

Canadian Healthcare Association
Association canadienne des soins de santé

Advancing Healthcare
for Canadians

The Canadian Healthcare Association (CHA) is the federation of provincial and territorial hospital and health organizations across Canada. Through our members, CHA represents a broad continuum of care, including acute care, home and community care, long term care, public health, mental health, palliative care, addiction services, children, youth and family services, housing services, and professional and licensing bodies. These services are provided through regional health authorities, hospitals and other facilities and agencies that serve all Canadians and are governed by trustees who act in the public interest. CHA's mission is to improve the delivery of health services in Canada through policy development, advocacy and leadership. CHA's distance learning programs, conferences and publishing services contribute to this national leadership. CHA and our members are committed to realizing the vision of a publicly funded health system that provides access to a broad range of comparable health services across Canada.

ANNUAL REPORT 2001

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Report of the Chairman, Ken Ezeard

The Canadian Healthcare Association is an important voice for Canadian health care. As Canada's health system undergoes national and provincial reviews, all in the name of reforming our health system, our collective voice has never been more relevant

As Chairman of the CHA Board of Directors for 2001, I have served the Association during what I feel is a watershed time in our health system's history.

Over the years, CHA's positions on funding, sustainability, accountability, and system change have enriched the health debate. Our Association is, by all accounts, a voice of reason on complex and often emotional issues.

We have countered misinformation with fact. We speak out loudly and clearly in support of more federal funding. We support the desire of Canadians to have a publicly funded health system that is based on health need, not the ability to pay. And we strongly believe that with leadership from all levels of government, adequate and predictable funding, and appropriate system change our publicly funded health system is sustainable.

OUR SUCCESS LIES IN OUR DIVERSITY.

Our success lies in our diversity. We are an example of working together for consensus. Each and every member of our Association brings unique insight to the table. Our pan-Canadian perspective serves us well when we are asked for our solutions for revitalizing Canada's health system.

In 2001 CHA accomplished a lot. We appeared before the Commission On the Future of Health Care In Canada and presented our Ten-Point Plan entitled *A Responsive, Sustainable, Publicly Funded Health System in Canada: The Art of the Possible*. We released two major policy briefs — our accountability brief, *Towards Improved Accountability in the Health System: Getting from Here to There* and our private-public brief, *The Private-Public Mix in the Funding and Delivery of Health Services in Canada: Challenges and Opportunities*.

Our news conferences to release our policy briefs received substantial coverage. I was pleased to have the opportunity to represent CHA at our national news conference on Parliament Hill to release our submission to the Commission on the Future of Health Care in Canada. It was an important communications and advocacy opportunity for CHA, as our Ten-Point Plan summarizes CHA's positions on all the key issues in the health care debate.

I am also pleased that the federal government, the media, the leaders of the national healthcare reviews and other important stakeholders continue to seek CHA's opinions and input on a range of issues. It is important that CHA remain a relevant and valued national voice for health.

CHA has worked tirelessly over the years to ensure the government is aware of the health system's perspective. We are the only national voice for the health system and, as such, a most valuable player during this time of cross-country check-ups, national commissions and reviews, and an ever-widening debate about the future of health care in our country.

On the international scene, I was pleased to represent CHA at the March 2002 annual meeting of the Board of Directors of the American Hospital Association (AHA) in Washington, where I had the opportunity to identify CHA's position on a number of issues common to our two countries. In areas of sustainability, accountability, and appropriate system change, CHA and AHA are very closely aligned and could be working more closely together for the betterment of health care in both Canada and the United States.

Internally, CHA has also accomplished a lot during 2001-2002. We now have in place an effective process for the ongoing CEO evaluation, which is consistent with the goals of the organization. We have also continued to progress in each division of our association while coping with the difficult staff issues of loss, illness, and change. Our financial position continues to improve thus creating greater stability to integrate and absorb the dynamic changes occurring at the provincial level among our member organizations, as well as, at the national level.

We have achieved a great deal in our history. Indeed our future success partly rests on our strong and credible history. Our future success must build on our history as we continue to meet the needs of our member organizations. Our current financial security will help us in that mission, as will the success of each of the Association's divisions.

Many thanks to each Board member for your dedication and knowledge, and for your support while I was Chair. Thank you also to the Chairs and CEOs of CHA's member organizations for their insight into the realities of operating in Canada's health system and for the diversity of opinion offered to our Board. I would also like to thank CHA staff for their contribution to our success. In particular, I would like to thank our President and CEO, Sharon Sholzberg-Gray for being an excellent representative of the CHA Board and our member organizations and for her strong support to the Chair position throughout the year.

It has been a privilege to serve as Chair of CHA. Thank you for the opportunity and I look forward to CHA's continued role in the national debate on the future of health care in Canada.



Report of the President, Sharon Sholzberg-Gray

In 2001, as in other years, health care was the number one concern of Canadians. Nowhere has this been more evident than on the national scene where two high profile national health reviews are currently underway and where national media continue to give the issues facing Canada's health system front-page coverage.

As I have said many times before, CHA makes a difference in the health care debate. This year more than ever, I hear the positions of CHA resonate. On many occasions, I am pleasantly surprised to hear others outside the Association repeat our positions and use the language of our news releases, speeches and policies when debating health reform. This is just more proof to me that we are not only being heard but we are being listened to.

CHA's role as a national voice for the health system is needed now more than ever. Through our provincial and territorial members, we represent the health system managers and trustees who are responsible for implementing the changes suggested by current review processes.

We have a unique perspective to offer. Our members are responsible for providing needed health services to Canadians within the realities of increasing health needs, decreasing per capita budgets, ever-changing political landscapes, and often reduced control and autonomy of decision-making. CHA is a key stakeholder and we make that known at every opportunity.

Throughout 2001, CHA worked hard to demonstrate to the Commission on the Future of Health Care in Canada, to the Senate Standing Committee on Social Affairs, Science and Technology, to the media, to the House of Commons Standing Committee on Finance, to various government officials, and other opinion leaders in the health community, that with the right mix of leadership, funding, and system change Canada's publicly funded health system is sustainable.

We have outlined CHA's plan for sustaining our health system through our Ten-Point Plan entitled *A Responsive, Sustainable, Publicly Funded Health System in Canada: The Art of the Possible*. And we have managed to do it without compromising values or pitting one ideology against another.

This year, we also released two major policy briefs, *Towards Improved Accountability in the Health System: Getting from Here to There*, and *The Private-Public Mix in the Funding and Delivery of Health Services in Canada: Challenges and Opportunities*.

Our national news conference to release our Private-Public policy brief unfortunately coincided with the tragic events of September 11. We did, however, receive considerable follow-up interest from the media. Our Private-

Public policy has also informed our discussions with the Commission on the Future of Health Care in Canada and with the Senate Standing Committee on Social Affairs, Science and Technology.

Throughout 2001, CHA staff and I continued our communications and advocacy efforts with key government officials, health leaders and the media. Our media presence has been substantial this year. This is due, in part, to the need for a national perspective on government actions or health issues — something CHA is perfectly positioned to offer.

We also maintained our public presence through the annual National Leadership Conference and Exhibition in Winnipeg in June, 2001— which focused on health human resources, one of the biggest challenges facing the health system today. The Conference received substantial media coverage and, by all accounts from delegates, was a great success.

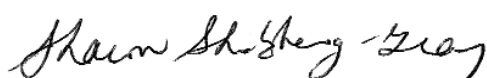
CHA'S ROLE AS A NATIONAL VOICE FOR THE HEALTH SYSTEM IS NEEDED NOW MORE THAN EVER.

CHA's Distance Education and Conferences Division has adopted the new name of CHA Learning as it continues to integrate services and meet its customers needs through both education and conferences. Our Publishing Division continues to offer the excellent Health Facilities Guide and new health titles as valuable industry tools. As well, CHA's financial picture is healthy. With continued planning and investment in such things as information technology, our Association will continue to be in a strong position to help shape health policy in Canada.

I would like to thank CHA's Board of Directors, the Chairs and CEOs of CHA's member organizations, and the staff of CHA for their perspective and valuable input, especially when we grapple with complex questions and diverse issues.

I would also like to recognize our outgoing Chairman, Ken Ezeard, whom I have worked closely with over the past year, for his abiding dedication and keen interest in the well being of CHA and its members.

2001 was a pivotal year in the health care debate. It looks like 2002 will be even more stimulating. As the pan-Canadian voice of the health system, I look forward to CHA's continued influence and success.



Financial Report

Canadian Healthcare Association
STATEMENT OF OPERATIONS

Year ended December 31

Association canadienne des soins de santé
ÉTAT DES RÉSULTATS

pour l'exercice terminé le 31 décembre

	2001 \$	2000 \$	
REVENUES			REVENUS
Membership fees	752,545	711,387	Cotisations annuelles
Products and services	675,955	690,000	Produits et services
Tuition fees	662,438	561,341	Frais de scolarité
Conference [note 8]	539,607	489,455	Conférence [note 8]
Rent	218,711	211,447	Loyer
Grants	483	3,320	Subventions
	2,849,739	2,666,950	
EXPENSES			DÉPENSES
Operating	1,436,964	1,301,301	Exploitation
Salaries and benefits	906,267	930,610	Salaires et avantages sociaux
Building rental and maintenance	214,749	212,813	Location et entretien des immeubles
Amortization of capital assets	121,088	122,360	Amortissement des immobilisations
	2,679,068	2,567,084	
EXCESS OF REVENUES OVER EXPENSES	170,671	99,866	EXCÉDENT DES REVENUS SUR LES DÉPENSES

*8. The Conference is a partnership between the CHA, the Canadian College of Health Service Executives and the Canadian Association for Community Care. Conference proceeds and costs are shared among the partners. CHA acts as the Conference Secretariat

*8. La Conférence est un partenariat constitué de l'ACS, du Collège canadien des directeurs de service de santé et de l'Association canadienne de soins et services communautaires. Tous les produits et les coûts sont partagés parmi les partenaires. L'ACS agit à titre de secrétariat de Conférence.

Auditors' Report

To the Directors of the Canadian Healthcare Association:

We have audited the balance sheet of the Canadian Healthcare Association as at December 31, 2001 and the statements of operations, cash flows and changes in net assets for the year then ended.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Association as at December 31, 2001 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Ottawa, Ontario
January 31, 2002

Chartered Accountants

Ernst & Young LLP