

## SCHEDULE G – FORM OF COMPLIANCE DECLARATION

### DECLARATION OF COMPLIANCE

Issued pursuant to the MSAA effective April 1, 2014

**To:** The Board of Directors of the North Simcoe Muskoka Local Health Integration Network (the "LHIN"). Attn: Board Chair.

**From:** The Board of Directors (the "Board") of the Canadian Mental Health Association, Muskoka-Parry Sound Branch (the "HSP")

**Date:** June 6, 2018

**Re:** April 1, 2017 – March 31, 2018 (the "Applicable Period")

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Unless otherwise defined in this declaration, capitalized terms have the same meaning as set out in the MSAA between the LHIN and the HSP effective April 1, 2014.

The Board has authorized me, by resolution dated June 6, 2018, to declare to you as follows:

After making inquiries of the Executive Director, Diane Brown-Demarco, and other appropriate officers of the HSP and subject to any exceptions identified on Appendix 1 to this Declaration of Compliance, to the best of the Board's knowledge and belief, the HSP has fulfilled, its obligations under the service accountability agreement (the "MSAA") in effect during the Applicable Period.

Without limiting the generality of the foregoing, the HSP has complied with:

- (i) Article 4.8 of the MSAA concerning applicable procurement practices;
- (ii) The *Local Health System Integration Act, 2006*; and
- (iii) The *Public Sector Compensation Restraint to Protect Public Services Act, 2010*.



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Bruce Loucks, Board Chairperson

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### Schedule G – Form of Compliance Declaration Cont'd.

#### Appendix 1 - Exceptions

[Please identify each obligation under the MSAA that the HSP did not meet during the Applicable Period, together with an explanation as to why the obligation was not met and an estimated date by which the HSP expects to be in compliance.]

- Addiction Supportive Housing program did not meet target with respect to numbers of visits. The target was 1900 and we achieved 1088 even though we met target with the numbers of clients served. An analysis of the service levels suggests many clients who have entered the program have achieved a greater level of stability and require less intense support. Targets will be adjusted to reflect the change in service need and resources moved to a more appropriate functional center to better reflect the services being provided.
- Assertive Community Treatment visits was under target by 12.3%. The total number of individuals served did meet target. The team leaders and managers are working to ensure targets are met and number of visits falls within 10% of target in future.
- Seniors mental health program achieved target for numbers of individuals served but fell below for number of visits. There was a change of staff mid-year and a significant period of time for training and transition where service was lost. Service is now back up to full capacity and will meet future targets.
- B'saanibamaadsiwin's community development targets were not met and are under by 25%. The targets for crisis, counselling, and groups were met. Visits was exceeded by 60%. The demand for community development is unpredictable and depends on the needs identified in a community at a given time and when not needed, the resources were used for increased individual service. The program will be looking closely at targets and community needs and suggest adjustment to targets to reflect more realistic service levels.
- Consumer/Family Initiatives events was under targets. The leadership team is working to improve engagement of clients and families to increase participation levels.