Toronto Central LHIN

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March 8, 2012

Dr. William Reichman President and Chief Executive Officer Baycrest Centre for Geriatric Care 3560 Bathurst Street Toronto, ON M6A 2E1

Re: Behavioural Supports Strategy Implementation

Dear Dr. Reichman:

The Toronto Central Local Health Integration Network (the "LHIN") is pleased to advise you that the Baycrest Centre for Geriatric Care (the "HSP") has been approved to receive new base funding in the amount of \$508,550 for the fiscal year 2011/12 in support of the Behavioural Supports Strategy Implementation Program ("Funding"). This base funding will annualize to \$3,051,514 for the fiscal year 2012/13. Details of the Funding and the terms and conditions on which it will be provided are set out in Appendix A ("Terms and Conditions"). In addition, the Funding is provided subject to the "Behavioural Supports Ontario Staffing Resources" policy, a copy of which is attached hereto and which is hereby incorporated into Schedule F of the Long-Term Care Home Service Accountability Agreement between the HSP and the LHIN (the "L-SAA").

Subject to the HSP's acceptance of the Funding and the conditions on which it is provided, the L-SAA will be amended to reflect the additional funding and conditions with effect as of the date of this letter. To the extent that there are any conflicts between what is in the L-SAA and what has been added to the L-SAA by this letter, the terms of this letter and the accompanying Appendix A will govern in respect of the Funding. All other terms and conditions in the L-SAA will remain the same.

Please indicate your organization's acceptance of the proposed funding based on the Terms and Conditions on which it is provided by signing below and returning one copy of this letter to Cynthia Hou, Senior Financial Analyst (the "LHIN Contact") within one (1) week of receipt of this letter.

If you have any questions or concerns please contact Cynthia Hou, Senior Financial Analyst at 416.969.3228 or by email at Cynthia.Hou@lhins.on.ca.

Sincerely,

Camille Orridge
Chief Executive Officer

Encl. Appendices A, & 1 and BSO Policy



Baycrest Centre for Geriatric Care Re: Behavioural Supports Strategy Implementation

CC:

Dr. Anthony Melman, Chair, Baycrest Centre for Geriatric Care Angela Ferrante, Board Chair, Toronto Central LHIN Mike Colle, MPP, Eglinton-Lawrence Raj Krishnapillai, Senior Director, Finance, Corporate & Shared Services (CFO) Vania Sakelaris, Senior Director, Health System Integration, Design and Development

AGREED TO AND ACCEPTED BY:

Baycrest Centre for Geriatric Care

By:

William Reichman, I have the authority to bind Baycrest Centre for Geriatric Care

Baycrest Centre for Geriatric Care
Re: Behavioural Supports Strategy Implementation

Appendix A

Terms and Conditions

A. Funding Allocation

	Fiscal 2011/12	
TBPE: ALSSH		
Base	One-Time	Total
\$508,550*		\$508,550*

*Note: This amount of \$508,550 represents a prorated amount of the annualized base funding for a 2- month period for the 2011/2012 fiscal year.

B. <u>Conditions of Funding</u>

1. Initiative

The programs/services to be implemented are described in the Project Charter between your organization and Toronto Central LHIN for this Initiative.

2. Deliverables and Milestones

The following Deliverables and Milestones are expected to be achieved through implementation of this Initiative and use of the funding allocation:

Deliverables and Milestones				
Deliverables & Milestones	Target Completion Dates	Costs associated with Deliverables		
2011/12				
Baycrest MOUs signed with partners (Woodgreen, Mount Sinai, CCAC)	March 31, 2012			
BSO Project Coordinator hired	March 1, 2012			
All remaining BSO staff/FTE's hired (See Appendix A)	March 31, 2012	\$508,550 pro-rated for		
Behavioural Supports Implementation Committee:		2011/12		
Committee will be established (and first meeting taken place)	March 15, 2012			
Functional/ Sector Leads in place	March 1, 2012			
Behavioural Support Unit:				
Kaizen events complete	March 8, 2012			

Re: Behavioural Supports Strategy Implementation

	12/13			
Re	Revise 2012/13 Project Charter with 12/13 project deliverables April 16, 2012			
Staff training complete (if required) April 30, 2012				
Int	egrated LTC and Community Outreach Teams			
0	Operation plan, deliverables and performance metrics developed for 12/13	April 15, 2012		
•	1 st patient provided with new outreach services	April 30, 2012		
•	TBD: Deliverables to be inserted upon operating plan development			
•	PDSAs& evaluation complete of outreach model and the expansion of partnership to G-MHOT and NLOT.	December 10, 2012		
Ed	ucation Consortium:			
•	Operation plan, deliverables and performance metrics developed for 12/13	April 15 2012	\$3,051,514 for 2012/13	
0	TBD: Deliverables to be inserted upon operating plan development		101 2012/13	
•	PDSAs & evaluation complete of consortium and its potential to expand to LTCH and acute care	December 10, 2012		
В	havioural Support Unit			
•	Work plan, deliverables and performance metrics developed for 12/13, submitted to LHIN	April 15 2012		
0	1 st patient admitted	July 1, 2012		
•	All BSU beds occupied (close of phased occupancy)	October 2012		
•	TBD: Deliverables to be inserted upon operating plan development			
•	Evaluation of BSU complete and submitted to LHIN	March 30, 2013		
		Pa4-1 Manualloca	\$508,550 for 2011/12	
	<u> </u>	Total Funding:	\$3,051,514 for 2012/13	
			101 20 12/13	

3. Reporting Requirements

Reporting Requirements

Outline the progress report requirements and submission dates.

Progress Reports are due on or before the 10th day of each month in the file format they were provided (i.e. Microsoft Excel). Financial Reports are due 10 days past the end of each quarter in the file format they were provided (i.e. Microsoft Excel. Templates will be provided by Toronto Central LHIN.

4. Funding Reconciliation

The funding allocation provided for the Initiative must be spent on the agreed items related to the Initiative in fiscal year 2011/12. Any unspent funds will be subject to recovery as deemed appropriate by TC LHIN. If any conditions of funding are not met, the funding allocation may be adjusted at the discretion of the LHIN.