

## DECLARATION OF COMPLIANCE

**To:** The Board of Directors of the Ontario Health  
**From:** The Board of Directors (the “Board”) of the Headwaters Health Care Centre (the “HSP”)  
**Date:** June 23, 2026  
**Re:** April 1, 2025 – March 31, 2026 (the “Applicable Period”)

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Unless otherwise defined in this declaration, capitalized terms have the same meaning as set out in the multi-sector service accountability agreement between Ontario Health and the HSP in effect during the Applicable Period (the “Agreement”).

The Board has authorized me, by resolution dated June 23, 2026, to declare to you as follows:

After making inquiries of Kim Delahunt, President and CEO of the 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 Agreement in effect during the Applicable Period.

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

- (i) Article 4.8 of the Agreement concerning applicable procurement practices;
- (ii) The *Connecting Care Act, 2019*; and
- (iii) Any compensation restraint legislation which applies to the HSP.



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**Melodie Mason**  
**Chair of the Board**  
**Headwaters Health Care Center**

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Issued pursuant to the MSAA effective April 1, 2025

### Appendix 1 – Exceptions

*Please identify each obligation under the MSAA 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.*

#### **Community Paramedicine Program – Total Visits**

*Headwaters Health Care Centre did not meet the MSAA targets for the Community Paramedicine program due to a mid-year transition to a new EMR vendor. This change resulted in community paramedicine visits not being consistently or accurately captured in the reporting period, leading to an underrepresentation of actual service volumes. The organization is actively working with the vendor to resolve reporting issues and has implemented corrective measures to ensure all visits are captured accurately going forward.*

#### **Headwaters 2 Home Program – Total Visits**

*Reported visit volumes do not fully reflect the breadth of services delivered through the Headwaters 2 Home Program. Due to the complexity of allocating encounters across multiple functional centres, the current reporting approach underrepresents the bundled, interdisciplinary model of care provided to patients and should not be interpreted as a service gap. Our approach will be to determine a more realistic target (including a potential bundled care functional centre) versus a date when the obligation will be met. Discussions with Ontario Health will continue.*

#### **Mental Health Crisis Intervention – Total Visits, Individual Served & Service Provider Interactions**

*Total program visits, and corresponding individuals served/service provider interactions, were below the FY25–26 target; however, volumes increased by 139 visits compared to the prior fiscal year. The variance from target is primarily attributable to the continued success of the Mobile Crisis Response Team (MCRT), which has enhanced community-based diversion and reduced demand for hospital-based services. In addition, resource changes for the program in the first half of the year required onboarding, core training, and increased documentation time to fully operationalize new staff. Volumes strengthened in the latter half of the fiscal year, and continued growth is anticipated in FY26–27 as program capacity stabilizes.*

#### **Annual Reconciliation Report FY23-24 and FY24-25**

*HHCC is addressing an unanticipated delay in completing the Annual Reconciliation Reports for FY2023-24 and FY2024-25 following the introduction of the MSAA. In consultation with Ontario Health, the reports and related audit requirements are being finalized.*