

To:	Chair and Members of the Committee of Management
Committee Date:	January 8, 2019
Subject / Report No:	LTCR-CM-07-19
Title:	Declaration of Compliance
Prepared by:	Lynne Johnson, Director of Long Term Care
Reviewed by:	Kim Wingrove, Chief Administrative Officer
Lower Tier(s) Affected:	All Grey County
Status:	Recommendation adopted by Committee as presented as per Resolution <i>CM08-19</i> ; Endorsed by County Council on February 14, 2019 as per Resolution <i>CC20-19</i> .

Recommendation

1. That report **LTCR-CM-07-19** be received; and
2. That the **Warden and Clerk be authorized to sign and submit a Declaration of Compliance for Grey Gables, Lee Manor and Rockwood Terrace to the South West Local Health Integration Network for the reporting period of January 1, 2018-December 31, 2018.**

Executive Summary

The Long-Term Care Service Accountability Agreement (L-SAA) is a legal document between the Local Health Integration Network (LHIN) and Grey County. A requirement of the L-SAA is that an annual Declaration of Compliance is signed and submitted to the LHIN.

Background and Discussion

The Declaration confirms that the provisions of the 2016-2019 L-SAA have been met during the reporting period and requires an annual authorization for signing rather than a blanket delegation by-law.

The reporting period for this declaration is January 1, 2018- December 31, 2018. Inquiries have been made of the Administrators of each home and Finance Department and all parties confirm that to the best of their knowledge and belief, all obligations under the L-SAA have been fulfilled during the reporting period.

At the time of writing this report, the 2018 declaration was not yet available from the LHIN therefore the 2017 document is included as a sample. This is a time sensitive document which must be signed and

received by the LHIN before March 1, 2019.

Legal and Legislated Requirements

It is a requirement of the L-SAA that an annual Declaration of Compliance be submitted and failure to do so would breach the requirements of the L-SAA.

Relevant Consultation

Internal- Administrators- Grey Gables, Lee Manor, Rockwood Terrace, Finance Department

External (N/A)

Appendices and Attachments

Sample- 2017 Declaration of Compliance

Schedule E – Form of Compliance Declaration

DECLARATION OF COMPLIANCE

Issued pursuant to the Long Term Care Service Accountability Agreement

To: The Board of Directors of the South West Local Health Integration Network (the "LHIN"). Attn: Board Chair.

From: The Board of Directors (the "Board") of the [insert name of License Holder] (the "HSP")

For: [insert name of Home] (the "Home")

Date: [insert date]

Re: January 1, 2017 – December 31, 2017 (the "Applicable Period")

The Board has authorized me, by resolution dated [insert date], to declare to you as follows:

After making inquiries of the [insert name and position of person responsible for managing the Home on a day to day basis, e.g. the Chief Executive Officer or the Executive Director] and other appropriate officers of the HSP and subject to the exceptions identified on Appendix 1 to this Declaration of Compliance, to the best of my Board knowledge and belief, the HSP has fulfilled its obligations under the long-term care service accountability agreement (the "Agreement") in effect during the Applicable Period.

Without limiting the generality of the foregoing, the HSP confirms that

- (i) it has complied with the provisions of the *Local Health System Integration Act, 2006* and with any complementary constraint legislation which applies to the HSP; and
- (ii) every Report submitted by the HSP is accurate in all respects and in full compliance with the terms of the Agreement;

Unless otherwise defined in this declaration, capitalized terms have the same meaning as set out in the Agreement between the LHIN and the HSP effective April 1, 2017.

[insert name of individual authorized by the Board to make the Declaration on the Board's behalf],
[insert title]

Schedule E – Form of Compliance Declaration Cont'd.

Appendix 1 - Exceptions

[Please identify each obligation under the LSAA 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.]

SAMPLE