

## **APPENDIX C - ATTESTATION**

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

TO:	The Board of London Health Sciences Centre, (the "Board")
FROM:	Dr. Jackie Schleifer Taylor Interim President & Chief Executive Officer London Health Sciences Centre
DATE:	May 26, 2021
RE:	April 1, 2020 – March 31, 2021 ("the Applicable Period")

On behalf of the London Health Sciences Centre (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;
- [to be added once ss. 15(1)(c.1) of the Act is proclaimed into force] 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 undersection 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 Chief Executive Officer 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 May 26, 2021.

ORIGINAL SIGNED

Dr. Jackie Schleifer Taylor President & Chief Executive Officer London Health Sciences Centre I certify that this attestation has been approved by the board of the **London Health Sciences Centre** on May 26, 2021.

ORIGINAL SIGNED

## Phyllis Retty Board Chair London Health Sciences Centre

## SCHEDULE A to Attestation

## Instructions [Please delete instructions once you have completed the Schedule]:

If, on behalf of your Hospital, you have no material exceptions to declare, please include a "no known exceptions" statement in each section to this schedule.

If, on behalf of your Hospital, you have material exceptions to declare with respect to any of the matters set out below, please:

- a) List them accordingly
- b) Provide a rationale for each exception in respect of why the Hospital did not comply with the requirement, and
- c) Describe what actions have been, or will be taken, to address each exception.
- 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.

Approximately 11% of London Health Sciences Centre's spend on goods and services can be considered non-compliant to the Procurement Directives.

DIRECTIVE	RATIONALE	ACTION PLAN
Directive #3 Organizations must conduct an open competitive procurement process where the estimated value of procurement of goods or services is \$100,000 or more.	Certain supplier engagements >\$100,000 in annual spend have not been procured in compliance with the new legislative requirements and have been strategically single sourced with the support of senior management to maintain operational effectiveness.	HMMS will continue to execute a Sourcing Strategy on behalf of London Health Sciences Centre, maximizing the available resources required for each competitive bidding engagement. This strategy includes tendering legacy contracts set to expire, capital and service requirements and new opportunities that arise based on organizational strategic priorities. The hospital will also continue to oversee the process of strategic single sourcing decisions to ensure all stakeholders are aligned with the decision in accordance with the hospital's Signing Authority Policy.

