

Attestation Form

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

TO: The Board of the University of Ottawa Heart Institute, (the “Board”)

FROM: Dr. Rob Beanlands
President and CEO
University of Ottawa Heart Institute

Date: June 12, 2025

RE: April 1, 2024 to March 31, 2025 (“the Applicable Period”)

On behalf of the University of Ottawa Heart Institute (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;
- the Hospital’s compliance with any applicable perquisite directives issued under section 11.1 of the BPSAA by the Management Board of Cabinet;
- the Hospital’s compliance with any applicable procurement directives issued under section 12 of the BPSAA by the Management Board of Cabinet,
- the Hospital’s compliance with any applicable directives on the preparation and publication of business plans and other business or financial documents issued under section 13 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 & 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 OTTAWA, Ontario this June 12, 2025.



Dr. Rob Beanlands, President & CEO

I certify that this attestation has been approved by the Board of the University of Ottawa Heart Institute on June 12, 2025.



Dalton McGuinty, Chair, Board of Directors

SCHEDULE A to Attestation

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 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.

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 \$121,000 or more.	Certain supplier engagements >\$121,000 in annual spend have been strategically single sourced with the support of senior management to maintain operational effectiveness and within Delegation of Authority Limits as approved by the Board	The Institute will continue to follow BPSAA guidelines for competitive procurement in a majority of its purchases. There will be certain instances, because of operational efficiencies, requirements for aligning existing equipment fleets and services and other organizational priorities when the Institute will single source supplies and services. These will be justified, documented and approved by senior management in accordance with approved Board policies.

6. Exceptions to the Hospital's compliance with the preparation and publication of business plans and other business or financial documents issued under section 13 of the BPSAA by the Management Board of Cabinet.

No known exceptions