Hamilton Niagara Haldimand Brant LHIN RLISS de Hamilton Niagara Haldimand Brant

April 9, 2013

Ms. Peg Purvis
Executive Director
Canadian Mental Health Association - Brant County Branch
44 King Street, Suite 203
Brantford ON N3T 3C7

264 Main Street East, Grimsby, ON L3M 1P8 Tel: 1.905.945.4930 1.866.363 5448 Fax: 1.905.945.1992 264, rue Main Est, Grimsby, ON L3M 1P8 Tel: 1.905.945.4930 1.866.363.5446 Téléc: 1.905.945.1992 www.hnhblhin.on.ca



Dear Ms. Purvis:

Re: 4% Community Funding Allocation - Expanded Case Management and Crisis Services

At their September 27, 2012, meeting, the Hamilton Niagara Haldimand Brant (HNHB) Local Health Integration Network (LHIN) Board of Directors (Board) approved 2012-13 base funding to support:

Expanded Case Management and Crisis Services

As a result of a reallocation of funding with partnering Health Service Providers (HSP), Canadian Mental Health Association - Brant County Branch will receive its share of the approved base funding directly from the LHIN in the 2013-14 fiscal year. Details of this approval are provided in the attached Project Funding Agreement (PFA). (Please be advised that if your agency is fulfilling a sponsoring or lead agency role, you are accountable to the LHIN for the deliverables, funding and reporting.) Included in the PFA is a performance schedule with the indicators we are asking Canadian Mental Health Association - Brant County Branch to report on in 2013-14.

Funding will be adjusted upon receipt of the signed PFA.

This funding is subject to in-year and year-end reconciliation and recovery. To facilitate this reporting requirement, please maintain separate financial and statistical records for these funds. A template to facilitate reporting will be provided to you electronically. This must be completed and submitted to the HNHB LHIN on a quarterly basis. These Quarterly Reports will be reviewed, and used to assist in the evaluation of the program and budget that was approved by the HNHB LHIN Board.

As you know, the 2012 Budget, Strong Action for Ontario, includes a plan to keep Ontario on track to balance the budget by 2017-18. The government is committed to getting its fiscal house in order while protecting the services that matter most to Ontarians: health care and education.

That strong action includes a plan to transform the broader public sector (BPS). The BPS plays a critical role in providing services to Ontarians and the government has always valued, and will continue to value that work. Compensation for the BPS accounts for more than 50 per cent of all Ontario government spending. The government is asking all Ontarians to do their part in returning the budget to balance. To meet the government's fiscal targets, the fiscal plan provides no funding for incremental compensation increases for new collective agreements.



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The government respects the collective bargaining process and will leave existing agreements intact. The government will also insist that its partners continue providing high-quality health care, education and other key public services to Ontario families.

Ontario is expecting its bargaining partners to meet the following criteria:

- For two years, collective agreements should not allow for increases in compensation. This
 includes wages, performance pay and benefits. Any movement through an established grid
 must be fully offset from within the total compensation package. Should parties wish to enter
 contracts of more than two years, those contracts should contain no increases in
 compensation during the additional period.
- The Broader Public Sector Accountability Act, 2010, implements compensation restraint
 measures for designated executives at hospitals, universities, colleges, school boards and
 designated organizations. The restraint measures are effective March 31, 2012, and are in
 place until the province ceases to have a deficit.
- Decisions related to compensation for non-executives who are not governed by collective agreements should live within fiscal targets.

In addition, there should be no agreement to terms that impose longer-term costs or restrictions on service delivery.

The attached PFA is a schedule of the Multi-Sector Service Accountability Agreement (M-SAA) previously signed with the LHIN. Subject to your acceptance to the terms and conditions detailed in this letter and the attached PFA, the M-SAA between your organization and the LHIN will be amended to reflect these changes. To the extent that there are any conflicts between what is in the M-SAA, and what has been added to the M-SAA by this letter and the attached PFA, this letter and the PFA will govern. All other terms and conditions in the M-SAA will remain the same.

To confirm your agreement with the terms and conditions as described in this letter and the PFA, please print, sign and return two copies by April 23, 2013 to the attention of Shannon Lawrence, Analyst, Finance, HNHB LHIN, 264 Main Street East, Grimsby, ON L3M 1P8. Please also return a copy electronically to shannon.lawrence@lhins.on.ca.

Should you have any questions regarding the information provided in the letter, please contact Karen Horvath, Interim Director, Finance, at karen.horvath@lhins.on.ca or (905) 945-4930, ext. 4236.

The success of this initiative is in part due to the hard work and dedication of your organization. Thank you for your commitment to improving services and supports for our community.

Sincerely,

Donna Cripps

Chief Executive Officer

Attachment(s)

 Marlene Robertson, Board President, Canadian Mental Health Association - Brant County Branch

Michael Shea, Board Chair, HNHB LHIN

Susan Vandevelde-Coke, Interim Executive Director, Community Addiction and Mental Health Services of Haldimand & Norfolk

Mike Benin, Manager of Mental Health & Addictions Services, Brant Community Healthcare System

Ms. Peg Purvis

Rose Gass, Director, Emergency Department and Respiratory Therapy, Norfolk General Hospital
Philip Christoff, Director, Quality and Risk Management, HNHB LHIN
Karen Horvath, Interim Director, Finance, HNHB LHIN
Steven Isaak, Director, Health System Transformation, HNHB LHIN
Rosalind Tarrant, Director, Access to Care, HNHB LHIN

Schedule F - Project Funding Agreement

THIS PROJECT FUNDING AGREEMENT (the "PFA") is effective as of April 1, 2013 (the "Effective Date") between:

HAMILTON NIAGARA HALDIMAND BRANT LOCAL HEALTH INTEGRATION NETWORK (the "LHIN")

- and -

CANADIAN MENTAL HEALTH ASSOCIATION - BRANT COUNTY BRANCH (the "HSP")

WHEREAS the LHIN and the HSP entered into a service accountability agreement dated April 1, 2011 (the "SAA") for the provision of Services and now wish to set out the terms of pursuant to which the LHIN will fund the HSP for Expanded Case Management and Crisis Services and (the "Project(s)");

NOW THEREFORE in consideration of their respective agreements set out below and subject to the terms of the SAA, the parties covenant and agree as follows:

- 1.0 Definitions. Unless otherwise specified in the PFA, capitalized words and phrases shall have the meaning set out in the SAA. When used in the PFA, the following words and phrases have the following meanings:
 - "Deliverable" means one of, and "Deliverables" mean more than one of, the deliverables provided by the HSP pursuant to the terms of this PFA and set out in Appendix A to this PFA;
 - "Project Funding" means the applicable price or funding for the Services and Deliverables and set out in Appendix A to this PFA;
 - "Service" means one of, and "Services" mean more than one of, the services provided by the HSP pursuant to the terms of this PFA and set out in Appendix A to this PFA; and
 - "Term" means the period of time from the Effective Date up to and including March 31, 2014.
- 2.0 Relationship between the SAA and the PFA. This PFA is made subject to and hereby incorporates the terms of the SAA. On execution the PFA will be appended to the SAA as a Schedule.
- 3.0 The Services and Deliverables. The HSP agrees to provide the Services and Deliverables on the terms and conditions of this PFA including all Appendices and schedules thereto.
- 4.0 Right to Re-use Deliverables. The HSP will grant, and will ensure that it acquires all the rights, and waivers of moral rights, it requires to grant to, and enable the LHIN to fully utilize, a perpetual, worldwide, non-exclusive, irrevocable, transferable royalty free, fully paid up right and license (a) to use, modify, reproduce and distribute the Deliverables in any form or format; and (b) to authorize other persons, including one or more local health integration networks to do any of the actions set out in (a) on behalf of the LHIN.

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- **5.0** Rates and Payment Process. Subject to the SAA, the Project Funding for the provision of the Deliverables shall be as specified in Appendix A to this PFA.
- 6.0 Representatives for PFA.
 - (a) The HSP's Representative for purposes of this PFA shall be Peg Purvis, Executive Director, tel: 519-752-2998, fax: 519-752-2717, e-mail: peg@cmhabrant.on.ca. The HSP agrees that the HSP's Representative has authority to legally bind the HSP.
 - (b) The LHIN's Representative for purposes of this PFA shall be: Donna Cripps, Chief Executive Officer, tel: 905-945-4930, fax: 905-945-1992, e-mail: donna.cripps@lhins.on.ca.
- 7.0 Additional Terms and Conditions. The following additional terms and conditions are applicable to this PFA.
 - (a) Notwithstanding any other provision in the SAA or this PFA, in the event the SAA is terminated or expires prior to the expiration or termination of the PFA, the PFA shall continue until it expires or is terminated in accordance with its terms.
 - (b) Additional Terms and Conditions are addressed in Appendix A

IN WITNESS WHEREOF the parties hereto have executed this PFA as of the date first above written.

CANADIAN MENTAL HEALTH ASSOCIATION - BRANT COUNTY BRANCH

Peo Purvio

Peg Purvi	S
Executive	Director

Date

HAMILTON NIAGARA HALDIMAND BRANT LOCAL HEALTH INTEGRATION NETWORK

By:

By:

Donna Cripps

Chief Executive Officer

Date

APPENDIX A: DELIVERABLES

DESCRIPTION OF PROJECT

Expanded Case Management and Crisis Services

This is part of an integrated program to build a continuum of crisis capacity, case management and treatment across Haldimand Norfolk and Brant. Program components include intensive case management, counselling, peer support, system navigation, common intake, support at transitions between hospitals and community, withdrawal management aftercare, expansion of safe beds and mobile crisis support. Canadian Mental Health Association - Brant County Branch will provide ongoing clinical group and individual support in the community for persons with mental health, addictions and concurrent disorders; follow up post hospital and safe beds discharge.

2. DESCRIPTION OF DELIVERABLES

See Performance Standards

OUT OF SCOPE

- Services other than those identified by the functional codes Schedule 2.
- Surplus funding cannot be used to offset operational costs or pressures related to base operations of the organization.

4. REPORTING

Reporting Period	Dates of Reporting Period	Due Date
Second Quarter Report	April 1, 2013 - September 30, 2013	October 31, 2013
Third Quarter Report	October 1, 2013 – December 31, 2013	January 24, 2014*
Year-End Report	January 1, 2014- March 31, 2014	April 30, 2014

^{*}subsequent reports due 30 days after end of quarter.

5. PERFORMANCE STANDARDS

- Provide a report updating the HNHB LHIN on the implementation of the project using the attached Schedule 1.
- LHIN staff will meet with you to assist with the development of the performance indicator targets for 2013-14.

6. FINANCIAL

See attached Schedule 2.

7. PROJECT ASSUMPTIONS

- On-going funding is contingent on the outcomes of a performance evaluation
- A performance evaluation will be completed within a year of the start date of the program.
- Start-up costs are funded on a one time basis.
- All funds are subject to reconciliation and recovery.

8. RATES / BUDGET

- 8.1 The Budget for completion of this PFA is outlined in the attached Budget & Reporting Schedule 2.
- 8.2 Regardless of any other provision of this PFA, the <u>base</u> funding payable for the completion of the Deliverables under this PFA is not to exceed \$92,870 in 2013-14 for the following:
 - Expanded Case Management and Crisis Services

CSS 4% Funding 2013-14

SCHEDULE 1

The same of the sa	THE PROPERTY OF THE PROPERTY O				
Project Name	Intensive Case Mgmf and Crisis Capacity	Program Status Report	Service Category	Service Category Mental Health and Addictions	
Lead Organization Name	CMHA-Brant County Branch	description of the state of the			T
Project Description	Multi-agency service enhancement for people with menta management, counselling & treatment, and substance us	ith mental health and addiction issues in Haldimand-Norfolk and Brant Counties. Includes additional safe beds, case stance use and withdrawal management supports.	Norfolk and Brant Coun	ies, Includes additional safe beds, case	

Substance use and withdrawal management supports. CONTRACK Baseline Target Current Status to TBD	Multi-Serior County Branch Multi-Serior County Branch Multi-Serior Serior entancement for people with mental health and addiction issues in Haldimand-Morfolk and Brant Counties Includes additional safe beds, case Multi-Serior Serior entancement for people with mental health and addiction issues in Haldimand-Morfolk and Brant Countering & treatment, and substance use and withdrawal management supports. People Puris Measure Indication Baseline Target	Project Name	Intensive Case Momt and Crisis Capacity	A)	-	Program	Program Status Report	Separate Contents	Mental Health and Addictions	lictions	
Multi-agency service enhancement for people with mental health and addiction issues in Haldimand-Norfolk and Brant Countes Includes additional safe beds case management, counselling & treatment, and substance use and withdrawel management supports. Peg Purvis Peg Purvis CAMHS H-N, Brant CMHA, BCHCS Brant Hospital CMHA H-N, adding A Steed of Med Wiled Control of CAMHS H-N, Brant CMHA, BCHCS Brant Hospital CMHA H-N, adding A Steed of Medical CMHA Brant	Multi-agency service enhancement for people with mental health and addiction issues in Haidimand-Norfolk and Brant Counties. Includes additional safe beds case management, counselling & treatment, and substance use and withdrawal management, counselling & treatment, and substance use and withdrawal management supports. Pag Purvis Pag Purvis Page Current Status to CAMHS H-N, Brant CMH-A BCHCS Brant Hospital CMH-A H-N, Target TBD T	Lead Organization Name	CMHA-Brant County Branch		***************************************	•	Martin Company (1997)	Schirtic Sampler	DO PID INDO I DINOIL	2000	
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HAMILTON NIAGARA HALDIMAND BRANT LOCAL HEALTH INTEGRATION NETWORK Budget and Reporting Schedule 2

Agency Name: Canadian Mental Health Association Brant County Sranch
Program Title: Expension of Crisis/Case Management Services (Brant, Haldimand & Norfolk)
Funding Sector (select from drop down list): Community Mental Health

IFIS Number: 101064
Program Number: N/A
HNHB LHIN Reference #:

SECTION A - BUDGET		32 Month Budget
		Operating Costs
W	Start Date (DD/MM/YY)	1/4/2013
Number of months program		12
REVENUE		
Client Fees	\$0.00	
Fundraising		
Revenues - Other		
TOTAL REVENUE		
EXPENSES		
Salaries and Wages	********	88,000
Benefit Expense	22.80%	15,504
Total Salaries and Benefits		83,504
Program Expenses		
Staff Travel		5,000
Program Supplies		
Medical Supplies	***	
Contracted Out Services		
Meals/Food costs		
Advertising and Promotion	- Wester	
Other Program Expenses (please describe)		
Telephone and Cell		1,260
Total Program Expenses		5,200
Administrative Expenses		
Office Expenses		2,166
Staff Training		1,000
Volunteer Training & Recognition		
Minor Capital/Equipment		With the last
Building and Grounds	And on the articles of the control o	
Rent		
Utilities & Insurance		
General maintenance	*	
Administration Costs		
Central Agency Charges	aveau.	
Total Administrative Expenses		3,166
TOTAL EXPENSES		92,870
OTAL EAPERSES		

201		Start the Counties Total				
Start Up	Operating	Total				
Costs	Costs	Budget				
	12					
THE REAL PROPERTY.	12	STATISTICS.				
-						
	-					
	68,000	68,000				
	15,504	15,504				
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	3,166	3,166				
	92,870 .	92,870				
	92,870	92,870				

		Position Description	Full-Time Equivalents	12 Month Salary For ONE FTE	Salary (excluding benefits)
	1	Clinical Counsellor	1.00	68,000	68,000
*****	2				
	3				
	4				
	5				-
	6				79.77.41.000
	7				
			1.00		68,000

*SECTION D - MINOR CAPITAL/EQUIPMENT PURCHASE DETAIL							
	Item Description	Unit Cost	Quantity	Total Cost			
1		·		· .			
2							
3							
4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
5							
6							
7	27/0						

Service Type	Service Code or Functional Centre		Units of Service	Units of Service		onth Budget
Select from Drop Down	Code	Description	Definition	Per Unit Cost	Units	Operating Cost
Expansion	72 5 09 76	COM Case Management - Mental Health	Visits Face-to-face and Telephone In-House and Contracted Out	\$83.06	1,080	89,704
			Individuals Served by Functional Centre	\$1,495.07	60	89,709
			Mumber of Group sessions		32	
			Number of Group participants		256	
					*	
			Administration Costs			3,166
			Total Revenue (non-LHIN funding)			- Manual 181
			TOTAL FUNDING REQUESTED*		3.45	92,870
			* Totals must agree to 12 Month Bu	odget		Balanced

Service Type	Service Code or Functional Cent	Halfred C			Prorati	ed Budget
Select from Drop Down	Code	Description	Definition	Per Unit Cost	Number of Clients	Operating Cost
Expansion	72 5 09 76	COM Case Management - Mental Health	Visits Face-to-face and Telephone in-House and Contracted Out	\$83.06	1,080	20.704
			Individuals Served by Functional Centre	\$1,495.07	60	89,704
	1		Number of Group sessions		32	1
	-	Number of Group participants		256		
						4
		****	Administration Costs			3,166
			Total Revenue (non-LHIN funding)			
			TOTAL FUNDING REQUESTED*			92,870
			* Totals must agree to Prorated Bu	dget		Balanced