

Sault Area Hospital EXECUTIVE COMPENSATION FRAMEWORK

A Message from the Chair of the Board:

Being accountable to our patients and community is essential to earning trust and building a reputation for excellence. "Accountability" means making the right clinical and managerial decisions, managing resources efficiently, measuring our performance and doing that in an open and transparent manner.

On September 6, 2016, the government filed Regulation 304/16 under the Broader Public Sector Executive Compensation Act, 2014 (BPSECA). This Regulation sets out the process for determining the maximum amount of salary and performance pay that will be available for designated executives of designated employers, including public hospitals, as well as other parameters regarding other elements of the executives' compensation. The process includes selecting a number of comparators (other organizations similar in scope, size, industry and location) to establish our executive compensation based on a maximum of the 50th percentile which represents the median of the salaries earned by designated executives of these comparator organizations. This regulation is intended to replace a compensation freeze that has been in place since 2010.

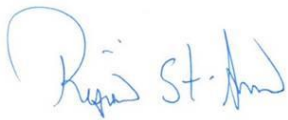
The Sault Area Hospital Executive Compensation Framework was established in alignment with the Regulation and utilizing guidance and resources provided by the Ontario Hospital Association. As part of the process, our framework was submitted and confirmation of approval to post for public consultation was granted by the Ministry of Health and Long Term Care. The framework sets out our approach to executive compensation and does not necessarily reflect the actual compensation of each designated executive. Negotiated contracts for individual executives are available and posted on our website.

As part of our commitment to the highest standards of accountability, Sault Area Hospital is sharing publicly our Executive Compensation Framework. We are also inviting feedback and engagement from the public on the contents of our framework.

To review Sault Area Hospital's Executive Compensation Framework, please click here [Link to Survey to be added](#)

Once you have reviewed our Executive Compensation Framework, we would welcome your feedback in the comment box provided. We ask that you provide your name and comments; however, neither will be released publicly. Please note all comments will be kept on file, as well as summarized and shared with our Board of Directors and Ministry of Health and Long Term Care. The deadline to submit comments is February 24, 2018. Your thoughtful and constructive input will help us to deliver quality care to our community. Please click here to share your feedback [Link to Survey to be added](#)

Sincerely,



Reg St. Amour
Sault Area Hospital Chair of the Board

INTRODUCTION

Serving a catchment population of approximately 115,000 with an approved complement of 293 beds, total assets of \$331 million and a total annual operating budget of \$214 million, Sault Area Hospital (SAH) provides primary, secondary and select tertiary services to residents in Sault Ste. Marie and the District of Algoma. SAH is extremely proud of our approximately 1850 dedicated staff, 370 physicians (active, supportive and locums) and 425+ volunteers who provide almost 65,000 hours of service each year.

DESIGNATED EXECUTIVE POSITIONS

“Designated Executives” are individuals who meet two criteria. First, the person is the head of a designated employer regardless of title; or is a vice president, chief administrative officer, chief operating officer or any other executive regardless of title. Second, the person is entitled to receive or could potentially receive \$100,000 or more in cash compensation in a given calendar year. In accordance with these criteria, Sault Area Hospital has identified the following positions as designated executives:

- President & Chief Executive Officer
- Chief of Staff
- Vice President, Medical Affairs
- Vice President, Clinical Operations & Chief Nursing Executive
- Vice President, Finance & Chief Financial Officer
- Vice President, Transformation & Chief Human Resources Officer

COMPENSATION PHILOSOPHY

Our Executive Compensation Philosophy is a set of guiding principles that drive compensation decision-making at Sault Area Hospital. It is designed to ensure that Sault Area Hospital retains and attracts top leadership at the executive level, as well as incent and reward highly skilled executives to provide excellent leadership and deliver on our vision, mission and values.

Strong executive leadership is required to build and foster “our iCcare way”, a culture where staff, physicians and volunteers live our values, recognize and respect the diversity of our community and always strive for continuous improvement. In order to achieve our mission of “exceptional people working together to provide outstanding care in Algoma” and deliver on our vision to “be recognized as the best hospital in Canada and an active partner in the best community health care system in the country”, the philosophy must reflect the real challenges of the healthcare environment and support the ability to recruit top level talent in Northern Ontario. The Executive Compensation Philosophy must enable the continued success in ensuring our community receives outstanding care through the use of evidence-informed practices, technology and innovation. Sault Area Hospital and our community need executive leadership that can continue to build on our recent successes, such as:

- The significant improvements in patient flow to ensure our patients get to the right bed as quickly as possible after being admitted through the Emergency Department;
- Continued delivery of a balanced budget in a very constrained and challenging environment;
- The Ministry approval and introduction of percutaneous coronary intervention (PCI) for our community;
- Culture and care transformation through our “iCcare Way” which is a values-based system of leadership and working every day built on delivering continuous improvement for our patients and community.

Our Executive Compensation Philosophy also sets our overall purpose and key principles based on affordability, flexibility, pay for performance, pay equity, the targeted position or percentile and our compensation market.

Overall Purpose	<i>To ensure that Sault Area Hospital retains and attracts top leadership at the executive level, the established Executive Compensation Framework is designed to incent and reward highly skilled executives to provide excellent leadership and deliver on our vision, mission, and values.</i>
Affordability	<ul style="list-style-type: none"> The framework will be designed such that it is affordable considering budgetary constraints.
Flexibility	<ul style="list-style-type: none"> The framework is designed to be flexible to accommodate shifting priorities, talent market pressures, challenges with recruitment based on our geographical location and overall organizational objectives.
Pay for Performance	<ul style="list-style-type: none"> The framework will support and reinforce behaviors consistent with a high-performance culture by rewarding employees on both individual and hospital performance. The framework will be highly correlated to performance and based on the achievement of key metrics aligned with the corporate strategy.
Pay Equity	<ul style="list-style-type: none"> Sault Area Hospital is committed to providing equitable compensation and benefits levels for positions with the same value (scope/complexity) to the organization.
Targeted Position	<ul style="list-style-type: none"> The compensation framework (base salary + performance pay) will be within the maximum allowable 50th percentile of the market and will adhere to the applicable prevailing legislation.
Compensation Market	<ul style="list-style-type: none"> For the purposes of the framework, our compensation market is focused on Ontario large community hospitals, teaching hospitals within Northern Ontario and/or teaching hospitals and other broader public sector organizations of similar complexity, size and scope.

DETERMINING COMPENSATION: COMPARATOR ORGANIZATIONS & COMPARATOR ANALYSIS

Comparator Organizations

The BPSECA requires a minimum of 8 comparators, including at least one Canadian organization. The Regulation also requires that chosen comparators meet all or most of the following criteria:

- The scope of responsibilities of the organization’s executives
- The type of operations the organization engages in
- The industries within which the organization competes for executives
- The size of the organization
- The location of the organization

As set out in our compensation philosophy, SAH has chosen to include more than 8 comparators to ensure a broad cross-section of the talent market, as well as robust data.

Scope of Responsibilities of the Organization’s Executives

Each of the comparator hospitals utilized for our framework have similar executive roles and are generally similar with respect to essential executive competencies (knowledge, skills and abilities), relative complexity and the level of accountability associated with each position. Each comparator hospital utilized participated in a survey and matched their executive positions to detailed role descriptions provided by the Ontario Hospital Association. This information, in addition to a review of hospital organizational structures and executive contracts was utilized to ensure appropriate and relevant benchmarking.

Type of Operations the Organization Engages in

Sault Area Hospital has chosen comparators that include Ontario large community hospitals and teaching hospitals within Northern Ontario. These are the same set of comparator hospitals that Sault Area Hospital utilizes when benchmarking other broader performance statistics.

Industries within which the Organization Competes for Executives

At an executive level, it is critical to attract and retain leaders with progressive leadership experience in the complex healthcare environment. For some executive level positions at Sault Area Hospital, such as the Vice President Clinical Operations and Chief Nursing Officer, this is a requirement based on required professional certification and licensing. At this time, SAH has chosen to not include other non-hospital broader public sector organizations of similar complexity, size, and scope; however, the hospital may choose to do so in the future.

The Size of the Organization

Sault Area Hospital's chosen comparators were reviewed utilizing data collected by the Ontario Hospital Association, as well as data available to us through other publicly reported mechanisms and direct contact with comparator hospitals.

The following data was utilized to determine a set of comparators with similar size and scope:

- Comparable number of hospital beds;
- Organizational headcount;
- Number of physicians with privileges;
- Annual inpatient volume;
- Annual medical training days;
- Annual research expense;
- Number of discrete sites; and
- Annual operating budget.

The Location of the Organization

All comparators utilized by Sault Area Hospital are hospitals in Ontario. Because of our location in Northern Ontario, Sault Area Hospital broadened other parameters related to size and scope to ensure appropriate and fair representation of Northern Ontario hospitals. It is our actual and projected experience that recruiting executive level talent to the North is a significant challenge from a retention perspective if the candidate recruited is not somehow connected to the North. For this reason, Sault Area Hospital considered it crucial to ensure we include relevant hospitals in Northern Ontario.

The following hospitals have been chosen as comparator organizations. The framework and analysis includes comparators for each designated executive position where there is a relevant and comparable executive position within that organization.

Grey Bruce Health Services	Quinte Health Care	Health Sciences North
Joseph Brant Hospital	North Bay Regional Health Centre	Hopital Montfort
Royal Victoria Regional Health Centre	Peterborough Regional Health Centre	Grand River Hospital
Mackenzie Health	Bluewater Health	Micheal Garron Hospital
Rough Valley Health System	Thunder Bay Regional Health Sciences Centre	St Joseph's Health Centre
North York General Hospital	Brant Community Healthcare System	Markham Stouffville Hospital
Queensway Carlton Hospital	Southlake Regional Health Centre	
Ontario Shores Centre for Mental Health Sciences (utilized for Vice President, Medical Affairs only)		

Comparator Analysis

The following table includes the maximum pay for each designated executive position in the chosen comparator organizations. For positions that are traditionally part-time (Chief of Staff and Vice President, Medical Affairs), the salaries below have been annualized. The pay for each comparator organization is inclusive of both salary and performance-related pay and reflects salaries that have been frozen since legislation was first introduced in March, 2010. The information in the table below has been obtained by utilizing data collected by the Ontario Hospital Association and verified through the use of the mandatory annual reporting of public sector salaries and the publication of executive salaries on hospital websites.

Comparator Hospital	President & Chief Executive Officer	Chief of Staff	Vice President, Medical Affairs	Vice President, Clinical Operations & Chief Nursing Executive	Vice President, Transformation & Chief Human Resources Officer	Vice President, Finance & Chief Financial Officer
A.	304,500	250,010	180,166	180,166	N/A	174,447
B.	341,250	420,000	180,685	180,685	180,685	180,685
C.	356,195	375,000	N/A	214,854	N/A	195,234
D.	325,125	N/A	207,585	207,585	207,585	N/A
E.	435,565	N/A	N/A	237,193	206,530	245,000
F.	380,000	N/A	375,000	230,000	230,000	230,000
G.	563,730	N/A	N/A	439,202	340,487	340,487
H.	300,008	340,000	N/A	179,925	N/A	N/A
I.	350,000	375,000	375,000	217,861	N/A	176,800
J.	375,000	300,000	399,999	236,999	195,000	212,226
K.	481,200	328,125	N/A	222,784	210,000	217,350
L.	440,000	385,000	N/A	234,000	196,900	234,300
M.	425,000	313,500	217,484	185,000	217,484	225,000
N.	473,000	N/A	413,012	262,500	236,250	253,000
O.	350,000	280,000	N/A	239,597	N/A	N/A
P.	455,000	500,000	N/A	209,624	226,155	N/A
Q.	453,200	385,000	N/A	249,700	258,500	253,000
R.	462,000	N/A	371,181	269,500	209,000	N/A
S.	420,900	379,236	N/A	250,008	182,520	N/A
T.	317,613	333,333	N/A	176,241	185,088	176,241
U.	N/A	N/A	377,857	N/A	N/A	N/A
50th Percentile				226,392		212,226
48.5th Percentile	\$388,793	\$350,675				
43rd Percentile			\$351,200			

The comparators and overall framework will be formally reviewed by the Board of Directors every three years, as well as in the event of any significant change.

SALARY & PERFORMANCE-RELATED PAY

As per the Regulation, designated executive compensation shall be capped at the 50th percentile of comparator organizations. Recalculation of the maximum pay can only occur when there is “significant restructuring” or at any other time where it is “warranted in the circumstances.” In addition, under the Excellent Care for All Act, hospitals must link executive compensation to the quality improvement targets set out in the hospital’s quality improvement plan. In compliance with the requirements of the Regulation, the Sault Area Hospital designated executive maximum total compensation is outlined below.

The following table demonstrates, by position, the minimum and maximum pay (base salary + pay for performance) for each SAH executive position. For positions that are traditionally part-time (Chief of Staff and Vice President, Medical Affairs), the salaries below have been annualized. SAH has chosen the 50th, 48.5th and 43rd percentile primarily because of the need to remain competitive and retain talent, recognize the experience of current incumbents, the difficulty experienced in recruiting experienced executives given our location, as well as the percentage allocated to pay for performance. These factors are aligned with our compensation philosophy.

Sault Area Hospital Position	Minimum of Salary and Performance Related Pay	Maximum of Salary and Performance Related Pay	Minimum Pay @ Risk for Achieving Performance Metrics
President & Chief Executive Officer	\$ 311,034.80	\$ 388,793.50	5%
Chief of Staff (annualized salaries)	\$ 280,540.00	\$ 350,675.00	5%
Vice President, Medical Affairs (annualized salaries)	\$ 280,960.31	\$ 351,200.39	3%
Vice President, Clinical Operations & Chief Nursing Executive	\$ 181,113.60	\$ 226,392.00	3%
Vice President, Chief Financial Officer	\$ 169,780.80	\$ 212,226.00	3%
Vice President, Chief Human Resources Officer			

As per the Regulation, SAH must establish their designated executive pay envelope, as well as the rate of increase that may be applied to the envelope once per year. SAH is required to calculate our “salary and performance-related pay envelope” according to the following formula: $P + (P \times R)$. In this formula, P = the actual amount of salary and performance-related pay that was paid to the entire group of designated executives at SAH in the previous pay year, while R = the rate of increase that may be applied to the envelope once per year, and which cannot be higher than the approved maximum rate of increase in the envelope. The sum of salary and performance related pay for the most recently completed pay year (“P”) for SAH is \$1,281,645.69 and the maximum rate of increase (“R”) to the envelope determined by SAH is 5%.

In determining this rate of increase, SAH is required by the regulation to consider the following criteria:

- The financial and compensation priorities of the government of Ontario as set out in a number of specified public sources.
- Recent executive compensation trends in the Ontario BPS and Canadian public sector in the same industry in which the organization competes for executives;
- A comparison between the percentages of operating budgets used for executive compensation as between the organization and its comparator organizations;
- The effect on attracting and retaining talent to the organization’s executive positions and salary/performance pay compression as between executives and those who report to them; and
- Any significant expansion in operations (but not if it is the result of a significant organizational restructuring).

SAH fully considered all of the criteria above with a focus on the compensation trends in the Ontario and Canadian public sector and the effect on attracting and retaining talent. An important element in retaining talent is fair compensation practices. In determining the maximum rate of increase, importance was placed on alignment to pay principles applied across all other non-union positions at SAH including the placement of employees on established wage grids based on recent, relevant full time experience. In addition, strong consideration was given to our historical challenges in recruiting experienced executives to our community. The Board also focused on recent compensation trends in the Ontario Public Service and the fact that executive salaries have been frozen since 2010. SAH President & CEO Compensation as a percentage of our operating budget is aligned to the average (0.16%) and overall executive compensation is less than 1% of operating budget (0.71%).

OTHER ELEMENTS OF COMPENSATION

Subject to the Employment Standards Act, the following elements are not permitted as part of designated executive compensation packages:

- Payments or other benefits provided in lieu of perks;
- Signing bonuses;
- Retention bonuses;
- Cash housing allowances;
- Insured benefits that are not generally provided to non-executive managers;

- Termination payments, including payments in lieu of notice of termination, and severance payments that in total equal more than 24 times the average monthly salary of the designated executive;
- Termination or severance payments that are payable in the event of termination for cause;
- Paid administrative leave (except in the college or university sector);
- Paid administrative leave that accrues at a rate in excess of 10.4 paid weeks per year (in the college or university sector); and
- Payments in lieu of administrative leave.

Other than salary and performance pay, designated employers are not permitted to provide an element of compensation to a designated executive unless the same element is also provided, in the same manner and relative amount, to non-executive managers generally. Non-executive managers are defined in the Regulation as employees and office holders who exercise managerial functions and who directly report to one or more designated executives. At Sault Area Hospital, this is the Director level of management. The only exception to this is if the element is required for the performance of the designated executive’s job, or is otherwise required for critical business reasons.

Element of Total Compensation Plan	Description
Vacation	A vacation plan with the same minimum/maximum accruals available to all full-time Directors at the hospital.
Percent in lieu of Vacation	Available to all part-time employees who are not eligible for paid vacation.
Float Days	A benefit provided to all Managers (2 per calendar year + 1 float day per week of on call)
Extended Health & Dental Benefits	A package available to all full-time employees. The premium cost is split between the employee and the hospital.
Semi Private Hospitalization	A benefit provided to all hospital employees, hospital paid.
Percent in lieu of Benefits	Available to all part-time employees who are not eligible to participate in the hospital health and dental benefit plans.
Hospital of Ontario Pension Plan (HOOPP)	All full-time employees are enrolled in HOOPP and SAH’s contributions are paid in accordance with HOOPP.
Hospital of Ontario Disability Income Plan (HOODIP)	All full-time employees are eligible for sick leave according to the provisions of HOODIP.
Long Term Disability	An income replacement benefit provided to all full-time employees. The premium cost is split between the employee and the hospital.
Termination Without Cause Provision	A minimum of 12 month’s salary to a maximum of 24 months, based on tenure and service.

ONGOING COMPLIANCE

As per the Regulation, should Sault Area Hospital determine the need to recalculate executive compensation due to “significant restructuring” or at any other time where it is “warranted in the circumstances”, the updated and revised framework shall be publicly posted. In addition, Sault Area Hospital will consult publicly on the addition of any new element of compensation to the executive compensation framework.

As per the compliance directive issued by the President of the Treasury Board, the board chair will attest that the Sault Area Hospital framework is compliant with all required terms of the Regulation. In addition, and as required by the Regulation, Sault Area Hospital will submit a separate annual compliance report that the compensation provided to executives in that year is in accordance with the terms of the framework.

FREQUENTLY ASKED QUESTIONS & ANSWERS:

How was this framework developed?

The development of the framework was led by the Board of Directors and followed a 10 step process recommended by the Ontario Hospital Association. The final draft of the framework was approved by the Board of Directors, as well as the Ministry of Health prior to posting for public input. Feedback gathered through public consultation will be reviewed by the Board of Directors prior to the implementation of a final framework that will be posted on our website and become effective as of the date of posting.

How can I review the Regulation in its entirety?

Regulation 304/16 (Executive Compensation Framework) can be found utilizing the following link:

<http://www.ontario.ca/laws/regulation/160304>

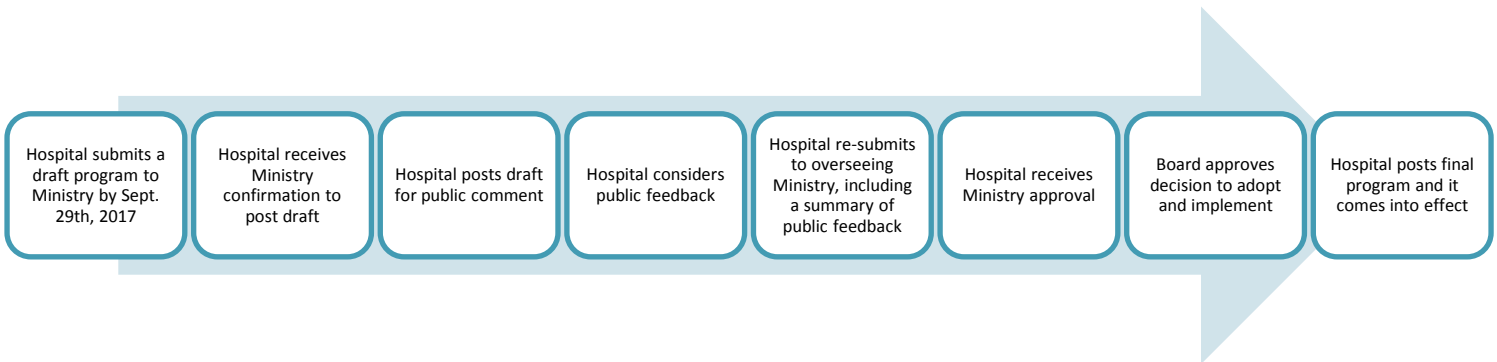
What was in place specific to Executive compensation prior to this new Regulation?

Several pieces of legislation have been put in place in Ontario since 2010 with the intent of restraining compensation for designated executives in the Broader Public Sector. These are:

- Public Sector Compensation Restraint to Protect Public Services Act – March, 2010
- Strong Action for Ontario Act – March, 2012
- Broader Public Sector Executive Compensation Act – March, 2015

When does the new compensation framework take effect? Is the compensation freeze is over?

The visual below demonstrates the process and steps required before the new framework takes effect.



In addition the Regulation also provides that, where a designated executive holds his or her position immediately before the effective date of the compensation framework and he or she continues in that position under the same contract or agreement or a renewal of it, the compensation plan in effect immediately before the effective date remains in effect even if it provides for compensation that is greater than that authorized in the framework. However, any increase in an element of compensation provided for in the compensation plan, but that has not been implemented on or before the effective date of the compensation framework, will not be valid or payable to the extent it is not consistent with the applicable framework.

As per the Regulation, the effect of the compensation framework for existing executives is grandfathered for three years. Three years after the framework comes into effect, the compensation plans that provide for remuneration inconsistent with the compensation framework will not be valid or payable to the extent the plans do not conform to the compensation framework.

Do the contracts of all current designated executives need to be grand-parented in accordance with the Regulation, or can some designated executives be grand-parented while others move to the new compensation program?

Hospitals have the option of deciding whether to maintain existing contracts subject to the limitations imposed by the Broader Public Sector Executive Compensation Act and the Regulation, or whether to have some or all of the designated executives captured by the compensation program upon implementation.

Appendix A – Specific Roles Benchmarked at Each Comparator Hospital

Comparator Hospital	President & Chief Executive Officer Comparator Roles	Chief of Staff Comparator Roles	Vice President, Medical Affairs Comparator Roles	Vice President, Clinical Operations & Chief Nursing Executive Comparator Roles	Vice President, Transformation & Chief Human Resources Officer Comparator Roles	Vice President, Finance & Chief Financial Officer Comparator Roles
Grey Bruce Health Services	President & CEO	Chief of Staff	Vice President, Clinical Services	Vice President, Clinical Services		Vice President, Corporate, Diagnostic Imaging & Chief Financial Officer
Quinte Health Care	President & CEO	Chief of Staff	Vice President	Vice President & Chief Nursing Officer	Vice President	Vice President & Chief Financial Officer
Joseph Brant Hospital	President & CEO	Chief of Staff	N/A	VP, Patient Care Services & Chief Nursing Executive		Vice President, Finance, Corp Services & Chief Financial Officer
North Bay Regional Health Centre	President & CEO	N/A	Vice President, Corporate	Vice President, Clinical & Chief Nursing Executive	Vice President, Corporate	
Royal Victoria Regional Health Centre	President & CEO	N/A	N/A	Vice President, Patient Programs & Chief Nursing Executive	Vice President & Chief Human Resources Officer	Vice President Corporate Services & Chief Financial Officer
Peterborough Regional Health Centre	President & CEO	N/A	Vice President & Chief Medical Officer	Vice President, Chief Nursing Executive & Chief Information Officer	Vice President	Vice President & Chief Financial Officer
Mackenzie Health	President & CEO	N/A	N/A	EVP, Chief Operating Officer & Chief Nursing Executive	Chief Human Resources Officer	Deputy Chief Financial Officer
Bluewater Health	President & CEO	Chief of Staff	N/A	Vice President, Operations		
Health Sciences North	President & CEO	Vice President, Medical Affairs & Chief of Staff	Vice President, Medical & Academic Affairs	Vice President, Patient Services, Clinical Transformation & Chief Nursing Executive		Vice President & Chief Financial Officer
Thunder Bay Regional Health Sciences Centre	President & CEO	Chief of Staff	Vice President, Medical & Academic Affairs	EVP, Patient Services & Chief Nursing Executive	Vice President, Human Resources	EVP Corporate Services & Operations
Hopital Montfort	President & CEO	Chief of Staff	N/A	Vice President, Patient Experience, Clinical Programs & Chief Nursing Executive	Chief Human Resources Executive	Chief Financial Officer
Grand River Hospital	President & CEO	Chief of Staff	N/A	Vice President, Clinical Services & Chief Nursing Executive	Vice President, Human Resources	Vice President, Finance & Admin, Chief Financial Officer
Micheal Garron Hospital	President & CEO	Chief of Staff	Vice President, Program Support	Chief Nursing Executive	Vice President, Program Support	Vice President, Corporate Support & Chief Financial Officer
North York General Hospital	President & CEO	N/A	Vice President, Medical & Academic Affairs	Vice President, Clinical Programs, Quality & Risk, Chief Nursing Executive	Vice President, People, Strategy & Clinical Support	Vice President, Information, Corporate Services & Chief Financial Officer
Brant Community Healthcare System	President & CEO	Chief of Staff	N/A	Chief Operating Officer/Chief Nursing Executive		
Rouge Valley Health System	President & CEO	Chief of Staff	N/A	Vice President, Regional Programs and Chief Nursing Executive	Vice President & Chief Transformation Officer	
Southlake Regional Health Centre	President & CEO	Chief of Staff	N/A	Vice President, Patient Experience & Chief Nursing Officer	Vice President, Our People, Corporate Services & Chief Human Resources Officer	Vice President, Accountable Care, Chief Financial Officer & Chief Information Officer
St Joseph's Health Centre	President & CEO	N/A	Vice President, Medical Affairs	Vice President, Clinical Services	Vice President, Human Resources	
Markham Stouffville Hospital	President & CEO	Chief of Staff	N/A	EVP, Patient Services & Chief Practice Officer	Chief Human Resources Officer	
Queensway Carlton Hospital	President & CEO	Chief of Staff	N/A	Vice President, Care	Vice President, Human Resources & Organizational Effectiveness	Vice President, Finance & Corporate Services
Ontario Shores Centre for Mental Health Sciences	N/A	N/A	Vice President, Medical Affairs			