

A new kind of health care for a healthier community



# Better Together

2012-13 Annual Report

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# 2012-13 Year in Review

	Credit Valley Hospital	Mississauga Hospital	Queensway Health Centre	TOTAL
Patient Visits	716,980	511,066	334,851	1,562,897
Inpatient Admissions	26,649	33,861	494	61,004
Beds Staffed & In Operation	441	663	164	1,268
Outpatient Visits - Ambulatory Care	326,604	164,979	161,935	653,518
Diagnostic Services (excludes Lab)	292,278	254,004	111,235	657,517
Births	5,228	3,821	N/A	9,049
Emergency Department (ED) Visits	98,098	92,083	61,681	251,862
Surgical Procedures	29,289	23,916	13,286	66,491
Professional Staff (Physicians, Dentists, Midwives)	447	647		1,094
Staff	3,543	3,985	643	8,171
Volunteers	1,086	600	205	1,891

#### NOTES:

Patient Visits = All Outpatient Visits + All Diagnostic Services + Emergency Visits All Diagnostic Services include Inpatient and Outpatient Exams

# We all want to be well and as healthy as we can be - at every stage of our lives.

We envision a new approach to health, an inter-connected system of care that is organized around the patient, both inside the hospital and beyond its walls. An approach that provides excellent care today and continued leadership for improving care tomorrow.

Working together to realize this vision, we will continuously ask ourselves what it will take to make a healthier community and dare to imagine innovative ways to achieve it. Our focus will be both on keeping people healthy, and on treating and caring for them when they need it most.

Building on the best of what we do, we will think and act differently in order to further improve our services. We will continuously demonstrate compassion, excellence and courage in the pursuit of our mission.

That means we will be with our patients and their families at every step of their journey, caring for them and helping them to access health support, while creating a learning environment in which we can deliver the highest quality of care possible. We will invest the precious resources of this community in the most effective ways possible.

We are all in this together.

And as partners in creating a new kind of health care, we are **Better Together.** 



# A Message from the Board Chair and the President and CEO

We are proud to share with you the annual report for 2012-13, a milestone year for Trillium Health Partners. Our new hospital is focused on improving patient and family-centred care and experience. In this first year, we have already realized some of the benefits that our patients are experiencing as one hospital. We have improved the quality of care by standardizing best practices in discharge planning, skin and wound care, and infection and prevention control across all sites, improved patient flow by reducing wait times in the emergency department for admitted patients by 10 per cent and worked with our community partners to improve systems that will reduce readmissions for patients.

and members of our community. Through these discussions we heard that we need to work together to create a system that will meet our patients' needs today and in the future – one that respects our diverse population, is simple to navigate and ensures access to care at the right time and closer to home. Our strategic plan is designed to act on what we have heard from our community, respond to increased service demands more efficiently, and deliver a connected system that provides the highest quality of care for our patients and their families.

To build a system of health care services in and outside the hospital, we will actively engage our community partners. We are working closely with the Local Health Integration Network (LHIN), Community Care Access Centre and

other hospitals in the region to put our strategy into action, partnering on a variety of initiatives including shared technology,

"We would like to recognize that, as always, our accomplishments reflect the dedication, commitment and talent of our passionate

staff, physicians, volunteers and foundations."

While the quality of care for our patients is our top priority each and every day, we are also looking to the

future. We continue to experience increased demands for service and in the coming years, we expect that we will be called upon to do more within our existing resources. We are responding to these increased demands by being even more efficient and looking for new ways to deliver service. In November, we published our new strategic plan and promise to deliver a new kind of health care for our community. This plan was developed through extensive engagement and consultation with over 23,000 patients and families, staff, physicians, volunteers, partners

an effective emergency care system that can accommodate volume increases year-round, a regional orthopaedic capacity plan and a strategy to better manage transitions for patients between hospital, home and other types of care.

We have been recognized as a leader in quality and safety by the Canadian Institute of Health Information (CIHI), which placed us among the leading hospitals in the GTA for excellence in quality and safety.

"Our strategic plan is designed to act on what we have heard from our community, respond to increased service demands more efficiently, and deliver a connected system that provides the highest quality of care for our patients and their families."



Alan Torrie and Michelle DiEmanuele

Our commitment to delivering quality care based on best practices was acknowledged by the Registered Nurses Association of Ontario by designating Trillium Health Partners a Best Practice Spotlight Organization (BPSO) candidate. Through this internationally-recognized program we will implement six evidence-based nursing practice guidelines over three years with the goal of achieving best practice designation as an organization.

Investing in research, innovation and education is also a key component of our strategy, to ensure we can continue to meet our patients' needs in the years to come. We are expanding post-graduate medical education with the help of a \$1.1 million investment by the University of Toronto. Our rewarding partnership with the University of Toronto/Mississauga and the Mississauga Academy of Medicine (MAM) continues with our second class of 54 medical trainees beginning their studies. This coming year, our second-year students will begin their clerkship and start gaining practical experience as they treat patients with the guidance and supervision of our physicians and nurses. This investment is instrumental in attracting and retaining much needed physicians to our hospital and our community and to building better health care for the future.

In what has been an incredible year we have advanced our goals of quality, access and sustainability, served more patients and ended the year in a strong financial position that will enable us to invest in redeveloping our hospital for the coming years.

We would like to recognize that, as always, our accomplishments reflect the dedication, commitment and talent of our passionate staff, physicians, volunteers and foundations. We deeply appreciate and have respect for the challenging and inspiring work they do every day. We are thankful to our patients, families, community partners and members of our community without whom we could not have achieved the successes of this milestone year.

Without question, everything we have achieved this year demonstrates that in becoming one hospital, we are truly **Better Together.** 

**Alan Torrie** 

Board Chair Trillium Health Partners

Michelle E. DiEmanuele

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President and CEO
Trillium Health Partners

# A Message from the Chief of Staff and the Chief Nursing Executive

We are proud of the many continued improvements to patient care that you will read about in this 2012-13 Annual Report. At the heart of our efforts is a deep and persistent commitment to teamwork, whether we are working together at a patient's bedside or coordinating across the hospital to have patients admitted in a bed as quickly as possible. We know that the more we collaborate and coordinate our efforts, the better quality of care our patients will experience.

Together with our Vice Presidents of Patient Care Services, Patti Cochrane and Dr. Craig McFadyen, we began the year by strengthening our foundation for teamwork by building our organizational leadership structure and re-organizing service areas into 13 clinical programs that will help us deliver the goals we set out in our strategic plan. Our clinical programs are based on a co-lead model that partners the clinical role of Chief and Medical Director for each program with a Patient Care Services Director to work together to oversee service delivery and ongoing quality of care. We're pleased to have put into place a strong team of experienced and talented physicians and administrators to lead these programs. Supported by our Pharmacy, as well as our enabling services, our interdisciplinary model ensures accountability across all sites.

An additional and very important part of our clinical structure is our Professional Practice Department. Professional Practice works to ensure that our health care professionals adhere to the highest standards of practice.

This team also collaborates in the areas of research and inter-professional education with more than 40 different health care roles at our hospital including nurses, occupational therapists, physiotherapists, respiratory therapists, pharmacists and physicians.

Our collaborative culture is supported by our commitment to continuous learning and seeking out and applying best practices. Over the past year, we have set out to begin standardizing best practices in the areas of wound care, infection prevention and discharge planning. As a candidate for the Registered Nurses Association of Ontario's Best Practice Spotlight Organization, we have begun to implement evidence-based nursing best practices in the areas of: Smoking Cessation, Assessment and Management of Pain, Prevention of Foot Ulcers in People with Diabetes, Developing and Sustaining Nursing Leadership, Breastfeeding, and Prevention of Falls and Injuries in Older Adults.

We are also establishing Inter-professional Practice Councils where staff from various disciplines come together to review the care provided and make improvements. As a teaching hospital committed to continuous learning, we believe there is always room for improvement when it comes to quality patient care. The Canadian Institute for Health Information's (CIHI) Canadian Hospital Reporting Project (CHRP) rated our patient care as one of the highest performing hospitals in the GTA last year.

Our collaborative culture is supported by our commitment to continuous learning and seeking out and applying best practices to deliver the highest quality of care, as recognized last year by CIHI's Canadian Hospital Reporting Project.



Kathryn Hayward-Murray and Dr. Dante Morra

We are also taking a collaborative and inter-professional approach to research, the cornerstone of our ability to continue to find new ways to improve patient care. Our research vision builds on our historical accomplishments in applied research that directly improves patient outcomes. For example, our regional centres for cancer and cardiac care continue to grow and adopt leading edge new procedures and treatments, such as transcatheter aortic valve implantation (TAVI) -- a minimally invasive technique for replacing heart valves in patients not strong enough for open heart surgery and brachytherapy, a form of radiation therapy for some types of cancer that takes less time and is much easier on patients' health.

Another accomplishment in the area of research has been the establishment of the two research chairs: the Dr. Mathias Gysler Chair in Women's and Children's Health System Leadership for outstanding medical and community leadership, and the Dr. Gopal Bhatnagar Chair in Cardiac Health System Leadership for outstanding medical and community leadership. These endowed research chairs were established by the hospital's foundations in recognition of the exceptional contributions of our outgoing Chiefs of Staff – Dr. Gopal Bhatnagar and Dr. Mathias Gysler. As one of the highest honours an academic hospital can bestow for clinical care, these chairs pay tribute to the legacy of Dr. Bhatnagar and

Dr. Gysler – a legacy that will remain a part of Trillium Health Partners and this community for years to come. These chairs will also enable us to recruit and retain top clinical and research experts to conduct critical research for advancement in patient care.

As we look toward an exciting and challenging future, we would like to express our deepest appreciation to our highly skilled and dedicated nurses, physicians and allied health professionals whose incredible efforts allow us to continue to deliver the highest quality of care each day. We truly are **Better Together**.

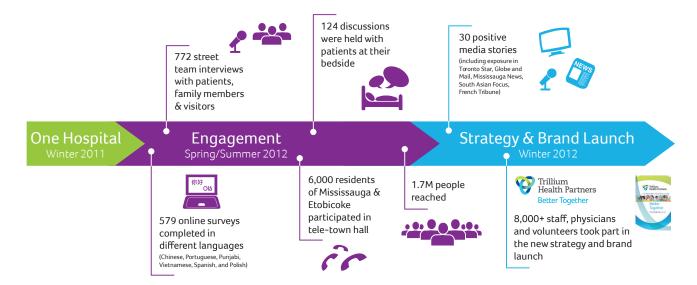
**Dr. Dante Morra, MD**Chief of Staff
Trillium Health Partners

Kathryn Hayward-Murray

Vice President, Patient Care Services and Chief Nursing Executive Trillium Health Partners

# **Better Together**

When we embarked on the journey to become one hospital over a year ago, we believed that we would be *Better Together*. We anticipated that our increased size and scale would help us use our resources even more efficiently, and that by building on each hospital's best practices we could collectively achieve excellence in the quality of care we provide our patients and community. One year later, we can say for certain that we have seen these anticipated benefits become very real.



Here are just a few highlights of how patients are receiving better care because we are now one hospital:

### Engaging and communicating with more than 23,000...

staff, physicians, volunteers, patients and community members provided us with input for our first strategic plan based on our communities' needs and with clearly defined goals to improve and achieve quality, access and sustainability in the coming years.

### Creating one patient experience...

by centralizing the intake process for cardiac surgical referrals to reduce wait times and worked with our community partners to improve systems that will reduce readmissions for patients.

### Sharing and standardizing best practices...

in wound care, cardiac care, cancer treatment and research has improved patient outcomes.

### Improving and sharing technology...

including a portal that gives clinicians full access to patient records across all our hospital sites, and a new website that offers translations in the top six languages served in our community to create a better experience for patients as they move from one site or clinician to another.

### Managing patient flow across the hospital...

as opposed to within individual sites, has helped patients who need beds to get them more quickly, further improving emergency department wait times by 10 per cent.

### Identifying site-specific emergency best practices...

and making use of them across the entire hospital has improved operations and allowed us to react swiftly to respond to community emergencies.

"Living with cancer is not easy, and I'm not willing to give up the quality of care and the personalized care I receive at Trillium Health Partners. It is very important to me."



(L-R) Lisa Roelfsema, Dr. Kaizer, Lynn Boyko, Andrea Finlayson, Jennifer Haley

# A Patient's Perspective

At Trillium Health Partners we strive to deliver high quality health care that puts patients at the centre. When we hear from patients about their experience, it reminds us that "patient and family-centred care" isn't an abstract ideal – it's a living reality.

Lynn Boyko has been battling cancer for over 20 years. Her story is an inspiring illustration of what "patient-centred" really means. Lynn came to the Carlo Fidani Regional Cancer Centre at Trillium Health Partners in 2006. She had been receiving cancer treatment at another hospital, but felt that it wasn't meeting all of her needs. At the same time, she had been seeing a hematologist at Trillium Health Partners. The hematologist was also an oncology specialist and he agreed to take her as a patient.

"I felt very comfortable with this doctor," she says.
"He really works with me. He presents options,
listens to my concerns and works with me to find an
approach that accommodates my needs." Working
with patients is the cornerstone of patient and
family-centred care. Lynn says, "Chemotherapy
nurses, for example, are always willing to hear what
I need. They'll make adjustments to the different
medications if I ask; they hold my hand if I'm upset.
I feel empowered, not intimidated."

Not long after becoming a patient at the Carlo Fidani Regional Cancer Centre, Lynn received the distressing news that her cancer had metastasized. Among other stresses, she had just taken a new teaching job that she would now have to resign,

raising financial concerns. She says that her interprofessional health care team at Trillium Health Partners - oncologist, nurses and social workers – helped her to deal with every aspect of the impact of her illness, from helping her find financial assistance, to supporting her emotionally, to ensuring she had the physiotherapy and other adjunct treatments needed to keep her as well as possible during treatment. Her family was a big part of the process, she says, and were always welcomed and supported by doctors, nurses and staff.

"Communication is an important aspect of patient-centred care," she says. "You feel you're being listened to. You never feel you are being rushed. Everyone is willing to take the time to answer my questions and return phone calls." Similarly, communication among various team members needs to work well. If Lynn's oncologist was away, his replacement was clearly familiar with her case, as were staff she encountered in radiology, chemotherapy, physiotherapy and pharmacy. "I did not have to keep repeating my story," she says.

When her family moved to a smaller home, she insisted on staying close to Trillium Health Partners. She says that friends in smaller towns are forced to go to Toronto for the kind of advanced treatments she receives at the Carlo Fidani Regional Cancer Centre. She wasn't willing to go this route. "Living with cancer is not easy, and I'm not willing to give up the quality of care and personalized care I receive at Trillium Health Partners. It is very important to me."

### It's been an extraordinary year!

It's been a milestone year at Trillium Health Partners. We were able to meet the growing demand for service and continue to advance our efforts to improve – each and every day – the quality of care for our patients, while maintaining a balanced budget. We also moved forward with great momentum in pursuing our overarching goals of quality, access and sustainability, and set out initiatives which have helped advance the hospital in realizing its mission of "a new kind of health care for a healthier community." We're proud to share with you selected highlights of this year's achievements.

## Quality

- Canadian Institute for Health Information (CIHI) ranked Trillium Health Partners among the best in the GTA
  for excellence in quality care and patient safety. We were ranked as higher than the national average in
  several categories.
- Registered Nurses Association of Ontario (RNAO) recognized Trillium Health Partners as a candidate for their Best Practice Spotlight Organization designation. We will be working to earn this designation over the next three years by implementing best practices in six areas of service.
- Introduced the TAVI program (Transcatheter Aortic Valve Implantation), a heart procedure for elderly or frail patients who cannot undergo traditional valve replacement surgery.
- Expanded programs at The Carlo Fidani Regional Cancer Centre and introduced brachytherapy, a leadingedge cancer treatment. Brachytherapy is a form of radiation therapy that is highly targeted and results in less tissue damage and a shorter treatment period for patients.
- Introduced a specialized procedure that reduces discomfort and improves the effectiveness of treatment for children who require multiple botox injections to treat cerebral palsy and other neuro-muscular conditions.



### Access

- 10 per cent improvement in emergency department wait times for admitted patients across the hospital as a direct result of improved operations in patient flow across all sites.
- New MRI installed at Mississauga Hospital, reducing the procedure time for many types of scans.
- Centralized registration centre at Credit Valley Hospital making registration faster and easier for patients.
- Expanded roles for physiotherapists and chiropractors in the Spine Centre, allowing patients to receive assessments and treatment more quickly.
- Introduced a number of initiatives focused on enabling seniors to maintain optimal health and function while in the hospital, so that they can successfully transition home more quickly.
- Through partnership with the Community Care Access Centre, increased the number of patients who can receive dialysis and other renal services at home.

### **Sustainability**

- Improved technology, including an electronic physician order entry system, has improved efficiency across all sites.
- Reduced administrative costs by almost \$4 million and realized further efficiencies of \$2.5 million.
- Reinvested to improve quality and support higher service levels.
- Increased provincial funding recognizing our volumes and opportunities as one hospital.



Committee

# **Board of Directors Report**

In what has been a milestone year, Trillium Health Partners' Board of Directors has worked to ensure that the organization continues to deliver high quality care, while taking steps forward to advance our mission for a new kind of health care for a healthier community. The report below outlines the key activities of the standing committees of the Board during fiscal 2012-13.

# Governance Committee

- Provided oversight on the completion of the review and integration of all Board policies and Committee terms of reference, as well the Medical Advisory Committee
- Increased transparency of governance decision-making by posting Board meeting minutes and the policy manual on the public website
- Developed and implemented an electronic portal where all meeting materials are centrally accessed
- Provided guidance on renewal of stakeholder relationships, including Foundation and Volunteer Fundraising and retail arrangements across all sites
- Considered and advised the Board on the establishment of a research institute including its scope, governance structure and legal status
- Monitored the academic affiliation with the University of Toronto through review and renewal of the affiliation agreement and development of a related Intellectual Property Policy
- Established terms of reference for the Research Ethics Board and appointed a delegate to oversee Board responsibilities
- Analyzed the skill mix of current Board members, restated the skill matrix used to guide Board recruitment and assessed opportunities for recruitment of new Directors

# Risk Management Committee

- Approved a by-law change to grant the Risk Management Committee authority to act on matters of an urgent and unique nature in the absence of the Board. Established a reporting process whereby all actions are presented at the proceeding Board meeting, thereby establishing seamless governance oversight of the hospital at all times
- Reviewed Board policies on compliance reporting and whistle-blowing to ensure best practices, accountability and transparency
- Provided oversight to the integrated Emergency Management Program for the new organization
- Monitored the requests received for disclosure under the Freedom of Information and Protection of Privacy Act
- Determined compliance with annual reporting requirements including regulatory compliance, claims management and corporate insurance coverage
- · Monitored material risks reported by the Chairs of the Board Committees

### • Met the budget plan for 2012-13 and have a net surplus

- Met the commitment to the working capital plan for 2012-13
- Created the balanced budget plan for 2013-14

Human Resources Committee

- Recruited a patient representative to committee to provide a patients' perspective in improving quality of care and a patient experience
- Implemented the organization's first Quality Improvement Plan that resulted in improved patient experience, reduced emergency department wait times and lower readmissions
- Passed the 2013-14 Quality Improvement Plan that puts a greater emphasis on preventing all hospital acquired infections
- Initiated Accreditation Canada Qmentum process that will further integrate services across all sites and lead to the adoption of best practices across the hospital
- Monitored the organization's performance quarterly, including the publicly reported indicators
- Reviewed high risk patient events and critical incidents to identify root causes and improve process to further prevent harm and improve patient safety

### Reviewed 2012-13 CEO Goals and Objectives for alignment to approved Reward-for-Performance Plan

- Reviewed the 2011-12 and 2012-13 Executive and Management Reward-for-Performance pay outs for alignment to approved Compensation Plan, Quality Improvement Plans and compliance with legislated requirements
- Reviewed the Executive Reward-for-Performance component of the 2013-14 Quality Improvement Plan
- Reviewed Board Policies on: Respect for Diversity, Reporting on Compliance, CEO Selection and Succession Planning, CEO Job Description, CEO Direction, CEO Performance Management and Evaluation, CEO Compensation, CEO Expense Reimbursement and Travel, Chief of Staff Selection and Succession, Chief of Staff Job Description, Chief of Staff Compensation
- Reviewed labour and employee relations strategies
- Reviewed Quarterly Human Resources Reports monitoring key people and organizational indicators and the linkages to integration, service planning and operational outcomes



Front row (L-R): Neil Skelding, Alan Torrie (Chair), Kathryn Hayward-Murray, Karen Wensley, Lee Stem Back row (L-R): Sacha Ghai, Edward Sellers, Wayne Bossert, Dr. Bill Wong, J. Fred Kuntz, Nicholas Zelenczuk, Michelle DiEmanuele, Joanne Rogers, Tim McGuire, Dr. Sarita Verma, Dr. Dante Morra Absent: William Rogers, Pam Turner, Dr. Naveen Dayal

# **Building Our Future of Better Care Through Education**

Trillium Health Partners' approach to education encompasses two key areas – building a better future in health care, and improving today's system through education and best practices. We are committed to nurturing the next generation of physicians to build capacity and expertise in our community. We also provide opportunities for our professional nursing and allied health staff to ensure practices remain leading-edge to help us continuously improve the quality of care for patients. Our physicians and staff are active participants in a culture of continuous learning, much of which takes place in an inter-professional team that brings learners from various disciplines together. We are firm believers that learning together leads to better collaboration and teamwork in caring for patients.

Last year was a rewarding year in every aspect of education at Trillium Health Partners. We provided training to approximately 2,000 learners through affiliations with nearly 60 colleges, universities and training institutes. Learners were provided experience in many areas of the organization some of which included surgery, medicine, paediatrics, cardiology, emergency services and outpatient clinics.

Through our affiliation with the University of Toronto, we provided medical education to 54 first year and 54 second year undergraduate medical students from the Mississauga Academy of Medicine (MAM). The formal clerkship training of third-year undergraduate medical students will commence in September 2013, at which time we will reach a total of 162 learners from MAM. This is an exciting milestone as it means we will now have third-year medical students working directly with patients across 10 clinical programs and two Family Medicine Teaching Units across our sites under the supervision and guidance of our physicians. Approximately half of our active physicians will be involved in teaching, and we have been working with the University of Toronto over the past year to help prepare them for this role.

A key aspect of our preparation for the first full cohort of third-year clerks has been conducting a pilot in which a number of third-year clerks from the University of Toronto's downtown medical

school campuses rotated into our hospital for two to three week periods in selected programs. This was an invaluable experience for everyone involved, and has helped us understand what we need to do to be ready for our MAM clerks next year. "I loved the experience here," says Carlo Cifelli, who completed his surgery, family practice and emergency rotations at Trillium Health Partners. "I got much more hands on practice than many of my classmates who rotated at other hospitals, and the teachers have been incredibly supportive and enthusiastic," he says.

In addition to training undergraduate learners through MAM, we also support postgraduate training at our hospital in a number of specialty areas. Our postgraduate learners come from the University of Toronto as well as other provincial, out of province and international Universities. Our family practice residency is well-established, with 36 family practice residents working with us each year. Postgraduate programs benefit not only the learners and our hospital, but also our community. We recently conducted a survey of physicians who completed our family practice residency, and approximately 40 per cent said they elected to stay and practice in Mississauga. One such physician is Dr. Roman Zassoko, who completed his residency in December. He moved to Mississauga to participate in our "very strong, resident-centred" program and has elected to stay and set up practice here, in close proximity to Mississauga Hospital. "Knowing the practising specialists and the patient population, it made sense to stay here," he says.



Carlo Cifelli, third-year Mississauga Academy of Medicine clerk

# **Our Volunteer Partners**

# The Value of One. The Power of Many.

At Trillium Health Partners this past year, 2,000 dedicated volunteers played an important role in supporting the delivery of quality, compassionate health care to our patients.

Volunteers are involved in every aspect of our hospital's daily operation. They are in our clinics and emergency departments, offering a warm hello and a helping hand in our patient units, and they support our gift shops and lottery desks to raise much needed funds for the hospital. A key role for our volunteers is helping patients and visitors get to the right place at the right time in our hospital by providing directions at the information desk and wayfinding across our sites. Our wayfinding volunteers are truly living our strategy each and every day by making sure patients get to where they need to be quickly and easily by guiding people to their destination and assisting with accessibility issues by bringing a wheelchair to patients and offering other supports if needed.

Some 2,000 volunteers contributed more than 200,000 hours to our hospital providing patients with important information, warmth and reassurance in their hospital experience.

We have approximately 125 volunteers assisting patients and visitors at our information desks throughout the day and during evening visiting hours.

Our volunteers understand that hospitals can be difficult to navigate sometimes, especially when English is a second language.

Our information desk volunteers are trained to navigate both the hospital and the computer system, so they can help family and friends locate patients during visiting hours and help patients find the right clinic or department.

Our information desk and lobby volunteers know that a kind and helping hand – and clear directions – can provide comfort during a difficult time. Now a volunteer on the information desk at Mississauga Hospital, Ramona Matthews was once a patient. She recalls coming to Mississauga Hospital for cancer treatment and having difficulty finding the oncology department. "A very kind volunteer came forward and walked us through the maze of corridors and got us to where we needed to be," she says. "It was a tremendous relief as we were feeling pretty overwhelmed."

Isobel Slakinski, who has been an information desk volunteer at Credit Valley Hospital since 2006, says, "You do your best to try and answer questions as quickly and nicely as possible so people can be on their way. It really makes a difference for people; many come back to the desk on their way out just to say thank you."







(Top to Bottom): Derek Keltie, Credit Valley Hospital Abhia Ahmed and Pat Perkins, Mississauga Hospital Merv Nowak and Peter Scholefield, Queensway

## Financials for 2012-13

Trillium Health Partners is pleased to report that at the conclusion of our second fiscal year as one hospital, we have continued to improve the financial strength of our combined organization. As of March 31, 2013, we have reported a surplus of \$14.4 million and a current ratio of 1.15. This is a remarkable accomplishment in these challenging times. A primary contributor to the surplus is the agreement, late in the fiscal year with the LHIN, to reallocate Post Construction Operating funding to match our actual volumes. In addition the organization achieved higher than expected rebates over the course of the year, further adding to the positive financial outcome.

### **Trillium Health Partners**

Summary statements of financial position as at March 31, 2013, March 31, 2012 and April 1, 2011 (In thousands of dollars)

	March 31, 2013	March 31, 2012	April 1, 2011
	\$	\$	\$
Assets			
Current assets			
Cash and short-term investments	213,529	178,244	100,537
Accounts receivable	44,344	45,782	40,027
Inventories and prepaid expenses	16,158	15,655	13,071
	274,031	239,681	153,635
Capital assets, at cost, net of accumulated amortization	655,587	678,470	681,944
Intangible assets - licences	2,892	2,892	2,888
Long-term investments	11,501	10,701	11,601
	944,011	931,744	850,068
Liabilities			
Current liabilities			
Accounts payable and accrued liabilities	95,749	100,231	97,105
Obligation under capital leases	583	635	603
Provincial capital grant	4,236	4,236	4,236
Deferred contributions	3,396	10,533	11,302
Current portion of long-term debt	11,813	4,942	1,011
Due to Ministry of Health and Long-Term Care, Local Health			
Integration Network and other Ministries	122,146	108,219	61,571
	237,923	228,796	175,828
Long-term debt	52,001	61,724	39,312
Obligation under capital leases - long-term portion	1,623	2,205	2,840
Employee future benefits	24,840	23,861	22,155
Deferred capital grants and contributions	470,238	472,350	472,691
	786,625	788,936	712,826
Net Assets			
Investment in capital assets	119,329	136,614	165,487
Internally restricted	6,283	6,449	6,597
Unrestricted	32,222	(255)	(34,842)
	157,834	142,808	137,242
Accumulated remeasurement gains (losses)	(448)		
Accumulated remeasurement gains (1055es)	, ,	110000	
	157,386	142,808	137,242

Approved by the Board of Directors

Alan Torrie, Bøard

Nicholas Zelenczuk, Treasurer

In the coming year the hospital will continue to act in a financially conservative manner to ensure that we have the resources available to meet our community's demand for services. The hospital continues to perform well against industry standards related to Health Based Allocation Methodology (HBAM), and actual costs are below expected costs.

### **Trillium Health Partners**

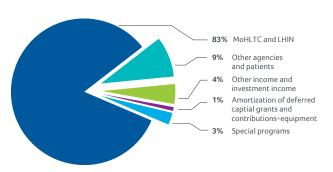
Summary statements of operations years ended March 31, 2013 and March 31, 2012 (In thousands of dollars)

	2013	2012
	\$	\$
Revenue		
Patient income		
Ministry of Health and Long-Term Care, Local Health		
Integration Network and other Ministries	762,968	719,304
Other agencies and patients	81,907	86,252
Other income and investment income	40,458	41,173
Amortization of deferred capital grants and contributions - equipment	7,768	8,019
Special programs	24,737	22,104
	917,838	876,852
Expenses		
Salaries, wages and employee benefits	604,000	584,986
Medical and surgical supplies	65,752	62,888
Drug supplies	39,939	37,989
Other supplies and expenses	130,615	124,838
Amortization - equipment	25,331	26,176
Special programs	24,710	22,091
	890,347	858,968
Excess of revenue over expenses, as per Hospital Service	27,491	17,884
Accountability Agreement		
Net building amortization	(10,628)	(9,064)
Interest on long-term debt	(2,497)	(2,467)
Excess of revenue over expenses for the year	14,366	6,353

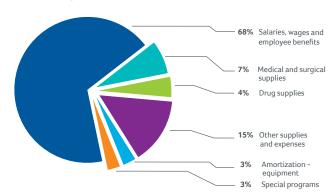
<sup>\*</sup>Full audited statements available upon request.

The pie charts below outline the distribution of our operating revenue and operating funds by expense category.

**2012-13 Revenues** 



2012-13 Expenses MoHLTC Level



# Message from the Foundations

Each and every day, our community demonstrates its commitment and support for our hospital. From individual donations, community-run fundraisers, corporate investment and countless volunteer hours, our supporters have become integral partners in building the future of health care in our region.

As Foundations, we share the hospital's strategic priorities and support the right care at the right time in the right place; research, innovation and education; and ensuring an exceptional patient experience. For the past year, we have been working collaboratively to maximize donor investment in Trillium Health Partners, while working with donors to ensure their gifts are directed to the area of the hospital most important to them.

Last year, fundraising activity from both Foundations totaled more than \$29 million to help deliver state-of-the art equipment and fund new programs across Trillium Health Partners. Following are just a few of the highlights:

- In April 2012, cancer survivor Robert Taberner helped launch a fundraising campaign to establish the first surgical robotics program for the region at our hospital. In one year, more than \$4.2 million has been raised to bring this state-of-the-art program here to benefit cancer care.
- We made great strides in our life-saving neuroscience program, raising \$2.9 million to date, and finished off key priorities in the area of mental health including: The AstraZeneca Adolescent Mental Health Outreach Program, the Mental Health Emergency Services Unit, The Hospital Elder Life Program and the Mental Health First Aid for Seniors program.
- Thanks to more than 6,000 generous gifts from the community and staff totaling \$5 million, a new state-of-the-art MRI machine was able to be installed at Mississauga Hospital. Such equipment is critical for the most accurate and timely diagnoses.
- TD Bank Group generously donated \$250,000 to establish a TD Grants in Medical Excellence program for our hospital, which will be directed to deliver a program in Developing and

Sustaining Clinical Leadership for 100+ nurses and allied health professionals. This training is integral to our hospital's pursuit of earning the internationally recognized BPSO designation by the RNAO, and will equip the future of clinical leadership for our hospital.

We encourage you to learn more about the tremendous support our community continues to show our hospital by visiting the "Donate" section of www.trilliumhealthpartners.ca.

This is an exciting time for health care in our community. The hospital has embarked on an exemplary new strategic plan that will deliver tremendous benefit not only to families in this community, but across the province. Our family of donors is vital to this mission. As partners in creating a new kind of health care, we are **Better Together.** 

Thank you for your continued support.

**Michele Darling**, Chair, Board of Directors The Credit Valley Hospital Foundation

Michele S. Daling

**Peter Willson,** Chair, Board of Directors Trillium Health Centre Foundation

**Steve Hoscheit,** Shared President and CEO Trillium Health Centre Foundation and The Credit Valley Hospital Foundation (as of April 1, 2013)

Stochen



(L-R): Peter Willson, Michele Darling, Steve Hoscheit

# **Our Leadership Team**

Over the past year, we put into place a new organizational structure that includes a new leadership team for administrative and clinical programs that will help us to deliver the highest quality of patient care.

### **Executive Leadership Team**

Michelle E. DiEmanuele, President and CEO

Dr. Dante Morra, M.D., Chief of Staff

Kathryn Hayward-Murray, Vice President, Patient Care Services and Chief Nursing Executive, CVH Lead

Patti Cochrane, Vice President, Patient Care Services, MH Lead

Dr. Craig McFadyen, Vice President, Patient Care Services, Medical Director and Chief of Oncology

Dr. Norm Hill, Vice President, Medical Education and Medical Administration

Susan Bisaillon, Associate Vice President, Operational Coordination

Leslie Starr-Hemburrow, Associate Vice President, Ambulatory Care

Morag McLean, Vice President, Human Resources. Volunteer Resources and Organizational Effectiveness

Krista Finlay, Vice President, Communications, Patient and Community Relations

Karli Farrow, Vice President, Strategy, Quality and Enterprise Risk

Steve Hall. Vice President and Chief Information Officer

Ron Noble, Vice President, Capital Planning, Redevelopment and Corporate Services, Interim Vice President, Finance and Chief Financial Officer, OHC Lead

### **Medical Department Chiefs**

Dr. Dante Morra, M.D., Chief of Staff

Dr. Derek Archer, Program Chief and Medical Director Diagnostic Imaging

Dr. Ann Bayliss, Program Chief and Medical Director Children's Health

Dr. Rose Geist, Program Chief and Medical Director Mental Health

Dr. Craig Irish, Chief, Anaesthesia

Dr. Michael Kates, Interim Chief, Primary Care, Rehab & Complex Continuing Care – MH/QHC

Dr. Eric Letovsky, Program Chief and Medical Director Emergency

Dr. Manish Maingi, Chief, Cardiac Health

Dr. Craig McFadyen, Vice President, Patient Care Services, Medical Director and Chief of Oncology

Dr. Tak Sameshima, Interim Chief, Medicine

Dr. Peter Scheufler, Program Chief and Medical Director Women's Health

Dr. Vir Sennik, Chief, Neurosciences / Musculoskeletal

Dr. Thomas Short, Chief, Surgery

Dr. John Srigley, Chief, Laboratory Medicine and Genetics

Dr. Paul Philbrook, Interim Chief, Primary Care, Rehab & Complex Continuing Care – CVH

## **Trillium Health Partners**



Trillium Health Partners is one of the largest community-based acute care facilities in Canada. Comprised of Credit Valley Hospital, the Mississauga Hospital and the Queensway Health Centre, Trillium Health Partners serves the growing and diverse populations of Mississauga, West Toronto and surrounding communities. Trillium Health Partners delivers a range of highly specialized regional programs including Cardiovascular, Maternal-Child, Oncology, Renal Dialysis, Clinical Genetics, Seniors' Health, Sexual Assault & Domestic Violence, and Stroke & Neurosciences. As regional leaders in the delivery of these programs, Trillium Health Partners is able to provide the highest level of specialized care to its patients right in their own community. Trillium Health Partners is a teaching hospital affiliated with the University of Toronto. Trillium Health Partners is an associate member of the Toronto Academic Health Science Network.

# Right Care, Right Place, Right Time

In a moment, your health can change. From scrapes to chest pains - when you are sick or hurt, it is hard to think about anything else. This is even more so when a loved one is involved. It is natural to react and seek care in the one place we all know about: the emergency department.

For a complete listing of all available community service options, please visit: www.hco-on.ca
Health advice from a registered nurse is also available at Telehealth Ontario: 1-866-797-0000

Below are your health care options at Trillium Health Partners:



### **EMERGENCY CENTRES**

For serious conditions that need immediate attention

Mississauga Hospital - 100 Queensway West, Mississauga Credit Valley Hospital - 2200 Eglinton Ave. West, Mississauga

Open 24 hours a day, every day of the year



### **URGENT CARE CENTRE**

For non-life threatening conditions when your family doctor is not available

Queensway Health Centre -150 Sherway Drive, Toronto

Open daily from 8 a.m. to 10 p.m., every day of the year



Follow us on:





