



# Report to Our Community

2018/19 UNIVERSITY HEALTH NETWORK

**UHN** T r n t General  
T r n t Western  
Princess Mar aret  
T r n t Rehab  
Michener Institute

# UHN's vision is to deliver A Healthier World

It is our pleasure to present UHN's 2018/19 Report to Our Community.

By any measure, it has been a remarkable year for TeamUHN, filled with clinical, scientific and educational world firsts. Our teams continued to be driven by their deep passion to provide superb care for our patients and their families.

We are delighted to highlight some of most significant achievements from the past year:

- UHN has been **recognized by *Newsweek* as one of the top 10 hospitals in the world.**
- We have maintained our track record as **Canada's top research hospital** – a position we have held since 2011.
- We continued to shape the health professionals of tomorrow as **Canada's largest training site.**
- With a focus on creating a vibrant Canadian economy, we were pleased to be **named Canada's top patent leader for hospitals.**



Dr. Kevin Smith

Brian J. Porter

Our achievements are made possible thanks to TeamUHN, which includes staff, physicians, researchers, learners and volunteers. The stories included in this report will give you an even better understanding of their extraordinary individual and collective impact.

This year, we would like to especially recognize the contributions of our nursing and allied health teams, who are key to being recognized as a world “top 10” hospital.

2018/19 also saw the important launch of UHN's Health and Social Policy initiative, a recognition of the important role we must play in the broader health of the population.

Healthcare is changing and UHN will continue to lead the way, by implementing our Strategic Plan to create A Healthier World. The future is about partnerships and we look forward to continuing to build meaningful ones with patients, communities, philanthropists, industry and peer organizations.

In closing, we want to express our appreciation to the Government of Ontario, our principal funder, and the Government of Canada for research funding. We steward these investments understanding the responsibility of using taxpayer resources.

Thank you for your support and dedication to UHN.



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

Dr. Kevin Smith  
President & CEO, UHN

Brian J. Porter  
Chair, UHN Board of Trustees

# Our guide for making important choices at UHN

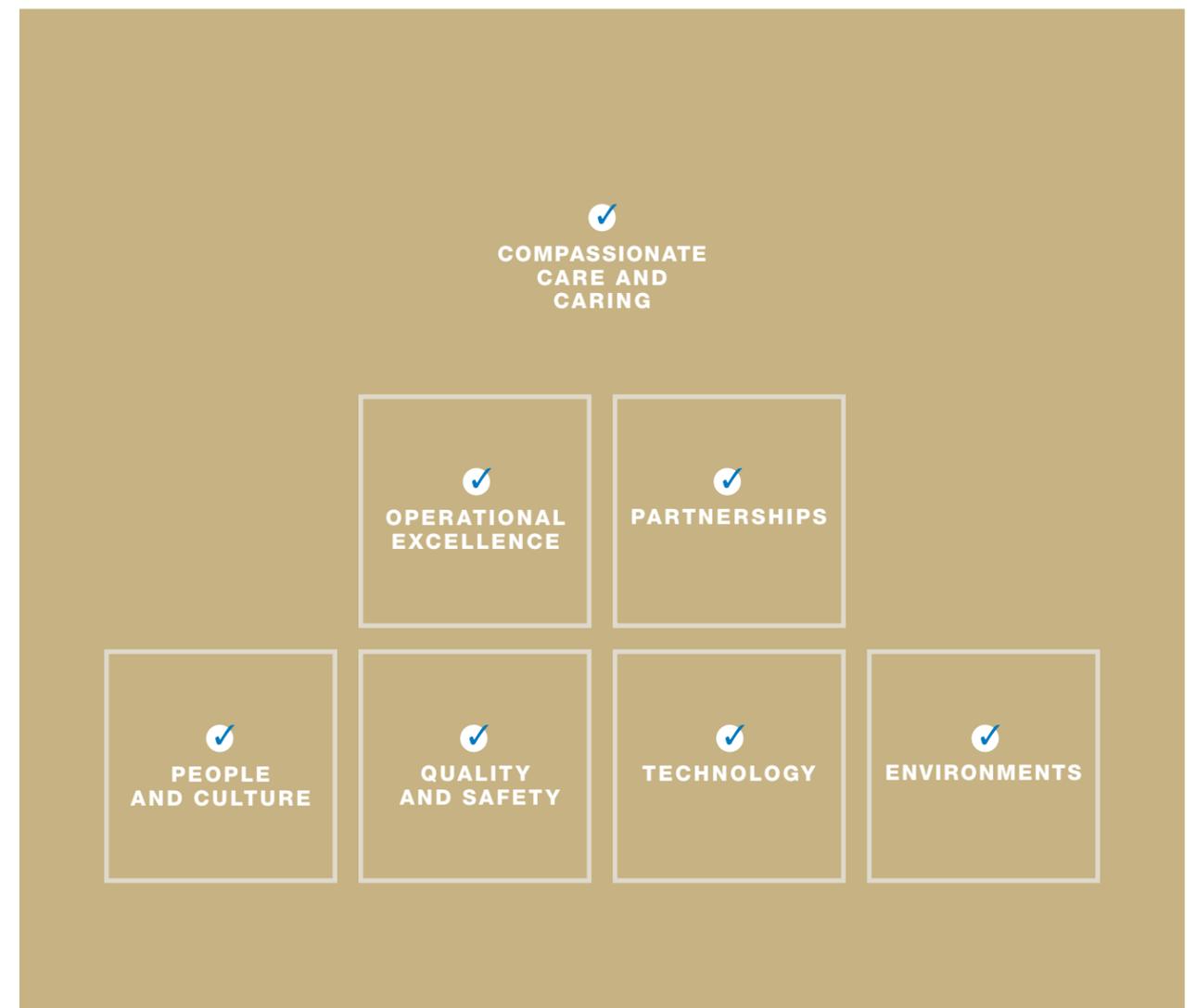
UHN's Strategic Plan is our guide for making important choices to advance care, research and education. Built on the trust of patients and passion of TeamUHN, our Strategic Priorities below will drive us toward our vision of A Healthier World.



# Our Essentials

When people come to UHN, they can and should expect the highest quality in the domains below – and it's our privilege to deliver on these essentials. They represent our central responsibilities as a leading academic health sciences centre.

**UHN's Strategic Priorities build on our Essentials and help us create A Healthier World.**





# UHN and U of T launch CRANIA

New centre to advance solutions for diseases such as Parkinson’s and Alzheimer’s

The Center for Advancing Neurotechnological Innovation to Application (CRANIA) aims to find safe and permanent solutions for conditions that have been haunting humanity, such as Alzheimer’s, Parkinson’s, depression, epilepsy, chronic pain, spinal cord injury, amongst many others.

Just how will it do that? Through unique technological advancements invented and made in Canada, and applied to the field of neuromodulation.

Neuromodulation uses sophisticated devices that can be implanted in a patient’s brain, spinal cord or peripheral nerves. These devices modulate neuronal activity, either through electric, or chemical stimulus. They can help control tremors from Parkinson’s, relieve chronic pain or even improve bladder control. It is a field that is progressing rapidly in medicine.

Dr. Taufik Valiante, scientist at the Krembil Research Institute, neurosurgeon at Toronto Western Hospital and co-founder of CRANIA, says that although Canada has a strong tradition of research in healthcare, it has lagged behind in neuromodulation development and commercialization. CRANIA is changing that.

“When we import technology we have no ability to change it and to innovate,” says Dr. Valiante. “At CRANIA, we will have this unique multi-disci-



Drs. Milos Popovic and Taufik Valiante

plinary and integrated approach that will allow us to better understand brain dysfunctions and develop new solutions for our patients.”

Currently, the state-of-the-art approach in many areas of neuroscience typically treats an area or region, rather than pinpointing the source of the problem.

“It’s like giving antibiotics to a whole city because one person has an infection,” says Dr. Milos Popovic, Research Director at the Toronto Rehabilitation Institute (TRI) and the co-founder of CRANIA. “We end up hitting a lot more neurons than we need to, healthy neurons... At CRANIA we will drastically improve accuracy and precision of treatments, targeting only the diseased neurons, and preserving many more of the already healthy ones.”

CRANIA researchers are using highly-advanced technologies to better understand how these diseases affect the brain. By analyzing this data using machine learning, they will be able to develop customized solutions which will target a specific dysfunction with less or no side effects.

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Dr. Claire Karekezi

## She followed her impossible dream and now becomes Rwanda’s first female neurosurgeon

Building her career as a neurosurgeon, being Black, African and a woman was never easy, says UHN fellow Dr. Claire Karekezi. She proudly went home to Rwanda in July as the country’s first female neurosurgeon and now specializes in neuro-oncology.

“Being an outsider, you have to prove yourself and show that you are deserving of that opportunity every step of the way,” she says.

“But I learned that if you work hard and if you are able to build relationships, no matter who you are or where you come from, things will eventually fall in place and you will succeed.”

UHN is committed to advancing equity, diversity and inclusion here and beyond.

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### More stories

- [Toronto General Hospital recognized in world top-10 ranking](#)
- [New cell manufacturing facility opens at MaRS](#)
- [The Princess Margaret in new national network of cancer centres named for Terry Fox](#)
- [Toronto recognized as international hub for cystic fibrosis care](#)



# Transplant journey

## How sports and a family saved a man's life

Sports and family have always been a great part of David Roberts' life. From basketball, football and hockey in his youth to triathlon later in his life, sports were a way of being connected with his loved ones and keeping active.

Training hard was part of David's routine for as long as he could remember. That's why when he started feeling overtired and had difficulty breathing about six years ago, he knew something wasn't right.

David had Idiopathic Pulmonary Fibrosis (IPF). It's a disease doctors don't know the cause of and which has no effective cure other than transplant.

IPF affects an estimated 15,000 people in Canada. It causes scarring in the lungs which progressively become thick and stiff until the patient can't breathe. Without transplant, the life expectancy of a patient with IPF is three to five years.

"I always took pride in being a person that can put up with anything, and I got hit by a disease that had no known cause, and there was very little I could do to stop it," David says. "It was a shocker, but together with my family, I found the strength to keep moving forward."

When he fell sick, David was actually training for one of the hardest endurance races in the world – the Ironman – which includes a 3.8-kilometre swim, 180-kilometre bicycle ride and marathon run (42.2 kilometres), and takes an average participant 12 hours to finish.



David and Susan Roberts

A retired teacher with two children and four grandchildren, David, now age 66, got into triathlon in his 50s with the main goal of having a new challenge and sharing it with his son and daughter, who had recently engaged in the sport.

And it really was a challenge. David is from Prince Edward Island and lived most of his adult life in New Brunswick, but until then he didn't know how to swim.

"People assume we from New Brunswick or P.E.I. know how to swim, but we don't," he says. "We work in the water, we don't play in the water."

"I was on my couch eating chips, watching them race and I thought to myself – I can do this. I know how to run and to bike, if I just learn how to swim I can join them."

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## Getting to a state-of-the-art stage of minimally invasive vascular surgery

Dr. Thomas Lindsay performed a percutaneous thoraco-abdominal aneurysm repair, which is believed to be a first in Canada, inserting a customized graft through three small incisions of less than one centimetre each.

The graft is custom-made for each patient, designed in the United States and produced in Australia. In the OR, you have a highly-specialized team of surgeons, anaesthetists, radiologists, nurses, radiologist technicians, spinal cord technicians – all trained to do a very precise job.

"My generation, we were trained to do repairs for this type of aneurysm in open surgery," says Dr. Lindsay. "Something like this was a pipe dream when I was training."

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### More stories

- The 'miraculous' work at UHN Emergency Departments
- Six-year-old donates birthday money to Parkinson's research
- Learning together: developing a treatment plan for a 'first case'



# Snapshots of caring, compassion and teamwork in UHN Emergency

## Doctor uses her camera to take us behind-the-scenes

For the uninitiated, a hospital Emergency Department (ED) is all high-stakes drama. Teams of healthcare professionals racing to save patients suffering a heart attack, stroke, or accident.

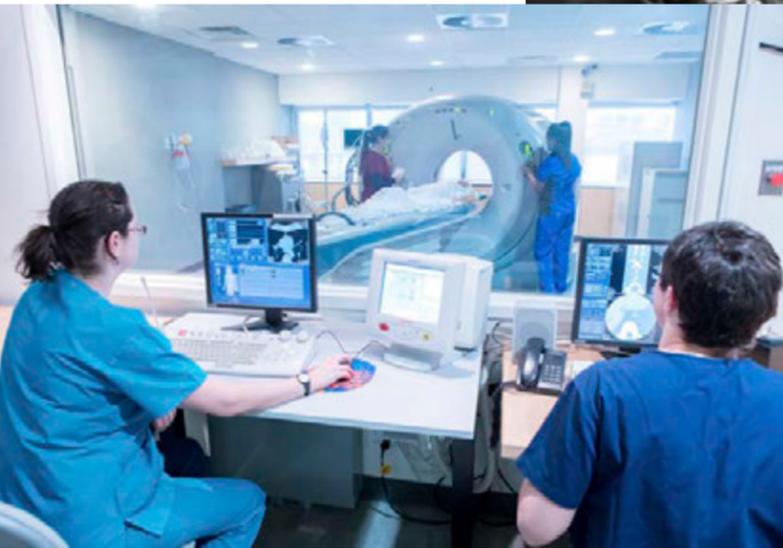
Those incidents happen. But they only capture a fraction of what comes through the doors each day at UHN. The Toronto General Hospital and Toronto Western Hospital EDs receive 120,000 patient visits a year for a range of ailments as diverse as the population they serve.

So, when UHN ED doctor Dawn Lim approached *UHN News* about using her camera to document a “day-in-the-life” of a UHN ED, it was an opportunity that could not be missed.

For this photo essay, Dr. Lim set out to tell everyday ED stories through her lens. They include a 73-year-old woman who arrived with a dislocated hip and a mechanic with a mangled finger. Also captured are ED staff members working to save the lives of an elderly patient suffering a stroke and a young man who attempted suicide.

The images are raw, gritty and powerful. They are also a beautiful tribute to the seamless teamwork, passion, courage and caring displayed by UHN ED staff every day.

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## A better way to learn about X-rays

Faculty and students at the Michener Institute of Education at UHN will soon have access to a secure, de-identified digital image bank with complete X-ray procedures that reflect the reality of clinical practice.

Through a partnership with the Joint Department of Medical Imaging (JDMI), Michener’s radiological technology faculty and students will have access to this digital image library for their upcoming winter semester. The image bank will enhance the program’s current host of teaching resources.

In the past, the program faculty largely used film-based images and augmented the library with images from publishers and the Internet.

“While film and digital images can be used for fundamental X-ray assessments, digitally-acquired images can highlight different techniques and considerations for students,” says Alex Gontar, Professor of Radiological Technology at Michener.



UHN Digital was instrumental in leading the collaboration across JDMI, Michener, UHN Privacy and Legal Affairs. To ensure the privacy and safety of all patients and their medical images, these teams implemented proper de-identifying processes for long-term student and faculty use.

“This is another great example of how our teams are enabling a strong partnership between JDMI and Michener,” says Leon Goonaratne, Senior Director for Digital JDMI and Cardiac. “We want to continue to enrich the education of Medical Radiation Technologists and provide students with the tools to thrive in this rapidly advancing digital era.”

[■ READ MORE](#)

## More stories

- [Preparing TeamUHN for a mass casualty incident response](#)
- [A day in the life of cardiac surgeon and scientist](#)
- [UHN launches 2019-23 Strategic Plan](#)



# Checking in on the hour

Intentional rounding helps Toronto Western team enhance patient safety and team-based care.

It's 8 a.m. on the General Internal Medicine (GIM) in-patient unit on 3B Fell at Toronto Western Hospital, when nurse Deb Desveaux collects the rounding sheet from the nursing station.

At the start of that day's shift, Deb signed up for the 8 a.m. and 1 p.m. time slots on the intentional rounding schedule – where nurses on the unit assign themselves to proactively check on each patient every hour outside of their scheduled times for care.

“How are you doing today?” Deb says to the patient in the first room on her round.

“Is there anything I can do for you?”

Started by a 2016 Krembil Nursing Award idea proposed by then 4B Fell nurses Marcella Chung and Pearl Lau, intentional – or hourly – rounding has made a positive difference to patient care on 3B Fell, a mixed GIM/Cardiology unit.

“Hourly rounding has enhanced patient safety, fostered a team-based approach to care, and provided reassurance to both patients and staff that everyone's needs are being taken care of,” says Deb, who has been with the team for more than four years.

On any given day, each nurse on the unit is assigned four to five patients on average. Before hourly rounding was adopted, nurses mostly focused on the patients they were responsible for. As such, checks on patients outside of medication or other point of care times could occasionally be inconsistent if a nurse became busy with an unstable patient or other duties.



Nursing team on Toronto Western's 3B Fell

All nurses would respond to call bells, but patients and their families would sometimes not understand why they hadn't seen their assigned nurse in a while during the shift.

Hourly rounding has helped to change that. Each 12-hour shift, nurses sign up for one or two slots of rounding. They visit every patient and check in with what's called The 5 Ps: pain, promotion of continence, position, physical environment, and promise – where the nurse promises the patient to come back with what they requested whether it be information, help or something else.

On the rounding sheet, the nurse will check off having seen each patient and note any changes in their condition or if any care was provided.

“Hourly rounding has helped to promote a change in mindset for nurses because it is providing care based on what the patient identifies as a need and not the care schedule,” says Sandra Li-James, Director, Professional Practice at TW.

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## More stories

- Working with Seniors program empowers future healthcare professionals
- Study finds heart-to-heart talk appears to boost use of cardiac rehab
- ‘We need to treat the whole person’

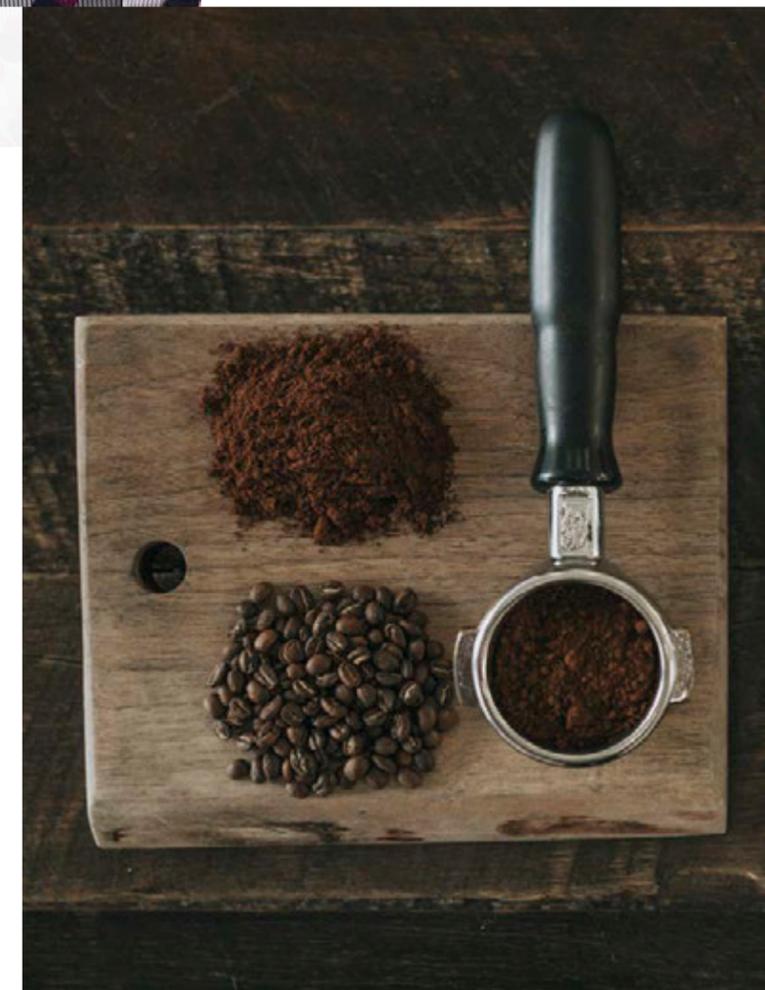
## How coffee may protect against Alzheimer's and Parkinson's

Coffee is more than just a simple beverage. Around the world, many would consider coffee a ritual, an essential part of their morning and a secret weapon in their arsenal to survive the workday.

A staple of early mornings and a saviour for late nights, approximately 500 billion cups of coffee are consumed worldwide each year.

A recent study by Dr. Donald Weaver, Senior Scientist and Research Director of the Krembil Brain Institute, suggests this enormous java infatuation may provide additional health benefits beyond a boost in energy and attention – drinking coffee could also possibly protect against developing both Alzheimer's disease and Parkinson's disease.

■ [READ MORE](#)



# myUHN Patient Portal reaches latest registration milestone

Secure website empowers patients to be partners in care

In April 2019, myUHN Patient Portal hit its latest milestone – 75,000 registered patients.

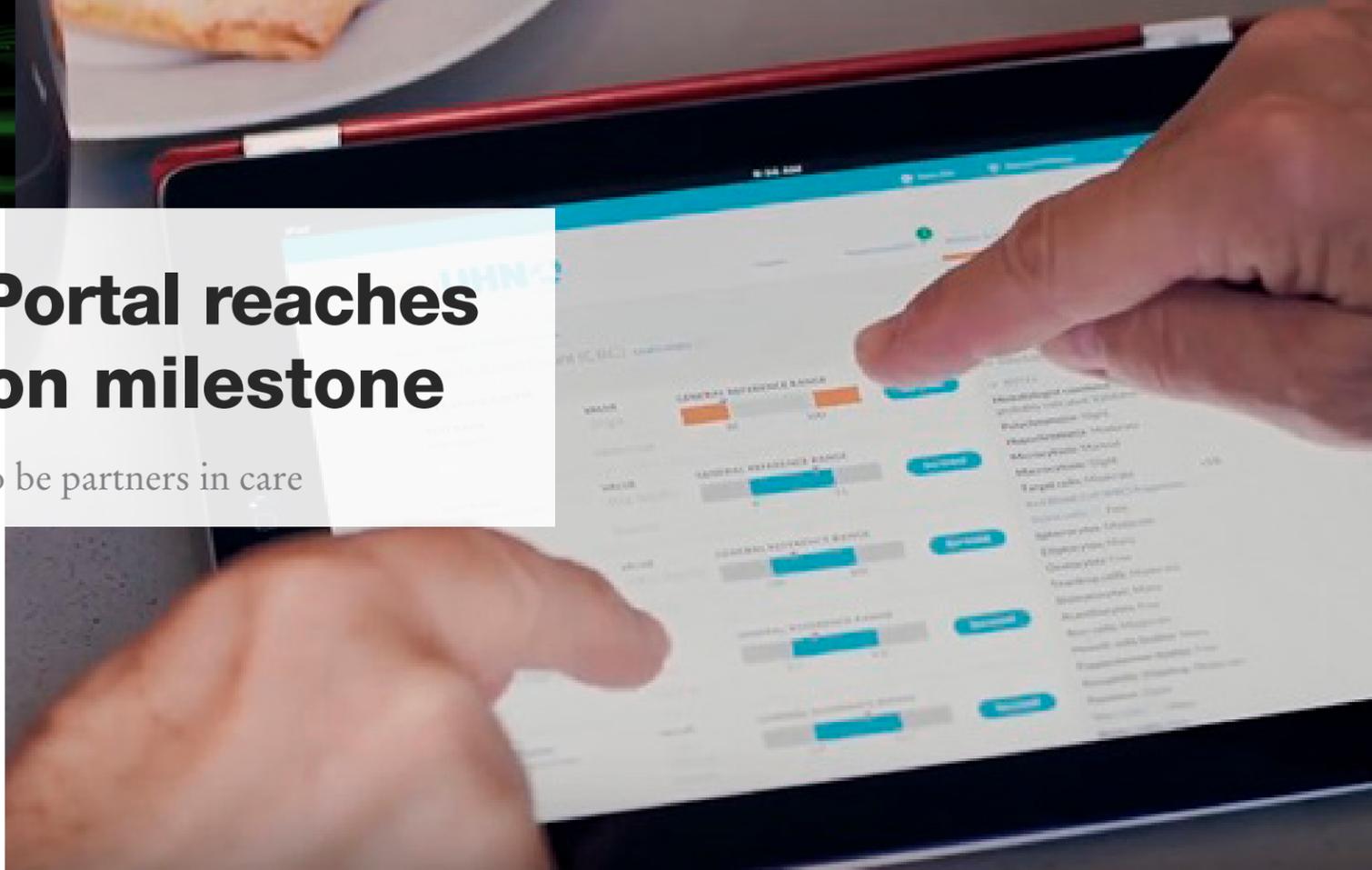
myUHN is a secure website that makes appointments, test results, pathology and diagnostic imaging reports and clinic notes available to patients in real-time. It allows patients to share their information with caregivers or family doctor, empowering them to become partners in care.

myUHN also includes patient education resource links, to help patients and caregivers better understand health information. myUHN demonstrates the organization’s Purpose, Values and Principles in action, exemplifying how the needs of patients always come first.

Since its inception, myUHN has been about teamwork; the portal was designed and built in-house by UHN Digital, in collaboration with patients, caregivers and staff. Patients said they wanted real-time access to their health records and information. Their view was that having immediate access to results would reduce anxiety, give them time to process the information and prepare questions in advance of appointments.

“Our patients are people who are invested in their own health,” says Dr. Joy Richards, Vice-President of Patient Experience and Chief Health Professions. “They want their information so they can have more meaningful conversations with their care team in order to make more informed decisions.”

In addition, myUHN is promoted by several community organizations – St. Hilda’s Senior Care Community, West Neighbourhood House, the



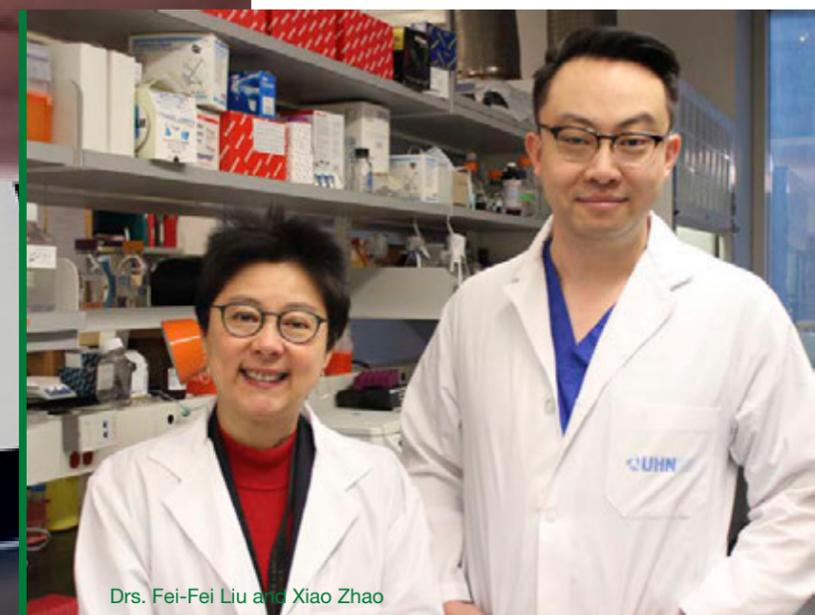
Leukemia & Lymphoma Society of Canada, and many more – as a way to engage patients and provide a seamless quality of care between UHN and our community health partners.

Continuous feedback has played an important role in making myUHN work for patients and staff. Bringing patients, caregivers, and staff together often to foster collaboration, identify patient needs and priorities, explore challenges and solutions and make joint decisions has been an important part of myUHN’s success.

This past winter, the myUHN Patient Portal team completed a benefits evaluation. Nearly 10,000 responses were received from patients, who reported:

- 94 per cent improved management of care
- 93 per cent improved communication
- 92 per cent better able to make decisions

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Drs. Fei-Fei Liu and Xiao Zhao

## New approach may curb treatment-related skin fibrosis in cancer patients

A clinical-scientific team specializing in head-and-neck cancer has identified a way to manipulate metabolism to potentially curb skin fibrosis – a common side effect of radiotherapy affecting quality of life of cancer survivors.

The study findings from the laboratory of principal investigator Dr. Fei-Fei Liu, Chief, Radiation Oncology, Princess Margaret Cancer Centre, are published online in *Nature Metabolism*.

First author Dr. Xiao Zhao, a resident in head-and-neck surgery who completed PhD studies with Dr. Liu, says the research team wanted to find a way to reduce radiation-induced fibrosis, a condition where normal tissue progressively thickens causing pain and dysfunction. There is currently no effective treatment to reduce this accumulation.

[■ READ MORE](#)

### More stories

- [How artificial intelligence could unlock Parkinson's greatest mysteries](#)
- [Precision imaging goes head-to-head with prostate cancer](#)
- [Revealing the molecular mystery of human liver cells](#)

# A Record Year

The Princess Margaret Cancer Foundation raised more than \$122 million



**\$50M**

Major and Estate Giving donors



**\$29.7M\***

366,426 Home Lottery ticket purchasers

\* Net Proceeds



**\$20.6M**

Enbridge Ride to Conquer Cancer, 5,042 participants



**\$6.0M**

Rexall OneWalk to Conquer Cancer, 3,300 participants



**\$2.6M**

Scotiabank Road Hockey to Conquer Cancer, 150 teams



**\$1.6M**

Journey to Conquer Cancer, 3,500 participants

**\$112.1 MILLION**

NET FUNDRAISING AND LOTTERY REVENUE (YEAR ENDING MARCH 31, 2018)



**\$1.3M**

Golf to Conquer Cancer, presented by Harry Rosen



**11.9K**

Doves dedicated to loved ones during the 17<sup>th</sup> Annual Doves of Hope campaign



**\$368K**

At Chinese community radiothons and campaigns



**150+**

Signature programs and third party community events

The Princess Margaret Cancer Foundation hit a new milestone with \$112.1-million in net fundraising and lottery revenue raised by March 31, 2018. These funds will enable Future Care Now at Princess Margaret Cancer Centre, one of the top five cancer research centres in the world.

The impact of these gifts is realized every day at the Princess Margaret. Our Research Campaign continues to fuel discovery across six pillars of cancer research, benefiting from a \$10.5-million anonymous gift to support Dr. Tak Mak and the Therapeutics Group, as well as Canadian senior mining company Agnico Eagle's \$5-million investment in Immunotherapy.

We successfully completed our fundraising campaign for the da Vinci robot, which is revolutionizing surgeries for some cancers, including head and neck and bladder cancer. This was made possible thanks to the support of our community of donors.

We continue to advance on fundraising for the Space Transformation Campaign, enabling the physical space to better reflect the world-class treatment and care patients receive. The \$50-million campaign has already seen re-openings of the Gynecologic Oncology and Palliative Care Clinics, and transformations on the main floor lobby, Outpatient Pharmacy, and Blood Collection Centre. With the continued support of our donors, we look forward to completing this project in the coming year.

We are grateful to our broad community of supporters - from our generous donors and volunteers to our walkers, riders, lottery purchasers and Cancer Centre partners - for helping us reach this record level of impact in cancer care and research benefiting patients at the Princess Margaret and around the world. Together, we are creating Future Care Now at the Princess Margaret.

The generous support of our community through philanthropy, events, and our home lottery program enables our cancer experts to accelerate cancer research and care each day at The Princess Margaret. Highlights of our fundraising year include:

- Major and Estate Giving donors contributed over \$50-million in philanthropic support, which included one of the largest Estate Gifts ever to our Cancer Centre
- Over 5,000 people participated in the Enbridge Ride to Conquer Cancer, raising over \$20.6 million, and 3,300 walkers raised \$6 million at the Rexall OneWalk to Conquer Cancer
- The 17<sup>th</sup> Annual Doves of Hope campaign saw almost 12,000 Doves dedicated and more than \$1 million raised
- The Chinese community actively participated in radiothons and various other campaigns to raise more than \$368,000
- Our new Colour To Conquer program inspired participants from more than 200 cities across Canada to colour their hair to raise funds for cancer research
- The Princess Margaret Home Lottery set a record, with net revenue of \$29.7-million, with over 365,000 tickets sold across Ontario

# World-leading knowledge fuels exceptional year

After an impressive wrap-up to the Billion Dollar Campaign, Toronto General & Western Hospital Foundation (TGWHF) had an exceptional year, raising more than \$153.5-million in fundraising revenue, from a record individual 85,163 gifts thanks to incredible donors and volunteers. Central to this past year's success were two transformational gifts that were made in recognition of UHN's vast pool of knowledge in surgery and in neurodegenerative diseases.

## Gift will further transform surgical innovation at UHN

Eric and Vizma Sprott, through The Sprott Foundation, made a second \$25-million commitment to support the Sprott Department of Surgery at UHN.

"This latest gift from The Sprott Foundation will further transform surgical innovation at UHN, enabling our world-leading research and life-saving surgical care," said UHN Surgeon-in-Chief Dr. Shaf Keshavjee. Funds will be used for a range of surgical upgrades at Toronto General and Toronto Western hospitals, including new imaging equipment, 3-D printing technology, modernization of existing surgical suites at Toronto Western Hospital, enhanced Intensive Care Units for transplant patients, an interventional suite dedicated to minimally invasive treatment and enhancements to the Emergency Department.



Eric and Vizma Sprott



Dr. Anthony Lang

"We support organizations that are leaders in their field," said Eric Sprott. "Surgeons at UHN performed the world's first successful single- and double-lung transplants. These innovations have saved the lives of millions of patients around the world, and we are proud to partner with UHN to fuel the next world-changing discovery."

In 2012, The Sprott Foundation made a \$25-million gift in support of the Department of Surgery at UHN, bringing their giving total to over \$50 million. In recognition of this generosity, the Sprott Department of Surgery at UHN was named. It is one of the largest surgical programs in Canada and consists of 39 staffed operating rooms, with surgical teams performing more than 25,000 surgeries a year.



## Finishing the year with an international accolade

Along with the Mayo Clinic and the Cleveland

Clinic, Toronto General Hospital was cited by *Newsweek* as one of the top 10 hospitals in the world. It is the only Canadian hospital on the list and was recognized for leading transplant research and innovation, including a triple organ transplant, and for cardiovascular care at the Peter Munk Cardiac Centre. "This international recognition would not be possible without the support of our donors who fuel this innovation," said TGWHF Board of Directors Chair Raj Kothari.

## A powerful partnership will create flagship centre

A landmark gift from The Rossy Foundation will create the new Rossy Progressive Supranuclear Palsy Centre at the Krembil Brain Institute. The Centre will nurture the future of research in this area, and translate the latest research developments to patient care. Progressive supranuclear palsy (PSP) is an uncommon brain disorder that affects movement, balance, speech, swallowing, vision, mood, behaviour and cognition.

As with Parkinson's disease, PSP is caused by a deterioration of brain cells in a few specific areas in the brain, mainly in the brain stem. There is no effective treatment for PSP and this is something Dr. Anthony Lang, Director, Edmond J. Safra Program in Parkinson's Disease, Director, Morton and Gloria Shulman Movement Disorders Clinic, and his team will tackle with this new centre.

"This transformational philanthropic investment will help us address a major unmet need both in Canada and worldwide," said Dr. Lang, who will serve as Director of The Rossy PSP Centre. "It will enhance our strengths, and establish a world-class program that will collaborate with a select group of international PSP research centres. We are tremendously grateful to the Rossy family for their visionary leadership."

Based in Montreal, The Rossy Foundation's mission is to contribute to civil society and to improve the lives of Canadians with a focus on health care, mental health, civic engagement, education and the arts. The Foundation was inspired to support UHN after learning about the incredible work of Dr. Lang and his team.



# \$100-million campaign helps shine a light on Toronto Rehab



One man's triumph over tragedy has led to the incredible team of individuals who are supporting each other to accomplish their goals and give back. Led by founder Robert MacDonald, TEAM "I WILL," has raised \$340,000 since 2015 and is best described as a "living and breathing self-improvement support system."

■ [READ MORE](#)

Toronto Rehab Foundation's Where Incredible Happens Campaign has achieved its \$100-million goal — a new fundraising landmark for rehabilitation in Canada — while helping shine a light on the accomplishments that have distinguished Toronto Rehab as a leader in rehabilitative research and care.

Key ways that campaign support is helping make incredible happen include:

- Facility and equipment upgrades to improve care
- Bolstering research infrastructure to advance Discovery and home, community and hospital-based innovations
- Funding scholarships and resources to forward Learning for patients and staff
- Flexible donations that allow Toronto Rehab Foundation to respond to emerging areas of greatest need
- At the Campaign Celebration on September 26, 2018, trees were beautifully lit to help broadcast that Toronto Rehab is one of the brightest lights in Canadian healthcare

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■ [YEAR IN REVIEW VIDEO](#)



Linda Mezon

Dean Connor

Dr. Kevin Smith

With many of the Foundation's board of Directors, Campaign Cabinet, and major donors attending, the heartfelt remarks from Dean Connor, Linda Mezon and Dr. Kevin Smith served to acknowledge and thank our benefactors, volunteers and staff for their role in helping Make Incredible Happen at Toronto Rehab.

We are honoured to thank and recognize the individuals, corporations, foundations and community groups that have generously supported Toronto Rehab Foundation. Each gift supports facilities, programs and research that will help rehabilitation provide independence, confidence and vitality.

■ [READ MORE](#)

"The support and generosity of our volunteers and donors is helping accelerate the pace of progress, from scientific discoveries to meaningful patient treatments. It allows us to create new technologies that will bring hope to people in Canada and around the world. And it will continue to make Toronto Rehab a place Where Incredible Happens."

Linda Mezon  
CHAIR, BOARD OF DIRECTORS  
TORONTO REHAB FOUNDATION

# Financial Highlights

For the year ended March 31, 2019

(in thousands of dollars)

Full audited statements are available at: [www.uhn.ca](http://www.uhn.ca)

## REVENUE

Ontario Ministry of Health and Long-Term Care / Toronto Central Local Health Integration Network / Cancer Care Ontario	1,330,064
Other patient services	210,646
Grants and donations for research and other purposes	338,476
Ancillary services and other	376,144
Amortization of deferred capital contributions	65,741
	<b>2,321,071</b>

## EXPENSES

Compensation	1,423,256
Medical, surgical supplies and drugs	337,794
Other supplies and expenses	288,320
Plant operations and equipment maintenance	126,132
Amortization	107,139
Interest on long-term liabilities	12,183
	<b>2,294,824</b>
<b>Excess of revenue over expenses for the year</b>	<b>26,247</b>

## ASSETS

<b>CURRENT</b>	
Cash and cash equivalents	168,171
Accounts receivable	208,830
Inventory	20,721
Prepaid expenses	21,483
<b>LONG TERM</b>	
Loans receivable	2,722
Capital assets, net	1,277,299
Long-term investments	423,740
	<b>2,122,966</b>

## LIABILITIES AND NET ASSETS

<b>CURRENT</b>	
Accounts payable and accrued liabilities	459,267
Current portion of long-term liabilities	24,135
<b>LONG TERM</b>	
Due to MaRS Development Trust	70,572
Deferred research contributions	234,440
Long-term debt	96,067
Employee future benefit liabilities	50,942
Deferred capital contributions	655,770
	<b>1,591,193</b>
<b>NET ASSETS</b>	
Internally restricted	136,689
Unrestricted	380,288
	<b>516,977</b>
Accumulated remeasurement gains	14,796
	<b>531,773</b>
	<b>2,122,966</b>

# Statistical Report

## Program Grouping Activity

UHN	Inpatient Separations <sup>*</sup>	Inpatient Weighted Cases <sup>+</sup>	CCC RUG Weighted Patient Days <sup>**</sup>	Day Surgery Cases <sup>-</sup>	Day Surgery Weighted Cases <sup>^</sup>	Ambulatory Visits <sup>~</sup>
Acute	38,415	92,056		33,691	7,832	1,049,375
Rehab	2,444	3,666				
Complex Continuing Care (CCC)	557		70,236			
Rehab & CCC Combined						106,696
<b>Total</b>	<b>41,416</b>	<b>95,722</b>	<b>70,236</b>	<b>33,691</b>	<b>7,832</b>	<b>1,156,071</b>

\* Data is based on General Ledger for Acute, Rehab, and CCC, PHS for Rehab & CCC Ambulatory Visits; + 2018 HIG Weights for Acute, 2018 RPG Weights for Rehab; \*\* 2018 RUG III Grouper; - Coding (NACRS); ^ 2018 CACS ON Weights; ~excludes radiation fractions and Emergency visits

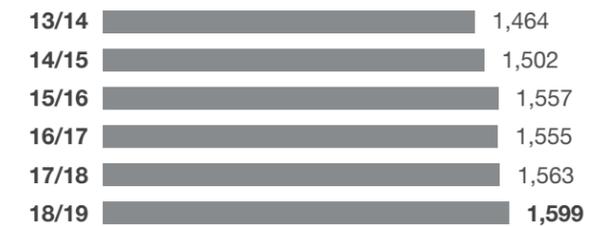
## Site Activity

Site	Beds	Inpatient Days	Clinic & Day/Night Care Visits	Emergency Visits
TGH	451	159,387	368,835	54,794
TWH	283	102,260	386,429	71,215
Princess Margaret	138	47,928	294,111	
TRI - Bickle Centre	208	62,380	1,078	
TRI - University Centre	161	51,998	38,852	
TRI - Lyndhurst Centre	60	19,126	10,411	
TRI - Rumsey Centre			56,355	
<b>UHN Total</b>	<b>1,301</b>	<b>443,079</b>	<b>1,156,071</b>	<b>126,009</b>

# Trends Report

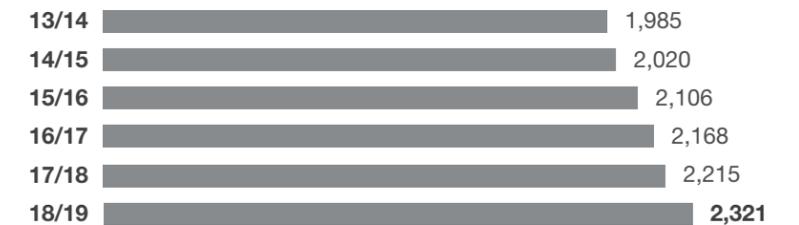
## Inpatient and Outpatient Activity

(in thousands of dollars)



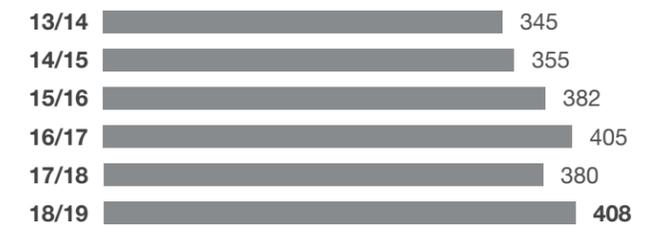
## Revenue

(in millions of dollars)



## External Research Funding Awarded

(in millions of dollars)



## Research Activity by Program 2018/19

(in thousands of dollars)

Arthritis Program	15,535
Joint Department of Medical Imaging	2,033
Krembil Neuroscience Centre	32,037
Laboratory Medicine Program	8,172
Medical and Community Care Program	52,604
Multi-Organ Transplant Program	17,269
Peter Munk Cardiac Centre	20,428
Princess Margaret Cancer Centre	204,935
Surgery & Critical Care Program	38,128
Toronto Rehabilitation Institute	17,185
<b>Total</b>	<b>408,326</b>