Sunnybrook shines a spotlight on 2017–18
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1. INTRODUCTION

Innovations in patient care, research and learning made 2017/18 a successful year for Sunnybrook and the patients and families the Hospital cares for when it matters most. At the same time, the organization was challenged on an almost daily basis by high inpatient occupancy.

Partnerships and collaboration were dominant themes throughout 2017/18. Sunnybrook worked closely with health system partners, and the Ministry of Health and Long-Term Care and Toronto Central Local Health Integration Network, to address inpatient occupancy and expand treatment for blood cancers. The Hospital expanded collaboration with Michael Garron Hospital to improve access to high quality health care services for residents in the hospitals’ shared community. Sunnybrook also pursued a joint venture with SPRINT and LOFT, two community organizations, to open the Pine Villa temporary care facility, to help ease pressure on inpatient beds.

A major highlight of the year was the appointment of Dr. Andy Smith as the Hospital’s new President and CEO. The appointment followed a comprehensive international search, which looked at candidates from across Canada, the United States and the United Kingdom. At the same time, Sunnybrook said goodbye to Dr. Barry McLellan, who served the Hospital as President and CEO for 10 years.
The past year involved significant work on the development of Strategic Plan 2018-21. Meaningful consultation and engagement with staff, with those who rely on Sunnybrook for care, and with partners in the community was undertaken to develop a path for the Hospital for the next few years.

The Hospital achieved exemplary standing from Accreditation Canada surveyors, following a comprehensive and rigorous review of Sunnybrook’s policies and procedures against national standards.

Sunnybrook received several honours, including being named as one of Canada’s Best Employers 2018 by Forbes, Canada’s Top 100 Employers and Greater Toronto’s Top Employers for 2018. The Hospital was named as one of Canada’s Greenest Employers of 2018 for integrating environmental principles into the organization’s corporate culture.

Individual staff shone in 2017/18. Sunnybrook medical oncologist Dr. Kathleen Pritchard was named to the Order of Canada for her contributions to the treatment of breast cancer in women. Staff also inspired others, including Dr. Shelly Dev, a critical care physician, who spoke out about burnout during her early days as a resident, and Dr. Paige Church, neonatologist and development paediatrician, who wrote about how having spina bifida has impacted her approach to caring for patients and families.

Sunnybrook’s 10,000-plus team of staff, who work in interprofessional teams to provide innovative and compassionate care, have created one of the best work environments in Canada. The many successes of the past year would not have been possible without team members who went above and beyond to achieve the best possible results for the organization.
2. FINANCIAL PERFORMANCE

Financially, Sunnybrook is focused on forward planning, accountability and fiscal prudence. This focus is integral to Sunnybrook’s sustainability and to the reported revenues in excess of expenses of $19.4 million for fiscal year 2017/18. Generating between 2 and 3 per cent of total revenue for reinvestment purposes is viewed as necessary, given the capital-intensive nature of hospitals. Sunnybrook’s year-end result represents 1.7 per cent of total revenue and is within the range supported by the Ontario Hospital Association. Of the $19.4 million excess of revenue over expenses, $11.4 million arose from various and multi-factorial events within the year, further described below, and the remainder (approximately $8 million) reflects Sunnybrook’s plan to generate an excess of revenue over expenses in recognition of critical required capital investments.

The overall favourable year-end result beyond the planned excess of revenue over expenses reflects continued strong fiscal discipline, achievement of Ministry of Health and Long-Term Care (Ministry) priorities and funded volumes, final and favourable settlement of several prior-year Ministry reconciliations, in-year success in implementing additional savings initiatives, combined with several one-time recoveries. One significant recovery was the receipt of $2.2 million from our insurer (Healthcare Insurance Reciprocal of Canada), a combination of return of prior year premiums due to positive claims performance and timing associated with claims made for some infrastructure damages that arose in the prior year.

Sunnybrook’s aged infrastructure continues to create operating cost pressures in response to various building infrastructure breakdowns. These infrastructure challenges also create risk to the organization, including our electrical power distribution system, mechanical steam plant boiler system, heating ventilation and air conditioning system, medical gas supply system and fire protection system. To address these risks, at least to the extent possible by the Hospital, Sunnybrook plans to spend approximately $5 million annually, a combination of operating and capital dollars. These planned investments augment the Ministry’s Health Infrastructure Renewal Fund (HIRF) allocation of approximately $10 million. However, despite this proactive approach, our external facilities’ assessment report identifies that Sunnybrook’s top Priority 1-3 risks increased from a cost of $198 million in 2001 to $248 million in 2016. Essentially, our facilities are aging faster than the investments being made to maintain them.
Sunnybrook continues to advocate for additional Ministry funding to address these risks and, based on the advice of the Ministry, will be including these into its upcoming Master Plan Ministry submission.

In addition to the challenges of its aged infrastructure, Sunnybrook had two other significant fiscal challenges during the past fiscal year. The first involved Sunnybrook’s accountability to perform certain volumes to meet patient needs and to earn the associated revenues. While Sunnybrook exceeded performance in certain critical areas of need, for example in the areas of CT and MRI (for which the organization will not be reimbursed by the Ministry), we underperformed in the inpatient rehabilitation Quality Based Procedure (QBP) for total joint replacement. This is as a result of Sunnybrook and other hospitals achieving the Ministry quality objective of only 10 per cent of total joint surgery cases going to inpatient rehab, resulting in fewer inpatient rehab days being needed. The resulting bed capacity this has created is being used for patients in greater need, primarily stroke victims. This is a good outcome for the health system, but for Sunnybrook it has a poor fiscal result since the under-performance in this QBP means the funds must be returned to the Ministry. We are actively engaged with the Toronto Central Local Health Integration Network (TC LHIN) to return these funds to base budget and the TC LHIN is very supportive of this direction.

The remaining significant fiscal challenge is related to the ongoing operation of both acute and ICU surge beds (for example, operating beds beyond the funded bed capacity). Sunnybrook has been focused on lowering its occupancy levels for many years. However, despite achieving one of the lowest acute lengths of stays in Ontario, occupancy levels continue to rise. Two of the most significant challenges in this regard are increased volumes of patients being seen but also increased levels of Alternate Level of Care (ALC) patients. With respect to the latter, during this fiscal year the Government of Ontario has invested heavily in opening new capacity. Sunnybrook, its patients and the rest of the Ontario health system are truly appreciative of this investment, and in February and March 2018 Sunnybrook began to experience a decrease in ALC occupancy as a direct result of these investments. We look forward to a continued decline so as to facilitate providing the care required for Ontario’s acute patients.
The chart below reflects how Sunnybrook (hospital operations only) has used the resources entrusted to it to provide patient care and, in particular, indicates that the vast majority of funds are used for direct patient care. Sunnybrook’s overall efficiency is further evidenced by approximately 10 per cent of total expenses being incurred in corporate support.

**FISCAL 17 /18: WHAT DO THESE EXPENSES BUY?**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Clinical Services</td>
<td>64.4%</td>
</tr>
<tr>
<td>Lab, Diagnostic Imaging &amp; Pharmacy</td>
<td>10.9%</td>
</tr>
<tr>
<td>Food &amp; Physical Support</td>
<td>9.0%</td>
</tr>
<tr>
<td>Corporate Support</td>
<td>10.8%</td>
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<tr>
<td>Medical Staff &amp; Clinical Education</td>
<td>3.1%</td>
</tr>
<tr>
<td>Other (Insurance &amp; Interest)</td>
<td>1.8%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>75.3%</strong></td>
</tr>
</tbody>
</table>

**Direct Care Expenses:**
- Clinical Services: 64.4%
- Lab, Diagnostic and Pharmacy: 10.9%
- Total: 75.3%
3. OCCUPANCY

A consistent theme during 2017/18 was Sunnybrook’s high inpatient occupancy, typically hovering from 110 to 119 per cent. High occupancy trends were not isolated to Sunnybrook, with the entire health system facing similar challenges. During the peak of influenza season, demand for care across all campuses was at some of the highest levels ever seen.

Weekly Occupancy Executive Meetings, in addition to emergency huddles, helped teams move patients in and out of the Hospital as efficiently as possible. Senior leaders maintained regular contact with the Ministry of Health and Long-Term Care, as well as the Toronto Central Local Health Integration Network, about occupancy pressures.

To support the information needs of patients and families, Sunnybrook developed both video and print materials to encourage staff and physicians to have early conversations about discharge planning and repatriation. Repatriation is the process of returning patients from Sunnybrook to a hospital that is closer to their home, and happens as soon as the need for specialized care has ended. By identifying discharges early and working on an estimated date of discharge, families became more engaged and aware of what plans they can set in motion.

In addition to opening surge beds at St. John’s Rehab, the Hospital further embedded its commitment to reducing occupancy by committing to five areas of improvement in its annual Quality Improvement Plan.

PINE VILLA OPENS

Pine Villa opened to help alleviate the pressures caused by patients waiting on inpatient wards for alternate level of care outside hospitals. The 69-bed facility provides short-term stays for alternate level of care patients who are transitioning back to the community, or awaiting placement in long-term care or complex continuing care. Funded by the Toronto Central Local Health Integration Network, Pine Villa is operated by SPRINT Senior Care and LOFT Community Services. The transitional supportive housing service is for patients who do not have home or community supports readily in place, and may require enhanced assisted living services to facilitate a safe and successful transition to their longer-term living arrangement.
AMBULATORY QUICK CLINICS LEND A HAND
Sunnybrook’s seven ambulatory QUICK clinics are helping to divert admissions, reduce Emergency Department visits and reduce readmissions. The seven clinics are delivering quality care that is urgent, integrated and comprehensive. The clinics include the General Internal Medicine Rapid Referral Clinic; the TIA, Urgent Neurology and Stroke Follow-Up; Malignant Pleural Effusion and Ascites; IV Antimicrobial Therapy; Heart Failure and Rapid Cardiology; Gastroenterology as well as the ACCESS (General Surgery) Clinic.

WEEKEND DISCHARGE TEAM
To facilitate unnecessary admissions and expedite discharges on Saturdays and Sundays, a Weekend Discharge Team was formed to work with General Internal Medicine floors, oncology inpatient units, as well as cardiology and emergency and trauma. The team consists of an occupational therapist, a physiotherapist and a social worker who help facilitate discharges home and rehabilitation support. The members receive handover from colleagues in their respective professions who identify patients who may be discharged on the weekend, resulting in improved patient flow seven days a week.
A major highlight of the past year was the development of Strategic Plan 2018-21. The journey involved significant engagement with the Hospital's staff, physicians, volunteers, patients, students, members of the community and fellow health care providers. At the foundation of the plan is Sunnybrook’s dual role in the health care system, with the Hospital serving its surrounding community for primary and secondary care and also offering more complex services to a larger region.

Four strategic directions provide the framework for Sunnybrook’s patient care, research and teaching activities.
PERSONALIZED AND PRECISE TREATMENTS
This arm of the strategic plan addresses the unique care needs of a patient, and is based on a number of factors such as genetics, lifestyle, and their goals of care. The focus is to develop care that is custom-made for patients, in order to diagnose, treat and, in some cases, prevent illness or injury.

INTEGRATED AND SUSTAINABLE MODELS OF CARE
This direction addresses the Hospital's connectivity with the community it serves. By working with partners in the North Toronto sub-region, as well as those in outlying communities, Sunnybrook will ensure patients are accessing care closer to home and in a timely manner.

QUALITY AND CREATING A BETTER CARE EXPERIENCE
In addition to building quality communities of care locally, Sunnybrook strives to create a better care experience that looks to benchmark our care internationally. By working with patients and families at the bedside to engage them in their care, and ensure they feel sufficiently informed to make decisions about their care, this direction draws in a strong patient engagement component.

BUILDING HIGH PERFORMING TEAMS
At the heart of this direction is teamwork, a culture which pervades the organization. By launching a new way to assess performance, this direction will include not looking only at individual performance but also evaluating teams across Sunnybrook. Team performance reviews will allow the Hospital to measure success and prompt an ongoing reach for better expectations.
5. EDUCATION

At Sunnybrook, education matters, and the past year was no exception. From events targeted at enhancing the student experience, to the development of innovative, practice-based solutions addressing the evolving challenges in health education, Sunnybrook offered some of the best teaching and clinical experiences in Canada.

New this year, a patient family advisor was added to the Education Research Unit Education to embed the voice of the patient in the work of this group.

Community outreach activities took place with several public education forums. One of the unique events involved grade school students and summer interns with the Sunnybrook Research Institute. Summer students were invited to submit a simple summary of their work in a way the public – even children – would understand and the grade school students voted on whose project was most understandable.

EDUCATION STRATEGIC PLAN 2017-2020

What are the best ways to teach students, patients and colleagues? How can Sunnybrook engage inquiry and scholarship and play a leadership role in improving health care in Canada? These questions helped frame the development of Sunnybrook’s Education Strategic Plan to guide teaching and learning over the next few years. The plan emphasizes four priorities, including the patient as educator, positioning Sunnybrook as the Canadian leader in engaging patients and families as teachers and educators. Another important component is team-based learning, focused on improving the performance of interprofessional teams through team assessment, self-directed team development, practice-based simulation and the promotion of team innovators. Equally important is the learner experience and culture and building capacity for education scholarship that focuses on improving patient outcomes and learner experiences.
COLORECTAL CANCER SURGERY IN REAL-TIME

Sunnybrook continued its commitment to inspiring and engaging the next generation of clinician-scientists. To mark Colorectal Cancer Awareness Month, grade 10 students at a local high school were invited to research colorectal cancer and develop a video or graphic to raise awareness about prevention and screening. In return, students were given a unique opportunity to view colorectal cancer surgery, a minimally invasive colon resection, via live video with Dr. Shady Ashamalla. Dr. Ashamalla explained what he was doing each step of the way, and answered students’ questions in real time. Feedback from the students was overwhelmingly positive, with one commenting “At one point I had a question about if the patient would feel any pain, and I was able to ask the surgeon right away.”
Once again, Sunnybrook Research Institute (SRI) brought discovery to life, helping to ensure patients benefit from breakthroughs faster than ever. SRI strives to lead in the development and implementation of health care advances that form the foundation of precision medicine, or targeted interventions tailored to each patient. The past year was no exception to innovation, due in part to the strategic integration of Sunnybrook’s research and clinical domains.

PIONEERING SCIENCE REWARDED

The Canada Foundation for Innovation provided teams at SRI with over $6.6 million to advance their work in the area of image-guided therapeutics research. Dr. Kullervo Hynynen, senior scientist and director of Physical Sciences, was awarded $2,510,000 to further develop focused ultrasound technology with fellow SRI researchers. Dr. Greg Czarnota, director of the Odette Cancer Research Program, garnered $3,231,400 to work with a team of SRI researchers on developing better radiotherapy technology. Lastly, Dr. Graham Wright, director of the Schulich Heart Research Program, also received $869,131 to work with SRI cardiac researchers and a team at University Health Network to develop imaging technologies and therapeutics to treat people prone to heart failure and sudden cardiac death.
FUNDING SUCCESS
SRI did exceptionally well with the Fall 2017 Project Grant competition of the Canadian Institutes of Health Research (CIHR). The national funding rate average was 16.5 per cent. At SRI, 25 per cent of applications submitted were funded, translating to 11 successful applications out of 475 Canada-wide. Total CIHR funding for SRI researchers is $7.8 million.

CLINICIAN-RESEARCH HONOURS
The past year was marked with numerous distinctions and honours for SRI clinician-researchers. To name just a few:

- Dr. Graham Wright was elected a Senior Fellow of the International Society for Magnetic Resonance in Medicine. Dr. Wright, whose research focuses on cardiovascular imaging for the purpose of disease assessment and intervention, was the only recipient from a Canadian institution recognized this past year.

- Dr. Larry Robinson was the recipient of the 2017 Lifetime Achievement Award from the American Association of Neuromuscular and Electrodiagnostic Medicine. The award recognizes distinguished and dedicated service in the fields of neuromuscular and electrodiagnostic medicine through teaching, research and scholarly publications.

- Dr. Rob Fowler was named the 2017 recipient of the prestigious Teasdale-Corti Humanitarian Award, given by the Royal College of Physicians and Surgeons of Canada, for his work on the frontline of the Ebola Virus Disease outbreak.

- Dr. Stuart Foster was elected to the U.S. National Academy of Engineering as a foreign member for his work in the field of high-frequency ultrasound and translating its technologies into clinical and preclinical imaging systems.
7. NURSING

Amid the stresses of high occupancy on the frontlines of the Hospital, Sunnybrook’s nurses continued to shine in 2017/18. The organization’s 3,000-plus nursing team were dedicated to excellence in care, research and education, and helped to ensure Sunnybrook best met the complex needs of its patients.

MAKING SENIOR CARE A PRIORITY

Nurse practitioner Deborah Brown won the distinction of being a 2017 Nightingale Award honourable mention for her work with elderly patients. Deborah, a member of the Senior Friendly team, was recognized for her work with older patients that led a colleague to refer to her as “a Nightingale in our midst.” The Toronto Star Nightingale Award is presented each year to an Ontario nurse nominated by his or her peers or patients.
THE PREMIER RECOGNIZES NURSES

Premier Kathleen Wynne visited Sunnybrook to see first-hand the opportunities and challenges facing nurses every day. Facilitated by the Registered Nurses’ Association of Ontario, Premier Wynne took the opportunity to learn more about the role of Nurse Practitioners, and how Sunnybrook is reducing and omitting opioid use for patients after cardiac surgery without compromising pain control.

APPRECIATION AND THANKS

Oncology nurse Mercyamma Varughese received the inaugural C-2 (Surgical and Oncology Inpatient Unit) Employee Appreciation Award. The award recognizes a staff member who provides exceptional patient care and demonstrates commitment to the unit. “Mercyamma is an unsung hero on our unit…I hear time and time again from our patients and their families about how Mercyamma provided compassionate and kind oncology care and support.” (Eleanor Miller, Patient Care Manager of C-2).
8. HEALTH PROFESSIONS

Every day, interprofessional teams at Sunnybrook are working together to provide care when it matters most. The Hospital’s rich mix of interprofessional staff enhances care outcomes to meet the complex needs of the organization’s patients.

Diversity of teams was highlighted during “Spring into Wellness”, a community-building event targeted at enhancing the student experience. Students from 18 different professions including physiotherapy, recreation therapy, medicine, creative arts and clinical nutrition, contributed to make the session a success. Along a similar vein, the Person-Centred Care Action Planning Forum was attended by 70 interprofessional team members, who identified best practices to enable personalized care and team collaboration.

LEADERSHIP IN INTERPROFESSIONAL COLLABORATION

Sunnybrook provided leadership to the health care system through the Toronto Academic Health Sciences Network, to support the development of high performing teams and interprofessional collaboration. The Hospital is the co-lead of an initiative to pilot an Advancing Collaborative Teams Toolkit in six organizations, as high performing teams are a critical enabler of safe, high-quality patient care.

PRACTICE-BASED RESEARCH AND INNOVATION SHINES

With the goal of supporting inquiry and innovation in the care provided to Sunnybrook’s patients and their families, the Practice-Based Research and Innovation seed grant process was launched in 2017-18. The initiative provides funding for health professionals to lead practice-based research projects that are patient-oriented and have a direct impact on practice and patient care.
SPIRITUAL CARE AND RELIGIOUS CARE EXCELS AT ADVANCING COMPASSION

A person’s illness often creates a new focus on meaning, purpose and relationships. At Sunnybrook, Spiritual and Religious Care works together with patients and families, as well as other interprofessional teams, to ensure effective communication, emotional support, trust and respect, and involving patients and families in health care decisions. The team is comprised of chaplains, faith-based chaplains and sisters, as well as religious visitors. Together with the University of Toronto’s School of Theology, Sunnybrook also provides Clinical Pastoral Education Supervisor Training and leads an accredited Clinical Pastoral Education Program.
9. PATIENT AND FAMILY ENGAGEMENT

Sunnybrook continued to break new ground in patient, family and community engagement, creating meaningful opportunities for partners to inform the unique work of an academic health sciences centre. The past year saw a significant increase in the number of dedicated patient and family partners participating on councils, operational committees, working groups and special projects. A Patient & Family Partner Program was launched to broaden the scope of participation, also ensuring patients and families are best matched with projects of interest.

DIGITAL ENGAGEMENT THRIVES

The Hospital increased patient participation in decision-making, service improvement, education of learners and research by enhancing tools such as Sunnybrook’s online ‘patient and family engagement hub’. The Health Standards Organization recognized the hub with a leading practice designation for effectively initiating a dialogue with patients and families, both during their stay and beyond.

PATIENTS AS EDUCATORS

Patient partners participated in the learning process for medical students during Sunnybrook Simulation Centre training sessions, providing feedback to students on their communication skills after participating in a scenario, and sharing their lived experience as a patient in the health system. The patient partners also worked with the Odette Cancer Centre to develop a series of educational videos about how to manage some of the most common symptoms and side effects of living with cancer.

PATIENT-DRIVEN RESEARCH

Through Practice Based Research and Innovation, Sunnybrook’s patients, families and community partners are involved with grant review, as well as being active members on advisory and fundraising committees. The patient perspective is included in each proposal submission to ensure value and impact of the research and this perspective is part of decision-making at all levels of the research cycle.
10. ONLINE COMMUNICATION AND SOCIAL MEDIA

Sunnybrook’s web site and social media channels continued to play a critical role in spreading information about the Hospital’s research and innovations and helping to improve the patient experience through online engagement. From the past year’s accreditation process to the strategic planning initiative, sunnybrook.ca and social media platforms like Facebook, Twitter and Instagram shaped how Sunnybrook told its story and engaged with staff, patients, families, the community and its many stakeholders. Throughout the year, short videos were shared on social media to highlight words of wisdom from palliative patients, Santa’s visit to the NICU and a safety message for New Year’s Eve.

PREPPING FOR ACCREDITATION

Sunnybrook’s Intranet, or Sunnynet, played a strong role in preparing staff for Accreditation Canada’s on-site visit. An entire section of Sunnynet was dedicated to education tools and resources, and interactive features like quizzes to engage staff. Staff were also invited to submit examples of patient engagement initiatives. These submissions formed the basis for thirty posters, highlighting excellence in quality and care at Sunnybrook, positioned throughout all three sites during accreditation.
STRATEGIC PLAN 2018-21: ONLINE

The digital and visual team supported the development of Strategic Plan 2018-21 by creating a website dedicated to informing and engaging the Hospital’s numerous stakeholders. The online presence played a large role in engagement, with numerous surveys posted to the site.

BUILDING FAMILIES’ RESILIENCE

A new website for the Neonatal Follow-Up Clinic featured resources and animated educational videos, all with the intent of building parents’ confidence and resiliency following discharge. The site allows parents and caregivers to search for resources by topic, milestone, age and more. In addition, there is a section for health care professionals and also a forum for parents to connect and share stories from the unique perspective of having a baby who has spent time in the neonatal intensive care unit.
11. QUALITY AND PATIENT SAFETY

A commitment to quality is weaved throughout everything Sunnybrook does, ensuring care that is safe, effective and efficient. This approach is underpinned by a culture of compassion and strong partnerships. During 2017/18, the Hospital launched Quality Conversations in 17 patient care units. These structured weekly huddles allow interprofessional teams a standing time to discuss patient safety and propose new quality initiatives. Partnerships also thrived as Sunnybrook created a shared Quality Improvement Plan focused on care transitions with Michael Garron Hospital, to improve patient outcomes and experience across the system.

SAFE AND EFFECTIVE CARE FOR OUR MOST VULNERABLE PATIENTS

The Women & Babies Program launched the Southern Ontario Obstetrical Network to Care to bring together care providers and families across Ontario, together with data experts and researchers, to significantly reduce preventable preterm births and stillbirths. Led by Dr. Jon Barrett, maternal fetal specialist, the network will spread knowledge about screening tests and treatment options proven to reduce preventable preterm births and stillbirths in the province, improving infant health outcomes and quality of care for families.

HAND HYGIENE E-MONITORING: KEEPING PATIENTS SAFE

Sunnybrook initiated an innovative hand hygiene electronic monitoring project among four other hospitals in the greater Toronto area. Electronic monitoring, or e-monitoring, measures hand hygiene compliance without the need for observational or in-person audits. The e-monitoring hand hygiene dispensers are equipped with a sensor that counts hand hygiene events, standardized by the number of hand hygiene opportunities, to provide accurate, real-time measurement of hand hygiene in a specific clinical area. In the five inpatient units at Sunnybrook where the pilot was launched, three performed above the target.
FIRST-IN-CANADA BARCODING SYSTEM HELPS ENHANCE PATIENT SAFETY

Being admitted to hospital usually involves patients receiving a large number of tests such as blood work. To make this process as safe as possible for patients, Sunnybrook expanded its use of innovative technologies to ensure tests and transfusions are done more accurately than ever before. A new barcode system was implemented in select areas, including the operating room, to match patients with the correct blood. Patients are issued a barcoded wristband that, when scanned, provides the patient’s information and a unique patient identifier. This allows staff to track collection in real time and, where applicable, ensure that the correct blood product is transfused.
12. DIGITAL HEALTH TECHNOLOGY

Technologies such as smart phones and accompanying apps, as well as social networks, have become ubiquitous in not only daily life but also on the frontlines of health care. The applications provide opportunities for patients and families to better monitor their health and wellbeing, and give everyone, including staff, greater access to information. The past year at Sunnybrook saw the introduction of a number of new digital health applications to help reduce inefficiencies, improve access to information and ensure the Hospital offers more personalized care for its patients. A new bed management system featured a new look and feel that can be accessed and used from any computer, and also included the ability to request patient transport.

SUNNYCARE RECEIVES CANADA HEALTH INFOWAY CERTIFICATION

SunnyCare’s ability to improve clinician efficiency, patient flow and continuity of care was recognized this past year as the Hospital received Canada Health Infoway’s aEMR designation. Canada Health Infoway helps to improve the health of Canadians by working with partners to accelerate the development, adoption and effective use of digital health solutions across Canada. During 2017/18, SunnyCare continued to innovate, including the addition of an advance care planning progress note to support patients and their substitute decisions makers. Medication reconciliation was also addressed through SunnyCare’s new eMedRec module, making it faster and easier to catch discrepancies and communicate plans clearly with the entire team.

CONNECTING SUNNYBROOK WITH UNIVERSITY AVENUE PEERS AND BEYOND

In 2017/18, SunnyCare extended its reach by allowing clinicians access to images and reports from other Greater Toronto Area organizations west of Yonge Street, including Sick Kids, University Health Network, Mount Sinai, Trillium Health Partners, Humber River Hospital, Baycrest Health Sciences and Michael Garron Hospital. SunnyCare is the Hospital’s electronic medical record system which provides authorized clinicians with quick and easy access to patient medical information on desktop as well as on mobile devices.
RESULTS AT CLINICIAN’S FINGERTIPS

SunnyCare’s Results Inbox, an electronic inbox allowing users to manage results online within SunnyCare, expanded in 2017/18. Previously, only outpatient results for lab, radiology, ECG/EKG, and pathology were available, but this was extended to include all pathology results for inpatient and discharged patients. The service allows users to assign coverage to another physician and have a patient’s results automatically flow to them.
Sunnybrook’s commitment to high levels of collaboration with its many health system partners continued in 2017/18, resulting in improvements in how quality care is delivered. The Hospital’s local role was reflected in the work of the North Toronto Health Link, which supports patients with multiple health care needs to manage their treatment plans. At a provincial level, when neonatal capacity surged, the Ministry of Health and Long-Term Care looked to Sunnybrook to assist with adding more funded capacity to the system to support high-risk pregnancies and neonatal services.
FASTER ACCESS TO THE RIGHT HEALTH CARE
Ontario invested in a new facility at Sunnybrook to offer specialized treatment for people with blood cancers such as leukemia. The Complex Malignant Haematology facility makes the Hospital the second in the Greater Toronto Area to provide a full range of potentially lifesaving services, including stem cell transplants. The investment will expand care for people with blood cancers and disorders, meshing with Sunnybrook’s commitment to providing care when it matters the most.

WORKING IN PARTNERSHIP FOR SHARED COMMUNITIES
Michael Garron Hospital and Sunnybrook expanded and formalized their collaboration in 2017/18 to improve access to high quality healthcare services for all residents in their shared communities. The two organizations signed a Strategic Alliance Agreement to signify a commitment to working in partnership with one another and establishing a closer and more integrated relationship. To assist with capacity for the malignant haematology facility, Toronto Paramedic Services began to divert a number of ambulances each day from Sunnybrook to Michael Garron. This included patients triaged as level 3, or ‘urgent’, and who were picked up at a location within seven kilometres of Michael Garron, with a goal of moving an average of five patients per day.
14. FUNDRAISING

Sunnybrook Foundation supports the advancement of fundraising in support of research, education and capital initiatives at Sunnybrook. For 2017/18, Sunnybrook Foundation supported the priorities of the hospital, including fundraising for the Hurvitz Brain Sciences Centre, Prostate Centre, Geriatric Medicine Centre for Senior Health, Trauma Recovery Clinic and the Hybrid Operating Room.

INVESTING IN TREATING BRAIN DISORDERS

Sunnybrook Foundation, together with the Harquail Family, made a joint $10 million investment in neuromodulation research. Neuromodulation is the ability to intervene in brain circuitry to stop, start, and interrupt the systems at the root of the most common and challenging brain disorders. The joint investment of $5 million from both the Harquail family and additional donor funds, will support a critical mass of world experts in neuromodulation and help build a physical hub for innovative care and research. The 4,000 square foot Harquail Centre for Neuromodulation at Sunnybrook, the first of its kind in the world, will support advanced, image-guided technologies such as focused ultrasound to interact directly with malfunctioning brain circuits.

$10 MILLION TO TREAT MENTAL HEALTH AT SUNNYBROOK

Glenn and Stacey Murphy and their children provided a gift of $10 million to create the Murphy Family Centre for Mental Health and also build a new home for the Family Navigation Project team at Sunnybrook. The gift was inspired by the Murphy family’s belief in Sunnybrook’s conviction that in order to gain a 360 degree understanding of brain disorders, the Hospital must integrate the centres of excellence for brain. The Garry Hurvitz Brain Sciences Centre will link each field of brain sciences — psychiatry, neurology, neuro-imaging, neurosurgery, ophthalmology, otology and neuro-pharmacology — in an effort to accelerate research that will slow the progress of brain disorders.
INVESTING IN TREATING BRAIN DISORDERS
15. CLINICAL BREAKTHROUGHS AND FIRSTS

Advancing patient care is at the heart of Sunnybrook’s culture, each and every day, and the past year made strides in innovation. Advances were sometimes low-tech, like the Odette Cancer Centre’s Patient Concierge and Buddy Program, which helps patients and caregivers navigate their way through treatment and care.

Innovations were also higher-tech, like the Emergency Department’s launch of self check-in kiosks for more efficient care, improving the pre-triage process for patients.

FIRST IN CANADA: CANCER ABLATION THERAPY PROGRAM

Sunnybrook’s Odette Cancer Centre acquired three radiation technologies to allow the Hospital to provide individualized, precision care to more patients, and conduct leading-edge research to invent the future of health care. The highly specialized therapy machines will help change the way tumours are targeted. The MR-Linac will allow clinicians to watch a beam of radiation move through a patient’s body in real time and direct that beam precisely at a tumour. The Gamma Knife Icon offers precision radiation to a broader group of patients – for instance, to people with as many as 30 brain tumours. And the last of the groundbreaking technology, the MRI-Brachytherapy Suite, allows Sunnybrook physicians to guide internal radiation treatment, called brachytherapy, with magnetic resonance imaging.
TAKING THE LEAD ON TREATING OBSESSIVE-COMPULSIVE DISORDER

Canada’s first intensive residential program for severe OCD opened at the Frederick W. Thompson Anxiety Disorders Centre at Sunnybrook. The program offers care for up to 20 patients with refractory, or treatment-resistant, OCD a year. Residential treatment has been shown to provide a safe and therapeutic environment for the most severely ill to receive the support they need. Sunnybrook’s initiative differentiates itself by offering a full continuum of care, including family involvement, discharge planning and follow-up.

FIRST IN NORTH AMERICA: ACCESSIBLE CARE PREGNANCY CLINIC

The Women & Babies Program opened the Accessible Care Pregnancy Clinic, offering specialized pregnancy care to women with physical mobility disabilities. The clinic cares for women who have both invisible, or not immediately apparent disabilities, and also women with visible physical disabilities, including spinal cord injuries, cerebral palsy, severe arthritis, spina bifida, multiple sclerosis, chronic pain, muscular dystrophy, scoliosis, or have a history of trauma such as a car accident. The clinic offers care options individualized to each woman and centralized ‘one stop’ care.

FOCUSED ULTRASOUND AND ALZHEIMER’S DISEASE

Sunnybrook scientists made history in 2017/18 when they used focused ultrasound to safely and non-invasively breach the blood-brain barrier temporarily in patients with Alzheimer’s disease in a clinical trial. The blood-brain barrier is a protective barrier that surrounds the tiniest blood vessels in the brain and prevents the entry of sufficient amounts of drug therapies that could be effective in treating disease. By opening up the blood-brain barrier using low frequency ultrasound, a small but important step was taken that may lead to future treatment opportunities, like large molecules like drugs and even stem cells into the brain.
16. FINANCIAL OUTLOOK

The Government of Ontario has already communicated funding for fiscal 2018/19, the earliest communication since the inception of Health System Funding Reform. In addition, recognizing the challenges being experienced by the health care sector – high occupancy, hence demand, and supply pressures arising from developments in medical technology – the Government of Ontario’s approach this year was to ensure that no hospital lost funding. The combination of many savings initiatives and new funding has allowed Sunnybrook to develop and submit a balanced budget for fiscal 2018/19, as well as to enter into a new Hospital Service Accountability Agreement (H-SAA) with the Toronto Central Local Health Integration Network (TC LHIN). The Sustainability Program Office (SPO), established in late fiscal 2016/17, was instrumental in the identification and implementation of various savings, or revenue generating initiatives. SPO continues to engage with the entire organization and focuses on maintaining financial stability while ensuring quality of care remains excellent and focused on patient needs.

The next fiscal year will benefit from the launch of a new strategic plan. This will build on the existing plan by leveraging Sunnybrook’s focus on being there for patients “when it matters most”. In addition, recognizing that there are many challenges facing the health care system and Sunnybrook in particular, the strategic plan’s goal will also enable fiscal and operational sustainability. Sunnybrook will have a continued focus on repatriation, patient flow and choosing wisely all while being engaged in the renovation of space in preparation for undertaking an expanded role in the provision of care for Complex Malignant Haematology patients.
Sunnybrook Shines a Spotlight on 2017–18