

March 23, 2015

Ms. Shiela Shaw  
Executive Director  
Canadian Mental Health Association, Fort Frances Branch  
612 Portage Avenue  
PO Box 446  
Fort Frances, ON P9A 3MB

Dear Ms. Shaw:

Re: Refresh of Multi-Sector Service Accountability Agreement Schedules for 2015/16

Further to email correspondence dated March 4, 2015, the North West Local Health Integration Network (the "LHIN") is advising you of amendments to your 2014-17 Multi-Sector Service Accountability Agreement (the "M-SAA"), effective April 1, 2015. These amendments include updates to certain performance requirements as well as updates to directives, guidelines and policies.

Please find attached amended M-SAA schedules:

- Schedule D, which updates the directives, guidelines and policies and replaces the previous Schedule D; and
- Schedule E1, which reflects amendments to certain core indicators and replaces the previous Schedule E1.

Subject to the HSP's agreement, the M-SAA between the HSP and the LHIN will be amended effective April 1, 2015.

To the extent that there are any conflicts between the M-SAA and the amendments to the M-SAA through this letter, the terms of this letter and the accompanying Schedules will govern. All other terms and conditions and Schedules in the M-SAA will remain the same.

Please indicate the HSP's agreement to the amendment of the M-SAA by signing below and returning one copy of this letter to the North West LHIN by **March 31, 2015**.

If you have any questions or concerns about this letter or the M-SAA, please contact James Anderson at (807) 684-9425 x 2033.

Sincerely,



Laura Kokocinski  
Chief Executive Officer

*Healthier people, a strong health system - our future*

*Des gens en meilleure santé, un système de santé fort - voilà notre avenir*

Encls. Schedule D  
Schedule E1

c. Trudy McCormick, Chair, Board of Directors  
Joy Warkentin, Chair, Board of Directors, North West LHIN

**AGREED TO AND ACCEPTED BY:**

**Canadian Mental Health Association, Fort Frances Branch**

**By:**

\_\_\_\_\_  
Executive Director,

I have the authority to bind Canadian Mental Health Association, Fort Frances Branch.

**SCHEDULE D – DIRECTIVES, GUIDELINES AND POLICIES  
COMMUNITY MENTAL HEALTH AND ADDICTIONS SERVICES**

(Amended effective April 1, 2015)

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

<ul style="list-style-type: none"> <li>▪ <b>Community Financial Policy, 2015</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Operating Manual for Community Mental Health and Addiction Services (2003)</b></li> </ul>	<ul style="list-style-type: none"> <li>Chapter 1. Organizational Components                             <ul style="list-style-type: none"> <li>1.2 Organizational Structure, Roles and Relationships</li> <li>1.3 Developing and Maintaining the HSP Organization / Structure</li> <li>1.5 Dispute Resolution</li> </ul> </li> </ul>
	<ul style="list-style-type: none"> <li>Chapter 2. Program &amp; Administrative Components                             <ul style="list-style-type: none"> <li>2.3 Budget Allocations/ Problem Gambling Budget Allocations</li> <li>2.4 Service Provision Requirements</li> <li>2.5 Client Records, Confidentiality and Disclosure</li> <li>2.6 Service Reporting Requirements</li> <li>2.8 Issues Management</li> <li>2.9 Service Evaluation/Quality Assurance</li> <li>2.10 Administrative Expectations</li> </ul> </li> </ul>
	<ul style="list-style-type: none"> <li>Chapter 3. Financial Record Keeping and Reporting Requirements                             <ul style="list-style-type: none"> <li>3.2 Personal Needs Allowance for Clients in Some Residential Addictions Programs</li> <li>3.6 Internal Financial Controls (<i>except "Inventory of Assets"</i>)</li> <li>3.7 Human Resource Control</li> </ul> </li> </ul>
<ul style="list-style-type: none"> <li>▪ <b>Early Psychosis Intervention Standards (Nov 2010)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Ontario Program Standards for ACT Teams (2005)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Intensive Case Management Service Standards for Mental Health Services and Supports (2005)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Crisis Response Service Standards for Mental Health Services and Supports (2005)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Psychiatric Sessional Funding Guidelines (2004)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Joint Policy Guideline for the Provision of Community Mental Health and Developmental Services for Adults with Dual Diagnosis (2008)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Addictions &amp; Mental Health Ontario – Ontario Provincial Withdrawal Management Standards (2014)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Ontario Admission Discharge Criteria for Addiction Agencies (2000)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Admission, Discharge and Assessment Tools for Ontario Addiction Agencies (2000)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>South Oaks Gambling Screen (SOGS)</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Ontario Healthcare Reporting Standards – OHRs/MIS - most current version available to applicable year</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ <b>Guideline for Community Health Service Providers Audits and Reviews, August 2012</b></li> </ul>	

Core Indicators - All Sectors

Schedule E1:  
Core Indicators - All Sectors

Healthcare Service Provider: Canadian Mental Health Association, Fort Frances Branch

Performance Indicators	2014/15		2015/16		2016/17	
	Target	Performance Standard	Target	Performance Standard	Target	Performance Standard
% Total Margin (Note 1)	0%	>=0%	0%	>=0%	0.0%	>=0%
Fund Type 2- Balanced Budget (Note 2)	0	0	0	0	0	0
Proportion of Budget Spent on Administration (Notes 3, 4, 6)	8.7%	< 12%	7.8%	< 12%	7.8%	< 12%
Variance Forecast to Actual Expenditures	0.0%	< 5%	0.0%	< 5%	0.0%	< 5%
Variance Forecast to Actual Units of Service	0.0%	< 5%	0.0%	< 5%	0.0%	< 5%
Percentage of Acute ALC Days (Closed Cases) (Notes 5, 7)	15.0%	<=15.0%	15.0%	<=15.0%	15.0%	<=15.0%
<b>Explanatory Indicators</b>						
Cost per Individual Served (by program/service)	Proportion of Budget Spent on Volunteer Services (Note 8)					
Client Experience (client satisfaction surveys)	Proportion of Budget Spent on Information Systems Support (Note 8)					
Proportion of Budget Spent on Plant Operations (Note 8)	Proportion of Budget Spent on General Administration (Note 8)					
<p>Note 1 - No negative variance is accepted for Total Margin</p> <p>Note 2 - Fund Type 2- Balanced Budget: HSP's are required to submit a balanced budget.</p> <p>Note 3 - Target Setting Methodology (BM = Benchmark)</p> <p>if HSP budget is &gt; LHIN upper corridor, Target = upper limit of performance corridor, Corridor = lessor of (10% above Target) and (HSP budget)</p> <p>if HSP budget is between LHIN BM target and upper corridor, Target = HSP budget, Corridor = LHIN benchmark for upper corridor</p> <p>if HSP budget is &lt; LHIN BM target, Target = HSP budget, Corridor = greater of (10% above HSP budget) and (LHIN BM target), unless 0, then 0</p> <p>Note 4 - As of April 1, 2014, Proportion of Budget Spent on Administration includes Undistributed Accounting Centres (82*), Admin &amp; Support Services (72 1*), Management Clinical Services (72 5 05), and Medical Resources (72 5 07). This definition applies to the North West LHIN and its Health Services Providers.</p> <p>Note 5 - Target represents target established for the North West LHIN and surrounding area</p> <p>Note 6 - Amended December 19, 2014 for Increased Psychogeriatric Services (2014/15 one-time \$24,000, fiscal portion of base \$46,400, annualized base in 2015/16 of \$185,600)</p> <p>Note 7 - Amended April 1, 2015 to update TBD targets for 2015/16 and 2016/17</p> <p>Note 8 - Amended April 1, 2015 for new explanatory indicators</p>						