

Provide the information required for each section. Refer to the [Broader Public Sector Executive Compensation Guide](#) for additional instructions and assistance with completing this form.

A. Compensation Philosophy	Provide information on the designated employer's compensation philosophy including details on how the executive compensation program supports the employer's strategic objectives and what the program, including its approach to performance-related pay, is designed to reward.
B. Designated Executive Positions	List all designated executives at the designated employer. If applicable, indicate the class or category of each designated executive position as it relates to the salary and performance-related pay structure in the executive compensation program.
C. Salary and Performance-related Pay Caps	
Comparator Selection	Provide information on the comparators used to benchmark salary and performance-related pay at the designated employer for each designated executive position or class of positions. Provide a rationale for the chosen comparators.
Comparative Analysis Details	Provide information on the percentile used to benchmark the salary and performance-related pay cap for each designated executive position or class of positions. Additional information on the methodology used to determine salary and performance-related pay can provide useful context.
Structure	Provide information on the salary and performance-related pay cap for each designated executive position or class of positions. Additional information on the salary ranges and performance-related pay structure can provide useful context.
D. Salary and Performance-related Pay Envelope	Provide the sum of salary and performance-related pay paid to designated executives for the most recently completed pay year. In addition, provide the maximum rate of increase to the salary and performance-related pay envelope. Additional information on why changes are necessary and how they were determined can provide useful context.
E. Other Elements of Compensation	<p>Provide information on any proposed compensation elements, other than salary and performance-related pay, that would be provided to designated executive positions or classes of positions but that are not generally provided in the same manner and relative amount to non-executive managers.</p> <p>Include rationale outlining the critical business reasons that justify the provision of each proposed element of compensation.</p>
F. Supplemental Information	Provide any additional information required to support or explain the information included in the executive compensation program.

Provide the contact information of the person completing this program.

Contact Information

Organization (Full Name)

Queensway Carleton Hospital

Completed By

Last Name

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Job Title

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A. Compensation Philosophy

Provide information on the designated employer's compensation philosophy including details on how the executive compensation program supports the employer's strategic objectives and what the program, including its approach to performance-related pay, is designed to reward.

First and foremost, Queensway Carleton Hospital is committed to providing safe, high quality patient care. The hospital's Executive Compensation Program is designed to attract and retain the executive level talent required for the gravity and complexity of hospital operations.

Consistent with our commitment to prioritizing patient care, the Executive Compensation Program strives to provide base salary and performance-related pay that does not exceed the median (50th percentile) of comparator organizations. The Executive Compensation Program is also consistent with our commitment to accountability, as demonstrated by incorporating a performance-related pay program that is based on achieving the hospital's strategic goals and quality improvement objectives.

The principles that govern the design and administration of QCH's proposed Executive Compensation Program are the following:

- Designed to attract and retain qualified executive level talent
- Aligned to the organization's vision and mission
- Aligned with the organization's culture and values: Accountability, Innovation and Respect
- Linked to the achievement of the organization's strategic goals and quality improvement objectives, and aligned with results-based performance metrics
- Market competitive, fair and reasonable
- Comparable to organizations in the province of Ontario with similar types of operations, annual operating budgets, number of full-time staff equivalents (FTEs) and patient volumes
- Fully compliant with applicable laws, regulations and ministry directives
- Independently informed and approved by the Board of Directors
- Transparent and accessible

B. Designated Executive Positions

List all designated executives at the designated employer. If applicable, indicate the class or category of each designated executive position as it relates to the salary and performance-related pay structure in the executive compensation program.

Full Job Title	Class of Position
E.g. Chief Operating Officer	E.g. VP-1
Chief Executive Officer	Chief Executive Officer
Chief of Staff, Vice President, Medical Affairs	Chief of Staff, Vice President, Medical Affairs
VP, Patient Care and Chief Nursing Executive	Vice President Class
VP, Corporate and Diagnostic Services and CFO	Vice President Class
VP, Human Resources and Organizational Effectiveness	Vice President Class
VP, Clinical Support, Info. Mgmt. and Chief Privacy Officer	Vice President Class

C. Salary and Performance-related Pay – Comparator Selection

Provide information on the comparators used to benchmark salary and performance-related pay at the designated employer for each designated executive position or class of positions. Provide a rationale for the chosen comparators.

Comparators 1

Executive Positions or Classes of Positions Benchmarked

Chief Executive Officer

Canadian Public Sector or Broader Public Sector Comparators

Organizations (e.g. Organization 1, Organization 2, Organization 3, etc.)

Belleville Quinte Health System, BlueWater Health, Brantford General Hospital, Cambridge Memorial Hospital, Children's Hospital of Eastern Ontario, Grand River, Joseph Brant Hospital, Markham Stouffville Hospital, Montfort Hospital, North Bay Regional Health Centre, North York General Hospital, Peterborough Regional Health Centre, Rouge Valley Hospital, Royal Victoria Hospital, Southlake Regional Health Care Centre, St. Joseph's Health Centre (Toronto), St. Joseph's Health Centre (London), Toronto Scarborough Hospital

Positions or Classes of Positions (e.g. Chief Financial Executives)

Chief Executive Officers

Rationale for Selected Comparators

The comparator group was selected based on the criteria identified in the Broader Public Sector Executive Compensation Act, 2014. Specifically, we examined:

- the scope of responsibilities
- type of operation
- location
- industry within which the organization competes for executives
- the size of the organization

Scope of Responsibilities

Eighteen comparator positions were chosen for the Chief Executive Officer position. Each of the positions selected were determined to be highly comparable to QCH's Chief Executive Officer position. Responsibilities for the position include overseeing VP level staff and reporting to the Board of Directors.

Type and Scope of Operations

QCH is a full-service hospital and offers a diversity of medical and surgical programs and services. Hospital staff focus on maintaining and enhancing their cornerstone programs – Childbirth, Geriatrics, Mental Health, Rehabilitation, Emergency, Medical and Surgical Services and Critical Care Services. QCH strives to be recognized for its clinical and operational excellence, and quality patient-centered care. For example, we are in the top quartile for most areas of patient satisfaction. According to data from the Canadian Institute for Health Information, QCH spends less on administration costs than the regional and provincial average.

In determining the list of comparator hospitals, we looked for other full-service community or urban community hospitals. All hospitals within our comparator group are within a similar scope, including inpatient beds, emergency services, critical care services, surgical programs and out-patient clinics.

In addition, we looked for hospitals that also served as acute referral hospitals for a broader geographic area. Queensway Carleton Hospital is a large, urban community hospital in Ottawa's west end, serving more than 400,000 patients each year. It is one of Canada's fastest growing catchment areas.

Location

All comparator organizations are similar Ontario hospitals located within 400 km of a centre of greater than one million people.

Industry Within Which QCH Competes for Executives

All comparator organizations are publicly-assisted hospitals located in Ontario. For the purposes of this analysis, the

Board of Directors, and the independent consultant hired to assist the Board of Directors, have focused specifically on Ontario hospitals that QCH is most likely to compete with for executive talent.

Size of the Organization

QCH's comparator group for this position includes 18 comparable hospitals in term of size of operations. Consistent with recognized practice, and acknowledging the fact that no other organization matches the exact size and complexity of QCH, the benchmark sample includes organizations that are smaller and organizations that are larger than QCH.

Queensway Carleton Hospital

- Operating Budget: \$211,473,000
- Staff FTE: 1,348 (approximately 2,000 employees)

Benchmark Organization Summary

- Median Operating Budget: \$251,737,000
- Median Staff FTE: 1,612

☐ The designated employer received approval from the President of the Treasury Board to use private sector and/or international comparators for these executive positions or classes of positions.

Comparators 2

Executive Positions or Classes of Positions Benchmarked

Chief of Staff, Vice President, Medical Affairs

Canadian Public Sector or Broader Public Sector Comparators

Organizations (e.g. Organization 1, Organization 2, Organization 3, etc.)

Belleville Quinte Health System, Cambridge Memorial Hospital, Children's Hospital of Eastern Ontario, Grand River, Joseph Brant Hospital, Montfort Hospital, North Bay Regional Health Centre, North York General Hospital, Peterborough Regional Health Centre, Royal Victoria Hospital, St. Joseph's Health Centre (Toronto)

Positions or Classes of Positions (e.g. Chief Financial Executives)

Chiefs of Staff and Vice Presidents, Medical Affairs

Rationale for Selected Comparators

The comparator group was selected based on the criteria identified in the Broader Public Sector Executive Compensation Act, 2014. Specifically, we examined:

- the scope of responsibilities
- type of operation
- location
- industry within which the organization competes for executives
- the size of the organization

Scope of Responsibilities

Eleven comparator positions were chosen for the Chief of Staff, Vice President, Medical Affairs position. Each of the positions selected were determined to be highly comparable to QCH's position. Responsibilities for the position include overseeing all Medical staff, leading select clinical departments, and playing a leadership role on the Medical Advisory Committee.

Type and Scope of Operations

QCH is a full-service hospital and offers a diversity of medical and surgical programs and services. Hospital staff focus on maintaining and enhancing their cornerstone programs – Childbirth, Geriatrics, Mental Health, Rehabilitation, Emergency, Medical and Surgical Services and Critical Care Services. QCH strives to be recognized for its clinical and operational excellence, and quality patient-centered care. For example, we are in the top quartile for most areas of patient satisfaction. According to data from the Canadian Institute for Health Information, QCH spends less on administration costs than the regional and provincial average.

In determining the list of comparator hospitals, we looked for other full-service community or urban community hospitals. All hospitals within our comparator group are within a similar scope, including inpatient beds, emergency services, critical care services, surgical programs and out-patient clinics.

In addition, we looked for hospitals that also served as acute referral hospitals for a broader geographic area. Queensway Carleton Hospital is a large, urban community hospital in Ottawa's west end, serving more than 400,000 patients each year. It is one of Canada's fastest growing catchment areas.

Location

All comparator organizations are similar Ontario hospitals located within 400 km of a centre of greater than one million people.

Industry Within Which QCH Competes for Executives

All comparator organizations are publicly-assisted hospitals located in Ontario. For the purposes of this analysis, the Board of Directors, and the independent consultant hired to assist the Board of Directors, have focused specifically on Ontario hospitals that QCH is most likely to compete with for executive talent.

Size of the Organization

QCH's comparator group for this position includes 11 comparable hospitals in term of size of operations. Consistent with recognized practice, and acknowledging the fact that no other organization matches the exact size and complexity of QCH, the benchmark sample includes organizations that are smaller and organizations that are larger than QCH.

Queensway Carleton Hospital

- Operating Budget: \$211,473,000
- Staff FTE: 1,348 (approximately 2,000 employees)

Benchmark Organization Summary

- Median Operating Budget: \$246,100,000
- Median Staff FTE: 1,567

☐ The designated employer received approval from the President of the Treasury Board to use private sector and/or international comparators for these executive positions or classes of positions.

Comparators 3

Executive Positions or Classes of Positions Benchmarked

Class: Vice President (includes positions of: VP, Corporate and Diagnostic Services and Chief Financial Officer; VP, Patient Care and Chief Nursing Executive; VP, Clinical Support, Information Management and Chief Privacy Officer; Vice President, Human Resources and Organizational Effectiveness)

Canadian Public Sector or Broader Public Sector Comparators

Organizations (e.g. Organization 1, Organization 2, Organization 3, etc.)

BlueWater Health, Brantford General Hospital, Cambridge Memorial Hospital, Children's Hospital of Eastern Ontario, Grand River, Joseph Brant Hospital, Markham Stouffville Hospital, Montfort Hospital, North York General Hospital, Peterborough Regional Health Centre, Rouge Valley Hospital, Royal Victoria Hospital, Southlake Regional Health Care Centre, St. Joseph's Health Centre (Toronto), St. Joseph's Health Centre (London), Toronto Scarborough Hospital

Positions or Classes of Positions (e.g. Chief Financial Executives)

Chief Financial Executives, Chief Nursing Executives, Human Resources Executives

Rationale for Selected Comparators

The comparator group was selected based on the criteria identified in the Broader Public Sector Executive Compensation Act, 2014. Specifically, we examined:

- the scope of responsibilities
- type of operation

- location
- industry within which the organization competes for executives
- the size of the organization

Scope of Responsibilities

Sixteen positions were chosen as comparators for the Vice President Class of positions, with responsibilities and accountabilities similar to QCH's Chief Financial Executive, Chief Nursing Executive and Human Resources Executive. QCH has one unique position (VP, Clinical Support, Information Management and Chief Privacy Officer) that was benchmarked as part of the broader Vice President Class.

Type and Scope of Operations

QCH is a full-service hospital and offers a diversity of medical and surgical programs and services. Hospital staff focus on maintaining and enhancing their cornerstone programs – Childbirth, Geriatrics, Mental Health, Rehabilitation, Emergency, Medical and Surgical Services and Critical Care Services. QCH strives to be recognized for its clinical and operational excellence, and quality patient-centered care. For example, we are in the top quartile for most areas of patient satisfaction. According to data from the Canadian Institute for Health Information, QCH spends less on administration costs than the regional and provincial average.

In determining the list of comparator hospitals, we looked for other full-service community or urban community hospitals. All hospitals within our comparator group are within a similar scope, including inpatient beds, emergency services, critical care services, surgical programs and out-patient clinics.

In addition, we looked for hospitals that also served as acute referral hospitals for a broader geographic area. Queensway Carleton Hospital is a large, urban community hospital in Ottawa's west end, serving more than 400,000 patients each year. It is one of Canada's fastest growing catchment areas.

Location

All comparator organizations are similar Ontario hospitals located within 400 km of a centre of greater than one million people.

Industry Within Which QCH Competes for Executives

All comparator organizations are publicly-assisted hospitals located in Ontario. For the purposes of this analysis, the Board of Directors, and the independent consultant hired to assist the Board of Directors, have focused specifically on Ontario hospitals that QCH is most likely to compete with for executive talent.

Size of the Organization

QCH's comparator group for this class of positions includes 16 comparable hospitals in term of size of operations. Consistent with recognized practice, and acknowledging the fact that no other organization matches the exact size and complexity of QCH, the benchmark sample includes organizations that are smaller and organizations that are larger than QCH.

Queensway Carleton Hospital

- Operating Budget: \$211,473,000
- Staff FTE: 1,348 (approximately 2,000 employees)

Benchmark Organization Summary

- Median Operating Budget: \$265,288,000
- Median Staff FTE: 1,740

☐ The designated employer received approval from the President of the Treasury Board to use private sector and/or international comparators for these executive positions or classes of positions.

C. Salary and Performance-related Pay – Comparative Analysis Details

Provide information on the percentile used to benchmark the salary and performance-related pay cap for each designated executive position or class of positions. Additional information on the methodology used to determine salary and performance-related pay can provide useful context.

Independent, third party experts in compensation practices were engaged to provide expertise, knowledge and advice to the Board of Directors to develop the Executive Compensation Program.

With a focus on prioritizing patient care while also ensuring the ability to attract and retain qualified executives, the Board of Directors is proposing an Executive Compensation Program that does not exceed the 50th percentile annual salary and performance-related pay that may be paid for the comparator organizations' executive positions.

As summarized in "Section C. Salary and Performance-related Pay – Comparator Selection," all of the comparator organizations selected for benchmarking purposes are comparable Ontario hospitals, in terms of size, type of operations and scope of responsibilities of the organization's executive positions. These organizations are also considered to be those that Queensway Carleton Hospital competes with for executives.

Under the Broader Public Sector Executive Compensation Act, the regulations requires that the calculation of a salary and performance-related pay cap be determined using no greater than the 50th percentile of a minimum of eight comparator organizations. QCH has voluntarily gone beyond the minimum requirement of eight comparator organizations, to ensure even greater validity of market research findings. As summarized in "Section C. Salary and Performance-related Pay – Comparator Selection," for the Chief Executive Officer position, eighteen comparator organizations were used to determine the 50th percentile value of the maximum salary and performance-related pay. In the case of the Chief of Staff, Vice-President Medical Affairs, eleven comparator organizations were used to determine the 50th percentile value. For the Vice-President Class of positions, sixteen comparator organizations were used to determine the 50th percentile value.

A summary of the market research findings and how QCH's current compensation practices compare to market norms is provided below. This information clarifies the degree to which QCH's current compensation practices fall below the level of its peers.

Position: Chief Executive Officer

Current Maximum Salary and Performance-related Pay: \$316,122

Market 50th Percentile Maximum Salary and Performance-related Pay: \$400,450

Degree to Which Current QCH Compensation is Below Market (\$): \$84,328

Degree to Which Current QCH Compensation is Below Market (%): 21%

Number of Comparator Organizations Included: 18

Position: Chief of Staff, Vice President, Medical Affairs

Current Maximum Salary and Performance-related Pay: \$280,005

Market 50th Percentile Maximum Salary and Performance-related Pay: \$371,181

Degree to Which Current QCH Compensation is Below Market (\$): \$91,176

Degree to Which Current QCH Compensation is Below Market (%): 25%

Number of Comparator Organizations Included: 11

Class of Positions: Vice-President

Current Maximum Salary and Performance-related Pay: \$182,436

Market 50th Percentile Maximum Salary and Performance-related Pay: \$216,102

Degree to Which Current QCH Compensation is Below Market (\$): \$33,666

Degree to Which Current QCH Compensation is Below Market (%): 16%

Number of Comparator Organizations Included: 16

As identified in the following section, the Board of Directors is proposing an Executive Compensation Program in which compensation for each position and class of positions does not exceed the market 50th percentile, reflecting QCH's ongoing commitment to prioritizing patient care.

C. Salary and Performance-related Pay Structure

Provide information on the salary and performance-related pay cap for each designated executive position or class of positions. Additional information on salary ranges and performance-related pay structure can provide useful context.

Executive Position or Class of Positions	Salary Range Minimum (\$)	Job Rate (\$)	Salary Range Maximum (\$)	Target Annual Performance-related pay (% of Salary)	Maximum Annual Performance-related Pay (% of Salary)	Salary and Performance-related Pay Cap (\$)
E.g. President	E.g. 200,000	E.g. 220,000	E.g. 240,000	E.g. 7.5	E.g. 10	E.g. 264,000
Chief Executive Officer	\$307,622	\$330,251	\$352,879	7.5	7.5	\$379,345
Chief of Staff, VP, Medical Affairs	\$280,005	\$296,284	\$312,563	7.5	7.5	\$336,005
Vice President	\$176,241	\$190,501	\$204,762	5.0	5.0	\$215,000

D. Salary and Performance-related Pay Envelope

Provide the sum of salary and performance-related pay paid to designated executives for the most recently completed pay year. In addition, provide the maximum rate of increase to the salary and performance-related pay envelope. Additional information on why changes are necessary and how they were determined can provide useful context.

Sum of Salary and Performance-related Pay for the Most Recently Completed Pay Year (\$)	Maximum Rate of Increase to Envelope (%)
\$1,301,091	5.0

Rationale for the Proposed Maximum Rate of Increase:

The compensation benchmarking exercise led by independent, third party experts has determined that Queensway Carleton Hospital is currently compensating its executives significantly lower than its peers, which poses a risk to executive recruitment and retention. Additionally, it is important to note that Queensway Carleton Hospital has not implemented cost-of-living increases for its executives for over eight years.

Queensway Carleton Hospital's total pay envelope for designated executives for the most recently completed pay year is \$1,301,091. The Board of Directors proposes that the maximum rate by which this envelope could be increased in each year be set at 5%. For clarity, please note that 5% is being proposed as the maximum allowable rate of increase. The actual rate of increase implemented in any given pay year may be lower. Any adjustments in salary for a designated executive shall be approved by the Board of Directors. In arriving at a determination of a maximum rate of increase of 5%, the Board of Directors took into account each of the five factors outlined in section 3.3, subsection (1) of Ontario Regulation 187/17.

Of note, factor number 5 requires the designated employer to take into account any significant expansion in the operations of the designated employer that is not the result of a significant organizational restructuring. Since April 1, 2009, Queensway Carleton Hospital has imposed restrictions on executive compensation increases. Initially, these restrictions were voluntary, reflecting the hospital's commitment to prioritizing patient care. Overall, these restrictions are such that QCH has not implemented cost-of-living increases for its executives for over eight years. However, during this time, QCH has undergone a major expansion of operations, evidenced as follows:

- 2008/09 Operating Budget: \$153,558,000
- 2016/17 Operating Budget: \$203,414,000

This 32.5% increase in operating budget represents a significant increase in executive-level complexity and accountability. However, to date this significant change has not resulted in commensurate adjustments to executive-level compensation. The Board of Directors believes that the proposed Executive Compensation Program and a 5% maximum annual rate of increase is appropriate to compensate executives at a level that is aligned with the reality of its current size and scope of operations.

Of additional relevance, and with respect to factor number 3, Queensway Carleton Hospital has calculated that the percentage of its operating budget that is used for executive salary and performance-related pay is approximately 0.64%. Whereas, the average percentage across seven representative organizations within our established comparator group is greater, at 0.69%. Some highly comparable organizations within our broader comparator group allocate in the range of 0.77% to 1.07% of their operating budget to executive salary and performance-related pay. Overall, this comparison further reinforces the finding that Queensway Carleton Hospital is compensating its executives at a level below its peers.

The hospital has also considered the effect on attracting and retaining talent of the compression that exists between the compensation provided to designated executives relative to the compensation provided to employees who directly report to them. The Board of Directors believes that a 5% maximum rate of increase will enable the hospital to make some necessary improvements to this compensation compression and thereby help to mitigate this attraction and retention risk.

The Board of Directors considered all of the identified factors, including the financial priorities and the compensation priorities of the Government of Ontario, and recent executive compensation trends within the healthcare industry. The Board of Directors recognizes that QCH currently compensates its executives below market norms, and believes that a 5% maximum rate of increase serves to appropriately balance the need to attract and retain qualified

executives with the need for financial stewardship and accountability.

The Board of Directors' primary objectives, within the context of the Executive Compensation Program, are to ensure the ability to recruit and retain qualified executives, and to foster accountability for performance by implementing a performance-related pay plan across all of the executive positions. The Board of Directors believes that its compensation strategy of adjusting executive compensation to include performance-related pay is in the best interests of all stakeholders, given that it strengthens executive-level accountability and ensures that this "at risk" pay is contingent upon the achievement of established organizational performance targets and thresholds. To allow for the introduction of this "pay at risk"/performance-related pay plan, the hospital requires a 5% maximum annual rate of increase.

It is important to note that Queensway Carleton Hospital has been and continues to be committed to appropriate financial stewardship. For the year ended March 31, 2009 the hospital was in a deficit position of over \$1-million. Through the implementation of efficiencies, the hospital has not seen an operating deficit for the past six years. As well, over the course of the past eight years, Queensway Carleton Hospital partnered with the Ministry on numerous capital expansion projects, all of which were delivered on time and on budget. While undertaking these expansion endeavors, since March 31, 2009 Queensway Carleton Hospital has improved its working funds position by over \$22-million, moving out of a negative position to a year end positive balance of \$14.7-million for 2016/17.

E. Other Elements of Compensation

Provide information on any compensation elements, other than salary and performance-related pay, that would be provided to designated executive positions or classes of positions but that are not generally provided in the same manner and relative amount to non-executive managers.

Include rationale outlining the critical business reasons that justify the provision of each element of compensation.

Element 1

Element of Compensation

Premium cost-sharing arrangement for Health, Dental and Long Term Disability plans

Positions or Classes of Positions

Chief Executive Officer; Chief of Staff, VP, Medical Affairs; Vice President Class

Rationale

Queensway Carleton Hospital's benefit plans for designated executives are consistent with those provided to non-executive managers. However, the hospital pays 100% of the premium costs for the Health, Dental and Long Term Disability plans for designated executives. For non-executive managers, the hospital pays 75% of the total premium costs for these benefits.

Recognizing that a difference in the benefits premium arrangement between designated executives and non-executive managers may be interpreted as not being "in the same manner and relative amount," the hospital will address this difference by the third anniversary of the posting of this Executive Compensation Program.

Element 2

Element of Compensation

Temporary Stipend

Positions or Classes of Positions

VP, Corporate and Diagnostic Services and Chief Financial Officer

Rationale

In 2016 and 2017, the VP, Corporate and Diagnostic Services and Chief Financial Officer received a temporary stipend for performing the temporary role of Acting Chief Financial Officer for the Eastern Ontario Regional Laboratory Association, and providing consulting services to the Eastern Ontario Regional Laboratory Association. Given that this temporary stipend was for providing services to an outside organization, and is outside of the job incumbent's role as a designated executive at QCH, this stipend has not been included in the calculation of QCH's "Sum of Salary and Performance-related Pay for the Most Recently Completed Pay Year (\$)." Please note that this arrangement has come to an end and this stipend will not be provided in the future.

F. Supplementary Information

Provide any additional information required to support or explain the information included in the executive compensation program.

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