

Contract Performance Framework

Version 5

March, 2016

Provincial CCAC Client Service Contract Performance Framework

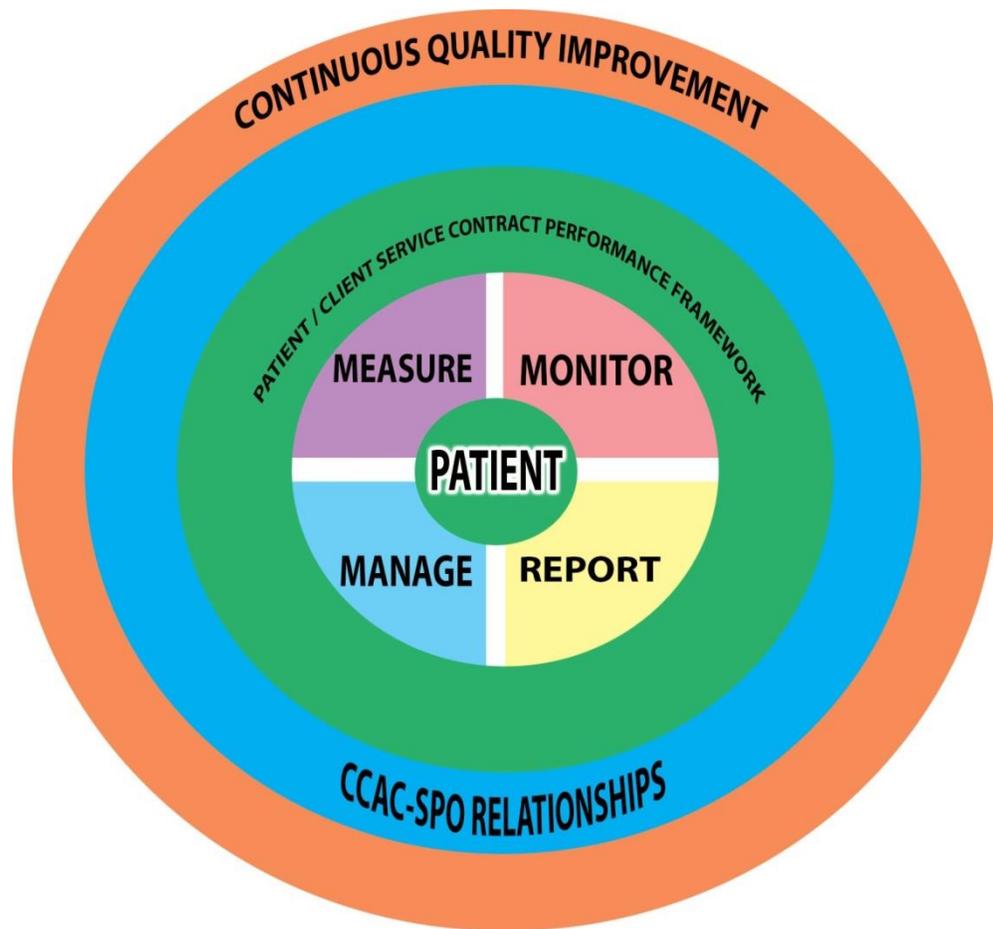
Introduction: Home care plays a critical role in achieving successful and sustainable health care for Ontarians. Ontario's 14 Community Care Access Centres (CCACs) and Service Provider Organizations (SPOs) are committed to continuously improve the client experience, to strengthen quality and accountability and to ensure value for money. A strong CCAC - SPO contractual relationship is the foundation for continuous quality improvement within a culture that guides, inspires and rewards excellence in care.

Under the auspices of Quality and Value in Home Care (QVHC), the Performance Management Table was asked to develop a provincial Client Service Contract Performance Framework incorporating all requirements as outlined in the September, 2012 Contract Management Guidelines For Community Care Access Centres released by the Ministry of Health and Long-Term Care (Appendix A).

The Contract Performance Framework is comprised of four components including performance measurement, monitoring, reporting and management, is centered on the client, and is underpinned by strong, respectful CCAC-Service Provider relationships and a commitment to continuous quality improvement.

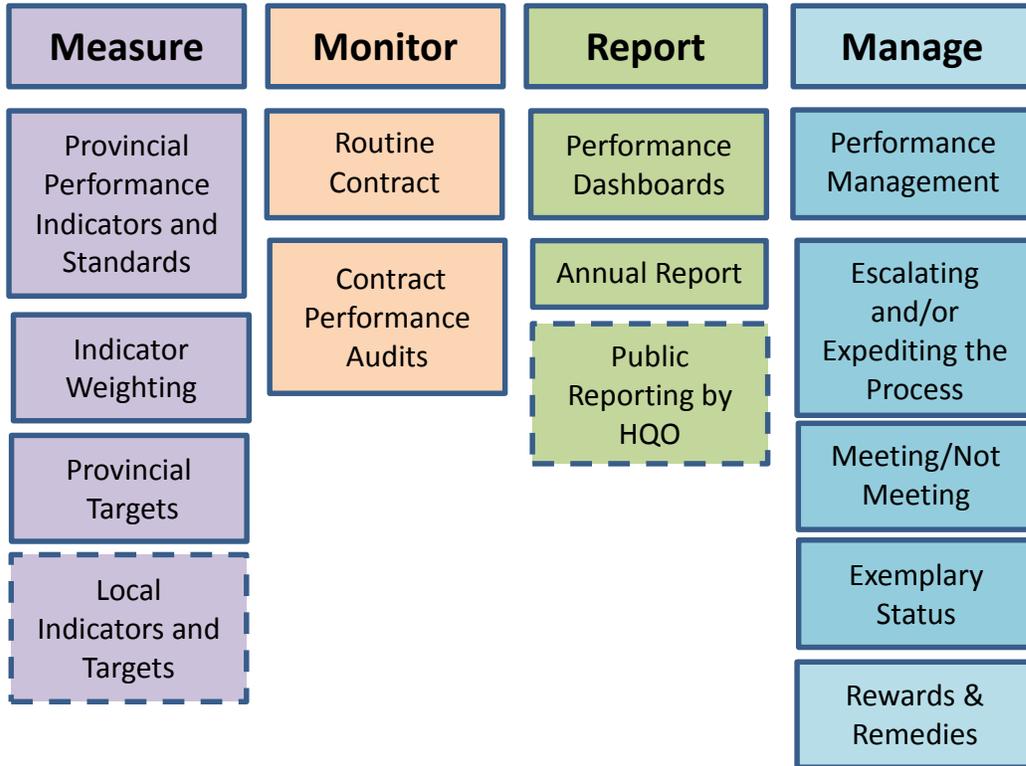
The QVHC Performance Management Table would like to acknowledge the contributions of the late Larry Savage who shared with us his experiences as a client of the homecare system in Ontario. Larry's story helped us to ensure that our decisions were guided by the perspective and needs of the client as we seek to transform to a client-centered system – focused on both quality and value for money.

Patient/Client Service Contract Performance Framework



The subcomponents, within each of the four components of the framework, are displayed below.

Client Service Contract Performance Framework



 Related elements which are outside of the mandate of the Performance Management Working Table

The framework applies to the management of all CCAC Client Service contracts, including both contracts with volume commitments and those without volume commitments. In recognition of the unique characteristics of some contracts without volume commitments, specific components of the framework may be applied differently. Where applicable, these differences will be clearly outlined in the framework document.

1. Purpose

The purpose of the Provincial CCAC Client Service Contract Performance Framework is to provide guidance to CCACs and SPOs¹, including processes and tools which:

- Incent the provision of safe, high quality client-centred care and continuous quality improvement;
- Increase consistency in quality of care so that clients can expect to have a similar experience and achieve similar outcomes regardless of where they live in the province;
- Create a shared understanding of performance expectations including measurement and evaluation of performance;
- Increase consistency, within and across CCACs, in the monitoring of contract performance and the management of performance related concerns; and
- Increase consistency, within and across CCACs, in the application of performance related consequences (rewards and remedies).

2. Guiding Principles

- Furthering safe, high quality, client-centred care
- Continuous quality improvement, learning, innovation and knowledge transfer
- Transparency and accountability
- Consistent and standardized system approach with flexibility to respond to local differences
- Respectful and collaborative relationships in which both parties commit to working together to achieve a shared understanding of performance related expectations and concerns and to co-creating sustainable solutions to achieve the desired outcomes (see Appendix B - CCAC-Service Provider Relations Framework).

3. Measure

Contract performance is assessed relative to a SPO's performance of all obligations under its Services Agreement with the CCAC. While there are specific performance indicators set out in the Performance

¹ Nothing contained in this Provincial CCAC Client Service Contract Performance Management Framework, or any of the guidelines, tools, processes, appendices or related documents is meant to amend, modify, supersede, vary, waive or otherwise affect any of the CCAC's or SPO's rights and obligations under their respective agreements. All references to the provincial template services agreement mean references to the 2014 Consolidated Services version of the provincial template services agreement.

Standards Schedule (Schedule 4) to the Services Agreement, compliance with these indicators is only one aspect of contract performance.

Evaluation of SPO performance is based on:

1. Schedule 4 Performance Indicators (Performance Standards Schedule). This includes both provincial performance indicators and local performance indicators.
2. All other contractual requirements as laid out in the Services Agreement.

Where applicable and set out in the Services Agreement, performance of service is assessed on a service by service basis.² This will:

- Create a fair approach in benchmarking and assessing all SPO's performance;
- Ensure that issues/trends are not masked in aggregated data, facilitating early identification and action;
- Facilitate appropriate root causing and action plan development; and
- When required; support the identification of appropriate, relevant remedies

For greater clarity, consolidated services are considered a service and each type of consolidated service is considered a distinct service (e.g., Outcome-based wounds would be one type of consolidated service).

For services with very small volumes, caution should be exercised in interpreting SPO performance as very small changes can result in significant variation in performance results.

Service provider performance is dynamic. The assessment of whether a SPO is meeting (satisfactory) or not meeting (unsatisfactory) performance expectations is ongoing and is made during regular contract performance reviews (e.g., quarterly) and/or at the time of issuance or closure of a Quality Improvement Notice (see section 6.1) .

3.1 Provincial Performance Indicators and Standards

Provincial Schedule 4 Contract Performance Indicators are outlined in Appendix C.

Provincial Schedule 4 performance indicators and contract performance standards will be reviewed annually and recommendations for changes will be confirmed in advance each year for April 1st implementation and periodically if contracts are amended.

This annual review will ensure that provincial performance indicators and standards demonstrate continuous quality improvement of the home care sector, reflect innovation and system evolution, align with the CCAC sector priorities and support transparency and accountability.

² All services are evaluated on a service by service basis unless Schedule 4 has been structured differently in the contract.

As client service delivery models evolve and new data sources become available, CCACs and SPOs intend contract performance indicators to shift more and more toward measures of client outcome, client experience and value for money and away from transactional or process measures. In addition, we will move away from SPO self-reported indicators in favour of indicators that can be produced using provincial data sets. This will improve the validity and comparability of results.

Prior to the setting of performance standards, indicators are developed through the identification of important outcomes, the generation of information regarding those outcomes, collection of information over time and an examination of the variables that impact performance. Where variables can be controlled, they are addressed.

The CCAC may, from time to time, request that the Service Provider provide data and other information to support the development of new performance standards. Once a benchmark can be set for performance, a developmental indicator may become a performance indicator.

The table in Appendix D outlines the applicability of performance indicators to various types of services (e.g., In-Home fee for service contracts with and without volume commitments, consolidated services and School Health Support Program).

Guidelines related to the application of contract performance rewards and remedies (see section 6.2) are currently under development.

3.2 Introduction of New Performance Indicators and Bedding In Period:

As indicated in Section 3.1, provincial performance indicators and standards will be reviewed annually with a focus on evolving and improving contract performance measurement. When new performance indicators or standards are introduced, a bedding-in period may apply. The bedding-in period provides time for CCACs and SPOs to understand the new performance expectations, develop and improve the data collection process, and, when necessary, to implement strategies to achieve them in advance of the application of contract performance management and/or contract remedies.

In situations where the CCAC has serious concerns regarding SPO performance, the CCAC may initiate the performance management process and/or exercise any of its rights under the contract during the bedding in period.

3.3 Provincial Performance Targets

Provincially standardized performance targets and/or corridors are being introduced with the October 2014 contracts.

There is currently significant variation provincially in service provider performance and it is recognized that adoption and implementation of provincial performance targets and corridors will require thoughtful consideration and management of risks and unintended consequences. Where required, a two year transition period will provide time for CCACs and SPOs to understand and address factors which are contributing to this variation and to move performance toward the desired provincial standard.

For 2016-17, the following table provides guidelines for CCACs in linking performance to rewards and remedies.

Performance Category	Performance Management and Remedies
Not Meeting	May move through an expedited performance management process and may apply a contract remedy, up to and including contract termination.
Needs Improvement	Issue Quality Improvement Notice. Failure to improve may result in the application of contract remedies, up to but not including contract termination.
Meeting Satisfactorily	No performance management indicated; CCACs and SPOs may choose to focus QI initiatives on improving performance.
Exceeding	Focus on maintaining excellence.

3.3.1 Calculating Performance Results

In most cases performance results should be reported as a whole number and generally accepted rounding principles should be used (i.e., less than .5 rolls down to the closest whole number and .5 and up rolls up to the next whole number). In the case of Missed Care rounding, the percentage should be 2 decimal points (i.e. 0.05%).

3.3.2 Provincial Performance Standards for Referral Acceptance and Discharge Report Submission Indicators:

Performance for these two indicators will be assessed utilizing the following performance categories and corridors, hereinafter referred to as Band A:

Not Meeting	Needs Improvement	Meeting Satisfactorily	Exceeding
<90%	90-93%	94-97%	98-100%

The whole numbers at the ends of each category are included in that category.

Exceptions:

1. In order to avoid delays in accessing care for patients, where 100% of market share has been awarded to a single SPO, the performance target for Referral Acceptance Rate will be 100%.
2. Where the risk of using Band A is deemed to be unacceptable, a CCAC may choose, through the two year transition period, to utilize the following performance corridors, hereinafter referred to as Band B.

Band B: Transitional Strategy for all services and indicators except Shift NSG Referral Acceptance

Not Meeting	Needs Improvement	Meeting Satisfactorily	Exceeding
<85%	85-90%	91-95%	96-100%

Band B: Transitional Strategy for Shift NSG Referral Acceptance

Not Meeting	Needs Improvement	Meeting Satisfactorily	Exceeding
<70%	70-85%	86-90%	91-100%

The determination of use of Band A versus Band B is to be made locally, by each CCAC, specific to each indicator and each service type. For greater clarity, the same Band must be used for all providers of a particular service. In determining whether to use Band A or Band B, CCACs should take into consideration:

- The current level of performance, for each indicator, for each service
- The current level of variation across providers for each indicator, for each service
- Factors contributing to the current level of performance and variation and the ability to influence those factors to achieve performance improvement

Performance targets and corridors will be reviewed annually, in accordance with the provincial performance indicator and standards review process.

3.3.3. Provincial Performance Standards for Survey Based Indicators:

The provincial standards for survey based indicators are:

Overall Satisfaction: NSG=91%; PS=83%; Rehab=87%

Satisfaction with Continuity: NSG=93%; PS=85%; Rehab=92%

Patient Centred Care Appointment: NSG=82%; PS=70%; Rehab=86%

Where the risk of adopting the provincial standard is deemed to be unacceptable, a CCAC may choose, through the two year transition period, to establish local performance targets, which would move them, year over year, toward the provincial performance standard. Section 3.5 offers guidance on setting local performance targets.

Performance on survey based indicators must be interpreted in the context of the margin of error which is provided by the third party survey provider.

3.3.4 Provincial Performance Standards for 5 Day Wait Time

Performance for the five day wait time indicator for all nursing services and personal support services delivered to complex patients will be assessed utilizing the following performance categories and corridors:

Not Meeting	Needs Improvement	Meeting Satisfactorily	Exceeding
< 90%	90 - 94 %	95 – 96 %	> 96 %

Where the risk of adopting the provincial standard is deemed to be unacceptable, a CCAC may choose, through a two year transition period, to use benchmarking as a local performance management strategy to move them, year over year, toward the provincial performance standard. Section 3.6 offers guidance on benchmarking.

3.3.5 Provincial Performance Standards for Missed Care

Performance for the missed care indicator for all services will be assessed utilizing the following performance categories and corridors:

Not Meeting	Needs Improvement	Meeting Satisfactorily	Exceeding
> .06 %	.06 - .05%	.05 - .04%	< .04%

Where the risk of adopting the provincial standard is deemed to be unacceptable, a CCAC may choose, through a two year transition period, to use benchmarking as a local performance management strategy to move them, year over year, toward the provincial performance standard. Section 3.6 offers guidance on benchmarking.

3.4 Local Performance Indicators

Where a CCAC needs to create cascading accountability for local priorities, a CCAC has the opportunity to create local contract performance indicators. The development of such indicators should be undertaken in a collaborative manner, taking into consideration opportunities to minimize the number of indicators and the burden associated with data collection and reporting.

3.5 Setting Local Performance Targets

Performance targets will be set locally for all local performance indicators and for all provincial performance indicators until provincial performance targets are established.

Locally, performance targets should be established in collaboration with SPOs. The following approach is suggested as a “best practice”:

1. CCACs should analyze baseline data or industry benchmarks (historical trends). In analyzing baseline data, it is helpful to consider the following questions:
 - Is there significant variation in performance across agencies? Across time?
 - If so, are the factors contributing to the variation understood?
 - Are the identified factors resolved or will they continue to impact performance?
 - Can they be influenced or modified?
2. CCACs should identify environmental/local factors that may impact on future indicator results (prospective factors). CCACs should consider:
 - Local and provincial CCAC sector changes
 - Broader health system changes
 - Health Human Resources (HHR) availability or other issues
3. CCACs should establish the draft targets based on their analysis of 1 and 2 above and should consider whether they wish to sustain current performance or are looking for performance improvement. If a CCAC is looking for improvement, they should establish the target using the baseline plus the desired % increase. In establishing the % increase, they should consider what is realistically achievable.

4. CCACs should share draft targets with SPOs and solicit feedback/input.
5. CCACs should then finalize the targets for incorporation into the contract documents.

3.6 Benchmarking

In situations where a number of SPOs are not meeting the target satisfactorily the CCAC may choose to initially manage and improve performance by selectively focusing on the SPOs whose performance is furthest from the provincial standard. This is sometimes referred to as benchmarking.

In benchmarking, Steps 1 and 2 described in Section 3.5 remain important. In Step 3 the provincial standard remains as the target, but the CCAC uses percentiles to identify the SPOs whose performance is most removed from the standard.

Example: In one CCAC there may be six SPOs who do not meet the performance standard (Not Meeting) and another four who need improvement (Needs Improvement). Rather than focus on six SPOs, the CCAC may focus on the 35th percentile, which might be the four SPOs with the poorest performance. It should be made known to all ten SPOs that improvement in performance is expected, but a QIN may only be issued to the SPOs in the bottom ranks.

As performance improves in the lowest ranking SPOs, the inclusion in the 35th percentile may shift, and the focus may change to other SPOs – gradually bringing everyone closer to the desired range.

The setting of the actual percentiles is a decision up to the individual CCAC, as it may depend on how many SPOs they have, how many are underperforming the target, and how many organizations the CCAC is able to performance manage at a given time.

4. Monitoring of Contract Performance

4.1 Routine Monitoring of Contract Performance

Routine contract management includes on-going two-way communication to understand local issues, improve processes, and share best practices across the CCAC. Continuous improvement in the quality of service provided to clients is maximized when CCACs and SPOs work in collaboration to identify quality improvement opportunities and to share information regarding initiatives that have been undertaken, individually or jointly. Continued use of kaizen events, Lean and Six Sigma processes, root cause analyses, and other shared quality improvement processes is encouraged.

Individual service provider performance will be continuously monitored by CCACs and performance data will be reviewed quarterly by the CCAC and SPO, at a minimum, which review may or may not include a meeting.

A comprehensive performance review and evaluation will be conducted by the CCAC annually, at a minimum, for each SPO at a service level. This may include a review of the following (but is not limited to):

- SPO's quarterly performance indicator results;
- SPO's Annual Report, with a specific focus on quality improvement including how client complaints, client satisfaction data, employee satisfaction data have been used to develop quality improvement plans and the improvement(s) achieved in the year;
- SPO's Annual Quality Improvement Plan; and
- Information gathered by the CCAC through audits and site visits, if conducted.

Routine performance reviews are best supported by a respectful, transparent dialogue between the CCAC and SPO. Where performance concerns have been identified, the discussion should focus on establishing a shared understanding of contributing factors and next steps. CCACs and SPOs should also proactively discuss areas where performance trends are concerning, even if the SPO is still meeting performance targets. This will assist in identifying improvement opportunities to prevent and/or minimize escalation of the performance concern.

The frequency and method of routine performance related CCAC-SPO communication will be determined by each CCAC based on a number of criteria (including but not limited to):

- Size of the contract (market share, volume)
- Number of services
- Level of performance
- Geography

As much as possible, when factors prohibit meeting face-to-face, CCACs and SPOs should consider the use of technology to improve the effectiveness of performance related communications.

Appendix E provides a guideline for routine contract management meetings and/or discussions.

4.2 Audits and Site Visits

CCACs may conduct local service provider audits or site visits as part of the information gathering or validation of service provider performance and/or data quality, in accordance with Section 11.1 (3) and (4) of the General Conditions of the Services Agreement.

5. Reporting

5.1 Performance Dashboards

Service provider performance related to the Performance Standards Schedule (Schedule 4) indicators will be displayed using a dashboard approach. There are two dashboard views that will be beneficial for CCACs and SPOs:

- A. SPO specific dashboard which allows trending of SPO performance, for each service, over time; and
- B. Comparative dashboard which enables service comparisons across service providers at a point in time.

CCACs may choose to colour code the dashboards for ease of interpretation.

	Meeting Expectations
	Not Meeting Expectations

A. Sample SPO Specific Performance Dashboard

This dashboard is completed during the routine quarterly performance review and allows for trending of SPO performance over time.

Nursing	Schedule 4 Indicators					
Indicator						
Target/ Corridor						
Q1 12-13						
Q4 11-12						
Q3 11-12						
Personal Support	Schedule 4 Indicators					
Indicator						
Target/ Corridor						
Q1 12-13						
Q4 11-12						
Q3 11-12						
Consolidated Services	Schedule 4 Indicators					
Indicator						

Target/ Corridor						
Q1 12-13						
Q4 11-12						
Q3 11-12						

B. Sample Comparative Performance Dashboard

This dashboard is completed during the routine quarterly performance review and allows for comparative analysis of SPO performance against the local CCAC and provincial average and other local SPOs.

Nursing Services								
	Indicator/Standard	Target/ Corridor	Provincial Average	CCAC Average	Agency A	Agency B	Agency C	Agency D
Schedule								

These dashboards will be used by CCACs for transparent reporting and comparisons of SPO performance within a CCAC and across SPOs (i.e., SPO names will appear in dashboards).

5.2 Annual Report

The CCACs provide an Annual Report template, developed provincially, to their SPOs to facilitate reporting of annual contract quality indicators and performance on other important contract obligations. CCACs may seek clarification of information submitted in the Annual Report. Performance on annual obligations and indicators is a proper subject for contract performance meetings between CCACs and SPOs.

5.3 Public Reporting of Quality

Public reporting is a mandate of Health Quality Ontario as prescribed by MOHLTC. Health Quality Ontario works in collaboration with CCAC and Service Provider stakeholders to determine meaningful quality indicators for public reporting. The mandate of the Performance Management Working Table is to evolve and mature contract performance measurement through annual review and revision of contract performance indicators. While this work is aligned with Health Quality Ontario public reporting on the quality of home care in Ontario, it is important to note that not all indicators reported by Health Quality Ontario will be contract performance indicators and not all contract performance indicators will be selected by Health Quality Ontario for public reporting.

6. Managing Performance

Performance management includes both rewarding superior performance and managing performance that does not meet expectations. For simplicity, the Performance Management Process outlined in section 6.1 is to be used in those situations where SPO performance is unsatisfactory / not meeting performance expectations.

6.1 Performance Management Process

The Performance Management process is built on a foundation of quality improvement best practices and informed by the CCAC-SP Relations Framework (Appendix B). The focus, initially, is on establishing a shared understanding of the factors contributing to poor performance and the co-creation of sustainable solutions to achieve the desired performance outcomes. When improvement goals and/or timelines are not achieved and/or sustained, the process supports escalation and the possible application of contract remedies in accordance with the CCAC's rights under the Services Agreement. The final decision with respect to imposition of contract remedies, while guided by this Framework and processes, is made by the CCAC in its sole discretion.³

The Performance Management process is intended to support greater provincial consistency and the ability to be responsive to local needs and circumstances in managing SPO performance issues/concerns.

A toolkit has been developed to support the performance management process including:

- Performance Management Process Map (Appendix F)
- Quality Improvement Notice template and Guidelines for Completion (Appendix G)
- Performance Management Meeting letter templates (Appendix H)

The Performance Management Process may be initiated by a CCAC when SPO performance fails to meet performance expectations in any of the areas outlined in Section 3.

A CCAC may proactively engage a SPO in a discussion regarding a declining performance trend but would not initiate the performance management process (e.g., issue a Quality Improvement Notice) as long as the level of performance was still meeting expectations.

This process is not intended to replace or duplicate risk event reporting systems and processes. A single risk event would not, under normal circumstances, initiate a performance management process unless

³ Any such decisions with respect to the exercise of remedies under the Services Agreement are to be made by the CCAC, in its sole discretion, and notwithstanding any previous communication with respect to the Service Provider's performance, any jointly developed solutions to mitigate or remedy poor performance, or any perceived improvement in the Service Provider's performance on the part of the Service Provider.

the risk event is very significant or there is evidence of a trend over time and/or an underlying fundamental process failure(s) on the part of the SPO.

6.1.1 Quality Improvement Notice

After discussion with the SPO and validation of a contract performance issue which remains unresolved the CCAC may issue a Quality Improvement Notice.

The Quality Improvement Notice serves as written notice of the performance issue/concern and record of all related follow up investigation/action by the CCAC and SPO. Key milestones, deliverables and timelines should be outlined in the Quality Improvement Notice as this is the tool that will be used to monitor progress toward improvement goals, and ultimately, to determine whether escalation is required. The CCAC and SPO should collaboratively review the action plan for the reasonability of the identified actions, deliverables and timelines to achieve the necessary improvement. Once developed, the SPO, and the CCAC if applicable, are accountable to deliver on their respective commitments defined in the action plan.

The Quality Improvement Notice remains open until closed for one of the following reasons:

- Acceptable level of performance has been achieved and sustained – Closure Status = Resolved
- It is learned that the QIN was issued in error – Closure Status = Unfounded
- Other (e.g., the contract is terminated as a result of failure to improve)

It is expected that most QINs will be closed in a timely fashion according to the agreed upon Action Plan. The time to closure will vary by the severity of the issue and the timeframe required to reasonably see improvement. For example, client satisfaction results typically experience a time lag before improvement is seen. Generally, the timeframe to closure should not exceed 12 – 18 months. In the event that a risk event has been initiated that is subsequently followed by the issue of a QIN, consideration will be given to minimize the duplication between the documentation of the two.

The Quality Improvement Notice template and Guidelines for completion can be found in Appendix G.

6.1.2 Escalation of the Performance Management Process

Where a QIN has been issued and the SPO fails to achieve the agreed upon deliverables and timelines as set out in the Action Plan, the performance management process will be escalated to a meeting of Senior Executives of the CCAC and the SPO as set out in General Conditions 11.1(a).

6.1.3 Criteria for Expediting the Performance Management Process

The CCAC may expedite the performance management process directly to a meeting of Senior Executives of the CCAC and SPO when:

- There is a quality/performance issue or a contract breach that is high risk to client, SPO, CCAC and/or reputation of the home care sector;

- Performance is an outlier when benchmarked against other SPOs;
- An open quality improvement notice is not tracking to the improvement deliverables and timelines;
- There are multiple open quality improvement notices;
- There are repeated quality improvement notices for the same issue due to failure to sustain improvement;
- There is an adverse event(s) symptomatic of underlying fundamental process failure(s) on the part of SPO;
- The SPO submits false or misleading information to CCAC; or
- The SPO has committed a material breach of the Services Agreement.

6.2 Rewards and Remedies

Nothing in this Provincial CCAC Client Service Contract Management Framework prevents a CCAC from taking immediate steps, including the issue of a notice of termination, where the degree of risk associated with the performance issue is significant and, in the CCAC's sole discretion, immediate remedies are required

Guidelines related to the application of contract performance rewards and remedies are currently under development.

6.3 Exemplary Performance:

As outlined in section 3, the assessment of whether an SPO is meeting (satisfactory) or not meeting (unsatisfactory) performance expectations is ongoing and is made during regular contract performance reviews (e.g., quarterly) and/or at the time of issuance or closure of a Quality Improvement Notice (see section 6.1) .

Work continues on the development of a new performance category, exemplary performance..

7. Continuous Quality Improvement of the Provincial Client Service Contract Management Framework

Annually, the Performance Management Working Table will undertake an evaluation and refresh of the CCAC Client Service Contract Performance Framework based on feedback and experience in its use. This will serve to improve the framework and its application to ensure that it continues to reflect best practices in contract management, enable the delivery of quality service to clients and support transformation of the home care sector.

8. Other Quality Improvement Processes Outside of the Performance Management Framework

The CCACs and SPOs have adopted the Quality Improvement Plan template used provincially by other sectors of the healthcare system. The requirement for SPOs to develop annual Quality Improvement

Plans (QIP) that align with the QIPs of their respective CCACs was implemented in April, 2014. The first aligned QIPs were filed with the Annual Reports of the SPOs at the end of June 2014. The QIPs will facilitate collaborative work toward the same quality goals.

CCACs and SPOs may also have local quality improvement projects designed and implemented collaboratively.

9. Glossary of Terms (Key Definitions)

Risk: A risk event means an unforeseen event that has given rise to or may reasonably be expected to give rise to danger, loss or injury related to the delivery of services, including danger, loss or injury to the client, caregiver, service provider personnel or loss or damage to the CCAC or the service provider.
(Section 5.5 of Services Schedules to the Services Agreement)

10. Appendices

- A. Contract Management Guidelines For Community Care Access Centres, September 2012
- B. CCAC-Service Provider Relations Framework
- C. Contract Performance Indicators for 2014 Template Version – Updated April 2016
- D. Applicability Matrix – Updated April 2016
- E. Contract Management Meeting Agenda Template
- F. Performance Management Process Map
- G. Quality Improvement Notice Template and Guidelines for Completion
- H. Performance Management Meeting Letter Template