



HEALTH COMMITTEE

Wednesday, March 9, 2022 – 9:30 a.m.

AGENDA

1. Call to order.
2. Roll call.
3. Disclosure of pecuniary interest and general nature thereof.
4. Adoption of minutes of previous meeting held on February 9, 2022.
5. Delegations: None at time of mailing.

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| 6. Emergency Services Department Report | 3 |
| 7. Long-Term Care Report | 9 |
| 8. Administration Department Report | 25 |
| 9. Board of Health Minutes – January 25, 2022. | 64 |
| 10. New Business. | |
| 11. Closed Meeting – None at time of mailing. | |
| 12. Date of next meeting (Wednesday, April 13, 2022) and adjournment. | |

NOTE: a) County Council:

Special Meeting – Wednesday, March 23, 2022

Regular Meeting - Wednesday, March 30, 2022

- b) Submissions received from the public, either orally or in writing may become part of the public record.

Strategic Plan

Strategic Plan Goal # 1: To inform the Federal and Provincial government on our unique needs so that Renfrew County residents get their “fair share”.

Initiatives:

- (a) Create s strategic communications plan**
- (b) Identify and advocate for issues important to the County of Renfrew.**

Strategic Plan Goal # 2: Fiscal sustainability for the Corporation of the County of Renfrew and its ratepayers.

Initiatives:

- (a) Commitment from Council supporting principles within the Long-Term Financial Plan**
- (b) Establish Contingency Plan to respond to provincial and federal financial pressures and opportunities beyond the Long-Term Financial Plan.**

Strategic Plan Goal # 3: Find cost savings that demonstrate our leadership while still meeting community needs.

Initiatives:

- (a) Complete community needs assessment**
- (b) With identified partners implement plan to optimize service delivery to the benefit of our residents.**

Strategic Plan Goal # 4: Position the County of Renfrew so that residents benefit from advances in technology, to ensure that residents and staff have fair, affordable and reasonable access to technology.

Initiatives

- (a) Ensure that the County of Renfrew is top of the list for Eastern Ontario Regional Network funding for mobile broadband**
- (b) Lobby for secure and consistent radio systems for first responders and government**
- (c) Put a County of Renfrew technology strategy in place.**

COUNTY OF RENFREW
EMERGENCY SERVICES REPORT

TO: Health Committee

FROM: Michael Nolan, Director of Emergency Services/Chief, Paramedic Service

DATE: March 9, 2022

SUBJECT: Department Report

INFORMATION

1. Community Paramedic Program Update [Strategic Plan Goal #3]

A Point of Care Ultrasound Service (POCUS) rollout within the CPRU program is being planned, including education for staff in a train the trainer model to leverage the Canadian Point of Care Ultrasound Society's expertise and accreditation. This will result in improved assessment and diagnostic capability for the Community Paramedic Program.

The CPRU program is participating in the High Intensity Supports at Home (HISH) program in collaboration with Home and Community Care Support Services and other multidisciplinary agencies in the community to provide "wrap around" care for patients requiring more intensive supports to safely remain at home.

2. COVID-19 Testing Update [Strategic Plan Goal # 3]

Swabbing clinics continue to provide testing for eligible residents although there has been a significant decline in numbers. The clinic in Shady Nook still offers weekday clinics while Horton and Arnprior have reduced the number of testing dates.

The transition to testing with the Abbott ID Now rapid analyzers will be used almost exclusively starting next week, while PCR testing will be used on an as

needed basis. All appointments for testing will continue to be booked through RCVTAC.

3. **RCVTAC - Funding**

Attached as Appendix ES-I is a letter dated February 14, 2022, from Ms. Fredrika Scarth, Director, Testing Strategy Coordination Branch, Ministry of Health providing confirmation that the Ministry of Health has received approval to continue supporting COVID-19 testing in fiscal year 2022-23, including maintaining current funding support for the Renfrew County VTAC.

4. **Vaccine Update [Strategic Plan Goal # 3]**

At the end of February, mass vaccine clinics were transitioned to a pop-up clinic model in response to the needs of our community. The clinics will be a continuation of the collaboration between the County of Renfrew Paramedic Service and the Renfrew County and District Health Unit. The goal is to have Pop-up Clinics in locations where there has not been community access since the fall. Approximately 500 in-home vaccinations have been completed. The in-home service will be continued until everyone who requires a vaccine has been provided access to one.

Chronic Home Care Recipients – Vaccine Statistics

The following statistics provide insight into how the County of Renfrew compares to the rest of the Province of Ontario for provision of vaccines to the 2009 chronic home-care recipients in the County of Renfrew. The data is from February 6, so it is anticipated that the County of Renfrew rates are higher.

Vaccine - 1 Dose:

Ontario – 92.4%

RCDHU – 94.6% (3rd highest rate)

Vaccine - 2 doses:

Ontario – 90.5%

RCDHU – 93.6% (2nd highest rate)

Vaccine – 3 doses:

Ontario – 67.4%

RCHDU – 73.9% (7th highest rate)

5. **Gratitude**

Attached as Appendix ES-II is a letter from Chief Pierre Poirier, Ottawa Paramedic Service, thanking the County of Renfrew Paramedic Service for the assistance provided during the recent convoy demonstrations in Ottawa on February 19 and 20, 2022.

Ministry of Health

Testing Planning and
Implementation

777 Bay Street, 19th Floor
Toronto ON M5G 2C8

Telephone: 416 327-7727

Ministère de la Santé

Planification et mise en œuvre
relatives au dépistage

777, rue Bay, 19^e étage
Toronto ON M5G 2C8

Téléphone : 416 327-7727

MEMORANDUM TO: Ms. Debbie Robinson
Warden
County of Renfrew

Ms. Leah Levesque
President & Chief Executive Officer
Arnprior Regional Health

FROM: Fredrika Scarth
Director
Testing Strategy Coordination Branch
Ministry of Health

DATE: February 14, 2022

SUBJECT: **COVID-19 Testing: Confirmation of Funding for FY 2022-23**

Thank you for your dedication and ongoing commitment in ensuring timely and equitable access to COVID-19 testing and assessments. The Ministry of Health (the ministry) understands that the Renfrew County Virtual Triage and Assessment Centre (VTAC) continues to strengthen access to health care in Renfrew County and is a critical part of the province's pandemic response.

By way of this memo, I can confirm that the Ministry of Health has received approval to continue supporting COVID-19 testing in fiscal year 2022-23, through the provincial diagnostic network overseen by Ontario Health. This includes maintaining current funding support for the Renfrew County VTAC.

Ontario Health will provide additional implementation details as they become available.

In addition, the Ministry is reviewing your proposal for expanding virtual triage services in Renfrew County to provide health care services beyond COVID-19.

.../2

Ministry officials will be in contact with you if any further information is required about your proposal, and to communicate a decision once it is made.

Sincerely,

Original signed by

Fredrika Scarth
Director, Testing Strategy Coordination Branch

c: Mr. Matthew Anderson, President and Chief Executive Officer, Ontario Health
Mr. Mark Walton, Senior Vice-President, COVID-19 Pandemic Response, Ontario Health
Ms. Michele Henry, Operational Director, Provincial Diagnostic Network, Ontario Health
Ms. Vanessa Allen, Medical Director, COVID-19 Provincial Diagnostic Network, Ontario Health
Mr. Elham Roushani, CFO, Ontario Health
Ms. Anna Greenberg, CRO, Toronto and East, Ontario Health
Ms. Alison Blair, Associate Deputy Minister, Pandemic Response and Recovery, Ministry of Health
Mr. Greg Hein, Assistant Deputy Minister, Digital Health Division, Ministry of Health



February 28, 2022

Debbie Robinson
Warden
County of Renfrew
9 International Drive
Pembroke, ON K8A 6W5

Warden Robinson:

On behalf of the Ottawa Paramedic Service, I wish to express our thanks for the assistance that Renfrew Paramedic Service provided to us during the recent demonstrations and occupation that the City of Ottawa experienced on February 19th and 20th, 2022.

We greatly appreciated you sending a Paramedic crew and vehicle for coverage in service to the Ottawa area during this time. Obviously with the demands of the police operation and potential impact on our daily operations they were very much appreciated.

We count on and value the partnership that the Ottawa Paramedic Service has with the Renfrew County Paramedic Service and recognize and appreciate the important role your organization played in helping us meet the challenges we faced during the Convoy occupation.

Once again, thank you for your assistance it was very much appreciated.

Sincerely yours,

Pierre Poirier, Chief
Ottawa Paramedic Service

cc: **M. Nolan, Chief, Renfrew County Paramedic Service**

**COUNTY OF RENFREW
LONG-TERM CARE REPORT**

TO: Health Committee

FROM: Mike Blackmore, Director of Long-Term Care

DATE: March 9, 2022

SUBJECT: Department Report

INFORMATION

1. COVID-19 Pandemic Update – Long-Term Care (Strategic Plan Goal #1)

The Renfrew County and District Health Unit (RCDHU) declared Bonnechere Manor's COVID outbreak that initially started on January 18, 2022 to be over on February 24, 2022. On March 2, 2022, RCDHU declared a facility wide outbreak in response to positive PCR results recorded for residents residing on Pinnacle Home Area and HM-2 North Home Area.

RCDHU has declared Miramichi Lodge 3A Home Area in a confirmed COVID outbreak status as of February 25, 2022 as the result of two residents testing positive. Both Homes have implemented enhanced infection prevention and control measures as directed by RCDHU including:

- Use of N95 masks and protective eyewear on affected units
- Tray service for dining
- General visitor restrictions (facility wide at Bonnechere Manor and Resident Home area 3A at Miramichi Lodge)
- Social absence restrictions (facility wide at Bonnechere Manor and Resident Home area 3A at Miramichi Lodge)
- Staffing cohort
- Isolation of affected residents
- Twice daily resident symptom screening

The provincial easing of restrictions as of February 21, 2022 include:

- All general visitors 5 years and older who provide proof of being fully vaccinated against COVID-19 may resume visits to long-term care homes.
- Children under 5 years of age continue to be restricted from entering a long-term care home, except for infants 12 months or younger.
- The number of visitors (including caregivers) that may visit at a time per resident increases to three.
- All residents regardless of vaccination status can resume social day absences. Residents and family are reminded about the benefits of limiting contact with others, including avoiding large social gatherings, following masking and physical distancing as much as possible, and only being in close contact with individuals who have had three COVID-19 vaccine doses.
- Social overnight absences are able to resume for residents who have had at least three COVID-19 vaccine doses.

In an effort to address the critical nursing shortage, the Ontario Nurses Association negotiated with Premier Ford, a \$5,000 bonus for all front-line nurses in publicly-funded settings on February 11, 2022. The province is also considering resurrecting the Late-Career Nursing Initiative and the New Graduate program toward ensuring nurses are able to take time-off. AdvantAge Ontario issued a letter to Minister of Health Christine Elliott, Minister of Long-Term Care Paul Calandra, and President of the Treasury Board Prabmeet Sarkaria outlining concerns with this potential initiative, primarily that of the exclusion of other health care providers. There has been no further update.

2. Ministry of Labour (Strategic Plan Goal #1)

Paula MacDonald, Occupational Health and Safety Inspector with the Ministry of Labour, conducted inspections over the phone for Miramichi Lodge on February 10, 2022 and Bonnechere Manor on February 14, 2022. Phone inspections were conducted with a Manager and a staff member of the Joint Occupational Health and Safety Committee for each Home. The purpose of the inspection was to respond to a complaint received by the Ministry of Labour alleging workers who may be positive for COVID-19 were working in the workplace and to review measures and procedures in place to protect workers from COVID-19. The inspection findings for both Homes

concluded both Homes were compliant regarding COVID screening and infection prevention and control measures. No orders were issued.

3. Ministry of Long-Term Care Inspection Report (Strategic Plan Goal #1)

Ms. Susan Lui, Inspector with the Ministry of Long-Term Care conducted a Critical Incident System inspection at Miramichi Lodge on the following dates: January 27, 31, February 2, 4, 8 and 11, 2022 regarding two critical incidents. The following inspection protocols were used during this inspection: Falls Prevention; Infection Prevention and Control and Prevention of Abuse, Neglect and Retaliation. Non-compliances were not issued and the full report is available through the Ministry of Long-Term Care website: [InspectionReportPublic2 \(Itchomes.net\)](https://www.itschomes.net/InspectionReportPublic2).

4. AdvantAge Ontario Annual Convention 2022 (Strategic Plan Goal #1)

The AdvantAge Ontario Annual Convention from April 20 to April 22, 2022 will be virtual again this year. For County of Renfrew Councillors who are interested in attending, please contact Dianne Johnston, Administrative Assistant at djohnston@countyofrenfrew.on.ca for more information.

RESOLUTIONS

5. Signing Authority – Bonnechere Manor (Strategic Plan Goal #2)

Recommendation: THAT the signing authority for Bonnechere Manor trust accounts be updated to remove Kimberley Saunders and add Shiji Pattayil Administrative Assistant-Finance effective immediately. AND FURTHER that two (2) of the following names have signing authority: Jeffrey Foss, Sandra Blok, Michael Blackmore and Shiji Pattayil.

Background

Kimberley Saunders resigned as Administrator for Bonnechere Manor on February 28, 2022 and recruitment for this position is underway. Shiji Pattayil is the successful applicant for the Administrative Assistant-Finance position and will commence her employee at Bonnechere Manor on March 14, 2022.

6. Signing Authority – Miramichi Lodge (Strategic Plan Goal #2)

Recommendation: THAT the signing authority for Miramichi Lodge trust accounts be updated to remove Jill Eady and add Kim Prentice Administration Supervisor effective immediately. AND FURTHER that two (2) of the following names have signing authority: Jeffrey Foss, Michael Blackmore, Kim Prentice and Brendan Mellish.

Background

Jill Eady resigned as Administration Supervisor for Miramichi Lodge on December 16, 2021. Kim Prentice was the successful applicant and commenced her employment at Miramichi Lodge on January 4, 2022.

BY-LAWS

7. “Extending Letters” to the Long-Term Care Service Accountability Agreement (Strategic Plan Goal #2)

Recommendation: THAT the Health Committee recommend that County Council authorize the Warden and Chief Administrative Officer/Clerk to sign the “Extending Letters” for the extension of the Long-Term Care Service Accountability Agreements from March 31, 2022 until March 31, 2023 between Ontario Health and each of Bonnechere Manor and Miramichi Lodge for submission by the deadline of March 30, 2022; AND FURTHER THAT County Council pass a By-law to Amend By-law 39-21, being a By-law Authorizing the Warden and Clerk to continue the Long-Term Care Service Accountability Agreement.

Background

Bonnechere Manor and Miramichi Lodge each entered into a Long Term Care Service Accountability Agreement (L-SAA) with Ontario Health with a request to sign ‘Extending Letters’ for extension of the L-SAAs for each of Bonnechere Manor and Miramichi Lodge from March 31, 2022 until March 31, 2023 and submitted by the deadline of March 30, 2022. The Extending Letters and By-law are attached as Appendix LTC-I.

8. Bonnechere Manor Senior/Adult Day Program Multi-Sector Service Accountability Agreement (M-SAA) (Strategic Plan Goal #2)

Recommendation: THAT the Health Committee recommend that County Council authorize the Warden and Chief Administrative Officer/Clerk to sign the “Extending Letter” for the extension of the Multi-Sector Service Accountability Agreement from March 31, 2022 to March 31, 2023 between Ontario Health and Bonnechere Manor Senior/Adult Day Program for submission by the deadline of March 30, 2022. AND FURTHER THAT County Council pass a By-law to Amend By-law 38-21 being a By-law Authorizing the Warden and Clerk to continue the Multi-Sector Service Accountability Agreement at their next session.

Background

Bonnechere Manor has been operating the Senior/Adult Day Program in Renfrew since February 1997.

For the continuation of 100% funding for the Bonnechere Manor Senior/Adult Day Program, Ontario Health is requesting the signed ‘Extending Letter’ for the extension of the Multi-Sector Service Accountability Agreement from March 31, 2022 until March 31, 2023 and submitted by the deadline of March 30, 2022. The Extending Letter and By-law are attached as Appendix LTC-II.

COUNTY OF RENFREW

BY-LAW NUMBER __-22

**A BY-LAW TO AMEND BY-LAW 39-21 BEING A BY-LAW AUTHORIZING THE
WARDEN AND CLERK TO EXECUTE AN “EXTENDING LETTER” FOR THE LONG-
TERM CARE SERVICE ACCOUNTABILITY AGREEMENT WITH ONTARIO HEALTH**

WHEREAS Sections 8, 9 and 11 of the Municipal Act, 2001, S.O. 2001, as amended, authorizes Council to enter into agreements;

WHEREAS the County of Renfrew deems it desirable to enter into an amended agreement with Ontario Health by signing the “Extending Letter” for the Long-Term Care Service Accountability Agreement (L-SAA) from March 31, 2022 until March 31, 2023 for ongoing provincial funding;

NOW THEREFORE the Council of the Corporation of the County of Renfrew hereby enacts as follows:

1. The amended agreements marked as Schedule “I” attached to and made part of this by-law shall constitute as amended agreements between the Corporation of the County of Renfrew Bonnechere Manor and Miramichi Lodge and Ontario Health for the “Extending Letter” to the L-SAA and Schedule E contained within the original L-SAA executed by Council be amended.
2. That the Warden and Clerk are hereby empowered to do and execute all things, papers, and documents necessary to the execution of this by-law.
3. That this by-law shall come into force and take effect upon the passing thereof.

READ a first time this 30th day of March, 2022.

READ a second time this 30th day of March, 2022.

READ a third time and finally passed this 30th day of March, 2022.

DEBBIE ROBINSON, WARDEN

PAUL V. MOREAU, CLERK



DELIVERED ELECTRONICALLY

February 28, 2022

Mr. Mike Blackmore
Director of Long-Term Care
Corporation of the County of Renfrew
Bonnechere Manor
470 Albert Street
Renfrew, ON K7V 4L5
Email: MBlackmore@countyofrenfrew.on.ca

Dear Mr. Blackmore,

Re: CCA s. 20 Notice and Extension of Long-Term Care Home Service Accountability Agreement ("Extending Letter")

The *Connecting Care Act, 2019* ("CCA") requires Ontario Health ("OH") to notify a health service provider when OH proposes to enter into, or amend, a service accountability agreement with that health service provider.

OH hereby gives notice and advises Corporation of the County of Renfrew (the "HSP") of OH's proposal to amend the long-term care home service accountability agreement (as described in the CCA) currently in effect between OH and the HSP (the "SAA").

Subject to the HSP's acceptance of this Extending Letter, the SAA will be amended with effect on March 31, 2022 as set out below. All other terms and conditions of the SAA will remain in full force and effect.

The terms and conditions in the SAA are amended as follows:

- 1) **Term** – In section 2.1, "March 31, 2022" is deleted and replaced by "March 31, 2023".
- 2) **Schedules** – The Schedules in effect on March 31, 2022 shall remain in effect until March 31, 2023, or until such other time as may be agreed to in writing by OH and the HSP.

Unless otherwise defined in this letter, all capitalized terms used in this letter have the meanings set out in the SAA.

Please indicate the HSP's acceptance and agreement to the amendments described in this Extending Letter by signing below and returning one scanned copy of this letter by e-mail no later than the end of business day on March 30, 2022 to: OH-East_Submissions@ontariohealth.ca.

CCA s. 20 Notice and Extension of Long-Term Care Home Service Accountability Agreement
("Extending Letter")

The HSP and OH agree that the Extending Letter may be validly executed electronically, and that their respective electronic signature is the legal equivalent of a manual signature.

Should you have any questions regarding the information provided in this Extending Letter, please contact Sam Malek, Lead, Performance, Accountability and Funding Allocation at Sam.Malek@ontariohealth.ca or 343-300-6868.

Sincerely,



Anna Greenberg
Chief Regional Officer, Toronto and East
Ontario Health

c. Debbie Robinson, Warden, Corporation of the County of Renfrew
Eric Partington, Vice President, Performance, Accountability and Funding Allocation, Ontario Health
(East)

Signature page follows

CCA s. 20 Notice and Extension of Long-Term Care Home Service Accountability Agreement
("Extending Letter")

AGREED TO AND ACCEPTED BY

Corporation of the County of Renfrew
Bonnechere Manor

By:

Paul Moreau
Chief Administrative Officer/Clerk for the County of Renfrew
I have authority to bind the health service provider.

Date: _____
mm/dd/yyyy

And By:

Debbie Robinson
Warden
I have authority to bind the health service provider.

Date: _____
mm/dd/yyyy



DELIVERED ELECTRONICALLY

February 28, 2022

Mr. Mike Blackmore
Director of Long-Term Care
Corporation of the County of Renfrew
Miramichi Lodge
470 Albert Street
Renfrew, ON K7V 4L5
Email: MBlackmore@countyofrenfrew.on.ca

Dear Mr. Blackmore,

Re: CCA s. 20 Notice and Extension of Long-Term Care Home Service Accountability Agreement ("Extending Letter")

The *Connecting Care Act, 2019* ("CCA") requires Ontario Health ("OH") to notify a health service provider when OH proposes to enter into, or amend, a service accountability agreement with that health service provider.

OH hereby gives notice and advises Corporation of the County of Renfrew (the "HSP") of OH's proposal to amend the long-term care home service accountability agreement (as described in the CCA) currently in effect between OH and the HSP (the "SAA").

Subject to the HSP's acceptance of this Extending Letter, the SAA will be amended with effect on March 31, 2022 as set out below. All other terms and conditions of the SAA will remain in full force and effect.

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Unless otherwise defined in this letter, all capitalized terms used in this letter have the meanings set out in the SAA.

Please indicate the HSP's acceptance and agreement to the amendments described in this Extending Letter by signing below and returning one scanned copy of this letter by e-mail no later than the end of business day on March 30, 2022 to: OH-East_Submissions@ontariohealth.ca.

CCA s. 20 Notice and Extension of Long-Term Care Home Service Accountability Agreement
("Extending Letter")

The HSP and OH agree that the Extending Letter may be validly executed electronically, and that their respective electronic signature is the legal equivalent of a manual signature.

Should you have any questions regarding the information provided in this Extending Letter, please contact Sam Malek, Lead, Performance, Accountability and Funding Allocation at Sam.Malek@ontariohealth.ca or 343-300-6868.

Sincerely,



Anna Greenberg
Chief Regional Officer, Toronto and East
Ontario Health

c. Debbie Robinson, Warden, Corporation of the County of Renfrew
Eric Partington, Vice President, Performance, Accountability and Funding Allocation, Ontario Health
(East)

Signature page follows

CCA s. 20 Notice and Extension of Long-Term Care Home Service Accountability Agreement
("Extending Letter")

AGREED TO AND ACCEPTED BY

Corporation of the County of Renfrew
Miramichi Lodge

By:

Paul Moreau
Chief Administrative Officer/Clerk for the County of Renfrew
I have authority to bind the health service provider.

Date: _____
mm/dd/yyyy

And By:

Debbie Robinson
Warden
I have authority to bind the health service provider.

Date: _____
mm/dd/yyyy

COUNTY OF RENFREW

BY-LAW NUMBER __-22

A BY-LAW TO AMEND BY-LAW 38-21 BEING A BY-LAW AUTHORIZING THE WARDEN AND CLERK TO EXECUTE AN “EXTENDING LETTER” FOR THE MULTI-SECTOR SERVICE ACCOUNTABILITY AGREEMENT WITH ONTARIO HEALTH FOR THE SENIOR/ADULT DAY PROGRAM

WHEREAS Sections 8, 9 and 11 of the Municipal Act, 2001, S.O. 2001 as amended, authorizes Council to enter into agreements;

WHEREAS the County of Renfrew deems it desirable to enter into an amended agreement with Ontario Health by signing the “Extending Letter” for the Multi-Sector Service Accountability Agreement (M-SAA) from March 31, 2021 until March 31, 2022 for the continuation of 100% funding for the Bonnechere Manor Senior/Adult Day Programs;

NOW THEREFORE the Council of the Corporation of the County of Renfrew hereby enacts as follows:

1. The amended agreement marked as Schedule “I” attached to and made part of this by-law shall constitute an amended agreement between the Corporation of the County of Renfrew and Ontario Health.
2. That the Warden and Clerk are hereby empowered to do and execute all things, papers, and documents necessary to the execution of this by-law.
3. That this by-law shall come into force and take effect upon the passing thereof.

READ a first time this 30th day of March, 2022.

READ a second time this 30th day of March, 2022.

READ a third time and finally passed this 30th day of March, 2022.

DEBBIE ROBINSON, WARDEN

PAUL V. MOREAU, CLERK



DELIVERED ELECTRONICALLY

February 25, 2022

Mr. Mike Blackmore
Director of Long-Term Care
Corporation of the County of Renfrew
470 Albert Street
Renfrew, ON K7V 4L5
Email: MBlackmore@countyofrenfrew.on.ca

Dear Mr. Blackmore:

Re: CCA s. 20 Notice and Extension of Multi-Sector Service Accountability Agreement (“Extending Letter”)

The *Connecting Care Act, 2019* (“CCA”) requires Ontario Health (“OH”) to notify a health service provider when OH proposes to enter into, or amend, a service accountability agreement with that health service provider.

OH hereby gives notice and advises Corporation of the County of Renfrew (the “HSP”) of OH’s proposal to amend the multi-sector service accountability agreement (as described in the CCA) currently in effect between OH and the HSP (the “SAA”).

Subject to the HSP’s acceptance of this Extending Letter, the SAA will be amended with effect on March 31, 2022 as set out below. All other terms and conditions of the SAA will remain in full force and effect.

The terms and conditions in the SAA are amended as follows:

- 1) **Term** – In section 2.1, “March 31, 2022” is deleted and replaced by “March 31, 2023”.
- 2) **Schedules** – The Schedules in effect on March 31, 2022 shall remain in effect until March 31, 2023, or until such other time as may be agreed to in writing by OH and the HSP.

Unless otherwise defined in this letter, all capitalized terms used in this letter have the meanings set out in the SAA.

Please indicate the HSP’s acceptance and agreement to the amendments described in this Extending Letter by signing below and returning one scanned copy of this letter by e-mail no later than the end of business day on March 30, 2022 to: OH-East_Submissions@ontariohealth.ca.

CCA s. 20 Notice and Extension of Multi-Sector Service Accountability Agreement (“Extending Letter”)

The HSP and OH agree that the Extending Letter may be validly executed electronically, and that their respective electronic signature is the legal equivalent of a manual signature.

Should you have any questions regarding the information provided in this Extending Letter, please contact Sam Malek, Lead, Performance, Accountability and Funding Allocation at Sam.Malek@ontariohealth.ca or at 343-300-6868.

Sincerely,



Anna Greenberg
Chief Regional Officer, Toronto and East
Ontario Health

c. Debbie Robinson, Warden, Corporation of the County of Renfrew
Eric Partington, Vice President, Performance, Accountability and Funding Allocation, Ontario Health
(East)

Signature page follows

CCA s. 20 Notice and Extension of Multi-Sector Service Accountability Agreement (“Extending Letter”)

AGREED TO AND ACCEPTED BY

Corporation of the County of Renfrew

By:

Paul Moreau
Chief Administrative Officer/Clerk for the County of Renfrew
I have authority to bind the health service provider.

Date: _____
mm/dd/yyyy

And By:

Debbie Robinson
Warden
I have authority to bind the health service provider.

Date: _____
mm/dd/yyyy

**COUNTY OF RENFREW
ADMINISTRATION REPORT**

TO: Health Committee

FROM: Paul Moreau, Chief Administrative Officer/Clerk

DATE: March 9, 2022

SUBJECT: Department Report

BY-LAWS

1. **Network 24 Ontario Health Team Implementation Funding [Strategic Plan Goal #2]**

Recommendation: THAT the Health Committee recommend that County Council authorize the Chief Administrative Officer to sign the Ontario Transfer Payment Agreement for the Network 24 Ontario Health Team to receive funding in the amount of \$1,125,000 (Implementation Funding) and \$75,000 (Collaborative Support) from the Province of Ontario; AND FURTHER THAT a By-law be adopted to execute a Transfer Payment Agreement with the Province of Ontario.

Background

At the September 30, 2021 meeting, County Council approved “THAT the County of Renfrew serve as the funding recipient for the Network 24 Ontario Health Team; AND FURTHER THAT these arrangements be revisited once the Network 24 Ontario Health Team becomes an independent and self-governing organization.”

We are recommending that County Council approve that the Chief Administrative Officer sign the Transfer Payment Agreement, attached as Appendix I, for the Network 24 Ontario Health Team Implementation Funding.

COUNTY OF RENFREW

BY-LAW NUMBER -22

**A BY-LAW TO EXECUTE A TRANSFER PAYMENT AGREEMENT FOR FUNDING FOR
THE NETWORK 24 ONTARIO HEALTH TEAM FROM THE PROVINCE OF ONTARIO**

WHEREAS County Council approved that the County of Renfrew serve as the funding recipient for the Network 24 Ontario Health Team; AND FURTHER THAT these arrangements be revisited once the Network 24 Ontario Health Team becomes an independent and self-governing organization;

AND WHEREAS the Ministry of Health has provided to the Network 24 Ontario Health Team with Implementation and Collaborative Support funding, and it is deemed necessary and desirable that the Council of the Municipal Corporation of the County of Renfrew enacts a By-law authorizing the Corporation to enter into an agreement with the Province of Ontario as Represented, in order to receive funding to support the Network 24 Ontario Health Team;

NOW THEREFORE, the Council of the Municipal Corporation of the County of Renfrew hereby enacts as follows:

1. THAT the Warden and Clerk are hereby authorized to sign and seal all things, papers and documents necessary for the attached Transfer Payment Agreement identified as Schedule "I" with the Province of Ontario, Ministry of Health.
2. THAT this By-law shall come into force and take effect upon the passing thereof.

READ a first time this 30th day of March, 2022.

READ a second time this 30th day of March, 2022.

READ a third time and finally passed this 30th day of March, 2022.

DEBBIE ROBINSON, WARDEN

PAUL V. MOREAU, CLERK

ONTARIO TRANSFER PAYMENT AGREEMENT

THE AGREEMENT is effective as of the 1st day of October, 2021
as represented by the Minister of Health

B E T W E E N :

Her Majesty the Queen in right of Ontario

(the “Province”)

- and -

Corporation of the County of Renfrew

(the “Recipient”)

CONSIDERATION

In consideration of the mutual covenants and agreements contained in this Agreement and for other good and valuable consideration, the receipt and sufficiency of which are expressly acknowledged, the Province and the Recipient agree as follows:

1.0 ENTIRE AGREEMENT

1.1 The agreement, together with:

Schedule “A” - General Terms and Conditions
Schedule “B” - Project Specific Information and Additional Provisions
Schedule “C” - Project
Schedule “D” - Budget
Schedule “E” - Payment Plan
Schedule “F” - Reports, and
any amending agreement entered into as provided for in section 4.1,

constitutes the entire agreement between the Parties with respect to the subject matter contained in the Agreement and supersedes all prior oral or written representations and agreements.

2.0 CONFLICT OR INCONSISTENCY

2.1 **Conflict or Inconsistency.** In the event of a conflict or inconsistency between the Additional Provisions and the provisions in Schedule “A”, the following rules will apply:

- (a) the Parties will interpret any Additional Provisions in so far as possible, in a way that preserves the intention of the Parties as expressed in Schedule “A”; and
- (b) where it is not possible to interpret the Additional Provisions in a way that is consistent with the provisions in Schedule “A”, the Additional Provisions will prevail over the provisions in Schedule “A” to the extent of the inconsistency.

3.0 COUNTERPARTS

- 3.1 The 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.

4.0 AMENDING THE AGREEMENT

- 4.1 The Agreement may only be amended by a written agreement duly executed by the Parties.

5.0 ACKNOWLEDGEMENT

5.1 The Recipient acknowledges that:

- (a) **by receiving Funds it may become subject to legislation applicable to organizations that receive funding from the Government of Ontario, including the *Broader Public Sector Accountability Act, 2010* (Ontario), the *Public Sector Salary Disclosure Act, 1996* (Ontario), and the *Auditor General Act* (Ontario);**
- (b) **Her Majesty the Queen in right of Ontario has issued expenses, perquisites, and procurement directives and guidelines pursuant to the *Broader Public Sector Accountability Act, 2010* (Ontario);**
- (c) **the Funds are:**
 - (i) to assist the Recipient to carry out the Project and not to provide goods or services to the Province;
 - (ii) funding for the purposes of the *Public Sector Salary Disclosure Act, 1996* (Ontario);
- (d) the Province is not responsible for carrying out the Project; and

- (e) the Province is bound by the *Freedom of Information and Protection of Privacy Act* (Ontario) and that any information provided to the Province in connection with the Project or otherwise in connection with the Agreement may be subject to disclosure in accordance with that Act.

- SIGNATURE PAGE FOLLOWS -

The Parties have executed the Agreement on the dates set out below.

**HER MAJESTY THE QUEEN IN RIGHT OF
ONTARIO as represented by the Minister of Health**

Date

Amy Olmstead
Acting Executive Lead
Ontario Health Teams Division

Date

Paul Moreau
Chief Administrative Officer / Clerk
County of Renfrew

I have authority to bind Corporation of the County of
Renfrew.

**SCHEDULE “A”
GENERAL TERMS AND CONDITIONS**

A1.0 INTERPRETATION AND DEFINITIONS

A1.1 Interpretation. For the purposes of interpretation:

- (a) words in the singular include the plural and vice-versa;
- (b) words in one gender include all genders;
- (c) the headings do not form part of the Agreement; they are for reference only and will not affect the interpretation of the Agreement;
- (d) any reference to dollars or currency will be in Canadian dollars and currency; and
- (e) “include”, “includes” and “including” denote that the subsequent list is not exhaustive.

A1.2 Definitions. In the Agreement, the following terms will have the following meanings:

“Additional Provisions” means the terms and conditions set out in Schedule “B”.

“Agreement” means this agreement entered into between the Province and the Recipient, all of the schedules listed in section 1.1, and any amending agreement entered into pursuant to section 4.1.

“Budget” means the budget attached to the Agreement as Schedule “D”.

“Business Day” means any working day, Monday to Friday inclusive, excluding statutory and other holidays, namely: New Year’s Day; Family Day; Good Friday; Easter Monday; Victoria Day; Canada Day; Civic Holiday; Labour Day; Thanksgiving Day; Remembrance Day; Christmas Day; Boxing Day and any other day on which the Province has elected to be closed for business.

“Effective Date” means the date set out at the top of the Agreement.

“Event of Default” has the meaning ascribed to it in section A13.1.

“Expiry Date” means the expiry date set out in Schedule “B”.

“Funding Year” means:

- (a) in the case of the first Funding Year, the period commencing on the Effective Date and ending on the following March 31; and
- (b) in the case of Funding Years subsequent to the first Funding Year, the period commencing on April 1 following the end of the previous Funding Year and ending on the following March 31.

“Funds” means the money the Province provides to the Recipient pursuant to the Agreement.

“Indemnified Parties” means Her Majesty the Queen in right of Ontario, Her ministers, agents, appointees, and employees.

“Maximum Funds” means the maximum Funds set out in Schedule “B”.

“Notice” means any communication given or required to be given pursuant to the Agreement.

“Notice Period” means the period of time within which the Recipient is required to remedy an Event of Default pursuant to section A13.3(b), and includes any such period or periods of time by which the Province extends that time in accordance with section A13.4.

“Parties” means the Province and the Recipient.

“Party” means either the Province or the Recipient.

“Project” means the undertaking described in Schedule “C”.

“Reports” means the reports described in Schedule “F”.

A2.0 REPRESENTATIONS, WARRANTIES, AND COVENANTS

A2.1 General. The Recipient represents, warrants, and covenants that:

- (a) it is, and will continue to be, a validly existing legal entity with full power to fulfill its obligations under the Agreement;
- (b) it has, and will continue to have, the experience and expertise necessary to carry out the Project;
- (c) it is in compliance with, and will continue to comply with, all federal and provincial laws and regulations, all municipal by-laws, and any other orders, rules, and by-laws related to any aspect of the Project, the Funds, or both; and

- (d) unless otherwise provided for in the Agreement, any information the Recipient provided to the Province in support of its request for funds (including information relating to any eligibility requirements) was true and complete at the time the Recipient provided it and will continue to be true and complete.

A2.2 Execution of Agreement. The Recipient represents and warrants that it has:

- (a) the full power and authority to enter into the Agreement; and
- (b) taken all necessary actions to authorize the execution of the Agreement.

A2.3 Governance. The Recipient represents, warrants, and covenants that it has, will maintain in writing, and will follow:

- (a) a code of conduct and ethical responsibilities for all persons at all levels of the Recipient's organization;
- (b) procedures to enable the Recipient's ongoing effective functioning;
- (c) decision-making mechanisms for the Recipient;
- (d) procedures to enable the Recipient to manage Funds prudently and effectively;
- (e) procedures to enable the Recipient to complete the Project successfully;
- (f) procedures to enable the Recipient to identify risks to the completion of the Project and strategies to address the identified risks, all in a timely manner;
- (g) procedures to enable the preparation and submission of all Reports required pursuant to Article A7.0; and
- (h) procedures to enable the Recipient to address such other matters as the Recipient considers necessary to enable the Recipient to carry out its obligations under the Agreement.

A2.4 Supporting Proof. Upon the request of the Province, the Recipient will provide the Province with proof of the matters referred to in Article A2.0.

A3.0 TERM OF THE AGREEMENT

A3.1 Term. The term of the Agreement will commence on the Effective Date and will expire on the Expiry Date unless terminated earlier pursuant to

Article A11.0, Article A12.0, or Article A13.0.

A4.0 FUNDS AND CARRYING OUT THE PROJECT

A4.1 Funds Provided. The Province will:

- (a) provide the Recipient up to the Maximum Funds for the purpose of carrying out the Project;
- (b) provide the Funds to the Recipient in accordance with the payment plan attached to the Agreement as Schedule “E”; and
- (c) deposit the Funds into an account designated by the Recipient provided that the account:
 - (i) resides at a Canadian financial institution; and
 - (ii) is in the name of the Recipient.

A4.2 Limitation on Payment of Funds. Despite section A4.1:

- (a) the Province is not obligated to provide any Funds to the Recipient until the Recipient provides the certificates of insurance or other proof as the Province may request pursuant to section A10.2;
- (b) the Province is not obligated to provide instalments of Funds until it is satisfied with the progress of the Project;
- (c) the Province may adjust the amount of Funds it provides to the Recipient in any Funding Year based upon the Province’s assessment of the information the Recipient provides to the Province pursuant to section A7.1; or
- (d) if, pursuant to the *Financial Administration Act* (Ontario), the Province does not receive the necessary appropriation from the Ontario Legislature for payment under the Agreement, the Province is not obligated to make any such payment, and, as a consequence, the Province may:
 - (i) reduce the amount of Funds and, in consultation with the Recipient, change the Project; or
 - (ii) terminate the Agreement pursuant to section A12.1.

A4.3 Use of Funds and Carry Out the Project. The Recipient will do all of the following:

- (a) carry out the Project in accordance with the Agreement;
- (b) use the Funds only for the purpose of carrying out the Project;
- (c) spend the Funds only in accordance with the Budget;
- (d) not use the Funds to cover any cost that has or will be funded or reimbursed by one or more of any third party, ministry, agency, or organization of the Government of Ontario.

A4.4 Interest Bearing Account. If the Province provides Funds before the Recipient's immediate need for the Funds, the Recipient will place the Funds in an interest bearing account in the name of the Recipient at a Canadian financial institution.

A4.5 Interest. If the Recipient earns any interest on the Funds, the Province may:

- (a) deduct an amount equal to the interest from any further instalments of Funds; or
- (b) demand from the Recipient the payment of an amount equal to the interest.

A4.6 Rebates, Credits, and Refunds. The Ministry will calculate Funds based on the actual costs to the Recipient to carry out the Project, less any costs (including taxes) for which the Recipient has received, will receive, or is eligible to receive, a rebate, credit, or refund.

A5.0 RECIPIENT'S ACQUISITION OF GOODS OR SERVICES, AND DISPOSAL OF ASSETS

A5.1 Acquisition. If the Recipient acquires goods, services, or both with the Funds, it will:

- (a) do so through a process that promotes the best value for money; and
- (b) comply with the *Broader Public Sector Accountability Act, 2010* (Ontario), including any procurement directive issued thereunder, to the extent applicable.

A5.2 Disposal. The Recipient will not, without the Province's prior written consent, sell, lease, or otherwise dispose of any asset purchased or created with the Funds or for which Funds were provided, the cost of which exceeded the amount as provided for in Schedule "B" at the time of

purchase.

A6.0 CONFLICT OF INTEREST

A6.1 No Conflict of Interest. The Recipient will carry out the Project and use the Funds without an actual, potential, or perceived conflict of interest.

A6.2 Conflict of Interest Includes. For the purposes of Article A6.0, a conflict of interest includes any circumstances where:

- (a) the Recipient; or
- (b) any person who has the capacity to influence the Recipient's decisions, has outside commitments, relationships, or financial interests that could, or could be seen to, interfere with the Recipient's objective, unbiased, and impartial judgment relating to the Project, the use of the Funds, or both.

A6.3 Disclosure to Province. The Recipient will:

- (a) disclose to the Province, without delay, any situation that a reasonable person would interpret as an actual, potential, or perceived conflict of interest; and
- (b) comply with any terms and conditions that the Province may prescribe as a result of the disclosure.

A7.0 REPORTS, ACCOUNTING, AND REVIEW

A7.1 Preparation and Submission. The Recipient will:

- (a) submit to the Province at the address referred to in section A17.1, all Reports in accordance with the timelines and content requirements as provided for in Schedule "F", or in a form as specified by the Province from time to time;
- (b) submit to the Province at the address referred to in section A17.1, any other reports as may be requested by the Province in accordance with the timelines and content requirements specified by the Province;
- (c) ensure that all Reports and other reports are completed to the satisfaction of the Province; and
- (d) ensure that all Reports and other reports are signed on behalf of the Recipient by an authorized signing officer.

A7.2 Record Maintenance. The Recipient will keep and maintain:

- (a) all financial records (including invoices) relating to the Funds or otherwise to the Project in a manner consistent with generally accepted accounting principles; and
- (b) all non-financial documents and records relating to the Funds or otherwise to the Project.

A7.3 Inspection. The Province, any authorized representative, or any independent auditor identified by the Province may, at the Province's expense, upon twenty-four hours' Notice to the Recipient and during normal business hours, enter upon the Recipient's premises to review the progress of the Project and the Recipient's allocation and expenditure of the Funds and, for these purposes, the Province, any authorized representative, or any independent auditor identified by the Province may take one or more of the following actions:

- (a) inspect and copy the records and documents referred to in section A7.2;
- (b) remove any copies made pursuant to section A7.3(a) from the Recipient's premises; and
- (c) conduct an audit or investigation of the Recipient in respect of the expenditure of the Funds, the Project, or both.

A7.4 Disclosure. To assist in respect of the rights provided for in section A7.3, the Recipient will disclose any information requested by the Province, any authorized representatives, or any independent auditor identified by the Province, and will do so in the form requested by the Province, any authorized representative, or any independent auditor identified by the Province, as the case may be.

A7.5 No Control of Records. No provision of the Agreement will be construed so as to give the Province any control whatsoever over the Recipient's records.

A7.6 Auditor General. The Province's rights under Article A7.0 are in addition to any rights provided to the Auditor General pursuant to section 9.1 of the *Auditor General Act* (Ontario).

A8.0 COMMUNICATIONS REQUIREMENTS

A8.1 Acknowledge Support. Unless otherwise directed by the Province, the Recipient will:

- (a) **acknowledge the support of the Province for the Project; and**
- (b) **ensure that the acknowledgement referred to in section A8.1(a) is in a form and manner as directed by the Province.**

A8.2 Publication. The Recipient will indicate, in any of its Project-related publications, whether written, oral, or visual, that the views expressed in the publication are the views of the Recipient and do not necessarily reflect those of the Province.

A9.0 INDEMNITY

A9.1 Indemnification. The Recipient will indemnify and hold harmless the Indemnified Parties from and against any and all liability, loss, costs, damages, and expenses (including legal, expert and consultant fees), causes of action, actions, claims, demands, lawsuits, or other proceedings, by whomever made, sustained, incurred, brought, or prosecuted, in any way arising out of or in connection with the Project or otherwise in connection with the Agreement, unless solely caused by the negligence or wilful misconduct of the Indemnified Parties.

A10.0 INSURANCE

A10.1 Recipient's Insurance. The Recipient represents, warrants, and covenants that it has, and will maintain, at its own cost and expense, with insurers having a secure A.M. Best rating of B+ or greater, or the equivalent, all the necessary and appropriate insurance that a prudent person carrying out a project similar to the Project would maintain, including commercial general liability insurance on an occurrence basis for third party bodily injury, personal injury, and property damage, to an inclusive limit of not less than the amount provided for in Schedule "B" per occurrence. The insurance policy will include the following:

- (a) the Indemnified Parties as additional insureds with respect to liability arising in the course of performance of the Recipient's obligations under, or otherwise in connection with, the Agreement;
- (b) a cross-liability clause;
- (c) contractual liability coverage; and
- (d) a 30-day written notice of cancellation.

A10.2 Proof of Insurance. The Recipient will:

- (a) provide to the Province, either:

- (i) certificates of insurance that confirm the insurance coverage as provided for in section A10.1; or
 - (ii) other proof that confirms the insurance coverage as provided for in section A10.1; and
- (b) upon the request of the Province, provide to the Province a copy of any insurance policy.

A11.0 TERMINATION ON NOTICE

A11.1 Termination on Notice. The Province may terminate the Agreement at any time without liability, penalty, or costs upon giving at least 30 days' Notice to the Recipient.

A11.2 Consequences of Termination on Notice by the Province. If the Province terminates the Agreement pursuant to section A11.1, the Province may take one or more of the following actions:

- (a) cancel further instalments of Funds;
- (b) demand from the Recipient the payment of any Funds remaining in the possession or under the control of the Recipient; and
- (c) determine the reasonable costs for the Recipient to wind down the Project, and do either or both of the following:
 - (i) permit the Recipient to offset such costs against the amount the Recipient owes pursuant to section A11.2(b); and
 - (ii) subject to section A4.1(a), provide Funds to the Recipient to cover such costs.

A12.0 TERMINATION WHERE NO APPROPRIATION

A12.1 Termination Where No Appropriation. If, as provided for in section A4.2(d), the Province does not receive the necessary appropriation from the Ontario Legislature for any payment the Province is to make pursuant to the Agreement, the Province may terminate the Agreement immediately without liability, penalty, or costs by giving Notice to the Recipient.

A12.2 Consequences of Termination Where No Appropriation. If the Province terminates the Agreement pursuant to section A12.1, the Province may take one or more of the following actions:

- (a) cancel further instalments of Funds;

- (b) demand from the Recipient the payment of any Funds remaining in the possession or under the control of the Recipient; and
- (c) determine the reasonable costs for the Recipient to wind down the Project and permit the Recipient to offset such costs against the amount owing pursuant to section A12.2(b).

A12.3 No Additional Funds. If, pursuant to section A12.2(c), the Province determines that the costs to wind down the Project exceed the Funds remaining in the possession or under the control of the Recipient, the Province will not provide additional Funds to the Recipient.

A13.0 EVENT OF DEFAULT, CORRECTIVE ACTION, AND TERMINATION FOR DEFAULT

A13.1 Events of Default. Each of the following events will constitute an Event of Default:

- (a) in the opinion of the Province, the Recipient breaches any representation, warranty, covenant, or other material term of the Agreement, including failing to do any of the following in accordance with the terms and conditions of the Agreement:
 - (i) carry out the Project;
 - (ii) use or spend Funds; or
 - (iii) provide, in accordance with section A7.1, Reports or such other reports as may have been requested pursuant to section A7.1(b);
- (b) the Recipient's operations, its financial condition, or its organizational structure, changes such that it no longer meets one or more of the eligibility requirements of the program under which the Province provides the Funds;
- (c) the Recipient makes an assignment, proposal, compromise, or arrangement for the benefit of creditors, or a creditor makes an application for an order adjudging the Recipient bankrupt, or applies for the appointment of a receiver; or
- (d) the Recipient ceases to operate.

A13.2 Consequences of Events of Default and Corrective Action. If an Event of Default occurs, the Province may, at any time, take one or more of the following actions:

- (a) initiate any action the Province considers necessary in order to facilitate the successful continuation or completion of the Project;
- (b) provide the Recipient with an opportunity to remedy the Event of Default;
- (c) suspend the payment of Funds for such period as the Province determines appropriate;
- (d) reduce the amount of the Funds;
- (e) cancel further instalments of Funds;
- (f) demand from the Recipient the payment of any Funds remaining in the possession or under the control of the Recipient;
- (g) demand from the Recipient the payment of an amount equal to any Funds the Recipient used, but did not use in accordance with the Agreement;
- (h) demand from the Recipient the payment of an amount equal to any Funds the Province provided to the Recipient; and
- (i) terminate the Agreement at any time, including immediately, without liability, penalty or costs to the Province upon giving Notice to the Recipient.

A13.3 Opportunity to Remedy. If, in accordance with section A13.2(b), the Province provides the Recipient with an opportunity to remedy the Event of Default, the Province will give Notice to the Recipient of:

- (a) the particulars of the Event of Default; and
- (b) the Notice Period.

A13.4 Recipient not Remediating. If the Province provided the Recipient with an opportunity to remedy the Event of Default pursuant to section A13.2(b), and:

- (a) the Recipient does not remedy the Event of Default within the Notice Period;
- (b) it becomes apparent to the Province that the Recipient cannot completely remedy the Event of Default within the Notice Period; or
- (c) the Recipient is not proceeding to remedy the Event of Default in a way

that is satisfactory to the Province,

the Province may extend the Notice Period, or initiate any one or more of the actions provided for in sections A13.2(a), (c), (d), (e), (f), (g), (h), and (i).

A13.5 When Termination Effective. Termination under Article will take effect as provided for in the Notice.

A14.0 FUNDS AT THE END OF A FUNDING YEAR

A14.1 Funds at the End of a Funding Year. Without limiting any rights of the Province under Article A13.0, if the Recipient has not spent all of the Funds allocated for the Funding Year as provided for in the Budget, the Province may take one or both of the following actions:

- (a) demand from the Recipient payment of the unspent Funds; and
- (b) adjust the amount of any further instalments of Funds accordingly.

A15.0 FUNDS UPON EXPIRY

A15.1 Funds Upon Expiry. The Recipient will, upon expiry of the Agreement, pay to the Province any Funds remaining in its possession or under its control.

A16.0 DEBT DUE AND PAYMENT

A16.1 Payment of Overpayment. If at any time the Province provides Funds in excess of the amount to which the Recipient is entitled under the Agreement, the Province may:

- (a) deduct an amount equal to the excess Funds from any further instalments of Funds; or
- (b) demand that the Recipient pay an amount equal to the excess Funds to the Province.

A16.2 Debt Due. If, pursuant to the Agreement:

- (a) the Province demands from the Recipient the payment of any Funds or an amount equal to any Funds; or
- (b) the Recipient owes any Funds or an amount equal to any Funds to the Province, whether or not the Province has demanded their payment,

such Funds or other amount will be deemed to be a debt due and owing to the Province by the Recipient, and the Recipient will pay the amount to the

Province immediately, unless the Province directs otherwise.

A16.3 Interest Rate. The Province may charge the Recipient interest on any money owing by the Recipient at the then current interest rate charged by the Province of Ontario on accounts receivable.

A16.4 Payment of Money to Province. The Recipient will pay any money owing to the Province by cheque payable to the "Ontario Minister of Finance" and delivered to the Province as provided for in Schedule "B".

A16.5 Fails to Pay. Without limiting the application of section 43 of the *Financial Administration Act* (Ontario), if the Recipient fails to pay any amount owing under the Agreement, Her Majesty the Queen in right of Ontario may deduct any unpaid amount from any money payable to the Recipient by Her Majesty the Queen in right of Ontario.

A17.0 NOTICE

A17.1 Notice in Writing and Addressed. Notice will be in writing and will be delivered by email, postage-prepaid mail, personal delivery, or fax, and will be addressed to the Province and the Recipient respectively as provided for Schedule "B", or as either Party later designates to the other by Notice.

A17.2 Notice Given. Notice will be deemed to have been given:

- (a) in the case of postage-prepaid mail, five Business Days after the Notice is mailed; or
- (b) in the case of email, personal delivery, or fax, one Business Day after the Notice is delivered.

A17.3 Postal Disruption. Despite section A17.2(a), in the event of a postal disruption:

- (a) Notice by postage-prepaid mail will not be deemed to be given; and
- (b) the Party giving Notice will give Notice by email, personal delivery, or fax.

A18.0 CONSENT BY PROVINCE AND COMPLIANCE BY RECIPIENT

A18.1 Consent. When the Province provides its consent pursuant to the Agreement, it may impose any terms and conditions on such consent and the Recipient will comply with such terms and conditions.

A19.0 SEVERABILITY OF PROVISIONS

A19.1 Invalidity or Unenforceability of Any Provision. The invalidity or unenforceability of any provision of the Agreement will not affect the validity or enforceability of any other provision of the Agreement. Any invalid or unenforceable provision will be deemed to be severed.

A20.0 WAIVER

A20.1 Waiver Request. Either Party may, in accordance with the Notice provision set out in Article A17.0, ask the other Party to waive an obligation under the Agreement.

A20.2 Waiver Applies. Any waiver a Party grants in response to a request made pursuant to section A20.1 will:

- (a) be valid only if the Party granting the waiver provides it in writing; and
- (b) apply only to the specific obligation referred to in the waiver.

A21.0 INDEPENDENT PARTIES

A21.1 Parties Independent. The Recipient is not an agent, joint venturer, partner, or employee of the Province, and the Recipient will not represent itself in any way that might be taken by a reasonable person to suggest that it is, or take any actions that could establish or imply such a relationship.

A22.0 ASSIGNMENT OF AGREEMENT OR FUNDS

A22.1 No Assignment. The Recipient will not, without the prior written consent of the Province, assign any of its rights or obligations under the Agreement.

A22.2 Agreement Binding. All rights and obligations contained in the Agreement will extend to and be binding on the Parties' respective heirs, executors, administrators, successors, and permitted assigns.

A23.0 GOVERNING LAW

A23.1 Governing Law. The 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 applicable federal laws of Canada. Any actions or proceedings arising in connection with the Agreement will be conducted in the courts of Ontario, which will have exclusive jurisdiction over such proceedings.

A24.0 FURTHER ASSURANCES

A24.1 Agreement into Effect. The Recipient will provide such further assurances as the Province may request from time to time with respect to any matter to which the Agreement pertains, and will otherwise do or cause to be done all acts or things necessary to implement and carry into effect the terms and conditions of the Agreement to their full extent.

A25.0 JOINT AND SEVERAL LIABILITY

A25.1 Joint and Several Liability. Where the Recipient is comprised of more than one entity, all such entities will be jointly and severally liable to the Province for the fulfillment of the obligations of the Recipient under the Agreement.

A26.0 RIGHTS AND REMEDIES CUMULATIVE

A26.1 Rights and Remedies Cumulative. The rights and remedies of the Province under the Agreement are cumulative and are in addition to, and not in substitution for, any of its rights and remedies provided by law or in equity.

A27.0 FAILURE TO COMPLY WITH OTHER AGREEMENTS

A27.1 Other Agreements. If the Recipient:

- (a) has failed to comply with any term, condition, or obligation under any other agreement with Her Majesty the Queen in right of Ontario or one of Her agencies (a “**Failure**”);
- (b) has been provided with notice of such Failure in accordance with the requirements of such other agreement;
- (c) has, if applicable, failed to rectify such Failure in accordance with the requirements of such other agreement; and
- (d) such Failure is continuing,

the Province may suspend the payment of Funds for such period as the Province determines appropriate.

A28.0 SURVIVAL

A28.1 Survival. The following Articles and sections, and all applicable cross-referenced sections and schedules, will continue in full force and effect for a period of seven years from the date of expiry or termination of the Agreement: Article 1.0, Article

3.0, Article A1.0 and any other applicable definitions, section A2.1(a), sections A4.2(d), A4.5, section A5.2, section A7.1 (to the extent that the Recipient has not provided the Reports or other reports as may have been requested to the satisfaction of the Province), sections A7.2, A7.3, A7.4, A7.5, A7.6, Article A8.0, Article A9.0, section A11.2, sections A12.2, A12.3, sections A13.1, A13.2(d), (e), (f), (g) and (h), Article A15.0, Article A16.0, Article A17.0, Article A19.0, section A22.2, Article A23.0, Article A25.0, Article A26.0, Article A27.0 and Article A28.0.

- END OF GENERAL TERMS AND CONDITIONS -

SCHEDULE “B”
PROJECT SPECIFIC INFORMATION AND ADDITIONAL PROVISIONS

| | |
|---|---|
| Maximum Funds | Up to a total of \$1,200,000, which includes: (a) Implementation Funding (Project A): Up to \$1,125,000 (b) Collaboration Supports Funding (Project B): Up to \$75,000 |
| Expiry Date | March 31, 2023 |
| Amount for the purposes of section A5.2 (Disposal) of Schedule “A” | \$5,000.00 |
| Insurance | \$2,000,000 |
| Contact information for the purposes of Notice to the Province | <p>Name: Ms. Allison Costello, Director</p> <p>Address: Implementation and Supports Branch, Ontario Health Teams Division Ministry of Health 1075 Bay Street, 12th Floor Toronto ON M5S 2B1</p> <p>Email: allison.costello@ontario.ca</p> |
| Contact information for the purposes of Notice to the Recipient | <p>Name: Mr. Paul Moreau</p> <p>Position: Chief Administrative Officer / Clerk</p> <p>Address: County of Renfrew 9 International Drive Pembroke ON K8A 6W5</p> <p>Email: pmoreau@countyofrenfrew.on.ca</p> |
| Contact information for the senior financial person in the Recipient organization (e.g., CFO, CAO) – to respond as required to requests from the Province related to the Agreement | <p>Name: Mr. Jeffrey Foss</p> <p>Position: Director of Corporate Services / Treasurer</p> <p>Address: County of Renfrew 9 International Drive Pembroke ON K8A 6W5</p> <p>Email: jfoss@countyofrenfrew.on.ca</p> |

Additional Provisions:

None

SCHEDULE “C”

Project A- Implementation Supports

Project Name: Network 24 Ontario Health Team Implementation Supports

Implementation Funding Recipient Name: Corporation of the County of Renfrew

Background

In early 2019, the Ontario Health Team (OHT) model of care was introduced as a signature initiative for health care transformation, enshrined in legislation through the *Connecting Care Act, 2019* (CCA).

OHTs enable patients, families, communities, providers and system leaders to work together, innovate, and build on what is best for Ontario’s health care system. Through this model, groups of health care providers work together to deliver a full and coordinated continuum of care for patients, even if they’re not in the same organization or physical location.

As a team, OHTs work towards a common vision of more integrated and better coordinated care across the Province and are enabled to achieve shared improvements according to the principles of the Quadruple Aim: improved health outcomes, patient and provider experience, and value.

The Network 24 Ontario Health Team has identified Corporation of the County of Renfrew as a member organization to serve on the OHT’s behalf as the Recipient for both Projects and has submitted an attestation to having a collaborative decision-making arrangement (CDMA) that meets the minimum specifications set out in *Guidance for Ontario Health Teams: Collaborative Decision-Making Arrangements for a Connected Health Care System, 2020*.

Alignment to System Priorities

The Project is aligned with the following priorities:

- advancing health care transformation through a model for integrated clinical and financial accountability as a signature initiative enshrined in the *Connecting Care Act, 2019*;
- COVID-19 preparedness, response and recovery through the integrated and co-ordinated delivery of services, including through digital health and virtual care; and
- ending hallway health care and ensuring all patients receive timely access to high quality health care.

Objectives

The objectives of the Project are to:

- support the OHT's implementation of its plans for using a population-health management approach to integrated and coordinated service delivery, including to enable OHT member and partner providers to:
 - continue to respond to COVID-19 through OHT programs linking hospitals, primary care, long-term care homes and other congregate care settings, home care and community services, and other health care services or related non-health services; and
 - maintain health system capacity during the remainder of the pandemic and throughout health system re-opening, including by regularizing new care pathways and practices, including virtual care, to help avoid a return to hallway health care;
- maintain and expand effective and representative engagement, participation, and leadership in OHT implementation activities by physicians and other clinicians from a range of practice areas and settings, including for primary care and family medicine; and
- maintain and expand effective and representative engagement and participation of patients, families, and caregivers in OHT implementation activities.

Eligible Activities

The Project shall include one or more of the following activities:

- planning and implementing a population-health management approach to integrated and coordinated service delivery;
- activities to support physician and other clinician leadership, engagement, and participation, including through compensation to physicians and other clinicians to support their involvement in OHT planning, implementation, and decision-making activities;
- activities to support patient, family, and caregiver engagement and participation, including through compensation to patients, family members, and caregivers to support their involvement in OHT activities;

- digital health, information management, and virtual care implementation activities, (provided the OHT commits to adopt core provincial digital health services, i.e., provincial clinical viewers, Health Report Manager, and eServices), including:
 - implementing initiatives to enable access to integrated patient health information in a privacy-protected manner;
 - implementing priority patient-facing digital health initiatives in alignment with the Ministry of Health’s *Ontario Health Teams: Digital Health Playbook* and in adherence to provincial standards, where and when available; examples of acceptable activities include:
 - virtual care solutions (e.g., remote patient monitoring solutions; solutions that enable telephone/video visits and meet the virtual visit requirements published by Ontario Health at <https://otn.ca/solution-providers-vendors/virtual-visit-guidance/>);
 - online appointment booking solutions; and
 - initiatives that enable Ontarians to digitally access their health information (e.g., patient access channels/portals);
 - adopting and implementing digital health solutions that include:
 - transitioning to fewer clinical systems;
 - enabling secure provider-to-provider messaging; and
 - adopting solutions that support population health and predictive analytics; and
 - planning and related activities to support achieving OHT goals and advance the OHT’s overall digital health and information management maturity;
- project management and leadership, including through investments in human resources, information management, and other OHT supports and enablers; and
- performance measurement and quality improvement activities, including practice facilitation to support change management.

The Recipient is eligible to acquire consulting services to support the following activities:

- website development and maintenance;
- translation services;
- community engagement support (e.g., support for engaging with local communities, including minority community groups); and
- facilitation and mediation services.

Expenses related to above eligible consulting services must not exceed 20% of the total value of this Agreement as outlined in Schedule D.

The Recipient is not eligible to acquire consulting services to support the development of the “Outputs” set out below, or the “Reports” set out in Schedule F.

The Project shall not include:

- acquiring consulting services to support the development of any “Outputs” set out below or “Reports” set out in Schedule F;
- acquiring goods or services, including consulting services, that are available through the OHT Central Program of Supports;
- acquiring goods or services, including consulting services, supported by other funding sources (e.g., personal protective equipment);
- developing or acquiring digital health solutions or services (including consulting) that:
 - would duplicate in functionality or purpose required provincial digital health solutions, or would require the development of new registries, data repositories, or other digital health solutions that are available in whole or part from the Ministry of Health or its delivery partners;
 - are already available through the Ministry of Health Central Program of Supports, through Ontario Health or OntarioMD, or through other delivery partners whose services or programs are funded by Ministry of Health (e.g., Provincial clinical viewers, CHRIS, HRM, and eServices); or
 - would duplicate digital health solutions or services for which existing pilot programs are in place provincially (e.g., digital identity services); and
- clinical service delivery to patients.

Milestones and Timelines

The Recipient shall work with the other members of the Network 24 Ontario Health Team towards achieving each of the following milestones (the “Milestones”) by March 31, 2023:

- Care has been re-designed for patients in the OHT’s priority population(s).
- Every patient in the OHT’s priority population(s) experiences coordinated transitions between providers - there are no ‘cold hand-offs’.
- Every patient in the OHT’s priority population(s) has access to 24/7 coordination and system navigation services.
- The majority of patients in the OHT’s priority population(s) who receive a self-management plan understand the plan, and the majority who receive access to health literacy supports use those supports.
- More patients in the OHT’s priority population(s) are accessing care virtually and accessing their digital health records.
- Most primary care providers to the OHT’s priority population(s) are members of, or partners with, the OHT.
- Information about OHT member service offerings is readily available and accessible to the public, e.g., through a website.
- Progress has been made to reduce inappropriate variation in care and implement clinical standards or best available evidence.

- The OHT's performance has improved on measures of access, transition, coordination of care, and integration.

Outputs and Due Dates

The Recipient shall produce the following outputs by the following dates:

| Item | Output | Due Date |
|------|--|------------------|
| 1 | A Collaborative Quality Improvement Plan (cQIP) in place in accordance with Ministry of Health direction and that includes indicators and targets specific to the Network 24 Ontario Health Team's priority population(s) and broader system integration indicators and targets to be defined by the Ministry of Health. | March 31, 2022 |
| 2 | A submission of a proposal to the Digital and Virtual Care Secretariat to access funding necessary to implement a Patient Portal. | March 31, 2022 |
| 3 | A patient, family and caregiver engagement, consultation, and partnership strategy or framework in place. | June 30, 2022 |
| 4 | Communication protocols in place to connect all primary care providers in the OHT with other OHT members and partners. | June 30, 2022 |
| 5 | Adopt the Ontario Patient, Family and Caregiver Declaration of Values in accordance with instructions provided by the ministry | October 31, 2022 |
| 6 | An OHT Expansion Plan in place on expanding the range and volume of services provided by OHT members in 2022-23, including by adding additional OHT members and/or partners. | March 31, 2023 |

General Requirements for Project Activities

In carrying out this Project, the Recipient shall ensure that the approved OHT shall:

- engage with a range of patients, families, and caregivers, physicians and other clinicians, and members of the community to inform its development and implementation of OHT activities;
- ensure that primary care and family medicine providers from various practice models and provider organizations serving the approved OHT's priority population(s) have opportunities to be engaged on, participate in, and provide leadership for OHT activities;
- recognize and respect the diversity of Ontario's communities, including by:

- ensuring its members comply with the requirements of the *French Language Services Act (FLSA)*, as applicable, and by working with the appropriate French Language Health Planning Entity or Entities for its priority patient population(s);
- recognizing and respecting the role of Indigenous peoples in planning and implementation; and
- working to ensure equitable access to care, including for Indigenous peoples, racialized communities, and Francophones;
- participate in sharing and learning opportunities offered through the Central Program of Supports, including:
 - OHT communities of practice on the Rapid-Improvement Support and Exchange (RISE) website (<https://www.mcmasterforum.org/rise>);
 - inter-OHT learning collaboratives and other information-exchange events and opportunities;
 - coaching programs; and
 - webinars and other information-exchange events hosted by RISE, the Ministry of Health, and Ontario Health; and
- participate in a central evaluation by an independent evaluator.

Project B – Collaboration Supports

Project Name: Network 24 Ontario Health Team Collaboration Supports

Collaboration Funding Recipient Name: Corporation of the County of Renfrew

Background

At maturity, OHTs will be required to provide a full and coordinated continuum of care for all but the most highly-specialized conditions to achieve better patient and population health outcomes. To support a full population, collaboration between providers and the expansion of membership over time is critical to the OHT model.

The Province made recommendations to groups of In Development Teams (those that had not yet been invited to complete a Full Application to become an Approved OHT) to collaborate and join together so that they would be as inclusive as possible and better positioned to provide a full and coordinated continuum of care to their attributed patient populations.

Now that these teams are approved as OHTs and prepare to advance and implement their year-one priorities, strengthening and solidifying the relationships across team members is critical to successfully realizing the OHT model, advancing provincial coverage, and providing Ontarians with better connected, more accessible care.

The Network 24 Ontario Health Team has identified Corporation of the County of Renfrew as a member organization to serve on the OHT's behalf as the Recipient.

Alignment to System Priorities

The Project is aligned with the following priorities:

- advancing health care transformation through a model for integrated clinical and financial accountability as a signature initiative enshrined in the *Connecting Care Act, 2019*;
- COVID-19 response and recovery through the integrated and co-ordinated delivery of services, including through digital health and virtual care; and
- ending hallway health care and ensuring all patients receive timely access to high quality health care.

Objectives

The objectives of the Project are to advance provincial coverage by:

- supporting the continued development, formalization, and operationalization of expanded memberships and collaboration across members as a result of multiple In Development (i.e., prospective) teams joining to become one OHT so that more Ontarians can benefit from the OHT model; and
- maintaining and expanding effective and representative engagement, participation, and leadership of physicians and other clinicians, as well as patients, families and caregivers in OHT implementation activities.

Scope of the Project

As part of the Project, the Recipients will:

- Uptake collaboration and facilitation supports provided by the OHT Central Program of Supports;
- Enhance collaborative governance and leadership, and build team cohesion;
- Enhance population health management approaches in care planning and delivery;
- Support physician and other clinician leadership, engagement, and participation, including through compensation to physicians and other clinicians, to ensure OHT planning, implementation, and decision-making activities are reflective of the collaboration between teams to create a unified OHT;
- Support patient, family, and caregiver (PFC) and community engagement and participation, including through compensation to patients, family members, and caregivers to ensure OHT activities are reflective of the collaboration between teams to create a unified OHT;
- Plan for inclusion of and engagement with additional providers, to support equitable, population-health focused approaches to delivering better coordinated, more integrated care for the OHT's attributed population;
- Support coordinated COVID-19 response and recovery efforts for the OHT's attributed population; and

- Acquire leadership, administrative, or project management support to carry out the above and other development activities such as facilitation or mediation services.

In carrying out the Project, it is the Province's expectation that the Network 24 Ontario Health Team work to ensure that the needs of all communities, including those providers that provide health services to underserved communities (e.g., Indigenous, Francophone, racialized and other priority populations) are respected, included, and considered in your collaboration efforts.

The Project shall not include:

- Acquiring consulting services except for facilitation or mediation services;
- Clinical service delivery to patients;
- Acquiring goods or services that are available through the OHT Central Program of Supports; and
- Acquiring goods or services supported by other funding sources, including activities covered by OHT Implementation Supports Funding.

Milestones and Timelines

| Milestones | Timelines |
|--|------------------|
| FY 2021-22 | |
| Team has co-developed a shared vision/purpose, guiding principles and has identified collaboration challenges and approaches to jointly addressing them. | March 2022 |
| Team has reviewed its year 1 implementation priorities and has developed a workplan. | March 2022 |
| Team has reviewed PFC and community engagement activities to date and has identified areas and a plan for improvement. | March 2022 |
| Team has reviewed physician and other clinician engagement activities to date and has identified areas and a plan for improvement. | March 2022 |

SCHEDULE "D" BUDGET

| | | |
|---|--|--------------|
| Funding Recipient Name: Corporation of the County of Renfrew | | |
| Primary Contact: Mr. Paul Moreau | | |
| Funding Period Start Date: October 1 st , 2021 | Funding Period End Date: March 31 st , 2023 | |
| Project Name: Network 24 Ontario Health Team Implementation Supports | | |
| FY | Expenditure Description | Total |
| 2021-22 | <ul style="list-style-type: none"> Planning and implementing a population-health management approach to integrated and coordinated service delivery (no spending limit); Digital health, information management, and virtual care implementation (no spending limit); Physician and other clinician leadership, engagement, and participation (no spending limit); Patient, family, and caregiver engagement and participation (no spending limit); Project management and leadership, practice facilitation to support change management, and other implementation activities (no spending limit); and Performance measurement and quality improvement (no spending limit). | \$200,000 |
| 2022-23 | <ul style="list-style-type: none"> Planning and implementing a population-health management approach to integrated and coordinated service delivery (no spending limit); Digital health, information management, and virtual care implementation (no spending limit); Physician and other clinician leadership, engagement, and participation (no spending limit); Patient, family, and caregiver engagement and participation (no spending limit); Project management and leadership, practice facilitation to support change management, and other implementation activities (no spending limit); and Performance measurement and quality improvement (no spending limit). | \$925,000 |
| | | |

| | | |
|--|---|--------------------|
| Total Budget | | \$1,125,000 |
| <i>* Total consulting services spend permitted throughout the entire length of TPA (2021 to 2023).</i> | | \$225,000 |
| | | |
| Project Name: Network 24 Ontario Health Team Collaboration Supports | | |
| FY | Expenditure Description | Total |
| 2021-22 | <ul style="list-style-type: none"> Staffing, including acquiring consulting services for facilitation and mediation, to support advancement of collaboration activities listed within the Scope of the Project; Administrative and overhead expenses to support advancement of activities listed within the Scope of the Project; Expanded physician and clinician leadership, engagement, and participation; Expanded patient, family, and caregiver (PFC) and community leadership, engagement and participation; Travel-related expenses (i.e., transportation, meals and accommodation) to support advancement of activities listed within the Scope of the Project. | \$22,500 |
| 2022-23 | <ul style="list-style-type: none"> Staffing, including acquiring consulting services for facilitation and mediation, to support advancement of collaboration activities listed within the Scope of the Project; Administrative and overhead expenses to support advancement of activities listed within the Scope of the Project; Expanded physician and clinician leadership, engagement, and participation; Expanded patient, family, and caregiver (PFC) and community leadership, engagement and participation; Travel-related expenses (i.e., transportation, meals and accommodation) to support advancement of activities listed within the Scope of the Project. | \$52,500 |
| | Total Budget | \$75,000 |

**SCHEDULE “E”
PAYMENT PLAN**

Upon execution of the Agreement by both parties, the Province shall provide the Recipient with Funds in instalments, as it determines, for the 2021-22 Funding Year.

In the 2022-23 Funding Year, the Province will provide quarterly payments to the Recipient as follows:

| 2022-23 Payment Schedule | |
|---------------------------------|------------------|
| mid-month April 2022 | \$244,375 |
| mid-month July 2022 | \$244,375 |
| mid-month October 2022 | \$244,375 |
| mid-month January 2023 | \$244,375 |
| 2022-23 Total | \$977,500 |

** (\$925,000 + \$52,500); from SCHEDULE “D” BUDGET*

SCHEDULE “F” REPORTS

The Recipient shall work with the other members of the Network 24 Ontario Health Team to provide the following reports to the Province by the due dates specified:

| Name of Report | Due Date |
|---|---|
| Spending Plan for <i>Implementation Supports Funding</i> | <ul style="list-style-type: none"> March 11, 2022 |
| Spending Plan for <i>Collaboration Supports Funding</i> | <ul style="list-style-type: none"> March 11, 2022 |
| Collaboration Plan for <i>Collaboration Supports Funding</i> | <ul style="list-style-type: none"> March 31, 2022 |
| Summary of Year 1 Workplan for <i>Collaboration Supports Funding</i> | <ul style="list-style-type: none"> March 31, 2022 |
| Harmonized Information Management Plan for <i>Implementation Supports Funding</i> | <ul style="list-style-type: none"> June 30, 2022 |
| Quarterly Reports for <i>Implementation Supports Funding</i> and <i>Collaboration Supports Funding</i> * | <u>Due dates in FY2022-23:</u> <ul style="list-style-type: none"> July 29, 2022 (for April 2022 to June 2022 – Q1) October 31, 2022 (for July 2022 to September 2022 – Q2) January 31, 2023 (for October 2022 to December 2022 – Q3) |
| FY2021-22 Year End Report for <i>Implementation Supports Funding</i> and <i>Collaboration Supports Funding</i> | <ul style="list-style-type: none"> April 29, 2022 (for October 2021 to March 2022) |
| Final Report for <i>Implementation Supports Funding</i> and <i>Collaboration Supports Funding</i> * | <ul style="list-style-type: none"> April 28, 2023 |
| Audited Financial Statements for <i>Implementation Supports Funding</i> and <i>Collaboration Supports Funding</i> | <ul style="list-style-type: none"> June 30, 2022 (for FY2021-2022) June 30, 2023 (for FY 2022-23) |

*Quarterly reports are not required for the periods of October 2021 to March 2022 and January to March 2023 – the Recipient shall include information for October 2021 thru March 2022 in the FY2021-22 Year End Report (due April 29, 2022), and for January 2023 thru March 2023 in the Final Report (due April 28, 2023).

Reporting details:

- A) The Spending Plan for Implementation Supports Funding shall set out a brief description of the OHT's plans for using Implementation Supports Funds in FY2021-22 and FY2022-23. This will include a description of expenditures and how they advance OHT implementation objectives and activities (or projects) as well as a breakdown of total planned spending under each eligible activity, i.e., for each of:
- Planning and implementing a population-health management approach to integrated and coordinated service delivery;
 - Digital health, information management, and virtual care implementation;
 - Physician and other clinician leadership, engagement, and participation;
 - Patient, family, and caregiver engagement and participation;
 - Project management and leadership; and
 - Performance measurement and quality improvement.
- B) The Spending Plan for Collaboration Supports Funding shall set out a brief description of the OHT's plans for using the Collaboration Supports Funding in FY2021-22 and FY2022-23. This will include a description of expenditures and how they advance collaboration efforts, as well as a forecasted amount for each expenditure.
- C) The Collaboration Plan for Collaboration Supports Funding shall set out:
- A vision/purpose of the OHT which reflects the collaboration between the previously independent In Development teams;
 - Principles to guide how the OHT will achieve the Milestones set out in **Schedule C** and complete the Reports set out in **Schedule F**; and
 - Challenges identified by the OHT, as well as approaches to address the challenges that is reflective of the team's collaboration.
- D) The Summary of Year 1 Workplan for Collaboration Supports Funding sets out the following:
- The OHT's implementation priorities during its first year of implementing the OHT model;
 - Areas of Improvement identified, as well as next steps and timelines associated with addressing these areas;
 - An approach and associated timelines to engage with PFC representatives, including identifying areas for improvement to ensure collaboration with these groups is reflective of the attributed population; and
 - An approach and associated timelines to engage with physicians and other clinicians, including identifying areas of improvement to ensure collaboration with these groups is reflective of the attributed population.
- E) The Harmonized Information Management Plan for Implementation Supports Funding shall include descriptions of:
- the OHT's information management needs;
 - the OHT's information governance and accountability structures; and
 - plans for managing privacy considerations and risks, based on factors that include: assessments of privacy considerations along the relevant data flows, applicable

privacy authorities, opportunities for harmonizing privacy practices and procedures, and available controls and safeguards.

F) Each Quarterly Report shall include the following:

- a status update on the Implementation Supports project and Collaboration Supports project that includes:
 - a brief description of any new OHT activities related to both Projects;
 - a progress update on both Projects' activities described in both of the OHT's Spending Plans, including whether, and if so how, the Project activity is helping the OHT achieve success on one or more quadruple aim goals, including improving the patient experience;
 - progress updates on the Milestones and Outputs set out in Schedule "C", including key successes;
 - data on performance indicators as detailed below; and
 - descriptions of key activities planned for the next reporting period;
- a financial expenditure statement, signed by the designated financial officer of the Corporation of the County of Renfrew, that includes the following:
 - breakdowns of total spending for each eligible activity under the Implementation Supports funding, i.e., for each of:
 - planning and implementing a population-health management approach to integrated and coordinated service delivery;
 - digital health, information management and virtual care implementation;
 - physician and other clinician leadership, engagement and participation;
 - patient, family, and caregiver engagement and participation;
 - project management and leadership; and
 - performance measurement and quality improvement;
 - breakdowns of total spending for each eligible activity under the Collaboration Supports funding
 - detailing of budget-to-actual expenditures;
 - explanation of variance between budget-to-actual expenditures (if applicable);
 - forecast for upcoming reporting period(s) and year-end position; and
 - interest earned on the funds; and
- performance indicators data, as follows:
 - The Recipient shall report data to the Province on a quarterly basis on three of the performance indicators identified by the OHT in its Full Application as priority measures for monitoring implementation progress in the short term, or such other indicators as agreed upon by the Province and the OHT.
 - In its first quarterly report-back on OHT-specific indicators, the Recipient shall describe the data collection, measurement methodology and data source

being used for each indicator, as well as identify benchmarks (where available) and targets for each indicator. These indicators will not be used for the purposes of public reporting, but to monitor OHT implementation progress and evaluate the extent to which OHTs are delivering more coordinated, integrated and patient-centred care.

G) The FY2021-22 Year End Report shall include the following:

- a status update that includes the items described above for Quarterly Reports, including from a year-end perspective, and with a focus on describing OHT successes in quantitative and qualitative terms; and
- a financial expenditure statement, signed by the designated financial officer of the Corporation of the County of Renfrew, that includes the items described above for Quarterly Reports.

H) The Final Report shall include the following:

- a status update that includes:
 - a summary description of all Project activities supported by these sources of funding;
 - key OHT achievements, described in terms of the quadruple aim; and
 - data on performance indicators.
- an evaluative analysis that includes descriptions of successes, challenges, opportunities, key enablers, and lessons learned;
- a financial expenditure statement, signed by the designated financial officer of the Corporation of the County of Renfrew, that includes the items described above; and
- confirmation that a cQIP and an OHT Expansion Plan have been developed and are in place for the following fiscal year.

I) The Audited Financial Statements refers to the Recipient's annual general-purpose audited statements, within which the Project activities are expected to be clearly reported.

J) The Province may request Project status reports and other updates from time to time.

K) The Province may provide further reporting instructions on the format and content of reports.

L) The Province may request copies of the aforementioned reports at any time.

Renfrew County and District Health Unit
"Optimal Health for All in Renfrew County and District"



Board of Health

Regular Board Meeting, via GoToMeeting

Tuesday, January 25, 2022

The Regular meeting of Renfrew County and District Health Unit's Board of Health was held on the virtual software platform—*GoToMeeting*. Members were present by audio and/or video.

Members:

| | |
|----------------------|------------|
| Ann Aikens | Chair |
| Christine Reavie | Vice-Chair |
| James Brose | Member |
| Michael Donohue | Member |
| J. Michael du Manoir | Member |
| Jane Dumas | Member |
| Joanne King | Member |
| Wilmer Matthews | Member |
| Jennifer Murphy | Member |
| Carolyn Watt | Member |

Staff:

| | |
|-------------------------|---|
| Vicki Benoit | Director, Health Protection |
| Dr. Robert Cushman | Acting Medical Officer of Health |
| Heather Daly | Acting Chief Executive Officer/Director, Corporate Services |
| Dr. Michelle Foote | Public Health Physician |
| Marilyn Halko | Executive Assistant (Secretary) |
| Patti Smith | Director, Director Health Promotion |
| Lindsey Cameron-Dermann | |

Regrets:

| | |
|------------|--------|
| Peter Emon | Member |
|------------|--------|

01. Call to Order

A. Aikens called the meeting to order at 10:00 a.m.

02. Agenda Approval

The agenda was approved as amended, with items 08. a. *Report to the Board—Dr. Robert Cushman, Acting Medical Officer of Health* and item 08. b. *Report to the Board—Heather Daly, Acting Chief Executive Officer/Director, Corporate Services* moved forward to items 06. a. and b.

Resolution: #1 BoH 2022-Jan-25

Moved by J. M. du Manoir; seconded by C. Watt; be it resolved that the Board approve the agenda, as amended.

Carried

03. Declarations of Conflict of Interest

There were no declarations of conflict of interest.

Chair Aikens verified with the Secretary that all 2022 *Acknowledgment of Conflict of Interest* forms had been completed by Board Members. The Secretary told Chair Aikens that one form was outstanding, for P. Emon. Chair Aikens will follow-up with the Board Member.

04. Delegations

There were no delegations.

05. Minutes of Previous Meetings (Approval)

- a. Special Board Levy Meeting Minutes 2021-Dec-10
The meeting minutes were approved for Friday, December 10, 2021.

Resolution: #2 BoH 2022-Jan-25

Moved by J. M. du Manoir; seconded by C. Reavie; be it resolved that the Board approve the meeting minutes from the Special Board Levy meeting held on Friday, December 10, 2021, as presented.

Carried

Chair Aikens thanked M. Donohue for his comprehensive comments regarding RCDHU's Levy submission, during the County of Renfrew's Finance and Administration meeting.

- b. Inaugural Board of Health Meeting Minutes 2022-Jan-11
The meeting minutes were approved for Tuesday, January 11, 2022.

Resolution: #3 BoH 2022-Jan-25

Moved by W. Matthews; seconded by J. Murphy; be it resolved that the Board approve the meeting minutes from the Inaugural Board of Health meeting held on Tuesday, January 11, 2022, as presented.

Carried

06. Staff Reports

(moved forward from item 08., as per the amended agenda)

- a. Report to the Board—Dr. Robert Cushman, Acting Medical Officer of Health
Dr. Robert Cushman gave an update to the Board on current COVID-19 activity in Renfrew County and District. The current focus is on RCD outbreaks at hospitals, long-term care/retirement homes and congregate living settings.

Dr. Michelle Foote gave an update on COVID-19 activity in RCD schools. Schools reopened for in-person learning on Monday, January 17, 2022. The situation in schools is rapidly evolving due to the highly contagious Omicron variant.

J. Murphy left the meeting at 10:20 a.m.

The Chair called for questions and comments from the Board.

As part of the Report to the Board, Lindsey Cameron-Dermann, Coordinator, Epidemiology and Health Analytics gave the following presentation:

- i. [COVID-19 RCDHU Epidemiology Update](#)

The Chair called for questions and comments from the Board.

Resolution: #4 BoH 2022-Jan-25

Moved by J. M. du Manoir; seconded by J. Dumas; be it resolved that the Board accept the Report to the Board from Dr. Robert Cushman, Acting Medical Officer of Health.

Carried

Chair Aikens asked L. Cameron-Dermann, or the Secretary to remove the CONFIDENTIAL watermark from the *COVID-19 RCDHU Epidemiology Update* in preparation for the presentation at the MOH(A) and RCDHU Area Mayors COVID-19 Information Update Meeting on Thursday, January 27, 2022, at 1:30 p.m.

Chair Aikens thanked Dr. Cushman, Dr. Michelle Foote and L. Cameron-Dermann for their *Report to the Board*.

Dr. Cushman also thanked Dr. Foote, SMT and L. Cameron-Dermann for their contributions to the *Report* and to RCDHU.

Dr. Foote and L. Cameron-Dermann left the meeting at 11:00 a.m.

- b. Report to the Board—Heather Daly, Acting Chief Executive Officer/
Director, Corporate Services
H. Daly presented the following *Report to the Board*:
 - i. [Quarterly Update](#)

The Chair went through each item on the *Report* and called for questions and comments from the Board.

Resolution: #5 BoH 2022-Jan-25

Moved by J. Brose; seconded by J. King; be it resolved that the Board accept the *Report to the Board—Quarterly Update* from H. Daly, Acting Chief Executive Officer/Director, Corporate Services.

Carried

The Chair thanked Heather Daly and her Team for the *Report to the Board*.

Dr. Cushman left the meeting at 11:15 a.m.

07. Business Arising

- a. Action List—Special/Regular Board Meeting
All items from the updated [Action List—Special/Regular Board Meeting—2021-Dec-10 and 2021-Nov-30](#) were completed or deferred to a later date.

08. Correspondence

The Board received the following correspondence:

| Subject: | | From: | Action: |
|----------|---|--|--|
| a. | <u>County of Renfrew 2022 Board of Health Appointments</u> | <ul style="list-style-type: none">• P. Moreau—Chief Administrative Officer—County of Renfrew | <ul style="list-style-type: none">• Received as information. |
| b. | <u>Letter of Congratulations and OIC to J. M. du Manoir</u> | <ul style="list-style-type: none">• Minister of Health—Deputy Premier Christine Elliott | <ul style="list-style-type: none">• Received as information. |
| c. | <u>alPHa 2022 Pre-Budget Submission</u> | <ul style="list-style-type: none">• Association of Local Public Health Agency—alPHa | <ul style="list-style-type: none">• Received as information. |
| d. | <u>alPHa Public Health Resilience in Ontario</u> | <ul style="list-style-type: none">• Association of Local Public Health Agency—alPHa | <ul style="list-style-type: none">• Received as information. |

The Chair congratulated J. M. du Manoir on his re-appointment to the Board.

Chair Aikens congratulated Board Member J. King on her new role as Co-Chair of the Network 24 Ontario Health Team.

The Chair also acknowledged the collaborative support work that Dr. Foote and L. Cameron-Dermann provide to the Ottawa West Four Rivers Ontario Health Team and the Network 24 Ontario Health Team, on behalf of RCDHU.

09. Board Committee Reports

There were no Board Committee Reports.

10. By-Laws

See New Business.

11. New Business

- a. By-Law 2022-01--By-Law to Appoint Auditors
[By-Law Number 2022-01—By-Law to Appoint Auditors](#)

Resolution: #6 BoH 2022-Jan-25

Moved by J. King; seconded by J. Dumas; be it resolved that the Board approve By-Law 2022-01—By-Law to Appoint Auditors, And Further: that the Chair and Vice-Chair be authorized to sign By-Law 2022-01.

Carried

- b. Appointment of Signing Officers
[Appointment of Signing Officers—2022](#)

Resolution: #7 BoH 2022-Jan-25

Moved by J. M. du Manoir; seconded by W. Matthews; be it resolved that the Board approve the Appointment of Signing Officers for 2022.

Carried

M. Donohue requested that signing authority be reviewed during discussion of the Board's Procedural By-Law at the next Governance Committee meeting.

C. Watt left the meeting at 11:20 a.m.

- c. Registration—alPHa Winter Symposium—Public Health Resilience—2022-Feb-25
After discussion of the [Registration—alPHa Winter Symposium—Public Health Resilience—2022-Feb-25](#), all Board Members were invited to attend the virtual symposium.

Resolution: #8 BoH 2022-Jan-25

Moved by C. Reavie; seconded by M. Donohue; be it resolved that the Board approve that all Board Members be invited to attend the virtual alPHa 2022 Winter Symposium on February 25, 2022.

Carried

The Chair asked Board Members to contact the Secretary, by February 15, 2022, if they would like to attend the *Symposium*.

12. Notice of Motion

There was no notice of motion.

13. Closed

There was no closed meeting.

14. **Date of Next Meetings**

The date of the next Regular Board meeting is Tuesday, February 22, 2021, at 10:00 a.m., or at the call of the Chair.

The Governance Committee meeting is Wednesday, February 2, 2022, at 1:00 p.m.

The Executive Committee meeting is Wednesday, February 9, 2022, at 9:30 a.m.

As noted by the Chair, a Resources Committee meeting will be scheduled in the third week of February 2022.

Chair Aikens thanked Board Members who were attending the ROMA 2022 Conference for adjusting their schedules so that they could join today's Board meeting.

15. **Adjournment**

Resolution: #9 BoH 2022-Jan-25

Moved by C. Reavie; seconded by J. King; be it resolved that the Regular Board of Health meeting be adjourned at 11:35 a.m.

Carried

The Regular Board meeting, held by *GoToMeeting*, adjourned at 11:35 a.m.

Chair

These meeting minutes were approved by the Board at the Regular Board meeting held on Tuesday, February 22, 2022.