of Service	Performance Farget	Performance Standardo	
ofal Acute Activity; cluding inpatient and ay Surgery*	Weighted Cases	757	643 - 871	
Other .				
Complex Continuing Gare	RUG Weighted Patient Days	1,050	> 893	
Mental Health	Inpallent Days	o	>0	
ELDCAP	Inpatient Days	0	0.00 - 0.00	
Rehabilitation	Inpatient Days	360	> 306	
Emergency Department Visits	Visils	11,000	> 9,350	
Ambulatory Care***	Visits	23,000	> 17,250	
	in SMSH inethology and MOH I IC PAC. III web			

South Huron Hospital A	ssociation			
Fac.# 655 Performance indicators		2010/11 Pärformance Pärget	2010/L1 Performanse Standard*	
HSAA Performance Indicators				
Performance Indicators For All Hospit	als			
Current Ratio		1.40	0.8 - 2.0	
Year End Total Margin		0.19%	0%	

	South Huron Hos	oilal Association					
Hospita							
		•			•		
						•	
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Once negotiated, an amendment will be made under section 15.3 of the Agreement to include these targets and any additional conditions not otherwise set out in Schedule B or B1. This funding would be an additional in-year allocation contemplated by section 5.3 of the Agreement

Hospital	South Huron Hospital Associa	ion			
	TBD	. This section has bee	en intentionally left bla	nk	

Once negotiated, an amendment (Sch F1.1) will be made under section 15.3 of the Agreement to include these targets and any additional conditions not otherwise set out in Schedule B or B1. This funding would be an additional in-year allocation contemplated by section 5.3 of the Agreement

Protected Services

Schedule G1 2010/11

lospital South Huron Hospital Association	on .						
Fac # 655	Unils of Service.	2010/11 Performance Parget		, 2010/11 Performance Standard	20	nsvazi Elli Plan	Ų
Stable Priority Services Chronic Kidney Disease	Weighted Units	N/A		N/A		N/A	
Cardiac catherization	. Procedures	N/A		N/A		N/A	
: Cardiac surgery	Weighted Cases	N/A		N/A		N/A	
Provincial Strategies							
Organ Transplantation* Endovascular aortic aneurysm repair	Cases	N/A		N/A		N/A	
Electrophysiology studies EPS/ablation Percutaneous coronary intervention (PCI) Implantable cardiac defibrillators (ICD) Daily noctumal home hemodialysis Provincial peritoneal dialysis initiative Newborn screening program							
Specialized Hospital Services							
Cardiac Rehabilitation	Number of patients treated	N/A		N/A		N/A	
-Visudyne-Therapy	Number of insured Visudyne vials	N/A	The state of the s	N/A		N/A	
Total Hip and Knee Joint	Number of Implant Devices	N/A		N/A		N/A	
Replacements (Non-WTS)							
Magnetic Resonance Imaging	Hours of operation Cases	N/A N/A		N/A		N/A N/A	
Regional Trauma Regional & District Stroke Centres Sexual Assault/Domestic Violence Treatme Provincial Regional Genetic Services HIV Outpatient Clinics Hemophiliac Ambulatory Clinics Permanent Cardiac Pacemaker: Services							
Provincial Resources Bone Marrow Transplant Adult Interventional Cardiology for Congeni Cardiac Laser Lead Removals Pulmonary Thromboendarterectomy Servic Thoracoabdominal Aortic Aneurysm Repair	es						

Note: Additional accountabilities assigned in Schedule B, B1

Funding and volumes for these services should be planned for based on 2009/10 approved allocations. Amendments, pursuant to section 5.2 of this Agreement, may be made during the quarterly submission process.

^{*} Organ Transplantation - Funding for living donation (kidney & liver) included as part of organ transplantation funding. Hospitals are funded retrospectively for deceased donor management activity, reported and validated by the Trillium Gift of Life Network.

Wait Time Services					建一块体的	Schedule H1 2010/
Hospital South Huron Hospital Association						
Fac# 655 25 25 25 25 25 25 25 25 25 25 25 25 2) Finded (**) Uctomenal Volumes (**)		2010/11 Base Volumer		
Selected Cardiac Services		R	lefer to Schedule G for Cardi			
Total Hip and Knee Joint Replacements (Total Implantations)	N/A	N/A		N/A	N/A	
Calaraci Suryenes (Total Procedures)	N/A	N/A		Control of the contro	N/A	
Magnetic Resonance Imaging (MRI) (Total Hours)	N/A	N/A		N/A	N/A	
Computed (omography (CT)) (Total Hours)	N/A	N/A		N/A	N/A	

^{*} The 2009/10 Funded volumes are as a reference only

** Once negotiated, an amendment will be made under section 15.3 of the Agreement to include these targets and any additional conditions not otherwise set out in Schedule 8,81. This funding would be an additional in-year allocation contemplated by section 5.3 of the Agreement.