

## APPENDIX C - ATTESTATION

### Draft Attestation Form

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

**TO:** The Board of Markham Stouffville Hospital, (the “Board”)  
**FROM:** Jo-anne Marr, President and CEO  
**Date:** May 27, 2021  
**RE:** April 1, 2020 – March 31, 2021 (“the Applicable Period”)

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On behalf of the **Markham Stouffville Hospital** (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;
- the Hospital’s compliance with any applicable procurement directives issued under section 12 of the BPSAA by the Management Board of Cabinet; and
- the Hospital’s compliance with any applicable directives on the preparation and publication of business plans and other business or financial documents issued under section 13.1 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 knowledge of these matters.

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

Dated at Markham, Ontario this **May 27, 2021**.

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**Jo-anne Marr**  
**President & CEO**  
**Markham Stouffville Hospital**

I certify that this attestation has been approved by the board of the Markham Stouffville Hospital on May 27, 2021.



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**Bob Nicholson**  
**Chair of the Board**  
**Markham Stouffville Hospital**

## **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.

**No known exceptions**

6. Exceptions to the Hospital's compliance with any applicable directives on the preparation and publication of business plans and other business or financial documents issued under section 13.1 of the BPSAA by the Management Board of Cabinet.

**No known exceptions**

## SCHEDULE F – FORM OF COMPLIANCE DECLARATION

### DECLARATION OF COMPLIANCE

Issued pursuant to the M-SAA effective April 1, 2020

**To:** The Board of Directors of the Central Local Health Integration Network (the “LHIN”). Attn: Board Chair.

**From:** The Board of Directors (the “Board”) of the Markham Stouffville Hospital

**Date:** May 27, 2021

**Re:** April 1, 2020 – March 31, 2021 (the “Applicable Period”)

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Unless otherwise defined in this declaration, capitalized terms have the same meaning as set out in the M-SAA between the LHIN and the HSP effective April 1, 2020.

The Board has authorized me, by resolution dated May 27, 2021, to declare to you as follows:

After making inquiries of the President and Chief Executive Office and other appropriate officers of the HSP and subject to any exceptions identified on Appendix 1 to this Declaration of Compliance, to the best of the Board’s knowledge and belief, the HSP has fulfilled, its obligations under the service accountability agreement (the “M-SAA”) in effect during the Applicable Period.

Without limiting the generality of the foregoing, the HSP has complied with:

- (i) Article 4.8 of the M-SAA concerning applicable procurement practices;
- (ii) The *Local Health System Integration Act, 2006*; and
- (iii) The *Public Sector Compensation Restraint to Protect Public Services Act, 2010*.



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Bob Nicholson, Board Chair

## **Schedule F – Form of Compliance Declaration Cont’d.**

### **Appendix 1 - Exceptions**

[Please identify each obligation under the M-SAA that the HSP did not meet during the Applicable Period, together with an explanation as to why the obligation was not met and an estimated date by which the HSP expects to be in compliance.]