

APPENDIX C - ATTESTATION

Prepared in accordance with Section 15 of the Broader Public Sector Accountability Act, 2010 (BPSAA)

TO: The Board – Centre for Addiction and Mental Health (the “Board”)

FROM: Dr. Catherine Zahn, President & CEO
Centre for Addiction and Mental Health

DATE: June 09, 2017

REPORTING PERIOD: April 01, 2016 to March 31, 2017 (the “Applicable Period”)

On behalf of the Centre for Addiction and Mental Health (the “Hospital”) I attest to:


- The completion and accuracy of reports required of the Hospital pursuant to Section 6 of the BPSAA on the use of consultants;
- The Hospitals compliance with the prohibition in Section 4 of the BPSAA on engaging lobbyist services using public funds;
- The Hospital’s compliance with any applicable expense claims directives issued under Section 10 of the BPSAA by the Management Board of Cabinet; and
- The Hospitals compliance with any applicable procurement directives issued under section 12 of the BPSAA by the Management Board of Cabinet,

during the Applicable Period.

In making this attestation, I have exercised care and diligence that would reasonably be expected of a President and CEO in these circumstances, including making due inquiries of Hospital staff that have the knowledge of these matters.

I further certify that any material exceptions to these attestations are documented in the attached Schedule A.

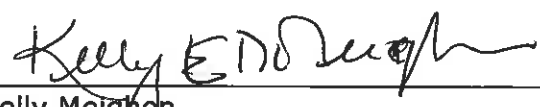
Dated at Toronto, Ontario this June 09, 2017



Dr. Catherine Zahn
President & CEO
Centre for Addiction and Mental Health

I certify that this attestation has been approved by the Board of the Centre for Addiction and Mental Health.

Dated at Toronto, Ontario this June 09, 2017



Kelly Meighen
Chair of the Board
Centre for Addiction and Mental Health

Schedule A to Attestation - Centre for Addiction and Mental Health

Reporting Period – April 01, 2016 to March 31, 2017
LHIN – Toronto Central

The Hospital, like all public hospitals in Ontario, has been engaged in ongoing efforts to bring itself into full compliance with the requirements of the Procurement Directive. Over the year, the Hospital has continued to modify Hospital processes surrounding procurement and supply chain activities. In particular, the Hospital reviews policies and processes, updates internal operating procedures, and engages in ongoing education and training of staff. The Hospital has used best efforts to fully comply with the requirements of the Procurement Directives, however these new policies and practices have significantly increased demands on existing procurement resources and we acknowledge there may be circumstances where strict compliance was not achieved. Accordingly, the Hospital will continue to monitor and improve its processes with the goal of reducing any circumstances of non-compliance in the future.

1. Exceptions to the completion and accuracy of reports required in section 6 of the BPSAA on the use of Consultants.
 - a. No known exceptions.
2. Exceptions to the Hospitals' compliance with the prohibition in section 4 of the BPSAA on engaging lobbyist services using public funds.
 - a. No known exceptions.
3. Exceptions to the Hospitals' compliance with expense claims directive issued under section 10 of the BPSAA by the Management Board of Cabinet
 - a. No known exceptions.
4. Exceptions to the Hospital's compliance with the prerequisites directive issued under section 11.1 of the BPSAA by the Management Board of Cabinet
 - a. No known exceptions
5. Exceptions to the Hospitals' compliance with the procurement directive issued under section 12 of the BPSAA by the Management Board of Cabinet
 - a. On behalf of the Hospital we have a non-material exception (\$118,000) to declare with respect to the matter set out below

No	Firm Name(s)	Name and Title of Contract	Rationale for non-compliance	Describe what actions have been taken, or will be taken
1	POI Business Interiors	Patient furniture	There was an immediate need for new patient furniture to ensure staff and patient safety was maintained in the clinical area. The area was assessed as part of a safety walk through and it was identified as a potential safety risk. Initial estimated value was significantly understated.	Continued stakeholder education program along with enhancements to procurement policy and procedures.

**APPENDIX A - HOSPITAL REPORT ON CONSULTANT USE
Centre for Addiction and Mental Health**

**LHIN - Toronto Central
Reporting Period - April 01, 2016 to March 31, 2017**

No	Consultant Firm Name(s)	Name and Title of Consulting Contract	Contract Term If the contract term has been extended please include the original contract term and amended contract term	Procurement Value (A) Original value plus (B) Value of amendments and (C) Total procurement value (\$) / Total Paid	Consultant Selection Process (Open competitive, Invitational Competitive, Non-Competitive) If non-competitive, provide explanation	Modifications to Agreement (yes/no) If yes - did the procurement documents permit modifications to the term or value of the agreement?
1	KPMG LLP	Service Agreement Business Development Plan	August 15, 2016 to November 01, 2016	(A) \$91,000 (B) \$0 (C) \$91,000	Open competitive process	NO
2	Delvina Interactive Corp.	Service Agreement Digital Strategy for CAMH	July 27, 2016 to October 31, 2016	(A) \$113,000 (B) \$0 (C) \$113,000	Open competitive process	NO
3	Korn Ferry	Service Agreement Executive Compensation Framework	November 11, 2016 to May 30, 2017	(A) \$70,000 (B) \$0 (C) \$70,000	Invitational Competitive	NO
4	Dr. Sinha	Service Agreement Clinical review Honorarium	March 28, 2017	(A) \$10,000 (B) \$0 (C) \$10,000	Non-Competitive Exemption under AIT - To engage a licensed professional; Medical Doctor.	NO
5	Corpus Sanchez	Service Agreement Emergency Room Process Improvement	November 14, 2016 to January 31, 2017	(A) \$56,000 (B) \$0 (C) \$56,000	Invitational Competitive	NO
6	PWC	Service Agreement Current State Assessment	February 23, 2017 to April 30, 2017	(A) \$58,500 (B) \$0 (C) \$58,500	Invitational Competitive	NO