



April 25th 2011

Mr. Paul Straszak
President & CEO
PSEC Secretariat
(Via e-mail)

Dear Mr. Straszek,

RE: Public Sector Employers Act - Section 14.8(3) - Public Sector Executive
Compensation Reporting Form

Attached please find the statement of Executive Compensation Parts One and Two for the fiscal year 2010/2011. I am also including a letter of attestation from Mr. Ron Philip, Board Chair of SJGH verifying that the compensation provided was within approved compensation plans.

Please contact me directly should you require any additional information.

Yours sincerely,

Gillian Henderson
Director, Human Resource Services

cc: Ron Philip, Board Chair, SJGH
Michael Pontus, CEO & President
Ilan Burkes, HEABC Consultant



April 25, 2011

Mr. Paul Straszak
President & CEO
PSEC Secretariat
(Via e-mail)

Dear Mr. Straszak,

RE: Public Sector Employers Act - Section 14.8(3) - Public Sector Executive Compensation Reporting Form

This letter serves as confirmation that the board is aware of the executive compensation paid, as detailed in the attached reports and I can confirm that the compensation provided was within approved compensation plans for this fiscal year.

Please contact me directly should you require any additional information.

Yours sincerely,

Ron Philip
Board Chair
St. Joseph's General Hospital

St. Joseph's General Hospital
Statement of Executive Compensation
2010/2011

PART ONE

Name and Principal Position (a)	Salary (b)	Bonus ¹ (4) c	Incentive Plan Compensation Paid ² (4) (d)	Pension ³ (4) (e)	All Other Compensation ⁴ (4) (f)	Total (4) (g)	Previous 2 Years Totals (h)
Michael Pontus President & CEO	\$190,738	N/A	N/A	\$15,957	\$14,655	\$221,352	2008/09 \$203,597 2009/10 \$215,028
Eric Macdonald VP Finance, Capital & Support Services	\$153,663	N/A	N/A	\$12,854	\$15,130 ⁵	\$181,648	2008/09 \$167,886 2009/10 \$175,827
Nancy Jutte VP Patient Services	N/A	N/A	N/A	N/A	N/A	N/A ⁶	2009/10 \$165,167 2008/09 N/A

¹ St. Joseph's General Hospital has no bonus payment system

² St. Joseph's General Hospital has no incentive payment plan

³ Pension Plan is the MPP for all staff. No other retirement schemes are in place. Only Employer contribution to MPP is reported.

⁴ Except where noted includes only Employer contributions/payments/premiums provided to all staff for EI, CPP, WCB, Extended Health, MSP, Group life, AD&D, LTD

⁵ Includes \$912.80 CMA membership

⁶ N. Jutte is currently on a long term absence and did not meet the threshold compensation for reporting in 2010/11

**St. Joseph's General Hospital
Statement of Executive Compensation
2010/2011**

PART TWO

Compensation Discussion and Analysis

St. Joseph's is a member of the Health Employers Association of BC and is governed by the HEABC Compensation Reference Plan. This plan has been developed pursuant to the statutory requirements of the Public Sector Employers Act and is applied across the employer members of HEABC for non-union, management and executive roles within healthcare.

Compensation Principles

- ✓ Jobs not covered by collective agreements will be compensated in a fair and equitable manner.
- ✓ Levels of compensation will be valid and defensible to full disclosure, thus ensuring accountability to the public. Levels shall reflect those in an appropriate composite market.
- ✓ Compensation policies and practices include the total compensation for services through both traditional employer compensation policies and special employment contract relationships.
- ✓ To ensure equity, appropriate systems will measure and recognize the composite value of the skill, effort, responsibility and working conditions involved in performing the duties of jobs across the healthcare sector.

Compensation Policy Objectives

- a. Healthcare's non-contract compensation plan would address the expectations of trustees, employers, employees and the Government.
- b. A defensible compensation system responds to broad equity issues. The compensation system recognizes the responsibility of the healthcare sector to establish compensation levels that acknowledge fairness and the public's ability to pay.
- c. Compensation levels are at a level so that healthcare employers can attract, motivate and retain qualified individuals. Fundamental to this statement is the fact that healthcare compensation practices cannot lead the market. This ensures that taxpayers receive the maximum benefits from qualified individuals occupying jobs within the healthcare sector.
- d. Compensation levels must be competitive to control unnecessary levels of turnover.
- e. Compensation levels will be based on an analysis of internal and external compensation levels. The comparison would consider the type and range of organizations from which healthcare sector employers must recruit and retain highly trained individuals.

- f. Internal equity requires that compensation be relative to the worth of jobs as measured by the composite value of skill, effort, responsibility and working conditions. External equity requires that compensation be relative to an acceptable composite market.
- g. Compensation should reinforce and reward performance. Employers shall establish measurable performance standards.
- h. Compensation policies should comply with the intent and requirements of legal obligations by being non-discriminatory in nature.
- i. Compensation policies and programs must be designed to be efficiently administered. The salary ranges will group jobs of similar value, and common impact and magnitude.

Compensation Surveys

The compensation reference plan shall be reflective of a representative market that shall be composed of an appropriate mix of employers from which healthcare must attract and retain qualified individuals.

HEABC is responsible for conducting an annual cash compensation survey to ensure appropriate internal and external equity are maintained.

Job market matches shall be appropriate to the type of position: local for administrative support positions; and provincial or national for managerial positions.

The comparison of compensation shall be to relevant external labour markets.

The external markets shall reflect the types of organizations from which healthcare employers must attract and retain individuals. This will include both the public and private sector. Compensation information will be collected on the basis of job content, not job title.

HEABC will conduct a total compensation survey on a minimum of a three-year, or as-needed cycle. Included in the survey will be: salaries, other cash and incentives; prerequisites; holidays; vacations and other paid time off work; group benefits; retirement or savings benefits; and standard hours of work.

Compensation Reference Ranges

HEABC is responsible for providing healthcare employers with salary reference ranges. The reference salary ranges will be based on the 50th percentile of the blended healthcare and external market pay policy lines. The salary reference ranges will include provisions for an adequate range and spread of salary rates to reflect developmental, job standard, and above standard rates.

Employers are responsible for establishing salary ranges that conform to the reference salary ranges. Employer's salary ranges will be deemed to conform to the compensation reference ranges if the organization's overall comparison ratio is within 0.90 and 1.10 of the appropriate market reference rates.

The comparison ratio calculation is the total of the organization's actual salaries divided by the total of the appropriate market reference rates. Employers are responsible for administering salaries within the reference salary ranges.

Circumstances may require employers to establish job rates that exceed the recommended market reference rates. These circumstances typically are the result of supply and demand factors, or unusual or emergent conditions within the organization. Employers, in consultation with HEABC, may establish job rates that exceed the recommended reference rates. The organization's overall comparison ratio should not exceed the recommended target.

Circumstances may require employers to extend geographic cost of living considerations in determining the final salaries of executive and non-contract employees. Employers may include a geographic cost of living component provided the organization's overall comparison ratio does not exceed the recommended range.

Circumstances may require employers to address compression or inversion issues between non-contract staff and directly supervised bargaining unit employees. A premium differential of up to 15 percent may be established where there is a functional supervisory role, with responsibility and accountability for outcomes. This premium differential does not form part of the comparison ratio calculation.

Organization Information Plan

The Organization Information Plan provides a means of grouping organizations with similar characteristics for the purpose of comparing the pay practices of these to a relevant external market. The grouping of organizations is determined by assessing certain characteristics that are inherent in all healthcare organizations.

HEABC is responsible for providing healthcare employers with a copy of the Organizational Information Questionnaire (OIQ), instructions on how it is used, and consulting assistance in order to complete and accurately collect the required information.

The healthcare employer is responsible for completing the questionnaire.

The healthcare employers' Board is responsible for approving the OIQ and returning the questionnaire to HEABC.

HEABC is responsible for reviewing all completed questionnaires for consistency in application and informing the healthcare employer of the final assessment.

The Organizational Information Questionnaire collects factual information on healthcare organizations.

Role Assessment Plan

The Role Assessment Plan provides a means of establishing an equitable hierarchy of jobs/roles within an organization, as well as a comparison of jobs/roles across the healthcare sector. The hierarchy of jobs/roles is determined by assessing the skill, effort, responsibility, and working conditions inherent in all jobs/roles in healthcare.

HEABC is responsible for providing healthcare employers with copies of the Role Assessment Plan, the associated Questionnaire, and consulting advice of the application of the system. HEABC is responsible for educating healthcare employers on the use of the plan and providing consulting advice and assistance as required.

Healthcare employers are responsible for ensuring that non-contract employees complete the questionnaire and having their respective managers approve the questionnaire to ensure the information accurately reflects job content and requirements. The head of the healthcare employer, or designate, completes a final approval of the questionnaire.

HEABC is responsible for working with healthcare employers is to ensure the consistent application of the plan through periodic reviews. HEABC is responsible to work with the healthcare employers to resolve any disputes on the application of the plan.

Application of the Compensation Reference Plan

For each of the NEOs reported in the Summary Compensation Table of this disclosure, St. Joseph's General Hospital has applied the Compensation Reference Plan, working with HEABC as necessary. The base salary and total compensation provided to each NEO is consistent with the principles and policy objectives stated above, as mandated by the Public Sector Employers Council in accordance with the Public Sector Employers Act.

St. Joseph's has established salary ranges and job rates consistent with the mandated 50th percentile of the blended market and HEABC reference salary ranges. Newly hired employees are placed on the appropriate salary range and at the appropriate range placement in accordance with their previous experience, competencies and current labour market conditions. Movement along the salary range is considered annually. Range movement is dependent on competence development and performance in the role. Performance and development are assessed between the employee and their manager. The Executive Committee of the Board of Directors approves an annual allocation of funds to be utilized for all non contract salaries and the President and CEO determines the compensation level for senior executives from within this allocation. The Executive Committee of the Board of Directors determines the compensation level for the President and CEO.

Benefits

St. Joseph's executive benefit package is the same benefit package as that provided by St. Joseph's to all of its non contract employees. Benefits include MSP premiums, Long Term Disability, Sick Leave, Group Life Insurance (4x's annual base salary; 5x's annual base salary for the President and CEO), Accidental Death and Dismemberment (4x's annual base salary, 5x's annual base salary for the President and CEO), Extended Health Plan (including vision care), Dental Plan, and enrolment in the Municipal Pension Plan. Our benefit package is comparable to other health sector employers in British Columbia.

Perquisites

St. Joseph's provides no executive perquisites that are not provided to all of it's non-contract staff.

Annual Leave

Annual leave is based on years of employment with St. Joseph's. Executives are eligible for four weeks annual vacation, with an additional week of vacation after each 5 years employment with St. Joseph's. Out annual leave provisions are similar to other health sector employers in British Columbia, and are competitive. Annual leaves are included in the base salary component of the Summary Compensation Table.