

**Attestation Form Prepared in accordance with section 15 of the
Broader Public Sector Accountability Act, 2010 (BPSAA)**

TO: The Board of St. Joseph's Health Care, London, (the "Board")
FROM: Dr. Gillian Kernaghan, CEO St. Joseph's Health Care, London
Date: May 28, 2012
RE: April 1, 2011 to March 31, 2012 ("the Applicable Period")

On behalf of the **St. Joseph's Health Care, London** (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 Hospital's 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;
- the Hospital's compliance with any applicable perquisite directives issued under section 11.1 of the BPSAA by the Management Board of Cabinet; and
- the Hospital's 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 **CEO** in these circumstances, including making due inquiries of Hospital staff that have knowledge of these matters.

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

Dated at London, Ontario this 28th day of May, 2012

original signed

Dr. Gillian Kernaghan, President and CEO
St. Joseph's Health Care, London

I certify that this attestation has been approved by the board of St. Joseph's Health Care, London on May 28, 2012.

original signed

Ms. Marcella Grail, Chair of the Board
St. Joseph's Health Care, London

**SCHEDULE A
TO ATTESTATION**

1. Exceptions to the completion and accuracy of reports required in section 6 of the BPSAA on the use of consultants;

No known exceptions.

2. Exceptions to the Hospital's compliance with the prohibition in section 4 of the BPSAA on engaging lobbyist services using public funds;

No known exceptions.

3. Exceptions to the Hospital's compliance with the expense claims directive issued under section 10 of the BPSAA by the Management Board of Cabinet;

No known exceptions.

4. Exceptions to the Hospital's compliance with the perquisites directive issued under section 11.1 of the BPSAA by the Management Board of Cabinet; and

No known exceptions.

5. Exceptions to the Hospital's compliance with the procurement directive issued under section 12 of the BPSAA by the Management Board of Cabinet.

DIRECTIVE	RATIONALE	ACTION PLAN
<p>Directive #2</p> <p>Prior to commencement, any procurement of goods and non-consulting services must be approved by an appropriate authority in accordance with the organization's signing authority policy.</p>	<p>Although the hospital followed the signing authority policy prior to engaging in a contract with a vendor, the hospital did not have a process in place to receive authorization <u>prior to</u> the commencement of a procurement (ie. a bid request prior to going to RFP).</p>	<p>Effective November 4, 2011, the hospital's signing authority policy was amended to include "approval levels for requests for competitive bidding". The hospital is now in compliance with this directive.</p>
<p>Directive #3</p> <p>Organizations must conduct an open competitive procurement process where the estimated value of procurement of goods or services is \$100,000 or more.</p>	<p>The primary emphasis for the hospital in the current year was to respond to the new legislation by creating compliant policies and processes, establishing new roles to support these processes and then hiring the appropriate resources. Due to capacity constraints in this first year of transition not all vendor relationships >\$100K were competitively bid in the period.</p>	<p>The hospital will develop a comprehensive sourcing strategy to prioritize competitive bidding events which will include tendering legacy contracts that are set to expire, ongoing capital and service requirements as well as new vendor relationships.</p>

DIRECTIVE	RATIONALE	ACTION PLAN
<p>Directive #22</p> <p>Organizations should include a dispute resolution process in their contracts</p>	<p>Hospital contracts are compliant with this directive throughout the year, however in circumstances where a purchase order has been used as the contract with a vendor, the standard terms and conditions attached to the purchase order did not contain the required language to outline the dispute resolution process.</p>	<p>The terms and conditions for purchase are currently being reviewed to ensure compliance and completeness to address the procurement, risk and privacy needs of the hospital. Implementation of changes to terms and conditions will be completed by September 30, 2012.</p>
<p>Directive #25</p> <p>Competitive procurement documents must outline bid dispute resolution procedures.</p>	<p>Hospital RFP documents are compliant with this directive, however certain procurement initiatives [ie. Requests For Quotes] were used throughout the year for certain capital and invitational bidding events and did not contain the required language to outline the bid dispute resolution procedures.</p>	<p>The terms and conditions in Requests for Quotes are currently being reviewed to ensure compliance and completeness to address the procurement, risk and privacy needs of the hospital. Implementation of changes to terms and conditions will be completed by September 30, 2012.</p>