

Appendix A - BPSAA ATTESTATION

Attestation Form

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

rnors

10:	The Ottawa Hospital Board of Gover
FROM:	Dr. Jack Kitts President & CEO The Ottawa Hospital
DATE:	May 25, 2018

RE: April 1, 2017 – March 31, 2018

On behalf of The Ottawa Hospital ("the Hospital") I attest to the Hospital's compliance with the following requirements of the **BPSAA** during the period of April 1, 2017 – March 31, 2018:

- the prohibition on engaging lobbyist services using public funds (section 4);
- the completion and accuracy of reports on the use of consultants (section 6);
- any applicable expense claims directives issued (section 10);
- any applicable perquisite directives issued (section 11.1);
- any applicable procurement directives issued (section 12); and,
- any applicable business plans directives (section 13).

In making this attestation, I have exercised care and diligence that would reasonably be expected of a President & 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 Ottawa, Ontario this May 25, 2018.

Dr. Jack Kitts President & CEO The Ottawa Hospital

I certify that this attestation has been approved by the Board of Governors of the Ottawa Hospital on June 6, 2018.

Katherine Cotton Chair of the Board The Ottawa Hospital



The Ottawa | L'Hôpital Hospital d'Ottawa

SCHEDULE A to BPSAA Attestation

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

The Hospital has been guided by the five key principles outlined in the Procurement Directive: delivery of quality patient care and other services, value for money, accountability, transparency and process standardization as well as the trade agreement rules effective in 2017, Canadian Free Trade Agreement (CFTA) and the Canada-EU Comprehensive Economic and Trade Agreement (CETA) when making decisions on its operational needs for goods and services. The Hospital has endeavored to comply fully with the requirements of the Procurement Directive and has worked diligently to bring itself into full compliance by enhancing its policies and processes. However, there may be circumstances in which the Hospital has failed to comply with the strict letter of the Procurement Directive and these exceptions are noted below.

As anticipated by BPS Procurement Directive mandatory requirements 7.2.21 (non-competitive procurement) and 7.2.18 (term of agreement modifications), exceptions have occurred in the form of extension of contracts. These exceptions were made based on the Hospital's strategic business decisions to align the close of active contracts with that of other related products or services; or for the purposes of entering a group procurement contract to achieve optimal value for money.

Exceptions were also made when the time periods required to conduct a complex and comprehensive open procurement extended beyond the end of the current contract for an essential product or service due to, for example, the review of alternative solutions or gathering of all necessary clinical input. Given that these services are needed to maintain the effective operations of the Hospital, decisions to extend some contracts were made to ensure continuity of service.

When required, the Hospital single/sole sources to vendors for specific allowable reasons as described in the Procurement Directive. Certain supplier engagements have not been procured in compliance with the requirements, and others have been strategically single sourced with the support and approval of senior management and the Board to maintain operational effectiveness, quality of patient care, and value for money. It is critical in the healthcare industry that the organization maximizes the value it receives from the use of public funds and that procurement activities result in the delivery of the right product or service at the right time and right place.

The Hospital and/or our Shared Services Organizations, which include HealthPro and Champlain Health Supply Services (CHSS), continue to execute a sourcing strategy that maximizes available resources to complete procurement requirements in a timely and effective manner. Both HealthPro and CHSS state that they are fully compliant with the BPS Procurement Directive for the 2017/18 fiscal year except for sole-sourced drug purchases from HealthPro contracts. The Hospital will also continue to oversee its procurement processes to ensure continued alignment with Hospital procurement and signing policies as well as the BPS Procurement Directive, CFTA and CETA requirements.

6. Exceptions to the Hospital's compliance with the business plans directive issued under **section 13** of the BPSAA by the Management Board of Cabinet; **"No known exceptions**"