

## MSAA AMENDING AGREEMENT

THIS AMENDING AGREEMENT (the "Agreement") is made as of the 1<sup>st</sup> day of April, 2017

**B E T W E E N:**

**Central Local Health Integration Network (the "LHIN")**

**AND**

**North York General Hospital (the "HSP")**

**WHEREAS** the LHIN and the HSP (together the "Parties") entered into a multi-sector service accountability agreement that took effect April 1, 2014 (the "MSAA");

**AND WHEREAS** the LHIN and the HSP have agreed to extend the MSAA for a twelve month period to March 31, 2018;

**NOW THEREFORE** in consideration of mutual promises and agreements contained in this Agreement and other good and valuable consideration, the parties agree as follows.

**1.0 Definitions.** Except as otherwise defined in this Agreement, all terms shall have the meaning ascribed to them in the MSAA. References in this Agreement to the MSAA mean the MSAA as amended and extended.

**2.0 Amendments.**

**2.1 Agreed Amendments.** The MSAA is amended as set out in this Article 2.

**2.2 Amended Definitions.**

(a) The following terms have the following meanings.

For the Funding Year beginning April 1, 2017, "Schedule" means any one, and "Schedules" means any two or more as the context requires, of the Schedules in effect for the Funding Year that began April 1, 2016 ("2016-17"), except that any Schedules in effect for the 2016-17 with the same name as Schedules listed below and appended to this Agreement are replaced by those Schedules listed below and appended to this Agreement.

Schedule A: Description of Services  
Schedule B: Service Plan  
Schedule C: Reports  
Schedule D: Directives, Guidelines and Policies  
Schedule E: Performance

**2.3 Term.** This Agreement and the MSAA will terminate on March 31, 2018.

**3.0 Effective Date.** The amendments set out in Article 2 shall take effect on April 1, 2017. All other terms of the MSAA shall remain in full force and effect.





## Schedule A2: Population and Geography

2017-2018

### Health Service Provider: North York General Hospital

#### Client Population

Eating Disorders - We service individuals 18yrs and older experiencing eating disorders. Given our services are group based our programming is offered in English. This is a partial hospitalization program and the goal is to normalize eating by providing the knowledge & tools to achieve success.

ACTT - Provision of community support, rehabilitation and treatment for individuals (aged 18 +) with a serious mental illness most often patients with a diagnosis of Schizophrenia.

Mental Health and Justice, Court Support Services - We serve clients experiencing mental health difficulties and who are involved in the legal system. We offer assessment and group program, and individual support.

Transitional Aged Youth Addiction Program - Program contains comprehensive and developmentally appropriate assessment and treatment for clients ages 16 - 24. Therapy is conducted in individual and family modalities. Treatment goals are flexible including abstinence and harm reduction. Parent consultation and parent education groups are also available. We work closely with a local Toronto District School Board alternative school.

North York Central Integrated Funding Model - Provide integrated care to elderly population with mid to end stage COPD and CHF as they transition from hospital to home for up to 18 weeks post discharge care.

#### Geography Served

Eating Disorders - Our program is offered Mon/Wed/Thurs 3:30-8pm at the Leslie site. We are located in the Central LHIN however we take referrals from outside our LHIN.

ACTT - Our program is offered 12 hours a day Monday through Friday, 8 hours each day weekends and holidays. Clients served are primarily within the Central LHIN and service is delivered from the Branson site.

Mental Health and Justice Court Support Services - Our program is offered 8 hours each day Monday through Friday. Clients served are primarily from the Central LHIN and the service is delivered from the Branson site.

Transitional Aged Youth Addiction Program - Our program is offered 8 hours each day Monday through Friday. Clients served are within the Central LHIN and service is delivered at the Branson site.

The Mobile Crisis Intervention Teams (MCIT) team serves those that reside in the areas in the CLHIN served by Toronto Police Services 32 and 33 division. Team is based at the Leslie site.

North York Central Integrated Funding Model - Through multiple community partners (Central CCAC, Saint Elizabeth Health Care, Pro Resp Home Oxygen & Respiratory care, Circle of Life, & North York Family Health Team), provide services to clients within the Central LHIN. Services are provided to clients in their homes according to the arranged hours by the respective provider.

**Schedule B1: Total LHIN Funding  
2017-2018**

**Health Service Provider: North York General Hospital**

LHIN Program Revenue & Expenses	Row #	Account: Financial (F) Reference OHSR VERSION 10.0	2017-2018 Plan Target
<b>REVENUE</b>			
LHIN Global Base Allocation	1	F 11006	\$5,058,498
HBAM Funding (CCAC only)	2	F 11005	\$0
Quality-Based Procedures (CCAC only)	3	F 11004	\$0
MOHLTC Base Allocation	4	F 11010	\$0
MOHLTC Other funding envelopes	5	F 11014	\$0
LHIN One Time	6	F 11008	\$0
MOHLTC One Time	7	F 11012	\$0
Paymaster Flow Through	8	F 11019	\$0
Service Recipient Revenue	9	F 11050 to 11090	\$0
<b>Subtotal Revenue LHIN/MOHLTC</b>	<b>10</b>	<b>Sum of Rows 1 to 9</b>	<b>\$5,058,498</b>
Recoveries from External/Internal Sources	11	F 120*	\$0
Donations	12	F 140*	\$0
Other Funding Sources & Other Revenue	13	F 130* to 190*, 110*, [excl. F 11006, 11008, 11010, 11012, 11014, 11019, 11050 to 11090, 131*, 140*, 141*, 151*]	\$90,000
<b>Subtotal Other Revenues</b>	<b>14</b>	<b>Sum of Rows 11 to 13</b>	<b>\$90,000</b>
<b>TOTAL REVENUE</b>	<b>FUND TYPE 2</b>	<b>15</b>	<b>Sum of Rows 10 and 14</b>
			<b>\$5,148,498</b>
<b>EXPENSES</b>			
<b>Compensation</b>			
Salaries (Worked hours + Benefit hours cost)	17	F 31010, 31030, 31090, 35010, 35030, 35090	\$2,409,964
Benefit Contributions	18	F 31040 to 31085, 35040 to 35085	\$731,064
Employee Future Benefit Compensation	19	F 305*	\$0
Physician Compensation	20	F 390*	\$351,465
Physician Assistant Compensation	21	F 390*	\$0
Nurse Practitioner Compensation	22	F 380*	\$116,699
Physiotherapist Compensation (Row 128)	23	F 350*	\$0
Chiropractor Compensation (Row 129)	24	F 390*	\$0
All Other Medical Staff Compensation	25	F 390*, [excl. F 39092]	\$0
Sessional Fees	26	F 39092	\$1,284,130
<b>Service Costs</b>			
Med/Surgical Supplies & Drugs	27	F 460*, 465*, 560*, 565*	\$588
Supplies & Sundry Expenses	28	F 4*, 5*, 6*, [excl. F 460*, 465*, 560*, 565*, 69596, 69571, 72000, 62800, 45100, 69700]	\$163,104
Community One Time Expense	29	F 69596	\$0
Equipment Expenses	30	F 7*, [excl. F 750*, 780*]	\$22,583
Amortization on Major Equip, Software License & Fees	31	F 750*, 780*	\$0
Contracted Out Expense	32	F 8*	\$68,901
Buildings & Grounds Expenses	33	F 9*, [excl. F 950*]	\$0
Building Amortization	34	F 9*	\$0
<b>TOTAL EXPENSES</b>	<b>FUND TYPE 2</b>	<b>35</b>	<b>Sum of Rows 17 to 34</b>
			<b>\$5,148,498</b>
<b>NET SURPLUS/(DEFICIT) FROM OPERATIONS</b>	<b>36</b>	<b>Row 15 minus Row 35</b>	<b>\$0</b>
Amortization - Grants/Donations Revenue	37	F 131*, 141* & 151*	\$0
<b>SURPLUS/(DEFICIT) Incl. Amortization of Grants/Donations</b>	<b>38</b>	<b>Sum of Rows 36 to 37</b>	<b>\$0</b>
<b>FUND TYPE 3 - OTHER</b>			
Total Revenue (Type 3)	39	F 1*	\$0
Total Expenses (Type 3)	40	F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$0
<b>NET SURPLUS/(DEFICIT)</b>	<b>FUND TYPE 3</b>	<b>41</b>	<b>Row 39 minus Row 40</b>
			<b>\$0</b>
<b>FUND TYPE 1 - HOSPITAL</b>			
Total Revenue (Type 1)	42	F 1*	\$0
Total Expenses (Type 1)	43	F 3*, F 4*, F 5*, F 6*, F 7*, F 8*, F 9*	\$0
<b>NET SURPLUS/(DEFICIT)</b>	<b>FUND TYPE 1</b>	<b>44</b>	<b>Row 42 minus Row 43</b>
			<b>\$0</b>
<b>ALL FUND TYPES</b>			
Total Revenue (All Funds)	45	Line 15 + line 39 + line 42	\$5,148,498
Total Expenses (All Funds)	46	Line 16 + line 40 + line 43	\$5,148,498
<b>NET SURPLUS/(DEFICIT)</b>	<b>ALL FUND TYPES</b>	<b>47</b>	<b>Row 45 minus Row 46</b>
			<b>\$0</b>
<b>Total Admin Expenses Allocated to the TPBEs</b>			
Undistributed Accounting Centres	48	82*	\$0
Plant Operations	49	72 1*	\$0
Volunteer Services	50	72 1*	\$0
Information Systems Support	51	72 1*	\$0
General Administration	52	72 1*	\$0
Other Administrative Expenses	53	72 1*	\$0
Admin & Support Services	54	72 1*	\$0
Management Clinical Services	55	72 5 05	\$0
Medical Resources	56	72 5 07	\$920,167
<b>Total Admin &amp; Undistributed Expenses</b>	<b>57</b>	<b>Sum of Rows 48, 54, 55-56 (Included in Fund Type 2 expenses above)</b>	<b>\$920,167</b>



## Schedule C: Reports

### Community Mental Health and Addictions Services<sup>1</sup>

2017-2018

Health Service Provider: North York General Hospital

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

A list of reporting requirements and related submission dates is set out below. Unless otherwise indicated, the HSP is only required to provide information that is related to the funding that is provided under this Agreement. Reports that require full entity reporting are followed by an asterisk "\*".

<b>OHRIS/MIS Trial Balance Submission (through OHFS)<sup>1</sup></b>	
<b>2014-15</b>	<b>Due Dates (Must pass 3c Edits)</b>
2014-15 Q1	<i>Not required 2014-15</i>
2014-15 Q2	October 31, 2014
2014-15 Q3	January 31, 2015
2014-15 Q4	May 30, 2015
<b>2015-16</b>	<b>Due Dates (Must pass 3c Edits)</b>
2015-16 Q1	<i>Not required 2015-16</i>
2015-16 Q2	October 31, 2015
2015-16 Q3	January 31, 2016
2015-16 Q4	May 31, 2016
<b>2016-17</b>	<b>Due Dates (Must pass 3c Edits)</b>
2016-17 Q1	<i>Not required 2016-17</i>
2016-17 Q2	October 31, 2016
2016-17 Q3	January 31, 2017
2016-17 Q4	May 31, 2017
<b>2017-18</b>	<b>Due Dates (Must pass 3c Edits)</b>
2017-18 Q1	<i>Not required 2017-18</i>
2017-18 Q2	October 31, 2017
2017-18 Q3	January 31, 2018
2017-18 Q4	May 31, 2018

<b>Supplementary Reporting - Quarterly Report (through SRI)<sup>1</sup></b>	
<b>2014-2015</b>	<b>Due five (5) business days following Trial Balance Submission Due Date</b>
2014-15 Q2	November 7, 2014
2014-15 Q3	February 7, 2015
2014-15 Q4	June 7, 2015 – Supplementary Reporting Due
<b>2015-2016</b>	<b>Due five (5) business days following Trial Balance Submission Due Date</b>
2015-16 Q2	November 7, 2015
2015-16 Q3	February 7, 2016
2015-16 Q4	June 7, 2016 – Supplementary Reporting Due
<b>2016-17</b>	<b>Due five (5) business days following Trial Balance Submission Due Date</b>
2016-17 Q2	November 7, 2016
2016-17 Q3	February 7, 2017
2016-17 Q4	June 7, 2017 – Supplementary Reporting Due
<b>2017-2018</b>	<b>Due five (5) business days following Trial Balance Submission Due Date</b>
2017-18 Q2	November 7, 2017
2017-18 Q3	February 7, 2018
2017-18 Q4	June 7, 2018 – Supplementary Reporting Due

## Schedule C: Reports

### Community Mental Health and Addictions Services<sup>1</sup>

2017-2018

Health Service Provider: North York General Hospital

#### Annual Reconciliation Report (ARR) through SRI and paper copy submission<sup>1</sup>

(All HSPs must submit both paper copy ARR submission, duly signed, to the Ministry and the respective LHIN where funding is provided; soft copy to be provided through SRI)

Fiscal Year	Due Date
2014-15 ARR	June 30, 2015
2015-16 ARR	June 30, 2016
2016-17 ARR	June 30, 2017
2017-18 ARR	June 30, 2018

#### Board Approved Audited Financial Statements<sup>1</sup>

(All HSPs must submit both paper copy Board Approved Audited Financial Statements, to the Ministry and the respective LHIN where funding is provided; soft copy to be uploaded to SRI)

Fiscal Year	Due Date
2014-15	June 30, 2015
2015-16	June 30, 2016
2016-17	June 30, 2017
2017-18	June 30, 2018

#### Declaration of Compliance<sup>1</sup>

Fiscal Year	Due Date
2013-14	June 30, 2014
2014-15	June 30, 2015
2015-16	June 30, 2016
2016-17	June 30, 2017
2017-18	June 30, 2018

#### Community Mental Health and Addictions – Other Reporting Requirements

Requirement	Due Date	
<b>Common Data Set for Community Mental Health Services</b>	Last day of one month following the close of trial balance reporting for Q2 and Q4 (Year-End)	
	2014-15 Q2	November 28, 2014
	2014-15 Q4	June 30, 2015
	2015-16 Q2	November 30, 2015
	2015-16 Q4	June 30, 2016
	2016-17 Q2	November 30, 2016
	2016-17 Q4	June 30, 2017
	2017-18 Q2	November 30, 2017
<b>DA TIS (Drug &amp; Alcohol Treatment Information System)</b>	Fifteen (15) business days after end of Q1, Q2 and Q3 - Twenty (20) business days after Year-End (Q4)	
	2014-15 Q1	July 22, 2014
	2014-15 Q2	October 22, 2014
	2014-15 Q3	January 22, 2015
	2014-15 Q4	April 30, 2015
	2015-16 Q1	July 22, 2015
	2015-16 Q2	October 22, 2015
2015-16 Q3	January 22, 2016	



## Schedule C: Reports

### Community Mental Health and Addictions Services<sup>1</sup>

2017-2018

Health Service Provider: North York General Hospital

	2015-16 Q4	April 28, 2016
	2016-17 Q1	July 22, 2016
	2016-17 Q2	October 24, 2016
	2016-17 Q3	January 23, 2017
	2016-17 Q4	May 2, 2017
	2017-18 Q1	July 21, 2017
	2017-18 Q2	October 24, 2017
	2017-18 Q3	January 23, 2018
	2017-18 Q4	May 2, 2018
<b>ConnexOntario Health Services Information</b> <ul style="list-style-type: none"><li>• Drug and Alcohol Helpline</li><li>• Ontario Problem Gambling Helpline (OPGH)</li><li>• Mental Health Helpline</li></ul>	All HSPs that received funding to provide mental health and/or addictions services must participate in ConnexOntario Health Services Information's annual validation of service details; provide service availability updates; and inform ConnexOntario Health Services Information of any program/service changes as they occur.	
<b>French Language Service Report<sup>1</sup></b>	2014-15	April 30, 2015
	2015-16	April 30, 2016
	2016-17	April 30, 2017
	2017-18	April 30, 2018

<sup>1</sup> Community Support Services and Community Mental Health and Addictions Services have the same report due dates for:

- OHRS/MIS Trial Balance Submission (through OHFS)
- Supplementary Reporting - Quarterly Report (through SRI)
- Annual Reconciliation Report (ARR) through SRI and paper copy submission
- Board Approved Audited Financial Statements
- Declaration of Compliance
- French Language Service Report

## Schedule D: Directives, Guidelines and Policies

### Community Support Services

2017-2018

Health Service Provider: North York General Hospital

*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>Personal Support Services Wage Enhancement Directive, 2014</b></li></ul>                                             |
| <ul style="list-style-type: none"><li>• <b>2014 Addendum to Directive to LHINs: Personal Support Services Wage Enhancement</b></li></ul>                        |
| <ul style="list-style-type: none"><li>• <b>2015 Addendum to Directive to LHINs: Personal Support Services Wage Enhancement</b></li></ul>                        |
| <ul style="list-style-type: none"><li>• <b>2016 Addendum to Directive to LHINs: Personal Support Services Wage Enhancement</b></li></ul>                        |
| <ul style="list-style-type: none"><li>• <b>Community Financial Policy, 2015</b></li></ul>                                                                       |
| <ul style="list-style-type: none"><li>• <b>Policy Guideline for CCAC and CSS Collaborative Home and Community-Based Care Coordination, 2014</b></li></ul>       |
| <ul style="list-style-type: none"><li>• <b>Policy Guideline Relating to the Delivery of Personal Support Services by CCACs and CSS Agencies, 2014</b></li></ul> |
| <ul style="list-style-type: none"><li>• <b>Protocol for the Approval of Agencies under the Home Care and Community Services Act, 2012</b></li></ul>             |
| <ul style="list-style-type: none"><li>• <b>Assisted Living Services for High Risk Seniors Policy, 2011 (ALS-HRS)</b></li></ul>                                  |
| <ul style="list-style-type: none"><li>• <b>Community Support Services Complaints Policy (2004)</b></li></ul>                                                    |
| <ul style="list-style-type: none"><li>• <b>Assisted Living Services in Supportive Housing Policy and Implementation Guidelines (1994)</b></li></ul>             |
| <ul style="list-style-type: none"><li>• <b>Attendant Outreach Service Policy Guidelines and Operational Standards (1996)</b></li></ul>                          |
| <ul style="list-style-type: none"><li>• <b>Screening of Personal Support Workers (2003)</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>                       |

## Schedule D: Directives, Guidelines and Policies

### Community Mental Health and Addictions Services

2017-2018

Health Service Provider: North York General Hospital

*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</li> <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>
	<ul style="list-style-type: none"> <li>Chapter 2. Program &amp; Administrative Components</li> <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>
	<ul style="list-style-type: none"> <li>Chapter 3. Financial Record Keeping and Reporting Requirements</li> <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>
	<ul style="list-style-type: none"> <li>• <b>Early Psychosis Intervention Standards (March 2011)</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>Addictions staged screening and assessment tools (2015)</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>	

**Schedule E1: Core Indicators**  
**2017-2018**  
**Health Service Provider: North York General Hospital**

Performance Indicators	2017-2018 Target	Performance Standard
*Balanced Budget - Fund Type 2	\$0	>=0
Proportion of Budget Spent on Administration	Refer to Schedule E3a	-
**Percentage Total Margin	0.00%	>= 0%
Percentage of Alternate Level of Care (ALC) days (closed cases)	TBD	-
Variance Forecast to Actual Expenditures	0.0%	< 5%
Variance Forecast to Actual Units of Service	0.0%	< 5%
Service Activity by Functional Centre	Refer to Schedule E2a	-
Number of Individuals Served	Refer to Schedule E3a	-
Alternate Level of Care (ALC) Rate	TBD	-
Explanatory Indicators		
Cost per Unit Service (by Functional Centre)		
Cost per Individual Served (by Program/Service/Functional Centre)		
Client Experience		
* Balanced Budget Fund Type 2: HSP's are required to submit a balanced budget		
** No negative variance is accepted for Total Margin		

**Schedule E2a: Clinical Activity- Detail**  
**2017-2018**

**Health Service Provider: North York General Hospital**

OHRs Description & Functional Centre		2017-2018	
		Target	Performance Standard
<i>These values are provided for information purposes only. They are not Accountability Indicators.</i>			
<b>Undistributed Accounting Centres 82*</b>			
*Total Cost for Functional Centre	82*	\$0	n/a
<b>Medical Resources 72 5 07</b>			
*Total Cost for Functional Centre	72 5 07	\$920,167	n/a
<b>Case Management/Supportive Counselling &amp; Services - Mental Health 72 5 09 76</b>			
Group Sessions	72 5 09 76	162	129 - 194
*Total Cost for Functional Centre	72 5 09 76	\$109,773	n/a
Mental Health Sessions	72 5 09 76	162	130 - 194
<b>MH Assertive Community Treatment Teams 72 5 10 76 20</b>			
* Full-time equivalents (FTE)	72 5 10 76 20	11.20	n/a
Visits	72 5 10 76 20	9,684	9200 - 10168
*Total Cost for Functional Centre	72 5 10 76 20	\$1,319,400	n/a
<b>MH Child/Adolescent 72 5 10 76 50</b>			
Group Sessions	72 5 10 76 50	374	299 - 449
*Total Cost for Functional Centre	72 5 10 76 50	\$197,642	n/a
Mental Health Sessions	72 5 10 76 50	374	299 - 449
<b>MH Forensic 72 5 10 76 55</b>			
* Full-time equivalents (FTE)	72 5 10 76 55	2.70	n/a
Visits	72 5 10 76 55	2,175	1958 - 2393
Group Sessions	72 5 10 76 55	138	110 - 166
*Total Cost for Functional Centre	72 5 10 76 55	\$315,911	n/a
Mental Health Sessions	72 5 10 76 55	138	110 - 166
<b>MH Eating Disorders 72 5 10 76 70</b>			
* Full-time equivalents (FTE)	72 5 10 76 70	13.50	n/a
Visits	72 5 10 76 70	5,611	5330 - 5892
*Total Cost for Functional Centre	72 5 10 76 70	\$1,554,334	n/a
<b>MH Psycho-geriatric 72 5 10 76 96</b>			
* Full-time equivalents (FTE)	72 5 10 76 96	0.80	n/a
Visits	72 5 10 76 96	674	573 - 775
*Total Cost for Functional Centre	72 5 10 76 96	\$143,852	n/a
<b>Addictions Treatment-Substance Abuse 72 5 10 78 11</b>			
* Full-time equivalents (FTE)	72 5 10 78 11	1.70	n/a
Visits	72 5 10 78 11	1,369	1232 - 1506
*Total Cost for Functional Centre	72 5 10 78 11	\$181,845	n/a
<b>Crisis Intervention - Mental Health 72 5 15 76</b>			
* Full-time equivalents (FTE)	72 5 15 76	2.40	n/a
Visits	72 5 15 76	660	561 - 759
*Total Cost for Functional Centre	72 5 15 76	\$298,574	n/a
<b>In-Home HPS - Nursing - Visiting 72 5 30 40 11</b>			
Visits	72 5 30 40 11	150	120 - 180
*Total Cost for Functional Centre	72 5 30 40 11	\$17,000	n/a
<b>In-Home HPS - Respiratory Services 72 5 30 40 35</b>			

**Schedule E2a: Clinical Activity- Detail**  
**2017-2018**

**Health Service Provider: North York General Hospital**

OHRs Description & Functional Centre		2017-2018	
		Target	Performance Standard
* These values are provided for information purposes only. They are not Accountability Indicators.			
Visits	72 5 30 40 35	50	40 - 60
*Total Cost for Functional Centre	72 5 30 40 35	\$6,000	n/a
<b>In-Home HPS - Physiotherapy 72 5 30 40 50</b>			
Visits	72 5 30 40 50	50	40 - 60
*Total Cost for Functional Centre	72 5 30 40 50	\$6,000	n/a
<b>CSS IH - Case Management 72 5 82 09</b>			
* Full-time equivalents (FTE)	72 5 82 09	0.50	n/a
Visits	72 5 82 09	240	192 - 288
*Total Cost for Functional Centre	72 5 82 09	\$55,000	n/a
<b>CSS IH - Comb. PS/HM/Respite Services 72 5 82 35</b>			
Hours of Care	72 5 82 35	400	320 - 480
*Total Cost for Functional Centre	72 5 82 35	\$23,000	n/a
<b>ACTIVITY SUMMARY</b>			
Total Full-Time Equivalents for all F/C		32.80	
Total Visits for all F/C		20,663	
Total Hours of Care for all F/C		400	
Total Group Sessions for all F/C		674	
Total Mental Health Sessions for all F/C		674	
Total Cost for All F/C		5,148,498	

**Schedule E2c: CMH&A Sector Specific Indicators  
 2017-2018  
 Health Service Provider: North York General Hospital**

Performance Indicators	2017-2018 Target	Performance Standard
No Performance Indicators	-	-
<b>Explanatory Indicators</b>		
Repeat Unplanned Emergency Visits within 30 days for Mental Health conditions		
Repeat Unplanned Emergency Visits within 30 days for Substance Abuse conditions		
Average Number of Days Waited from Referral/Application to Initial Assessment Complete		
Average number of days waited from Initial Assessment Complete to Service Initiation		

**Schedule E2d: CSS Sector Specific Indicators**

**2017-2018**

**Health Service Provider: North York General Hospital**

<b>Performance Indicators</b>	<b>2017-2018 Target</b>	<b>Performance Standard</b>
No Performance Indicators	-	-
<b>Explanatory Indicators</b>		
# Persons waiting for service (by functional centre)		



**Schedule E3a Local: All  
2017-2018**

**Health Service Provider: North York General Hospital**

Performance Indicators	2017-2018 Target	Performance Standard
Proportion of Budget Spent on Administration <sup>1,2</sup>	0.00%	≤ 15%
Number of Individuals Served by Organization <sup>3</sup>	978	831 - 1125

<sup>1</sup> Proportion of Budget Spent on Administration: (Total Admin and support Expenses - Program Rent) / (LHIN Base Allocation + Service Recipient Revenue)

<sup>2</sup> All Central LHIN HSPs are required to identify the cost related to Program Rent out of the total Administration and Support Expenses

<sup>3</sup> Central LHIN HSPs are required to report Total Unique Individuals Served by Organization

