

# Annual Report



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This year marks the 25th Anniversary of the Ontario Council on Community Health Accreditation. In 1981, a committed group of public health professionals identified the need to promote excellence and accountability in public health and developed an accreditation program for public health agencies which was unique in Canada. During the next 25 years, while the mission and vision remained the same, the accreditation standards and process were expanded and enhanced to better reflect the numerous changes in the structure and delivery of public health programs in Ontario.

In 1981, the accreditation process was primarily based on a set of administrative and organizational standards. It was OCCHA's belief that the establishment of strong organizational and administrative processes provided the foundation for the delivery of effective and efficient programs and services. Since that time, the accreditation process has improved through the addition of a number of standards related to program planning, implementation, monitoring and evaluation. Several years ago, the OCCHA Board of Directors further strengthened its program through the addition of standards and processes to support and facilitate continuous quality improvement in public health units. In addition, OCCHA participated in a number of provincial initiatives and committees in the support of public health renewal.

The adaptability of the accreditation program has contributed to OCCHA's longevity and growth. However, the greatest strength of both the organization and the accreditation process has always been public health itself. The accreditation process belongs to all public health units and public health professionals. It is through the expertise, feedback, support and commitment of public health providers that OCCHA has remained both relevant and credible. So I would like to take this opportunity to sincerely thank all those, who over the past 25 years, have given so much time to ensuring the sustainability of the organization, including: all past and current board members; OCCHA surveyors; our member organizations; public health units; boards of health; accreditation coordinators; OCCHA staff members, and our community partners. I would also like to thank the Ministry of Health and Long -Term Care, Public Health Division, for their ongoing support and their recognition of the need for accountability in public health.

OCCHA looks forward to our continued collaboration over the next twenty-five years in promoting accountability and excellence in public health.

Report of the Executive Director  
*Meighan Finlay*

## ONTARIO COUNCIL ON COMMUNITY HEALTH ACCREDITATION 2005-2006 Board of Directors

### PRESIDENT

*Karen Boughner*

ANDSOOHA - Public Health  
Nursing Management

### VICE-PRESIDENT

*Bonnie Jeffrey*

Ontario Association of Public  
Health Dentistry

### SECRETARY-TREASURER

*Ellen Wodchis*

Health Promotion Ontario (public  
health)

### PAST PRESIDENT

*Kris Millan*

Ontario Society of Nutrition  
Professionals in Public Health

## Members at Large

*Jason Garay*

Association of Public Health Epidemiologists in  
Ontario

*Catherine Boskie*

Association of Ontario Public Health Business  
Administrators

*Allan Northan*

Association of Local Public Health Agencies,  
Council of Ontario Medical Officers of Health

*Helen Mulligan*

Association of Local Public Health Agencies,  
Board of Health Section

*Daina Mueller*

Ontario Public Health Association

*Robert Thompson*

Association of Supervisors of Public Health  
Inspectors of Ontario

The Ontario Council on Community Health Accreditation (OCCHA) was formed in 1981. OCCHA is an independent agency directed by a Board of Directors whose members are appointed by professional associations involved in public health.

## Mission Statement

The Ontario Council on Community Health Accreditation promotes accountability and excellence in public health programs and services.

## Mandate

To establish, review and revise accreditation standards related to governance, administration and program planning, implementation monitoring and evaluation.

To enhance knowledge through consultation and shared experience.

To measure agency performance against peer-set standards, provide comprehensive reports and confer accreditation awards.

To promote and facilitate continuous quality improvement in public health units through consultation across Ontario health units.

To work in partnership with other community health organizations and relevant provincial ministries, to promote excellence in public health programs and services.

## Strategic Directions

1. Strengthen OCCHA's partnership with the MOHLTC by creating opportunities for collaboration in support of public health renewal.
2. Enhance customer service and marketing of OCCHA and the accreditation process and nurture/strengthen alliances and partnerships in support of OCCHA's mission.
3. To encourage and facilitate organizational excellence and ongoing quality of practice (Continuous Quality Improvement) in public health.
4. Build the capacity to fulfill OCCHA's role in support of public health renewal.

## Report of the Principles & Standards Committee

Chair: Ellen Wodchis  
Members: Daina Mueller, Catherine Bloskie, Allan Northan, Jason Garay and Karen Boughner (ex-officio),

During the year April 1, 2005 to March 31, 2006 the Principles and Standards (P & S) Committee held three meetings.

Highlights of the P & S committee during this time period, which were brought forward to the OCCHA board, included the following:

- Three health units were granted accreditation awards;
- Work continued on reviewing the survey process and accreditation standards to better reflect the Mandatory Health Programs and Services Guidelines, to further reduce duplication and to facilitate the preparation of on-site evidence. Final changes to both the standards and the accreditation process were approved in January and immediately implemented
- A successful surveyor training workshop was conducted in February 2006; and
- Policies and procedures related to amalgamations and provisional accreditation were reviewed and developed. These policies will be submitted to the OCCHA Board of Directors for approval later this year.

I sincerely thank all members of the P & S Committee and the OCCHA Executive Director for dedication and thoughtful review of the new standards over the past year. The committee looks forward to a productive year ahead.

*Ellen Wodchis*

## Report of the Marketing Committee

Chair: Rob Thompson  
Members: Helen Mulligan, Bonnie Jeffrey, Karen Boughner

In keeping with OCCHA's strategic plan, we continued to focus on the marketing of the accreditation process. To that end, a submission was made to the Capacity Review Committee (CRC) regarding the role of the accreditation process with respect to public health accountability in Ontario. We were pleased to see Recommendation 16 of the CRC's final report that, "Legislation should be amended to mandate accreditation for all public health units and to require public reporting of accreditation status."

The OCCHA Board of Directors looks forward to collaborating with the Ministry of Health and Long-Term Care to facilitate implementation of the CRC's recommendations.

In March the committee reviewed our implementation plan for those strategic directions related to marketing. Areas identified as high priorities for OCCHA included: ensuring that accreditation is on the agenda of member organizations through the use of regular reports; maintenance and regular updates to our web site; review of the OCCHA seal of excellence; conducting further surveyor training workshops, and enhancing our collaboration with other public health and quality assurance agencies.

My thanks to the Marketing Committee members for their commitment to enhancing the accreditation process and the development of a functional implementation plan.

*Rob Thompson*

# Financial Statements

Statement of Financial Position

As at March 31, 2006

	2006	2005
<b>Assets</b>		
Cash	\$ 144,053	\$ 81,250
Short-term investments (Note 3)	47,287	76,124
Accounts receivable	1,071	1,351
Prepaid expenses	1,580	1,596
	<u>193,991</u>	<u>160,321</u>
<b>Liabilities</b>		
Accounts payable	\$18,646	\$ 3,758
Deferred revenue	22,350	10,198
	<u>40,996</u>	<u>13,956</u>
Net assets	\$ 152,995	\$ 146,365

Net Assets Represented by:

Accumulated surplus	\$ 152,995	\$ 146,365
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Statement of Operating Funds

Year Ended March 31, 2006

	2006		2005
	Budget	Actual	Actual
<b>Revenue</b>			
Ministry of Health and Long-Term Care Grant	\$ 150,550	\$ 116,000	\$ 116,000
Accreditation maintenance fees	38,500	41,250	39,021
Accreditation survey fees	11,000	17,100	7,700
Interest income	1,100	1,213	794
Miscellaneous income	-	-	448
	<u>201,150</u>	<u>175,563</u>	<u>163,963</u>
<b>Expenditures</b>			
CQI activities	4,000	3,452	966
Board and committee meetings	15,000	12,183	12,230
Marketing and travel	4,200	5,392	4,228
Insurance	2,500	2,148	2,155
Equipment rental	700	1,052	1,341
Office and computer	4,500	3,774	9,495
Photocopying and printing	1,200	1,039	100
Postage and courier	800	1,017	752
Professional development	750	748	673
Professional services	4,000	2,000	4,000
Rent and occupancy	13,500	12,670	12,124
Salaries and benefits	130,000	97,280	89,129
Telephone and facsimile	4,000	3,832	3,869
Surveyor training workshop	5,000	5,087	4,837
Accreditation survey expenses	11,000	17,259	5,674
	<u>201,150</u>	<u>168,933</u>	<u>151,573</u>
Surplus	-	6,630	12,390
Surplus, beginning of year	146,365	146,365	133,975
Surplus, end of year	\$146,365	152,995	\$146,365

See accompanying notes to financial statements.

## Notes to Financial Statements

### 1. Purpose of organization

Ontario Council on Community Health Accreditation ("OCCHA") is a non-profit corporation incorporated under the Ontario Business Corporations Act without share capital on October 31, 1981.

OCCHA's conviction is that the provision of quality public health programs and services requires sound administrative and operational processes. Through the accreditation process, OCCHA provides an independent, voluntary, peer evaluation of the administrative and operational aspects of local public health agencies.

### 2. Significant accounting policies

The financial statements of Ontario Council on Community Health Accreditation are prepared in accordance with Canadian generally accepted accounting principles applicable to non-profit organizations described below.

#### (a) Accrual basis of accounting

These financial statements are prepared on the accrual basis of accounting for revenues and expenditures.

#### (b) Capital assets

Capital assets are recorded at cost and expensed in the year of acquisition net of any grants received for that purpose.

#### (c) Revenue recognition

Revenue received prior to the completion of accreditation and other projects is deferred to the period of completion.

#### (d) Income taxes

The Council is a not-for-profit organization and is therefore exempt from income taxes under the Income Tax Act.

### 3. Short-term investments

Short-term investments consist of GICs bearing interest at an average rate of 1.65% per annum.

### 4. Statement of cash flows

A statement of cash flows has not been provided as it would not provide any additional meaningful information.

### 5. Budget information

The budget figures as presented for comparison purposes are unaudited and are those approved by the Board of Directors. No audit opinion is expressed or implied.

### 6. Contracts and commitments

Future minimum payments required under contractual obligations that have remaining terms in excess of one year are:

2007	\$34,034
2008	\$13,622
	<u>\$47,656</u>

## Auditors' Report

To the Directors of the

Ontario Council on Community Health Accreditation

We have audited the statement of financial position of **Ontario Council on Community Health Accreditation** as at **March 31, 2006** and the statement of operating funds for the year then ended. These financial statements are the responsibility of the Council's management. Our responsibility is to express an opinion on this financial statement based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the **Ontario Council on Community Health Accreditation**, as at **March 31, 2006** and the results of its operations for the year then ended in accordance with Canadian generally accepted accounting principles.

Mississauga, Ontario  
May 16, 2006

Clarkson Rouble LLP  
Chartered Accountants

## Report of the President

As with many sectors in health care, public health has had an unprecedented year of "transformation" and growth within the system. OCCHA, with its mandate to "promote excellence in public health programs and services", has strived to continue to address the needs of the field while continuously refining the tools used for public health accreditation.

A significant amount of OCCHA's energy over the past year has been dedicated to three areas. The first has been to provide timely and accurate information on the role accreditation can play in the restructuring process for public health across Ontario. To this end, Meighan Finlay, OCCHA's Executive Director, has actively participated on the CRC Reference Panel and the roundtable discussion on accountability.

Secondly, the Board continued its work to revise the accreditation standards to reflect the much appreciated feedback from the health units given over the past year. The revised standards and accompanying documentation will provide an easier, more comprehensive process for accreditation.

The third area of focus has been the establishment of the Continuous Quality Improvement Advisory Group

to facilitate the integration of CQI principles into the accreditation process and the development of a quality framework for public health.

OCCHA would like to thank all those who have provided their expertise and input into the accreditation process over the past year. Public Health professionals have always been willing to give of their time and talent. The quality and quantity of the information from the field on both the standards review and CQI framework are clear examples of that dedication to public health.

This is an exciting time for OCCHA. Times of change provide many opportunities for potential growth and improvement. The release of the Capacity Review Committee's report outlines a clear role for accreditation in the future of public health service delivery. OCCHA's Board of Directors and staff have the skills, dedication and commitment to ensuring that a comprehensive accreditation process is available to public health providers. We look forward to the challenges and being part of the revitalization of public health in Ontario.

*Karen Boughner*

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## Report of the CQI Committee

Chair: Kris Millan  
Members: Karen Boughner, Ellen Wodchis

The CQI Committee was formed in 2005 as a standing committee of the OCCHA Board of Directors. Its purpose is to improve OCCHA's ability to encourage and facilitate organizational excellence and ongoing quality of practice (i.e., CQI) in public health. The Committee met several times over the course of 2005-2006 and accomplished the following activities:

- Development of terms of reference
- Development of a workplan
- Development of a CQI Framework
- Development of the CQI Advisory Group terms of reference

The CQI Advisory Group, with representation from twenty health units, met for the first time on February 17, 2006. The purpose of the meeting was to approve the terms of reference and review and provide feedback on the CQI Framework. The meeting was successful and generated a great deal of enthusiasm for quality improvement in the public health system. The Advisory Group met for a second time via teleconference to further refine the CQI Framework.

I would like to thank the inaugural members of the CQI Committee for their hard work. Also, thank you to the CQI Advisory Group for their interest in our work and commitment to quality improvement in public health.

*Kris Millan*

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## Accredited Health Units

Algoma Health Unit

Brant County Health Unit

Durham Region Health Department

City of Hamilton Public Health Services

Kingston, Frontenac and Lennox & Addington Public Health

Leeds, Grenville and Lanark District Health Unit

Middlesex-London Health Unit

Niagara Region Public Health Department

Ottawa Public Health

Perth District Health Unit

Simcoe Muskoka District Health Unit

Sudbury and District Health Unit

Wellington-Dufferin-Guelph Public Health