

11 Allstate Parkway, Suite 500
Markham, ON L3R 9T8
Tel: 905-948-1872
Toll Free: 1-866-392-5446
Fax: 905-948-8011
www.centrollhin.on.ca

11 Allstate Parkway, bureau 500
Markham, ON L3R 9T8
Telephone: 905 948 1872
Sans frais: 1 866 392 5446
Télécopieur: 905 948 8011
www.centrollhin.on.ca

June 8, 2020

Mr. John Hughes
Chief Administrative Officer
Shouldice Hospital Limited
7750 Bayview Avenue
Thornhill ON L3T 4A3

DELIVERED ELECTRONICALLY

Dear Mr. Hughes:

Re: LHSIA s. 20 Notice and Extension of Service Accountability Agreement(s) ("Extending Letter")

The *Local Health System Integration Act, 2006* requires the Central Local Health Integration Network (the "LHIN") to notify a health service provider when the LHIN proposes to enter into, or amend, a service accountability agreement with that health service provider.

In this COVID-19 outbreak, the LHIN hereby gives notice and advises Shouldice Hospital Limited (the "HSP") of the LHIN's proposal to amend each and every service accountability agreement (as described in the *Local Health System Integration Act, 2006*) currently in effect between the LHIN and your HSP (each a "SAA").

Subject to the HSP's acceptance of this Extending Letter, each SAA will be amended with effect on June 30, 2020. All other terms and conditions of the SAA remain in full force and effect.

The terms and conditions in the SAA are amended as follows.

- 1) **Term** – With respect to a SAA that is a hospital service accountability agreement only, in section 2.2, "June 30, 2020" is deleted and replaced by "March 31, 2021".
- 2) **Schedules** – The Schedules in effect on June 29, 2020 shall remain in effect until March 31, 2021, or until such other time as may be agreed to by Parties.

Unless otherwise defined in this letter, all capitalized terms used in this letter have the meanings set out in the SAA.

Please indicate the HSP's acceptance and agreement to the amendment of the SAA as described in this Extending Letter by signing below and returning one scanned copy of this letter by e-mail no later than the end of business day on June 30, 2020, to Alethia Henderson at Alethia.Henderson@lhins.on.ca.

The HSP and the LHIN agree that the Extending Letter may be validly executed electronically, and that their respective electronic signature is the legal equivalent of a manual signature. The electronic signature of a party may be evidenced by one of the following means and transmission of the Extending Letter may be as follows:

- 1) a manual signature of an authorized signing representative placed in the respective signature line of the Extending Letter and the Extending Letter delivered by facsimile transmission to the other party;
- 2) a manual signature of an authorized signing representative placed in the respective signature line of the Extending Letter and the Extending Letter scanned as a pdf and delivered by email to the other party;
- 3) a digital signature, including the name of the authorized signing representative typed in the respective signature line of the Extending Letter, an image of a manual signature or an Adobe signature of an authorized signing representative, or any other digital signature of an authorized signing representative with the other party's prior written consent, placed in the respective signature line of the Extending Letter and the Extending Letter delivered by email to the other party; or
- 4) any other means with the other party's prior written consent.

Should you have any questions regarding the information provided in this Extending Letter, please contact Edin Wong, Team Lead, Community and Long-Term Care at 905-948-1872 ext. 7940 or via email to Edin.Wong@lhins.on.ca.

Sincerely,



Karin Dschankilic CPA, CA
Vice President, Performance, Corporate Services and CFO
Ontario Health (Central Region) | Central Local Health Integration Network

c: Donna Cripps, Transitional Regional Lead, Ontario Health (Central Region) | CEO, Central, Central West, Mississauga Halton and North Simcoe Muskoka Local Health Integration Networks (LHIN)

Re: LHSIA s. 20 Notice and Extension of Service Accountability Agreement(s) ("Extending Letter")

AGREED TO AND ACCEPTED BY:

Shouldice Hospital Limited

By:

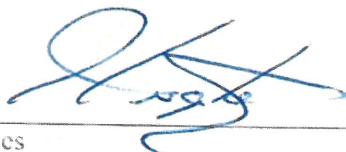


E.B. Shouldice
Board Chair

I have authority to bind the HSP

June 9/2020
Date

And by:



John Hughes
Chief Administrative Officer

I have authority to bind the HSP

June 9/2020
Date