

Research



Patient Care



Education



University Health Network

2017-18 Year in Review

Message from the CEO & Board Chair



(L to R) Brian Porter, Chair of the University Health Network Board of Trustees, Dr. Kevin Smith, Incoming President & CEO of UHN, and Dr. Charlie Chan, former Interim President & CEO of UHN and Executive Vice President, Chief Medical Officer. (Photo: Visual Services, UHN)

We accomplished a lot together over the past year.

And we have much to be proud of. University Health Network (UHN) was ranked Canada's top research hospital for the seventh year in a row, our adult organ transplant program became North America's largest, and the Michener Institute was recognized as an accredited provider of Continuing Professional Development by the Royal College of Physicians and Surgeons of Canada. This is all in addition to UHN's position as the country's continuing leader in cancer, cardiac, neuroscience, rehabilitation and transplant research. We invite you to learn more about our accomplishments through the stories contained in this report.

While celebrating successes such as these, we also underwent significant organizational change and managed increased demands for our services, something experienced by all hospitals in Ontario's healthcare system with most sites operating beyond 100 per cent capacity.

It takes resilience to work in healthcare. Our staff treat and support patients during some of the most vulnerable moments of their lives; return with renewed intellectual curiosity to their labs each day in the hopes of improving care; and attempt to bridge the gaps between theory and practice as we shape tomorrow's healthcare professionals. To do all this while managing the challenges of this past year draws on everyone's commitment to care, research and learning. This – combined with the resilience, strength and excellence from the people who work here – is what makes us UHN.

While we are one of Canada's largest healthcare research organizations, our primary value is the needs of patients come first. It is this shared value that guides everything we do.

On behalf of the Board of Trustees, we thank the entire UHN community for their work over the past year. We look forward to the one ahead with Incoming President & CEO, Dr. Kevin Smith. As an experienced health system leader, Kevin will build on our work to transform lives and communities through care, discovery and learning.

Charlie Chan
Interim President & CEO
Executive Vice President,
Chief Medical Officer

Brian Porter
Chair, UHN Board of Trustees



University Health Network
is a teaching hospital affiliated with
the University of Toronto

UHN Executive Team



Brad Wouters
Executive Vice President,
Science & Research



Brian Hodges
Executive Vice President,
Education



Charlie Chan
Interim President & CEO;
Executive Vice President,
Chief Medical Officer



David Jaffray
Executive Vice President,
Technology & Innovation



Emma Pavlov
Executive Vice President,
Human Resources/
Organizational Development
and Michener Operations



Larry Baldachin
Executive Vice President,
Chief Business Officer



Mike Nader
Executive Vice President,
Chief Operating Officer

Thanks to everyone in the UHN community for a wonderful year.

Priorities that bring UHN staff together across care, research and education

Beyond our shared purpose of transforming lives and communities, there are certain priorities that tie UHN together.

These include committing to zero preventable harm at our hospitals, delivering the greatest value for our patients, empowering them to participate in their healthcare, and enabling our staff to do their best work.

While navigating a year of organizational change and managing external pressures, it is these priorities that bring our staff together across care, research and education. They have been important to all of us at UHN for a long time and are articulated as Caring Safely, Patient Experience, Operational Excellence and People & Culture.

Collectively, these priorities are referred to as our Foundational Elements. Below is a reflection on the work done in these areas by countless staff across UHN.





Caring Safely: Our work to create a culture where everyone embraces safety.

Part of this work involves tackling common Hospital Acquired Conditions (HACs) – conditions that cause preventable harm to patients. To reduce the occurrence of HACs, our teams designed prevention bundles, a group of standards and practices proven to improve safety outcomes when used consistently. Over the past year, the Caring Safely team began testing and implementing these bundles with specific test units across UHN.

While we are still in early stages, these units are already making an impact on safety and achieving their longest stretch without a HAC occurrence. For example: Unit 10ES at Toronto General Hospital set a unit record of 72 days without a fall. The Coronary Intensive Care Unit at Peter Munk Cardiac Centre set a record of 83 days without a central line infection. Similarly, Unit 16P at Princess Margaret Cancer Centre achieved their longest stretch without a fall – 62 days. Many other units achieved unit bests, consistently completing all elements of the Pressure Injury prevention bundle including 4N at Toronto Rehab Bickle Site, 2B at Toronto Rehab Lyndhurst and 3B at Toronto Western Hospital. As we continue to implement these bundles, we look forward to celebrating results at all sites.

Beyond this, we trained 77 per cent of our staff and physicians on Safety Behaviours and Error Prevention tools over the past year – exceeding our target of 75 per cent – and 84 per cent of our leaders on high reliability leadership methods. Introducing new practices to an organization as large as UHN is no easy feat, so we are especially proud of our Education team and the volunteer faculty who donated their time to teach these sessions.

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Patient Experience: Our work to engage patients and family caregivers in creating a compassionate, responsive patient experience.

This past year, UHN's Patient Partnerships program onboarded its 100th Patient Partner. Patient Partners are patients or family caregivers who partner with staff to help improve the safety and quality of care we provide. While our staff are attuned to our patients' needs and building relationships with them every day, Patient Partners are able to share their unique insights to shape the patient experience at UHN.

Having a positive patient experience also means empowering patients to be partners in their own care. One of the ways we do this at UHN is through myUHN Patient Portal, which gives patients secure online access to their own health information including lab results and clinic notes. Launched in January 2017, myUHN has now reached more than 43,000 registrants as of April 2018. Over this past year, we also had language interpreters attend more than 31,000 appointments and had 47,000 visits to the patient and family libraries across UHN, helping patients and families to navigate the health system with clear, accessible materials and support.



Information Technology Transformation: Our work to create a digitally enabled future for UHN.

In 2017-18, we continued our IT Transformation to address UHN's IT structure and improve the way we invest in our technology. This transformation has consolidated the operations and finances of the IT capabilities across the organization under a new Operating Model and single reporting framework, merging 22 IT sub-units to address the immediate need for greater coordination of IT expertise, resources and investments for all areas of UHN including our clinical units, research labs and education centres.

Moving into FY 2018/19, UHN Digital is focused on enhancing IT operations capabilities to better serve its clinical, corporate, research and education customers. Furthermore, work is underway to identify key digital priorities across the seven portfolios of our Executive Vice Presidents and develop a digital roadmap to enable UHN to realize maximum value from its investments in digital technologies.



People & Culture: Our work to ensure UHN's culture enables our staff to do their best work.

UHN's continued success is due in large part to our people. We spent the past year further embedding the behaviours that support our Purpose, Values & Principles (PVP) to achieve our desired culture at UHN. Part of this work included introducing changes to our hiring and development processes for our staff and leaders. For example, we now hire and screen candidates using UHN's Values.

Our staff continued to demonstrate resilience in meeting growing demands in a challenging environment. To further support them, we partnered with leaders across the organization to improve team relationships and engagement through initiatives including our Respect & Civility @ Work, Just Culture and Crucial Conversations sessions – touching more than 4,500 employees and leaders at UHN. We also worked to create safer work environments by translating the reporting of incidents into safety practices.

Another key focus of this past year has been the building of leadership capability, which included launching a New Physician Orientation program to help orient new physicians to our PVP and organizational direction. Further, we continued developing our leaders through our leadership programs, rounding on units and participating in huddles.

Finally, we continued our efforts to build a respectful, inclusive culture at UHN. Efforts in this area included the creation of an Indigenous Council, expanded efforts in the areas of Asian Heritage awareness, LGBTQ+ and Black History. We will continue to focus on implementing needed initiatives in partnership with each respective community, celebrating our diversity and promoting equity for all our people.

We continued our efforts to build a respectful, inclusive culture at UHN.



Operational Excellence: Our work to find safer, simpler and smarter ways of providing exceptional care.

This past year, UHN and other hospitals in the Ontario healthcare system faced a challenging flu season and were forced to operate well beyond normal operating capacity. It was a long winter for all Emergency Departments across the province – we made it through thanks to the strength and resilience of our excellent staff. To better support them, we updated our Overcapacity Protocol (OCP) to help manage the flow of patients when the hospital is in surge.

We also opened the Hillcrest Reactivation Centre, a transitional care space for alternate level of care (or post-acute) patients. Hillcrest allows us to better meet the care needs of this population. In addition to our OCP and other flow strategies, Hillcrest is a new way for us to ensure patients are in the right place at the right time.

Beyond this, UHN launched the Office of Stewardship & Sustainability (OSS) this past year as a key part of our effort to achieve operational excellence for the organization. The OSS engages all levels of UHN to plan and implement initiatives that help our teams deliver the best care for our patients.

Next year, we look forward to expanding Operational Excellence to include non-clinical areas; such as, Finance, Facilities and UHN Digital.

UHN launched the Office of Stewardship & Sustainability (OSS) this past year as a key part of our effort to achieve operational excellence for the organization.

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20,176

Followers



9,749

Page Likes



36,785

Followers



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Parkinson's disease no match for these dancing queens: bit.ly/2ooK25R
#WorldParkinsonsDay @ParkinsonCanada



Popular in April



12 Retweets



22 Likes



Other UHN News headlines

- Advance Care Planning: Hoping for the best, planning for the worst
- An oral history of acute stroke care
- Student recalls life-saving transplant after discovering kidney failure 'by accident'

Education course targets global leaders in rapidly-advancing cardiac specialty

Structural heart disease intervention is a specialized field within cardiology that is still in its infancy for many healthcare professionals. But it's growing quickly and not-so-quietly.

"It's a very fast-paced field, where you need to be at the forefront of all the information and there is so much information coming out with respect to new technologies, novel applications, how to perform the procedure," says Dr. Mark Osten, interventional cardiologist, Peter Munk Cardiac Centre (PMCC), and one of the medical experts leading the Toronto Course in Congenital and Structural Heart Disease Intervention. "It's fine to read it in a textbook, but ultimately you have to perform the procedure, and for that you need training, you need a comfort level."

A two-day educational session that took place in late April 2017, featured international experts in structural heart disease intervention, which comprises patients

born with heart defects as well as those who encounter cardiac abnormalities affecting the heart's vessels or valves later in life.

These procedures are performed in a cardiac catheterization laboratory or hybrid operating room and involve percutaneous (through the skin) access via a needle puncture and using catheters, guidewires and other minimally-invasive devices.

"There are things we do pretty routinely in the pediatric laboratory on children that are unusual in adult congenital lesions, but as these children grow, people are going to have to be trained in order to take care of them in a very sophisticated way," says Dr. Lee Benson, pediatric cardiologist, The Hospital for Sick Children.

[Link to full story: click here.](#)

Other UHN News headlines

[Discussing end-of-life preparation in palliative care](#)

[World's first simulator for pulmonary endarterectomy will bring life-saving skill to more thoracic surgeons](#)

[Grateful patient thanks staff at Donald K. Johnson Eye Institute with gift of music](#)



Peter Munk Cardiac Centre cardiologists, Dr. Eric Horlick (L) and Dr. Mark Osten, use catheters and guidewires to treat a patient with a hole in her heart – one of several cardiac conditions found within the specialty of structural heart disease intervention, which was the subject of a two-day course in Toronto in late April 2017. (Photo: UHN)

Social @ UHN



1,580

Tweets sent by @UHN

7,492

Mentions of @UHN by the public

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Drs. Lee, Piggott and Baltzer, three of our female surgeons from Toronto Western Hospital take the #NYerORCoverChallenge! #ILookLikeASurgeon



Popular in May



5 Retweets



20 Likes

Other UHN News headlines

- At-home sleep apnea test now available to Ontario patients
- Speech-language pathologists get innovative to provide patient care
- Canada's largest hospital reports on year of medically assisted dying

Dr. James Eubanks is driven to find a cure for a disorder that affects young girls

In many ways, Abby Congram is a typical 17-year-old. She likes socializing with her friends, and she's interested in boys and music (Great Big Sea and Meghan Trainor are her favourite artists). Abby also loves horses – there are pictures of horses all over her room, and she rides them near her home in Stratford, Ont.

But unlike most of her peers, Abby is unable to speak. She can't use her hands to type or hold a pencil or eat. She needs 24-7 assistance for all the activities of daily living. Abby has Rett syndrome, a rare neurological and developmental disorder that affects girls almost exclusively.

One in 10,000 females around the world is born with Rett syndrome, a genetic disorder whose cause wasn't even known until 1999. Because it's neurologically based, symptoms vary greatly, but they can include seizures, the inability to speak, irregular breathing, poor thermoregulation (maintaining proper body temperature), an irregular heart rate, problems walking and the loss of purposeful hand use.

Abby suffers from painful gastrointestinal problems and muscle weakness, which are also symptoms typical of Rett syndrome.

"Abby's muscle tone will suddenly go low one day and she can't walk, when yesterday she could," says Karen Congram, Abby's mother. "She has a lot of difficulty with what's called the autonomic nervous system, which controls her digestive system and her heart rate and her bladder, and so when the nervous system decides it's not working today, that creates a lot of pain."

Rett syndrome is a disorder without a cure or any effective treatments to curb its debilitating and painful symptoms. But Dr. James Eubanks is working to change that.



The Krembil Research Institute and the Globe and Mail have teamed up for a special content project designed to highlight the tremendous accomplishments of our scientists and research programs at Krembil.

[Link to full story: click here.](#)

Other UHN News headlines

[Toronto Western Hospital earns stroke distinction](#)

[Patient improves day-to-day life with MS thanks to specialized rehab](#)

[Talking about 'The C Word'](#)



Karen Congram, right, helps her daughter Abby adapt to life with Rett syndrome, a genetic disorder that affects one in 10,000 girls around the world. (Photo: The Globe and Mail)

Social @ UHN

In the past year, we shared more than 300 of UHN's best stories on Facebook.



307

Page Posts



22,070

Post Likes

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Mojgan Nemati immigrated to Canada from Tehran, Iran 13 years ago. Her lesson for those starting over? Don't look back – just focus on what you can become in Canada. Listen to Mojgan's story: <http://bit.ly/homeep1>



Popular in June



119 Likes



8 Shares



Other UHN News headlines

- The stakes are high for an acclaimed cerebrovascular surgeon searching for a stroke drug
- Dr. Christopher Paige named UHN Inventor of the Year
- First-in-Canada implant of novel sensor device at UHN for heart failure patients

Anesthesia fellow taking novel pain clinic back home to Barbados

As Dr. Judith Nicholls' year-long fellowship at Toronto General Hospital's (TG) Transitional Pain Program neared its end, she joked that she better hurry in booking her flight back home to Barbados.

But she certainly wasn't going to be relaxing on the beaches when she returned.

Instead, Dr. Nicholls would be taking everything she learned at UHN to spearhead the opening of the Caribbean's first multi-disciplinary pain clinic in Bridgetown, Barbados. She says the clinic will include a variety of services, including ones for chronic pain, opioid addiction, psychosocial therapy and physiotherapy.

"There's a dire need for pain services in the Caribbean, and not many people are willing to invest their time and energy in it," Dr. Nicholls says. "My vision is that it will eventually be a referral centre for the rest of the Caribbean."

While the Caribbean does not have as extreme of an opioid crisis as Canada does, there's still a significant population with sickle cell disease and chronic pain where more treatment options are necessary, according to Nicholls.

Near the end of her residency at the University of the West Indies in 2013, Dr. Nicholls says she had her eyes set to do her anesthesia fellowship at TG's Transitional Pain Program after learning about Dr. Hance Clarke's work during a visit to Toronto two years ago.

What started as a one-year pilot program in 2014 now boasts an established team of physicians, psychologists, acupuncturists, and other specialists who help post-surgical patients wean off of addictive opioids while still managing their chronic pain.

Link to full story: [click here](#).

Other UHN News headlines

Toronto Rehab researchers engage people living with dementia to set Canadian research priorities

Stem-cell researchers solve mystery of relapse in acute myeloid leukemia

Vulnerable, at-risk chronic pain patients taper opioids successfully with psychological tools



Dr. Judith Nicholls, Anesthesia Fellow at the Transitional Pain Clinic, Toronto General Hospital, says her experience at UHN has given her the vision and skills to fill a gap in the pain services available in the Caribbean. (Photo: UHN)

Social @ UHN

In the past year, we shared nearly 200 of UHN's best corporate stories on LinkedIn.



189

Stories Shared



10,879

Post Likes



Popular in July



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When Julie Tomaino, a Toronto Rehab stroke patient, set a dynamic goal to choreograph again, her rehab team stepped out of their comfort zone and onto the stage. <https://bit.ly/2tfqVLv>



143 Likes



69 Shares

Other UHN News headlines

- No ordinary walk in the park for a cardiac nurse, patient and cardiologist
- One family's experience with medical assistance in dying
- Peter Munk Cardiac Centre nurse practitioner honoured for teaching excellence

Ontario government announces funding to expand access to stem cell transplants

Ontario's Ministry of Health is investing in new inpatient and outpatient units at Princess Margaret Cancer Centre and London Health Sciences Centre to increase access for patients who need stem cell transplants.

Dr. Eric Hoskins, Ontario Minister of Health and Long-Term Care, announced the investment at the Princess Margaret.

The funding will enable the cancer centre to add 15 new beds. It will also provide new treatment space for outpatients and support up to eight more stem cell therapy physicians.

"With this new funding, we are helping hospitals provide life-saving stem cell treatment closer to home.

The government's investment in the two new units will reduce wait times and improve care for Ontarians who need stem cell transplants," Dr. Hoskins said at the announcement.

In the past year, 428 stem cell transplants were performed at the Princess Margaret.

Stem cell transplantation is an essential component of treatment for some people with lymphoma, leukemia, myeloma and other blood disorders. Bone marrow or peripheral blood stem cells help patients recover from high-dose chemotherapy treatment, with or without radiation, by helping blood cells to regrow.

Link to full story: [click here.](#)

Other UHN News headlines

[Finding new methods for detecting glaucoma](#)

[UHN breast cancer rehab program gives women back fitness and quality of life](#)

[UHN improving the experience of cardiac patients one step at a time](#)



Dr. Eric Hoskins, Ontario Minister of Health and Long-Term Care, announces an investment in new inpatient and outpatient units at the Princess Margaret to increase access for patients in need of stem cell transplants. (Photo: UHN)

Social @ UHN

In the past year, we had more than 5,000 retweets and replies on Twitter.



5,888

Retweets and Replies



9,536

Likes on our tweets



Popular in August



49 Likes



33 Shares

University Health Network

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Drs. Trevor Pugh and Suzanne Trudel of the Princess Margaret Cancer Centre have developed a less invasive procedure for diagnosing and monitoring patients with multiple myeloma. Learn more: <http://bit.ly/2uCGFrZ>



Other UHN News headlines

- UHN team coins new medical term for tech-related illness
- Discharge Summary Program at UHN earns 3M Health Care Quality
- Toronto Rehab nurses advance their knowledge to care for complex patients

Toronto Rehab patients realize benefits of adapted sports

The first question Fabio Angelini asked his medical team when he arrived at Toronto Rehab Lyndhurst Centre as a spinal cord injury patient in a wheelchair, was whether he would ever play golf again.

They couldn't promise him anything.

Thanks to personal determination and the combined efforts of the physiotherapy, occupational therapy, and therapeutic recreation team, Fabio is now standing with some assistance, and back playing golf again, too.

Promoting the benefits of therapeutic recreation is the focus of the Lyndhurst Games – an event aimed at introducing patients to the possibilities of participating in adapted sports and leisure activities with the hope that they incorporate it into their own therapy.

The Canada 150-themed Games brought together more than 200 patients, staff, volunteers, and family members to try different adapted sports and recreational activities such as handcycling, wheelchair

basketball, and bocce ball, in a friendly competition between the four spinal cord injury inpatient and outpatient units.

"What we strive to do is to really promote being active in the community," says Nicole Leong, organizer and recreation therapist at Lyndhurst. "Not only physically active but also engaging socially with peers again."

This was the third Lyndhurst Games since the inaugural event five years ago. After the two previous Games, the centre noticed a much higher participation in the recreation and leisure programs.

For patients who might feel apprehensive at first, having staff members play alongside can put them more at ease.

"When the patient participates with a staff member who they know, like one of their therapists or nurses, the patients are so much more willing to try it," says Nicole.

Link to full story: [click here.](#)

Other UHN News headlines

Poor diet and lifestyle could accelerate osteoarthritis, UHN research suggests

UHN therapy group helps bariatric surgery patients take control of eating habits

A little extra effort by Michener Institute student goes a long way for patient



Two-and-a-half months after coming to Lyndhurst Centre, Fabio is now standing with some assistance and back playing his favourite sport, golf. (Photo: UHN)

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In the past year, our stories were shared more than 3,000 times on Facebook.



3,301

Shares



1,706

Comments



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The Peter Munk Cardiac Centre at Toronto General Hospital has received the single-largest gift to a hospital in Canadian history: a commitment of \$100-million from the Peter & Melanie Munk Charitable Foundation.

<https://bit.ly/2f9pl8E>

Popular in September



141 Likes



3 Comments



Other UHN News headlines

- Unit at Toronto General Hospital makes it everyone's business to eliminate patient falls
- Krembil researchers use DNA screening to unlock secrets of undiagnosed epilepsy
- Summer program exposes Toronto high school students to careers in healthcare

UHN housekeeper's safety sense and quick response help save father of three

Jared Wright's quick thinking and attention to detail during his housekeeping rounds at Toronto General Hospital (TG) helped save a young father's life.

Jared is a valued member of Unit 5B safety huddles at TG, offering insights into potential safety hazards, constantly scanning his environment and paying attention to information shared by the team during the huddles.

"He's an extra set of eyes on our patients," says Danielle Small, Patient Care Coordinator, Units 5A and 5B, Cardiology Inpatient and Cardiac Short-Stay. "He's a great help to us."

Danielle adds that everyone on the unit is expected to attend daily safety huddles and speak up about any safety concerns.

There's no better illustration of that than the day after lunch when Jared came into the room of Herby to say hello, as he often did, and to see how the patient was feeling.

Herby, 38, was born with congenital heart failure, and was waiting for a heart and lung transplant.

But that afternoon, Jared noticed that Herby did not respond when he greeted him, and that he was groaning and trying to reach out with his hand.

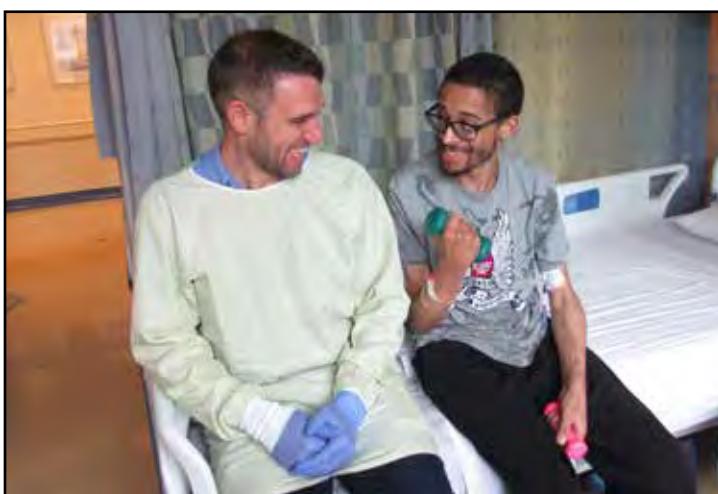
When Herby did not respond, Jared realized something was wrong, and called a nurse.

The nurse quickly realized Herby was having a stroke, and a Code was called.

Herby, who has three children aged nine, two and nearly a year, recalls that day, grateful Jared stopped by.

"I couldn't get up. I couldn't move my whole right side. I could not talk," Herby says.

Link to full story: [click here.](#)



Jared Wright, (L), who goes to Unit 5B safety huddles at Toronto General Hospital regularly, shares a laugh with Herby, 38, following the patient's heart and lung transplant. During his housekeeping rounds, Jared noticed that Herby was not responding to his greeting and called a nurse to help. Herby was having a stroke as Jared entered his room. (Photo: UHN)

Other UHN News headlines

[Patients get right test at right time with medical imaging Same Day Access Program](#)

[The mission to cure osteoarthritis](#)

[Social work in the Emergency Department connects patients to support](#)

Social @ UHN

In the past year, people on LinkedIn engaged with our stories more than 900 times.



816

Shares



168

Comments



**Popular
in October**



48 Likes



16 Retweets



University Health Network

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Welcoming our patients, [@Kathleen_Wynne](#), [@SenSanders](#) & [@docdanielle](#) today at Toronto General Hospital to discuss a single-payer healthcare system.



Other UHN News headlines

- Toronto Rehab housekeeper makes patients feel at home
- UHN Patient Experience committed to being compassionate, collaborative and responsive
- Celebrating the bounty of Toronto Rehab's vegetable gardens

DriverLab technology will keep everyone safer on the roads

Imagine a world where a customized license gives your elderly mother the freedom to drive during the day, but not at night. Where you don't need to worry about the hazard she may be posing to herself – or others – on the road, while she maintains the independence that matters so much to her.

Where your brother, who suffers from chronic pain, can take a prescribed dose of medication that has been proven to be safe while driving, without interfering with performance.

Where you, exhausted after years of sleep apnea, won't risk nodding off in your car, because it can actually sense, and warn you, of your drowsiness.

Where we all benefit from the assistance that driverless vehicles can offer.

Researchers at Toronto Rehabilitation Institute are accelerating our efforts to get there, with DriverLab –

the most advanced driving simulator in Canada, and unique in the world.

DriverLab is designed to study the impact of our health on driving performance, with an aim to increase driver safety in healthy older adults and people living with injury or illness.

The technology comes at a time when vehicle collisions represent the number-one cause of accidental death in Canada, and cost Canadians \$62.7 billion per year.

Global numbers are equally staggering: Every year, 1.24 million people around the world die in motor vehicle collisions and up to 50 million people suffer from disabling injuries.

Older adults are far too often involved in these statistics.

Link to full story: [click here.](#)



Real rain helps to recreate common challenging conditions experienced in DriverLab. (Photo: UHN)

Other UHN News headlines

[Princess Margaret Cancer Centre signs collaboration deal with German counterpart](#)

[New stem cell transplant unit opens at the Princess Margaret](#)

[Michener Institute to lead development of provincial personal support worker registry](#)

Social @ UHN

In the past year, our content was displayed more than eight million times across our three platforms.



8,255,912

Impressions



University Health Network

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UHN ranked No. 1 in Canada's Top 40 Research Hospitals for 2017. Research Infosource Inc. found UHN spent \$332 million on research in the year ending March 31, 2017.
<https://bit.ly/2wfcl7m>



Popular in November



141 Likes



3 Comments

Other UHN News headlines

- Michener valedictorian hoping to inspire future engineering and healthcare professionals
- Ride rockets into the record books
- UHN Refresh Program strives to bring wellness to the workplace

Not just a reason, but the ability, to smile again

Whether unconsciously or reflexively, it happens without much thought: the corners of your mouth turn up and you smile, communicating happiness in one of its purest forms.

What seems like a simple movement of the mouth relies on facial muscles working together with networks of nerves that are responding to information from the brain. If that system goes offline, your smile can be lost along with the ability to control your face.

But through a technique pioneered in Toronto, smile reinnervation or smile surgery, is giving adults suffering from facial paralysis new hope on regaining the function of their face.

Anastasia Fernandes, 32, knows how it feels to lose the ability to smile. In late 2015, the then-newlywed was still suffering from constant headaches and facial numbness that she had earlier attributed to the stress of planning a wedding.

With the symptoms getting worse, her family doctor ordered an MRI that came back with serious news: there was a large mass in her brain that was eventually diagnosed as an acoustic neuroma, also known as a vestibular schwannoma, where a tumour grows on the main nerve from the inner ear to the brain.

Anastasia was referred to neurosurgeon Dr. Fred Gentili at Toronto Western Hospital (TW) where the good news was that these types of tumours were benign, but she would need extensive surgery to remove it which would result in her losing the hearing in her right ear.

"I wasn't ready for something like this," recalls Anastasia. "You always feel somewhat untouchable as a person, especially when you're young, and I had never been sick. So it almost didn't register with me that the tumour was benign because it was so hard to be told that I would lose my hearing."

[Link to full story: click here.](#)



Dr. Heather Baltzer (C), a hand surgeon with the Hand and Upper Extremity Transplant Program at Toronto Western Hospital, is one of few surgeons in Canada who can offer the smile reinnervation surgery to adults. (Photo: UHN)

Other UHN News headlines

Michener Institute named an accredited provider of continuing professional development

A good catch: helping an elderly couple get to Toronto General Hospital safely

Michael Burns named President & CEO of The Princess Margaret Cancer Foundation

Social @ UHN

In the past year, people discovered UHN News stories more than 50,000 times through social media.



11,660

Link Clicks



20,646

Link Clicks



19,055

Link Clicks



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**Popular
in December**



104 Likes



24 Shares



Other UHN News headlines

- UHN research develops insulin-producing cells; next stop clinical trials
- Artificial intelligence launches new era in cardiac care
- After 42 years, Barb Tiano saying goodbye

A story of hope: helping Popi taste and eat for the first time in eight years

A crack team of surgeons and clinicians at UHN have given Popi Rani Das the ability to breathe normally, taste, eat and drink for the first time in eight years, offering her hope for a better life when she returns to Bangladesh.

The 29-year-old woman was left for dead eight years ago after she drank clear, odourless acid in a cup given to her by her then-husband who claimed her dowry was too meagre. Defying the odds, Popi survived, although with a severely damaged airway, throat, esophagus (gullet or food pipe) and stomach.

She had 10 corrective surgeries performed by doctors in Bangladesh, with little improvement.

Relying on a feeding tube inserted into her stomach for sustenance, and on her mother for company, she subsisted, barely breathing, for seven years,

in a windowless, dark corner of an Acid Survival Foundation Hospital in Dhaka, Bangladesh.

Dr. Toni Zhong, Director of the Breast Reconstruction Program at UHN, chanced upon Popi while on a humanitarian mission to treat burn victims in Bangladesh.

"She was a shadow of a person, thinking that nobody could help her," recalls Dr. Zhong, who is also the Belinda Stronach Chair of the UHN Breast Reconstruction Program.

"I knew if I did not do anything then and there, then nobody would. And I also knew that I had strong teams back at UHN who could help."

Link to full story: [click here.](#)



Popi, centre foreground, with some members of her healthcare team (from left to right): UHN translator Tannazzum Kaiser, surgical lead Dr. Ralph Gilbert, speech-language pathologist Elana Aziza, and social worker Shobha Sawh. (Photo: UHN)

Other UHN News headlines

New Medical Director charts fresh course for Krembil Neuroscience Centre

Krembil patient learns to walk again after emergency spine surgery

The ultimate transformer

Social @ UHN



In the past year, videos on UHN's YouTube channel were watched more than one million times.

1,009,024

Views

3,260

Likes

2,089

Shares



**Popular
in January**



University Health Network

@UHN

One in every 18 patients in Canadian hospitals experiences a preventable incident of harm. Read what leaders at UHN are doing to reduce this number to zero: bit.ly/2CD68JW via @uoftmedicine



29 Likes



22 Retweets

Other UHN News headlines

- Province approves surgical services redevelopment at Toronto Western Hospital
- A milestone for TIME
- \$20-million gift establishes The Walter and Maria Schroeder Institute for Brain Innovation & Recovery

Education program brings international health professionals to learn at UHN

Christina Han is a program manager in South Korea's largest hospital network – the Asan Medical Centre (AMC) in Seoul.

When she was looking to expand her knowledge with first-hand experience in educational leadership and organization development, she decided to turn to Canada's premier academic health centre – UHN.

In a first-of-its-kind [Personalized Learning Program™ \(PLP™\)](#), Christina spent four weeks meeting with leaders and teams across the campuses of the Michener Institute of Education at UHN and with the Human Resources' Organizational and Employee Development team.

"I quickly realized the focus on interprofessional teamwork and collaboration at UHN," Christina says. "With the learning I attained here, I hope to develop a similar structure to enable our teams to better collaborate at AMC."

AMC is an academic health sciences system that is South Korea's largest hospital network with 12,688 beds, serving more than 11 million patients annually.

In her capacity at the AMC Academy, Christina is responsible for a variety of education and staff development programs.

Her department also runs a scholarship program that encourages staff to visit international organizations for observerships. Through this scholarship program, AMC has sent 12 staff to participate in personalized learning programs at UHN in the past two years.

Hearing great reviews from her colleagues about the quality of their PLPs and having built a strong relationship with UHN across continents, Christina made a decision to participate in her own PLP to experience what her colleagues had during their visits to Toronto.

The [Personalized Learning Program™ \(PLP™\)](#) has been available at UHN for nearly four years. It is a platform that has allowed for many different kinds of health professionals from around the world to visit UHN.

Link to full story: [click here](#).

Other UHN News headlines

[Mechanical hearts are buying time for patients and groundbreaking research](#)

[Alzheimer's drug one step closer to reality after Krembil team signs major development deal](#)

[Free app helps ensure drug safety for HIV and hepatitis patients worldwide](#)



Christina Han, pictured in front of one of the sites of the Asan Medical Centre – South Korea's largest hospital network, with eight sites spread across the country – says her four weeks of learning at the Michener Institute of Education at UHN "exceeded my expectations." (Photo: Courtesy Christina Han)

Social @ UHN

In the past year, the audience across our three platforms grew by...



↑18.7%



↑10.2%



↑19.5%

 **University Health Network** 
@UHN

The Government of Canada is investing up to \$950-million to create thousands of jobs in innovation and research. The Digital Supercluster, one of five superclusters supported by this new funding, will use big data to unlock new potential in healthcare. <https://bit.ly/2CnQBJZ>



Popular in February



155 Likes



4 Comments

Other UHN News headlines

- 'I'm amazed every day to see what patients are willing to do to contribute to research'
- Virtual care for spinal cord patients
- How a safety event report made UHN safer for staff and patients

Better, Faster, Stronger

Just as high-performance athletes display an unwavering drive to hone their skills, so do UHN researchers.

They work tirelessly to improve our understanding of disease, the delivery of care and the efficiency of the healthcare system. Their achievements are enabled by partnerships with clinicians, patients, donors and companies. And they achieve their goals by pushing the limits of healthcare innovation.

The current issue of the UHN Research Report highlights how our researchers are working to make healthcare better, stronger and faster.

The report includes a selection of exciting stories and thought-provoking images that reveal:

- how brain mechanisms enhance performance during pain;

- a strategy to improve cancer immune therapies;
- a digital platform that can diagnose Alzheimer's disease using speech;
- a new method that could lead to safer stem cell-derived treatments for diabetes; and
- an AI-based technology that speeds up radiation therapy planning.

The report also includes stories celebrating funding success, high-impact discoveries and innovative applications of UHN research findings, as well as the generous support provided by UHN's sister foundations and their donors.

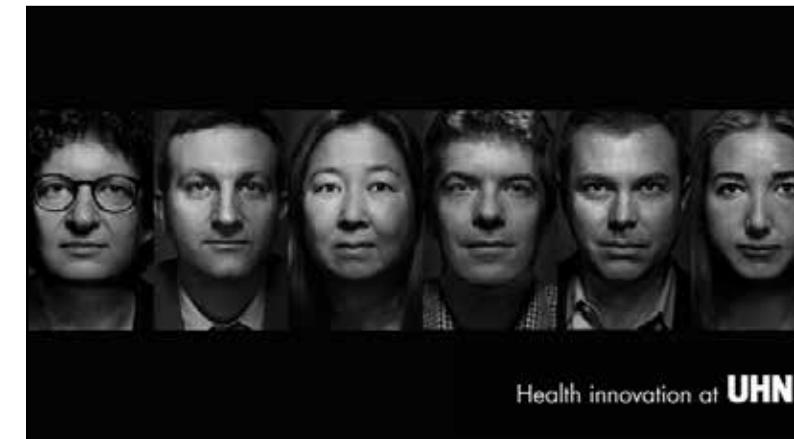
 Link to full story: [click here](#).

Other UHN News headlines

Teamwork at Toronto General Hospital the saving grace in patient's cancer surgery

Allied Health team brings rehab classes right to the unit

Major players in the global fight against cancer joining forces at Toronto conference



The six researchers featured on the 2017 UHN Research Report cover are: (L to R) Drs. Karen Davis, Thomas Purdie, Pamela Ohashi, Frank Rudzicz, Michael Laflamme and Cristina Nostro.
(Photo: UHN StRIDE Team)

Social @ UHN

In the past year, activity on our platforms increased by...

- ↑ **399,917** – Impressions (number of times content displayed, whether clicked on or not)
- ↑ **9,029** – Engagements (likes, comments, shares or retweets)
- ↑ **14,231** – Link clicks

 **University Health Network** 
@UHN

We are pleased to announce Dr. Kevin Smith will be joining UHN on May 22, 2018 as our next President and Chief Executive Officer. He is well known for his contribution to the healthcare system both provincially and nationally.
<https://bit.ly/2FILOck>

Popular in March



163 Likes



4 Comments



Other UHN News headlines

- ‘Every day was motivating,’ patient says of Toronto Rehab experience
- UHN now home to largest adult transplant program in North America
- UHN helps women with chronic kidney disease deliver healthy babies while on hemodialysis

UHN housekeeper speaks up to save a life

Toronto Western Hospital’s Morteza Gorgzadeh shows how everyone can play a role in patient safety.

For Morteza Gorgzadeh, it was just another day at work.

A housekeeper with the Support Services team at Toronto Western Hospital, Morteza was going about his daily tasks and doing what he could to make the patients on the 8A General Internal Medicine in-patient unit feel more comfortable.

“I always make sure to say hello and get to know the patients in the different rooms,” says Morteza.

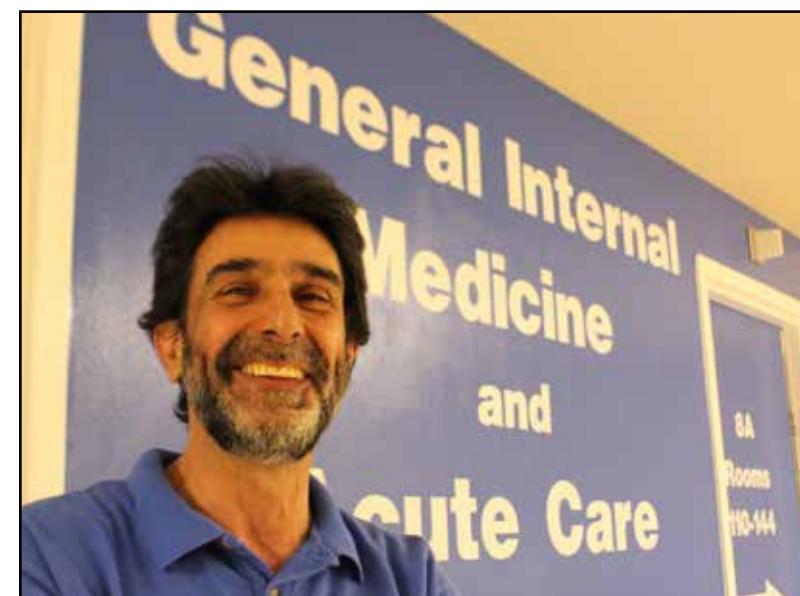
“My job is to help create an environment where patients can eat, feel comfortable, feel better so that

they can go home. I take that seriously.”

But that day, one of the patients who had been on the unit for a while didn’t look very comfortable. When Morteza entered the room, he saw him sprawled sideways across the bed, his oxygen mask half off his face.

“It looked like he was sleeping but when I went to see if he was okay, I noticed that he was breathing heavily and foaming at the mouth,” Morteza recalls. “He didn’t look well to me.”

 [Link to full story: click here.](#)



Although it looked like the patient was sleeping, something didn’t sit right with Morteza Gorgzadeh when he came upon the man in his room. The TW 8A General Internal Medicine unit housekeeper’s gut instinct prompted him to call a nurse, an action which saved that patient’s life. (Photo: UHN)

Other UHN News headlines

[Finding a good pair of lungs](#)

[Breaking free from stereotypes to push women in STEM](#)

[Adapting to patient needs: Toronto Western Tuberculosis Clinic pilots evening appointments](#)

The Princess Margaret Cancer Foundation launches \$50 Million Transformation Campaign

Princess Margaret Cancer Centre is embarking on a remarkable transformation to improve the experience of patients, creating a more calming, therapeutic atmosphere from the moment they step through our doors. This multi-phase project will foster feelings of comfort, hope and confidence for patients and their loved ones, and help build cancer care capacity for the future.

The Princess Margaret treats more than 17,700 new patients annually and we want our facilities to match



Princess Margaret Cancer Centre treats more than 17,700 new patients annually and we want our facilities to match the world-class cancer care offered by our dedicated staff. (Illustration: TPMCF)

the world-class cancer care offered by our dedicated staff. The pressure on our facilities will only intensify

as cancer cases continue to rise. The Princess Margaret is committed to meeting that growing need while delivering on our promise of providing personalized cancer medicine, tailored to each individual patient's needs.

Our Transformation Campaign will dramatically improve the patient experience by providing a more comfortable environment and, most importantly, by putting patients' needs first.

Outpatient Pharmacy and Blood Collection Centre

The Outpatient Pharmacy and Blood Collection Centre are part of nearly every patient's experience. Expansion and reorganization of these key areas will accommodate current and future patient growth.

The new Pharmacy space will accommodate two automated prescription refill machines, an expanded staff of pharmacists, a private consultation room, and nine patient stations, four of which will be accessible.

Similarly, the new Blood Collection Centre will include three accessible collection stations, an expanded reception and waiting area, and functional upgrades such as a better patient flow process.

PAUL ALOFS SIGNS OFF AFTER 14 YEARS, WITH A BILLION-DOLLAR LEGACY

After a 14-year tenure, Paul Alofs stepped down as President & CEO of The Princess Margaret Cancer Foundation at the end of 2017.

Paul joined the Foundation in 2003 with a passion for the cause, after tremendous success in many other sectors from retail and entertainment to social enterprise.

During his term at the Princess Margaret, Paul led the successful five-year Billion Dollar Challenge and raised more than \$1.2 billion. He was instrumental in starting new fundraising programs such as The Ride to Conquer Cancer and helped to significantly grow the Princess Margaret Home Lottery program.

"He's allowed the cancer centre to become, really, one of the top five cancer centres in the world," said Dr. Bradly Wouters, Executive VP, Science and Research, University Health Network.



Paul Alofs stepped down as President & CEO of The Princess Margaret Cancer Foundation at the end of 2017. (Photo: TPMCF)

New Clinics

The Princess Margaret's first dedicated Outpatient Palliative Care Clinic will be located on the fifth floor. This clinic will give its multidisciplinary team more space and resources to meet the unique needs of palliative patients and their families. By creating a dedicated outpatient clinic, this important area of care will have greater profile and, hopefully, serve more patients and their family members.

The new Gynecologic Oncology Clinic will also be located on the fifth floor, consolidating three spaces into one convenient more patient-friendly location.



The new Blood Collection Centre will include three accessible collection stations, an expanded reception and waiting area, and functional upgrades such as a better patient flow process. (Illustration: TPMCF)

Patient Library

The Patient Education team at the Princess Margaret has nearly 900 unique pamphlets and an even greater number of digital resources and articles to help guide patients through every stage of their treatment.

The new space will allow for improved access to this information including open and accessible displays of pamphlets and books, an expanded multilingual collection, digital kiosks, a private consultation room, and access to resources in a beautiful, library-like space.

MICHAEL BURNS LEADS THE PRINCESS MARGARET CANCER FOUNDATION AS NEW PRESIDENT & CEO

The Princess Margaret Cancer Foundation welcomed Michael Burns as its new President & CEO in January 2018.

As the CEO of the 2017 Invictus Games in Toronto, Michael led the execution of the Games and built the organization from the ground up. With support from government, more than 100 corporate and community partners and countless volunteers, the Games were completely sold-out and generated the highest national and worldwide viewing audience ever.

Michael also brings more than 20 years of experience in marketing, financial services, technology and entrepreneurship to the role.

He is co-founder of the True Patriot Love Foundation, which supports Canada's military, veterans and their families by funding programs for mental health, physical rehabilitation, career transition and family services. He is Past Chair of the Michael Garron Hospital Foundation Board (formerly the Toronto East General Hospital Board Foundation) and successfully led the team that secured the Garrons' \$50-million donation.



Michael Burns, CEO of the 2017 Invictus Games in Toronto, became the new President & CEO of The Princess Margaret Cancer Foundation in January 2018. (Photo: TPMCF)

In Memory of Peter Munk (1927–2018): ‘A great inspiration to us’

Toronto General & Western Hospital Foundation lost one of its most influential and loyal supporters when Peter Munk passed away on March 28, 2018.

The Munks’ legacy of giving to UHN – more than \$180 million – was extraordinary, and will continue to transform the future of heart health for years to come.

“We will forever be grateful for Peter’s remarkable generosity, extraordinary vision and leadership,” says TGWHF President and CEO Tennys Hanson. “He was one of Canada’s most outspoken and passionate champions, and his tremendous support will have a lasting, positive impact on the lives of future generations.”

Peter and Melanie Munk came to UHN with their vision more than two decades ago when they established the Peter Munk Cardiac Centre in 1997. They were deeply involved in the evolution of the centre.

Historic gift of \$100 million

“Peter was a great inspiration to us,” says TGWHF Chair Jim Leech. “Throughout the years, his knowledge and guidance benefitted the leadership of UHN.



Peter Munk delivers an inspiring message in September of last year at Toronto General Hospital in an event to announce a \$100-million gift to the Peter Munk Cardiac Centre. (Photo: TGWHF)

“This is not only our loss. It is a loss for all of Canada.”

On Sept. 19, 2017, Peter and Melanie Munk announced a historic gift of \$100 million to the Peter Munk Cardiac Centre. To date, it is the largest single gift ever given to a Canadian hospital.

“By supporting a centre of excellence that aims to be the world’s leader in cardiac care, I believe we help not only the hospital and its patients, but also augment Toronto’s reputation for innovation and excellence,” Peter Munk said at the historic announcement.

‘Canada welcomed me with open arms’

“This gift reflects my enormous gratitude to Canada, to Ontario and to the talented and dedicated staff at the Peter Munk Cardiac Centre. I arrived in this country in 1949 with practically nothing, yet Canada welcomed me with open arms and gave me the opportunity to succeed.

“Every step in my career, I felt a common desire to do more for Canada.”

This latest gift will primarily be used to develop a data-driven digital cardiovascular health platform that reduces costs, advances medical research, and improves the outcomes of patients with cardiac and vascular disease.

By collecting, integrating and analyzing big data using emerging artificial intelligence tools, along with conducting new clinical trials and expanding expertise in genomic medicine, the Peter Munk Cardiac Centre will make individualized, evidenced-based therapy possible for patients.

‘We have lost a great friend’

“While we have lost a great friend, Peter Munk’s vision to provide outstanding, compassionate care for patients with cardiac and vascular disease will live on through the Peter Munk Cardiac Centre,” says Dr. Barry Rubin, Chair and Medical Program Director at PMCC.

“Through his incredible generosity, we will continue to work towards achieving the level of excellence in patient care, teaching and research that Mr. Munk expected.

“This is a legacy that all Canadians should be proud of.”

[Watch Peter Munk’s inspirational remarks on repaying Canada](#)



At the gift announcement last September, front row, (L to R) Melanie Munk, Peter Munk, Amie Munk, Anthony Munk; back row, (L to R) Toronto Mayor John Tory, Brian Porter, Chair of the Board of Trustees of UHN, TGWHF President and CEO, Tennys Hanson, TGWHF Chair Jim Leech, Dr. Eric Hoskins, former Ontario Minister of Health and Long-Term Care, Dr. Barry Rubin, Chair and Medical Program Director at PMCC, and former UHN President & CEO, Dr. Peter Pisters. (Photo: TGWHF)

Unprecedented \$20-million gift to build The Walter and Maria Schroeder Institute for Brain Innovation & Recovery

The scope of Toronto Rehab's work and care extends beyond our walls to meaningfully impact society's health and safety. Donors to the Toronto Rehab Foundation are excited about the tangible results of our innovations, and we are beginning to welcome a new stratum of philanthropists who want to propel the success of the world's leading rehabilitation research centre.

Representing the largest donation ever made to a rehabilitation hospital in Canada, the Schroeder family's \$20-million gift made this past year has established The Walter and Maria Schroeder Institute for Brain Innovation & Recovery.

"We are standing at the threshold of extraordinary advances in healthcare – the Schroeder's philanthropy has just opened that door," said Cindy Yelle, President & CEO of the Toronto Rehab Foundation.

Brain disorders such as Alzheimer's, Epilepsy and Parkinson's are among the most serious health problems facing society, causing untold human suffering and enormous economic costs. They are also among



the most enigmatic of all diseases. The Schroeder family's \$20 million investment will help accelerate the development of new treatments and protocols.

The Walter and Maria Schroeder Institute will allow us to build a collaborative group of multi-disciplinary experts in engineering and the clinical neurosciences across UHN and the University of Toronto to accelerate novel neuro-technological breakthroughs. It will create an environment and framework to:

- advance technology through CRANIA (CenteR for Advancing Neuro-technological Innovation to Application) to further understand and treat neurological conditions;
- test and implement new therapies that may help to restore function for patients with disorders affecting the nervous system; and
- develop treatments and technologies that can be delivered to people regardless of their geographical location.

The Walter and Maria Schroeder Institute for Brain Innovation & Recovery will help Toronto Rehab and

UHN take the quantum leap to revolutionize the science behind brain recovery and help maximize the lives of millions.

Walter and Maria Schoeder (standing, centre) celebrate the gift announcement with senior members of The Walter and Maria Schroeder Institute for Brain Innovation & Recovery team. Back (L to R) Toronto Rehab's Director of Research, Dr. Milos Popovic, Dr. Andrea Iaboni and Dr. Katherine McGilton; Front (L to R) Dr. Robin Green and Dr. Alex Mihailidis.
(Photo: TRF)

Ride Rockets to a World Record

In Toronto's Nathan Phillips Square, more than 300 "officially amazing" participants rocketed the Toronto Rehab Foundation to a Guinness World Record for the most money raised in a static cycling event. The Rocket Ride for Rehab on Oct. 14, 2017 raised more than \$275,000 and engaged an incredible crowd of past patients, supporters, scientists, clinicians, staff, family and friends in the five-hour relay event. This year's event is set for Oct. 13, 2018.

[Read more about the record-breaking day.](#)



The Rocket Ride for Rehab last October was one for the record books. (Photo: TRF)

Tribute to an Incredible Couple

The Toronto Rehab Foundation was the grateful recipient of proceeds from The St. George's Society of Toronto 2017 Red Rose Ball. Award of Merit recipients David and Sheryl Kerr have long embraced the innovation and care at Toronto Rehab and, through this event and beyond, they have engaged a flourishing community that is helping make incredible happen.

[Read a story and watch a video about the event.](#)

Improving the health of Canadians

Medavie Health Foundation is partnering with Toronto Rehab to provide the necessary health information and support for at-risk Canadians to take control of their health and reduce their risk of developing chronic disease. The four-year, \$750,000 investment will result in an e-health solution to include online coaching and tailored exercise plans. Together, we will empower people with the motivation and tools to live better.

[Read the full story and watch a video.](#)



(L to R) Cindy Yelle, President & CEO, Toronto Rehab Foundation, Bernard Lord, CEO, Medavie, Dr. Paul Oh, Medical Director, Cardiovascular Prevention and Rehabilitation Program, Toronto Rehabilitation Institute, Patty Faith, Executive Director, Medavie Health Foundation, and Michael Eizenga, Board Member, Toronto Rehab Foundation. (Photo: TRF)

Financial Highlights

For the year ended March 31, 2018
(in thousands of dollars)

| REVENUE | \$ | ASSETS | \$ |
|--|------------------|--|------------------|
| Ontario Ministry of Health and Long-Term Care/ | | Current | |
| Toronto Central Local Health Integration Network/ | | Cash and cash equivalents | 137,828 |
| Cancer Care Ontario | 1,269,539 | Accounts receivable | 214,989 |
| Other patient services | 212,064 | Inventory | 18,319 |
| Grants and donations for research and other purposes | 323,266 | Prepaid expenses | 20,403 |
| Ancillary services and other | 345,804 | Long Term | |
| Amortization of deferred capital contributions | 64,706 | Loans receivable | 2,450 |
| | 2,215,379 | Capital assets, net | 1,258,158 |
| EXPENSES | | Long-term investments | 394,279 |
| Compensation | 1,369,596 | | 2,046,426 |
| Medical, surgical supplies and drugs | 307,974 | LIABILITIES AND NET ASSETS | |
| Other supplies and expenses | 277,512 | Current | |
| Plant operations and equipment maintenance | 121,990 | Accounts payable and accrued liabilities | 422,573 |
| Amortization | 108,487 | Current portion of long-term liabilities | 22,786 |
| Interest on long-term liabilities | 13,446 | Long Term | |
| | 2,199,005 | Due to MaRS Development Trust | 73,234 |
| Excess of revenue over expenses for the year | 16,374 | Deferred research contributions | 208,536 |
| | | Long-term debt | 117,540 |
| | | Employee future benefit liabilities | 49,470 |
| | | Deferred capital contributions | 666,514 |
| | | | 1,560,653 |
| | | Net Assets | |
| | | Internally restricted | 133,132 |
| | | Unrestricted | 354,688 |
| | | | 487,820 |
| | | Accumulated remeasurement losses | (2,047) |
| | | | 485,773 |
| | | | 2,046,426 |

Program Grouping Activity

| UHN | Inpatient Separations * | Inpatient Weighted Cases+ | CCC RUG Weighted Patient Days ** | Day Surgery Cases ~ | Day Surgery Weighted Cases ^ | Ambulatory Visits * |
|-------------------------------|-------------------------|---------------------------|----------------------------------|---------------------|------------------------------|---------------------|
| Acute | 37,496 | 89,816 | | 32,266 | 7,310 | 1,023,559 |
| Rehab | 2,328 | 3,626 | | | | |
| Complex Continuing Care (CCC) | 501 | | 64,820 | | | |
| Rehab and CCC Combined | | | | | | 105,787 |
| Total | 40,325 | 93,442 | 64,820 | 32,266 | 7,310 | 1,129,346 |

* Data is based on General Ledger for Acute, NRS for Rehab, and CCRS for CCC, PHS for Rehab & CCC Ambulatory Visits;
+ 2017 HIG Weights for Acute, 2017 RPG Weights for Rehab; ** 2017 RUG III Grouper; ~ Coding (NACRS);
^ 2017 CACS ON Weights; * excludes radiation fractions and emergency visits.

Site Activity

| Site | Beds * | Inpatient Days | Clinic & Day/Night Care Visits | Emergency Visits |
|-------------------------|--------------|----------------|--------------------------------|------------------|
| TGH | 432 | 154,750 | 368,847 | 52,425 |
| TWH | 274 | 98,891 | 370,297 | 70,153 |
| Princess Margaret | 135 | 46,939 | 284,415 | |
| TRI - Bickle Centre | 208 | 60,626 | 2,266 | |
| TRI - University Centre | 161 | 53,590 | 40,113 | |
| TRI - Lyndhurst Centre | 60 | 18,910 | 9,736 | |
| TRI - Rumsey Centre | | | 53,672 | |
| Total | 1,270 | 433,706 | 1,129,346 | 122,578 |

* Beds staffed and in operation.

Research Activity

| UHN Research Activity by Program | 2017/2018 |
|-------------------------------------|----------------|
| (in thousands of dollars) | |
| Arthritis Program | 17,543 |
| Joint Department of Medical Imaging | 3,715 |
| Krembil Neuroscience Centre | 32,037 |
| Laboratory Medicine Program | 5,844 |
| Medical and Community Care Program | 48,394 |
| Multi-Organ Transplant Program | 15,766 |
| Peter Munk Cardiac Centre | 19,460 |
| Princess Margaret Cancer Centre | 187,772 |
| Surgery & Critical Care Program | 34,884 |
| Toronto Rehabilitation Institute | 14,815 |
| Total | 380,230 |

Trends Report

Inpatient and Outpatient Activity

(thousands)



Revenue

(\$ millions)



External Research Funding Awarded

(\$ millions)

