

**APPENDIX C – ATTESTATION**

**Attestation Form**

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

**TO:** The Board of **Pembroke Regional Hospital**, (the “Board”)  
**FROM:** **Pierre Noel**  
**President and CEO**  
**Pembroke Regional Hospital**  
**Date:** **June 26, 2019**  
**RE:** **April 1, 2018 to March 31, 2019 (“the Applicable Period”)**

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On behalf of the **Pembroke Regional 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;
- [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 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 **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.

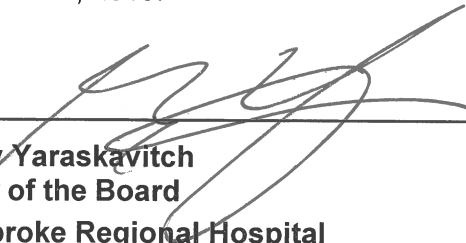
Dated at **Pembroke**, Ontario this **June 26, 2019**.

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**Pierre Noel**  
**President and CEO**

**Pembroke Regional Hospital**

I certify that this attestation has been approved by the board of the **Pembroke Regional Hospital**  
On June 26, 2019.



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**Garry Yaraskavitch**  
**Chair of the Board**  
**Pembroke Regional Hospital**

## SCHEDULE A to Attestation

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

Pembroke Regional Hospital experienced an exception to the BPS procurement directive in 2018-19. This exception arose relating to an infrastructure updating project at the hospital. The project involved the updating of plumbing and electrical work in one wing of the hospital. The original contractor was selected from a competitive procurement action with a small select group of contractors based on the initial predicted value. As the project progressed there were a series of unforeseen conditions relating to the deterioration of water and drainage pipes that supported the wing and other floors of the hospital. The cumulative impact of these unforeseen conditions resulted in the contract exceeding the threshold for an "Open competitive" process. The Board was made aware of this exception and will review and improve internal processes to prevent this happening on future projects.

# APPENDIX A – HOSPITAL REPORT ON CONSULTANT USE

## Hospital Report on Consultant Use

**Name of Hospital:** Pembroke Regional Hospital

**LHIN:** Champlain

**Reporting Period:** April 1, 2018 to March 31, 2019

No.	Consultant Firm Name (s)	Name and Title of Consulting Contract	Contract Term If the contract term has been extended please include the original contract term and the amended contract term	Procurement Value (A) Original value plus (B) Value of amendments and (C) Total procurement value (\$) / Total Paid	Consultant Selection Process (Open Competitive, Invitational Competitive, Non-competitive) If non-competitive, please provide an explanation	Modifications to Agreement (Yes/ No) If Yes, did the procurement documents permit modifications to the term or value of the agreement?
No	Information to Report	No	Information to Report	No	Information to Report	No

**Preservation of Solicitor –client privilege:**

This legislation maintains the integrity of solicitor client privilege, litigation privilege and settlement privilege, and does not require the disclosure of information subject to any of these privileges.

While hospitals are expected to report on their retention of lawyers and law firms for the provision of consulting services, they are not required to report on instances where they have retained lawyers and law firms to provide legal advice, draft legal documents, conduct litigation on behalf of a hospital, or otherwise for the purpose of providing legal services to a hospital.