Annual Report 2009/10

Toronto General Hospital Toronto Western Hospital Princess Margaret Hospital



Vision

Achieving Global Impact

Mission

Exemplary patient care, research and education

Purpose

We are a caring, creative and accountable academic hospital,

transforming health care for our patients, our community and the world

Values

Caring Integrity Teamwork Respect Innovation Excellence Leadership

From the Chair and CEO

This past year everyone at University Health Network (UHN) has been taking stock, dreaming about what is possible, and committing to an organization that will continue to live our purpose statement. By doing so, we live our vision statement — Achieving Global Impact — every day.

In a year that saw such satisfying developments — the province-wide adoption of the surgical safety checklist following our participation in a worldwide study; discovering a way to repair donated lungs, thereby increasing the number of successful lung transplants; and the work of our Emergency Departments to decrease patient wait times — it is notable that the people of UHN also found time to participate in planning for our future with such enthusiasm and commitment. This year's print *Annual Report* gives a glimpse of the past year with some reference to where UHN is going in the next five years. The electronic *Annual Report* provides the opportunity to demonstrate our planning process, which will be finalized this fall. You may read more about our plans at www.uhn.ca.

UHN moves forward from *Strategic Directions 2011*, a plan developed in 2000–'01, which has served as our roadmap through the century's first decade. This past year we looked at what we had accomplished, how the external environment had changed, and what predictions we could make about where medicine would take us in the next five years. The pace of change — in medicine and our environment — has dictated a shorter planning window with the understanding that we will make adjustments as we go. Change has proved to be a core competency of those who work at UHN, making us very optimistic about the future.

Our optimism also comes from the work of our programs and departments as part of this past year's planning process. We have done our market research and have reasonable predictions about the populations we will serve. And, we have ample evidence that our leaders are thinking about new and better ways to deliver healthcare to Ontarians. It has been a stimulating and exciting year at UHN as we look to the future.

Of course, there will be challenges. The government will be challenged to find resources to fund everything that we would like to do at UHN. But our people accept that challenge. We will find ways to be more efficient, deliver more care for the dollars available, work with others to realize better care, and find additional resources to complete the challenges in our strategic plan. We can say this because we believe that the people at UHN are up to all challenges.



Dr. Robert Bell President and CEO University Health Network

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John Mulvihill Chair, Board of Trustees University Health Network

To view our extended Annual Report, including multimedia content, visit www.uhn.ca

Empowering our People

UHN strives to be an employer of choice. That includes creating a transparent, respectful and diverse work environment where employees can thrive and grow professionally. For 11 consecutive years, the results of UHN's Employee Opinion Pulse Survey show that physicians and employees recognize the organization's efforts, with more than 82% of employees saying UHN is a great place to work.



Developing leaders

UHN recognizes that its future success depends, in large measure, on the effectiveness of its current and future leaders. That's why leadership development is a top priority for the organization. In the past year, UHN has delivered several leadership development programs designed to ensure that employees, including senior clinical staff, are ready to assume leadership positions in the future. Meanwhile, through professional development programs, UHN has equipped frontline leaders with the knowledge and skills to work effectively in a complex hospital environment.

Health and productivity

Recognizing the link between a healthy employee and a productive one, UHN's Oasis Wellness Centre, now in its third year, continues to create innovative healthy lifestyle and wellness programs for physicians and employees. Last year, UHN offered more than 550 wellness programs across all three hospitals, including physical-activity and healthy-eating challenges, cooking demonstrations, stress-management classes, and seminars on naturopathic medicine and natural living. UHN also launched The Nurses' Toolbox, an eight-week wellness program for nurses. Designed with their demanding work schedules in mind, the program delivers physical and stress-reduction exercises on the clinical units and teaches nurses yoga and relaxation techniques that they can perform independently throughout the day.

Meanwhile, UHN's Occupational Health and Safety department continues to set the bar by reducing accident- and illnessrelated absenteeism — along with their related costs — through the use of effective return-to-work strategies.

Fostering diversity

To foster a diverse, ethical and inclusive workplace, UHN continues to provide mediation services and educational programs. A key initiative last year was a facilitated dialogue about race, which created an opportunity for staff to discuss barriers to career mobility.

Moving forward

As UHN plans for the future, the organization will continue to invest in its human resources. To respond to the current and future skills shortage, UHN will implement a comprehensive recruitment strategy designed to attract the best and brightest professionals. Meanwhile, UHN will develop strategic talent- and career-management programs aimed at sustaining leadership capacity and enabling employees to foster their careers.

UHN's continued efforts to create a healthy, respectful and engaging work environment, along with the hospital's focus on providing equitable healthcare, will also be foundational to the organization's success.

For more information on our strategic plans, visit www.uhn.ca/AR9010.asp 5

Improving Patient Care

UHN has a reputation for achieving clinical excellence and this past year was no exception. With a renewed commitment to patient safety, UHN's emphasis has been on safe medication practices, preventing falls, prevention of hospital-acquired infections, incident reporting and investigation, and safer surgical practices.

Putting safety first

Following our participation in a worldwide study, UHN became one of the first hospitals to officially adopt the surgical safety checklist. Physicians and operating-room (OR) staff perform numerous safety checks before commencing a major surgery — from identifying themselves by name and title, to reviewing patient information, to ensuring that all equipment is available and functional. Performing these checks has not only improved communication among healthcare professionals in the OR, but it has also significantly lowered the risk of surgery complications and patient mortality.



"We know that many surgical complications are preventable," says Surgeon-in-Chief Dr. Bryce Taylor, who co-authored the study with Dr. Richard Reznick, Vice President of Education. "With approximately 234 million surgeries performed each year worldwide, we owe it to our patients to look at every opportunity to prevent complications during and after surgery."

Meanwhile, UHN's emphasis on electronic incident reporting has increased the number of adverse incidents and "near-miss" events being reported on patient-care units. The increase demonstrates UHN's commitment to a "no-blame" approach to errors as no one can change things they don't know about.

UHN was also one of the first hospitals to add hospital-acquired infections to its incident-reporting system. This information is helping UHN correct system and process issues, as well as identify and remedy potential incidents before harm befalls any patient.

Combined, UHN's efforts to improve patient safety have lowered its Hospital Standardized Mortality Ratio (HSMR) for the third year in a row. In 2009–'10, UHN's HSMR was 77, making it one of the best rates in Canada.

Integrating clinical programs

For four years, UHN's medical teams have been integrating clinical programs, in an effort to provide more seamless and comprehensive patient care. The teams' consistent efforts are paying off. UHN has observed a marked decline in waiting times for patients accessing the hospital through the Emergency Departments, while coordination of care in the General Internal Medicine units, and at the time of patient discharge, has improved.

Much to be done

As UHN maps out its future direction, the organization has been engaging everyone in the conversation. It turns out that all clinical programs want better clinical documentation, so in the coming years, one of UHN's goals is to design searchable clinical records that allow healthcare professionals to capture specific information about patients and their health outcomes. Having access to this information will bolster UHN's role as a research hospital and lead to better communication among clinicians, as well as improved patient safety.

Advancing Research

In 2009–'10, UHN researchers continued to make scientific discoveries with far-reaching impact in Canada and worldwide. These discoveries include a technique developed by Dr. Shaf Keshavjee that has led to a major increase in lungs available for transplantation — organs often in short supply. His XVIVO Lung Perfusion System allows clinicians to examine lungs outside the body and repair injured lungs that were once deemed unsuitable.

Another breakthrough was Dr. Tony Lam's discovery of a hormone found in the gut that may lower glucose levels in diabetes. Dr. Lam and his team discovered that activating receptors of the cholecystokinin peptide hormone lowers blood glucose levels by triggering a signal to the brain and then to the liver to lower glucose or sugar production. The findings have major implications in the treatment of and potential cure for diabetes.

Cancer research also made major strides thanks to the work of Drs. Ming Tsao, Igor Jurisica and Frances Shepherd. The trio developed an analysis tool for early stage non-small-cell lung cancer, the most common form of lung cancer with a 15% five-year survival rate. The tool, which is an information-



based medicine platform, uses genetic information to diagnose and determine the best treatment for patients at an early stage, allowing the best chance for survival.

The next five years

The research landscape is ever evolving, and as Canada's largest research hospital, UHN is at the forefront of scientific discovery. Personalized medicine — the use of a patient's own biological substances in therapeutic decision-making — will continue to be a major focus in the future. As gene and protein informatics become more sophisticated, clinicians will be



better able to predict a patient's response to a particular drug or therapy.

The development of medical technology for guided diagnostics and interventions is another long-term goal. The use of video cameras, surgical instruments and fibre-optic cables inserted through tubes avoids the invasive surgeries and biopsies of the past. Increasingly, researchers and clinicians are looking to robotics and image-guided techniques to perform complicated surgeries and diagnostic procedures.

The future of medicine at UHN also lies in cell and tissue regeneration. Understanding how the body heals itself has major implications for the treatment of diseases such as cancer, heart disease and Alzheimer's. Over the next five years, UHN researchers will find new ways to harvest cells and tissue and reap the benefits of regenerative medicine.

Being Accountable

Balanced operations

Despite a challenging fiscal climate, UHN ended the year with balanced operations through the alignment of patient volumes with available funding at the program level. UHN also met key deliverables of the Hospital Service Accountability Agreement with the Toronto Central Local Health Integration Network (LHIN).

Careful financial planning has enabled UHN to achieve the required surplus contribution from Rehabilitation Solutions towards the construction of the Krembil Discovery Centre, a multiyear, \$150-million facility that will house internationally renowned clinical and research programs in neural-related diseases and disorders and all of Rehabilitation Solutions.

In the coming years, one of UHN's main priorities will be enabling our *Strategic Plan 2016* through the careful management of resources and by securing the necessary funding to expand clinical programs. Another key focus will be enabling innovation opportunities in research.



Caring for our planet

In 2009, UHN made major strides toward reducing waste and conserving energy, as the hospital continued its commitment to protecting the environment.

At the Toronto General and Toronto Western hospitals, the Care to Conserve program for thermostats, lights and other controls achieved a combined 2.1% energy savings in two years — an equivalent of nearly \$175,000 in cost savings and a reduction of more than 500 metric tonnes of greenhouse gases. Other utility initiatives have led to a 35,000-gigajoule reduction in UHN's energy consumption, saving the hospital more than \$500,000.

Last year, UHN's greening efforts were recognized with both a Smart Commute Employer of the Year Award for its sustainable transportation program and an Energy and Environmental Stewardship Award from the Canadian College of Health Service Executives.

Over the next five years, UHN will continue to work toward LEED certification, an internationally accepted benchmark for sustainable buildings, for the new Krembil Discovery Centre. UHN will also focus on implementing sustainable transportation initiatives, including better cycling facilities for staff and a new carpooling program. As the organization builds on its culture of sustainability, partnerships with local community groups, such as the Toronto Central LHIN, the City of Toronto and the Discovery District, will be vital in continuing to find ways to reduce UHN's environmental footprint.







Education

As one of Canada's largest teaching hospitals, UHN was the training ground for more than 3,000 health-professional trainees. These trainees came from a variety of professional backgrounds, including nursing, medicine, allied health, pharmacy and medicine.

Simulated teaching and learning

One of UHN's goals is to enhance its international profile in education. Recently, UHN made significant strides towards achieving that goal when the hospital received a \$5-million commitment from an anonymous donor towards the expansion of a telesimulation centre at the Toronto Western Hospital. Pioneered by Dr. Allan Okrainec, the telesimulation centre specializes in the use of technology in knowledge transfer, particularly to developing nations. With this new funding, UHN will



be better positioned to expand Dr. Okrainec's world-leading telesimulation surgical education program to more remote areas. This innovative program involves the use of Skype, a software application designed for making voice calls over the Internet, and webcams to teach surgeons new techniques in minimally invasive surgery.

Inter-professional education

In the past year, UHN also secured private and government funding to begin construction of the Kalmar Inter-professional Education Centre at the Toronto Western Hospital. Maria Tassone was appointed inaugural director.

A joint partnership among UHN, University of Toronto (U of T) and Toronto Rehabilitation Institute, the Kalmar Inter-professional Education Centre will help further UHN's scholarly work and research in inter-professional education. The Centre will also serve as a hub for all U of T-affiliated academic hospitals, where students from various healthcare disciplines can come together to learn about each other's skill sets and discover ways to work together as an inter-professional team as they transition from being students to professionals.

"Inter-professional education itself is important, but the translation into inter-professional care is what's really critical," says Dr. Richard Reznick, Vice President of Education. "And indeed, one of the goals of the centre is to submit the concept of interprofessional care to scientific scrutiny, to be sure it's producing tangible benefits in healthcare delivery."

New models of training

As UHN plans for the next five years, the hospital is focusing on developing new and better methods of teaching and training. Most of UHN's existing programs are traditional in approach, but new realities in education, such as reduced workweeks for health-professional trainees, are challenging old models.

To adapt to the changing times, UHN recently introduced an anaesthesia-assistant program designed to make anaesthesia care more efficient. The hospital also pioneered a hybrid residency combining interventional radiology and general surgery to prepare individuals for what are becoming merging specialties. These two programs, among others, alter the future of medical education and more change is anticipated.

Information Management

UHN recognizes the strategic role that information plays in its vision to be an innovative and accountable teaching hospital that transforms care for patients, the community and the world. An essential part of UHN's information management (IM) strategy is providing physicians, nurses and clinicians with the tools and information they need to deliver exemplary patient care.

Clinical documentation

This year, UHN introduced Surgical Synoptic Patient Notes (SSPN) in its General Surgery, Orthopedics, Urology and Plastic Surgery ambulatory clinics. An innovative web-based technology, SSPN records patient history and physical-examination results at the point of

care, and provides clinicians with a structured synoptic report containing a set of standard medical terms and universal observations.

Using SSPN, clinicians can choose from more than 100 templates to record a patient's symptoms, medications, allergies, diagnosis and treatment options. Once a patient note is completed, the system automatically files the note in an electronic patient record and faxes copies to referring physicians. The project is one of the first to leverage the power of SNOMED CT, a computer-accessible collection of medical terms, which allows clinicians to access real-time information on diseases, clinical findings and procedures.

"We have a great opportunity to improve healthcare using electronic documentation tools such as the SSPN," says Dr. Michael Jewett, Urologist, Princess Margaret Hospital. "We can enhance patient safety, improve productivity and leverage our potential as a research hospital."

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Rapid assessment zone

Over the past few years, the demand for emergency services has risen steadily. As a result, patients experience lengthy wait times and transfer delays from the Emergency Department (ED) to inpatient units.

To improve patient flow, UHN implemented a rapid assessment zone (RAZ) within the EDs of the Toronto General and Toronto Western hospitals. Led by SIMS, the project involved using a "lean" approach to design an efficient care process for mid-acuity patients who meet certain criteria and can be seen quickly. With approximately 50% of ED patients being triaged to a RAZ, both triage-to-nursing and nursing-to-physician assessment times have significantly improved since the project began.

"The RAZ units have been extremely helpful in facilitating the timely assessment, management and disposition of mid-acuity patients who can be expediently cared for in these areas, rather than in our other resource-intensive bed areas, which can then focus on the more complex patients," says Dr. Anil Chopra, Medical Director, Emergency Medicine.

Dr. Paul Ellis, Assistant Director, Emergency Medicine, echoes Dr. Chopra's remarks. "Not only have our mid-acuity patients benefitted from the alternate location for care within the ER, but [higher- and lower-acuity] patients have benefitted as well," says Dr. Ellis.

The future is bright

Developing a sustainable, integrated healthcare system comes with challenges, as well as opportunities. UHN will continue to lead in the use of IM and information technology to deliver exemplary patient care. The hospital's five-year IM plan builds on the success of previous IM strategies and accelerates the development of advanced electronic patient record and business-intelligence tools to achieve UHN's academic healthcare mission.

Our Foundations

Despite a challenging economic climate this year, our three foundations — Arthritis & Autoimmunity Research Centre Foundation (AARCF), Toronto General and Western Hospital Foundation (TG&WHF) and the Princess Margaret Hospital Foundation (PMHF) — raised more than \$129.3 million (net) combined towards scientific research, patient care and the education of healthcare professionals at UHN.

AARCF

AARCF completed a successful year raising more than \$2.4 million in revenue.

In March, the foundation wrapped up its fourth-annual Power of Movement campaign, raising \$226,000 towards arthritis research. AARCF also held a record number of educational forums for donors, including a joint seminar with The Arthritis Society that drew more than 100 guests.

This year also marked the installation of the Illumina at the Toronto Medical Discovery District Tower. A compact and highly sophisticated machine, the Illumina enables

DNA analyses at significantly faster and more accurate rates. With this \$500,000 instrument — made possible, in large part, through a generous donation from the R. Howard Webster Foundation — scientists are now uniquely positioned to undertake world-leading gene research that will aid in the discovery of better therapeutic interventions for arthritis and autoimmune disorders.



With the number of Canadians suffering from arthritis rising fast — from 4.5 million in 2009 to an estimated six million by 2020 — there is an ever-increasing need for arthritis research. To support the ongoing work of UHN scientists, AARCF will be ramping up efforts to grow its pool of endowed funds over the next five years.

PMHF

This year, PMHF brought in more than \$69.9 million through various channels.

PMHF launched a joint initiative with Emmanuelle Gattuso and Allan Slaight to raise \$12.5 million toward expanding The Gattuso Rapid Diagnostic Centre at Princess

Margaret Hospital (PMH). To inspire others to contribute, Ms. Gattuso and Mr. Slaight generously offered to match all donations. Spearheaded by Dr. David McCready, the Gattuso Rapid Diagnostic Centre specializes in diagnosing breast cancer and devising a treatment plan within 24 hours.

A separate fundraising initiative championed by David Bloom, a cancer survivor and former CEO of Shoppers Drug Mart, raised \$4.1 million to establish the first Canadian chair in multiple myeloma research at PMH. Dr. Donna Reese, a prominent international expert in multiple myeloma, was appointed inaugural holder.





Our Foundations

The Ride to Conquer Cancer successfully expanded to British Columbia, Alberta and Quebec. With nearly 8,500 participants, the campaign raised more than \$35 million (gross), benefiting cancer organizations across Canada, including The Campbell Family Cancer Research Institute at PMH. In Toronto alone, more than 3,530 participants raised \$14.5 million (gross).

PMHF strongly believes in the principles of "social enterprise" - that is, employing marketbased strategies for a social purpose, or simply put, doing well for the sake of doing good. The next five years will see PMHF continuing to embrace this model of thinking as it works toward achieving its vision to conquer cancer in our lifetime.



TG&WHF enjoyed a successful fundraising year, bringing in more than \$57 million in revenue for UHN

October saw the official opening of the \$5-million multipurpose operating room (MPOR) at the Toronto General Hospital, a project made possible through donor support, including a gift of \$2.8 million from the late R. Fraser Elliott. With its advanced imaging and surgical equipment and 50% more space than a traditional OR, the 1,000-square-foot MPOR offers surgeons and radiologists greater flexibility to perform advanced image-guided procedures in the treatment of cardiac and vascular disease.





TG&WHF marked another milestone last year with the raising of more than \$60 million in donor funds — including a \$30-million lead gift from philanthropists Robert and Linda Krembil — towards the creation of the Krembil Discovery Centre at the Toronto Western Hospital. Once completed, this modern, nine-story, glass tower will house world-leading research into stroke, brain tumours, Parkinson's disease and arthritis, among other disorders, and be home to Rehabilitation Solutions, a UHN-affiliated health- and disability-management services group.

With construction underway, the focus now is on raising funds to outfit the Krembil Discovery Centre with the latest research equipment, as well as to recruit and retain the brightest scientific minds.







Financial Statements

For the year ended March 31, 2010 (Amounts in thousands)

Revenue

Ontario Ministry of Health and Long-Term Care / Toronto Central Local Health Integration Network

Hospital programs	\$ 820,639
Specifically funded programs	58,715
Other patient services	156,068
Grants and donations for research and other purposes	230,084
Ancillary services and other	205,098
Amortization of deferred capital contributions	72,648
	\$ 1,543,252

Expenses

Compensation	\$ 923,128
Medical, surgical supplies and drugs	180,451
Supplies and other	176,526
Specifically funded programs	58,721
Plant operations and equipment maintenance	74,321
Depreciation	93,826
Interest on long-term liabilities	19,842
	\$ 1,526,815

Excess of revenue over expenses

\$16,437

Full audited statements may be viewed at www.uhn.ca

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Assets

Current

Cash and cash equivalents Accounts receivable	\$ 132,238 16,117
Inventory	11,336
Prepaid expenses	5,189
Total Current Assets	264,880
Loans receivable	2,517
Capital assets, net	985,693
Long-term investments	206,378
	\$ 1,459,468

Liabilities and Net Assets

Current Accounts payable and accrued liabilities Current portion of long-term liabilities Total Current Liabilities	\$ 268,030 3,786 281,816
Due to MaRS Development Trust	89,233
Deferred research contributions	153,767
Long-term debt	216,197
Employee future benefit liabilities	23,232
Deferred capital contributions	410,533
Total Liabilities	1,174,778
Total Net Assets	284,690
	\$ 1,459,468

Trends Report

Inpatient and Outpatient Activity (thousands)



Growth in External Research Funding Awarded (millions)



Program Grouping Activity 2009/2010

UHN	Inpatient Separations*	Inpatient Weighted Cases+	Day Surgery Cases*	Day Surgery Weighted Cases^	Ambulatory Visits
Total	31,070	61,807	27,566	4,943	965,972

*Data is based on General Ledger; + 2006 Grouper, PAC 10 Weight MOHLTC 2007 Calculator; ^PAC 10 Weight MOHLTC 2008 Calculator; Radiation fractions excluded

Site Activity

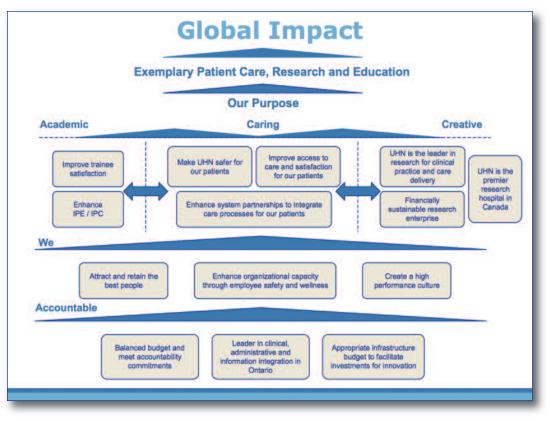
Site	Beds	Inpatient Days	Clinic & Day/Night Care Visits	Emergency Visits
TGH TWH PMH Non-Site Specific	404 240 118	136,479 88,422 40,500	228,955 389,894 255,971 4,204	35,615 51,333
UHN	762	265,401	879,024	86,948

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Research Activity (Amounts in thousands)

Program Grouping Activity 2009/2010	External Research Grants Awarded to UHN
Krembil Neuroscience Program	\$ 15,277
Laboratory Medicine Program	3,395
Medical & Community Care – Complex Medical Care	2,045
Medical & Community Care – Chronic Disease Management	5,201
Medical & Community Care – Community & Multicultural Health	3,316
Musculoskeletal Health and Arthritis	11,104
Peter Munk Cardiac Centre	15,995
PMH Cancer Program	138,758
Surgical & Critical Care – Critical Care	576
Surgical & Critical Care – Surgical Services	16,342
Transplantation	8,863
Total	\$ 220,872

* Figure rounded to nearest thousand from total



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We are a caring, creative and accountable academic hospital, transforming health care for our patients, our community and the world. University Health Network is a teaching hospital affiliated with the University of Toronto.

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