SUBJECT: Public Health Accreditation Process Changes (City Wide) BOH08027

RECOMMENDATION:

(a) That the Board of Health approve postponing the next Public Health Accreditation survey from June 2009 for twelve (12) months as outlined in Report BOH08027.

(b) That the members of the Board of Health direct staff to report back prior to the application submission with regards to the application process, timelines and Board of Health participation.

Dr. Elizabeth Richardson, Medical Officer of Health
Public Health Services

EXECUTIVE SUMMARY:

Recent changes to public health in the province such as the development of the new Ontario Public Health Standards (OPHS) and protocols, has prompted the Ontario Council on Community Health Accreditation (OCCHA), our provincial accrediting body, to revise both the accreditation standards and process. The revised accreditation standards will reflect the new OPHS and the accreditation process will change from a variable two (2) to four (4) year cycle to a fixed three (3) year cycle for a complete survey and an annual review component.

In order to facilitate the transition to the new process, OCCHA is providing PHS with a choice of two (2) options with regards to their re-accreditation timetable; (1) to proceed on schedule using the old standards then re-survey between years one and two with the new standards or (2) postpone their survey to 2010 using the new standards. Staff is recommending Option 2.
Public Health Accreditation is the official recognition of excellence in public health programming and services to the public, local agencies, professional associations and local, regional and provincial governments. Accreditation is also a requirement for those health units who receive grants from the province to carry out public health research, education (PHRED) activities in collaboration with a university. PHS has been continuously accredited through the OCCHA process since 1989.

The last survey for Hamilton took place in June 2005 at which time Public Health Services (PHS), as part of the Public Health and Community Services Department, was granted a four (4) year award with the next re-accreditation scheduled for June 2009.

**BACKGROUND:**

The Ontario Council on Community Health Accreditation (OCCHA) is an independent agency directed by a board whose members are appointed by professional associations involved in local official public health agencies. Public Health Accreditation through OCCHA is the process whereby the organizational and administrative aspects of a board of health/public health agency, including program planning, implementation, monitoring and evaluation, are measured against peer set principles and standards. Achieving the accreditation status demonstrates accountability to provincial and local funding agencies, our governing board, and to the public that we have achieved peer set standards for effective and efficient delivery of public health programs and services.

Accreditation affects all Divisions of PHS, regardless of the funding source, and includes the Board of Health as the governing body. In addition, specific administrative areas of the organization at the corporate level are evaluated. One program within the Family Health Division, Child and Adolescent Services, who receives 100% funding from the Ministry of Children and Youth Services, undergoes accreditation through another accrediting body, Children’s Mental Health Ontario (CMHO). In order to complement their process and avoid duplication, CMHO recognizes the OCCHA process and endeavours to coordinate their timetable so that the two processes occur within several months of each other. In conversations with CMHO, Child and Adolescent Services have been granted an extension to 2010, should OCCHA’s option to postpone be approved by the Board of Health as described below.

As mentioned in a number of previous Board of Health reports, Public Health in Ontario is undergoing many changes as part of the overall strategy to rebuild public health capacity within the province. This includes the development of the new Ontario Public Health Standards (OPHS) and accompanying protocols. In 2009 these OPHS and protocols will be replacing the 1997 Mandatory Health Programs and Services Guidelines (MHPSG).

OCCHA’s board is endeavouring to complement changes being faced by Public Health Units in Ontario, by updating their standards to reflect the new OPHS and protocols and by revising the process of how they conduct their surveys. Formerly, accreditation surveys could occur every two (2) to four (4) years depending on the level of compliance with their standards. The new process will involve a standardized three (3)
year cycle, regardless of the level of compliance and an annual review component. The new standards and process will be implemented in January 2009.

PHS was originally due to have its next accreditation survey in June 2009. OCCHA recognizes how important it is that public health units focus their limited staff resources particularly over the next year or more on OPHS implementation. One way in which OCCHA is supporting public health units originally scheduled for re-accreditation in 2009, is by giving them two (2) options that will facilitate the continuity of accreditation standing during the transition. These options are:

**Option 1:** Health units in transition may choose to undergo a re-accreditation survey on their regularly scheduled date in 2009 using the current accreditation standards. Health units will be required to transition from the current accreditation process and standards to the revised process and standards between accredited years 1 and 2. This would require PHS to do two (2) surveys within three (3) years (2009 and in 2010 or 2011).

**Option 2:** Health units in transition may elect to “bridge” their accreditation award for a period of twelve (12) months, which will result in their undergoing a re-accreditation survey using the revised accreditation process and standards in 2010. This would require PHS to do one (1) survey in 2010.

Staff’s recommendation is to select Option 2, or postpone our next survey to 2010 using the revised accreditation standards based on the new OPHS and protocols.

Staff will report back to the Board of Health prior to the application submissions for the next survey. This report will outline the complete accreditation process and confirm the dates for the on-site survey and the participation of the Board of Health in the process.

**ANALYSIS/RATIONALE:**

The rationale for delaying the accreditation survey process until 2010 is three fold.

(1) **Efficient use of staff resources** – Preparation for a survey involves the full time commitment of the Accreditation Coordinator and part time commitment from a number of staff from all divisions for at least a year prior to the survey. Preparing for a survey in 2009 would mean starting now and the staff resources would be spent on the old accreditation standards based on the now outdated MHPSG. An additional survey would be required within 2 years.

(2) **Strategic focus of staff resources** – If the survey was not postponed, time spent preparing for the survey between now and June 2009 would be time taken away from implementing the new OPHS and protocols. In addition to planning and implementing activities of the OPHS, many staff will be involved in training. Implementation of OPHS and protocols and preparing for an accreditation survey would both have deadlines that would have to be met. With limited staff resources there would be a risk of not meeting our OPHS deadlines.
(3) Benefits of the Accreditation continuous improvement process – The Accreditation process is a key continuous improvement tool for PHS. We use this process to learn about areas where PHS can improve and then apply the learning. If there is not sufficient time to implement improvements before preparing for the next survey, this benefit is not realized.

**ALTERNATIVES FOR CONSIDERATION:**

The alternative is to go forward as originally scheduled for a June 2009 survey using the old accreditation standards which are based on the outdated MHPSG. An application would need to be submitted by November 2008, a comprehensive questionnaire would need to be completed and submitted by March 2009 and the follow-up on-site survey in June 2009. PHS would then be required to complete another full application, questionnaire and on-site survey using the new accreditation standards between June 2010 and 2011. This would require further time and effort that need to be focused on transitioning to the new OPHS and protocols.

**FINANCIAL/STAFFING/LEGAL IMPLICATIONS:**

**Financial Implications**
OCCHA is in the process of establishing their new fee schedule based on their new three (3) year cycle which will begin in 2009.

**Staffing Implications**
Preparing for an accreditation survey requires a full time commitment of the Accreditation Coordinator and part time commitment from all divisions. All staff is involved to varying degrees in the preparation for a survey. Postponing the survey to 2010 would be a more efficient use of staff resources. Preparing for both an accreditation survey and implementing the new OPHS in the same year would be spreading limited staff resources too thin.

**Legal Implications**
N/A

**POLICIES AFFECTING PROPOSAL:**

The Ministry of Health and Long Term Care requires public health agencies that receive grants for public health research, education and evaluation (PHRED) activities in collaboration with a university to be an accredited organization.

Although accreditation is not currently mandatory for all public health units, in May 2006, the Capacity Review Committee (CRC), in its Final Report recommended that “legislation should be amended to mandate accreditation for all Public Health Units and to require public reporting of accreditation status”.

---

Postponing our survey supports both PHS’ and the City’s visions of being an effective and efficient organization, maximizing the use of our staff resources to the greatest benefit of the community and taxpayer.

**RELEVANT CONSULTATION:**

N/A

**CITY STRATEGIC COMMITMENT:**

By evaluating the “Triple Bottom Line”, (community, environment, economic implications) we can make choices that create value across all three bottom lines, moving us closer to our vision for a sustainable community, and Provincial interests.

Community Well-Being is enhanced.  ☑ Yes  ☐ No

Engaging in one survey process allows PHS staff resources to be freed up to implement OPHS and protocols. A continued commitment to the Accreditation survey process ensures that our operations continually improve to better serve our community and its well-being.

Environmental Well-Being is enhanced.  ☑ Yes  ☐ No

By postponing the survey, there will be a decrease in the time spent on preparation of an additional accreditation survey. This will lead to a greater focus on environmental issues as opposed to issues related to the old standards.

Economic Well-Being is enhanced.  ☑ Yes  ☐ No

This recommendation ensures that PHS focusses its staff resources in a cost effective and efficient manner to implement its OPHS and protocols, while avoiding the use of staff resources for multiple survey processes.

Does the option you are recommending create value across all three bottom lines?  ☑ Yes  ☐ No

Do the options you are recommending make Hamilton a City of choice for high performance public servants?  ☐ Yes  ☑ No

N/A