Where It All Begins

Let’s start this story at the beginning: a patient enters St. Michael’s Hospital.

If you’ve visited St. Michael’s before, chances are it was through an “outpatient” visit, meaning that you came to a clinic or unit for diagnosis or treatment, and didn’t stay overnight. The vast majority of visits to St. Michael’s are outpatient; the hospital’s various clinics welcomed 466,600 appointments in 2012-13, plus 280,800 additional visits for diagnostic purposes (such as X-rays, blood work, etc.).

The second-most common way to enter St. Michael’s is through the Emergency Department. These patients may stay for just a short time, or may be admitted to the hospital for further treatment. The St. Michael’s Emergency Department had about 72,000 visits in 2012-13.

“Admitted” and day surgery patients come to St. Michael’s to have surgery, give birth or receive other medical treatment. Some patients are admitted through the Emergency Department, and others are referred directly to the hospital by family doctors or from other health care centres. In 2012-13 St. Michael’s performed more than 29,500 surgeries and delivered more than 3,000 babies. Among our 26,400 admitted patients, the average length of stay was about six days.

Continuing in St. Michael’s tradition of outreach and strong connection with the community, we are distributing this annual report throughout the entire St. Michael’s neighbourhood. Please let us know what you think! Email communications@smh.ca with your feedback about this report. A full list of the hospital’s contact information can be found on the inside back cover.
In 2012-13, St. Michael's began streamlining the way its clinics operate, with the goal of reducing wait times and keeping patients updated before, during and after clinic visits.

This was a big project: St. Michael's has more than 20 clinic areas operating in a variety of specialties. So why change?

Patients told the hospital that they were waiting too long for appointments and in the clinic waiting rooms. They also commented that communication is not always the best – patients don’t know why they are waiting or even if the clinic staff remember that they have arrived. These are important issues and the hospital wants to do better.

St. Michael's is working on improving every stage of an outpatient appointment:

- A more efficient referral process between doctors outside the hospital and those within
- Convenient appointments, scheduled at a time that works for the patient, with a reminder when an appointment is close
- Faster registration at the clinic, and frequent updates on how long patients can expect to wait
- Time well spent in the examination room with the clinic staff
- Follow up after a clinic visit is over

These improvements are well underway, and will continue into 2013-14. If you have feedback about your experience at one of our outpatient clinics or anywhere at St. Michael’s, please visit our Patient Relations office or contact us at 416-864-5215 or PatientAffairs@smh.ca.

Provinces call Academic Family Health Team a model for team-based care

In July 2012, a report to the premiers called St. Michael's Hospital Academic Family Health Team a model for primary care that could be used across the country. The report was authored by the Council of the Federation Working Group on Health Care Innovation.

Team-based care means that the clinics' patients have one-stop access to coordinated care from doctors, nurses, nurse practitioners, chiropractors, psychologists, social workers, dieticians, pharmacists, dentists, dental hygienists, residents and students.

To learn more about family medicine at St. Michael's, visit stmichaelshospital.com.
Reducing Wait Times in the Emergency Department

The worst happens, and you’re on your way to a hospital Emergency Department. Aside from worries about what’s happening with your or your loved one’s health, what’s the biggest concern on your mind? How long you will have to wait to get the care you need and move on to your next destination.

At the bedside and in the boardrooms, St. Michael’s management, doctors and staff are constantly working together to find new ways to deliver treatment faster and help patients return home sooner. As a result, St. Michael’s Emergency Department patients are waiting half the amount of time they were just a few years ago.

Getting you home

What’s the best way to get people into the hospital as quickly as possible? Help patients leave as quickly as possible, when they’re ready. “Discharge” (leaving the hospital) can be complicated. Some patients will need to set up special supports at home, others continue on to other health care facilities that need to prepare for their care. At St. Michael’s, discharge planning and communication with the patient’s next care provider often starts as soon as patients are admitted, so that they don’t need to wait when they’re ready to move on.

Freeing up beds across the hospital

Every time a patient is admitted to a hospital ward from the Emergency Department, that frees up an emergency bed for someone else. The General Internal Medicine team noticed that many of their patients were being admitted to temporary beds in other wards due to space issues, so they changed their process to get their patients to the right place at the right time. Now, when patients have recovered and are getting ready to go home, they are moved to an area for patients who aren’t as acutely ill, creating space on the ward for sicker patients. The result? St. Michael’s patients are spending almost two days less than expected in the hospital – an impressive outcome for our patients and the health care system.
Prevention is the best medicine

A St. Michael's program called “TIPSY” (The “ThinkFirst Injury Prevention Strategy for Youth”) is a half-day program to encourage Grade 11 and 12 students to drive safely and do their best to avoid the need for emergency care. Students are taken on tours of the Emergency Department trauma resuscitation room and the Trauma/Neurosurgical Intensive Care Unit, and hear from a trauma survivor who is living with a brain or spinal cord injury.

To bring TIPSY to your school, contact Anne Sorvari at sorvaria@smh.ca.

Shaving hours off of emergency surgery wait times

The longer an elderly person waits for emergency hip fracture surgery, the tougher it tends to be for them to recover. Staff and doctors from departments across the hospital decided that too many St. Michael’s hip fracture patients were waiting for too long to get surgery, and worked together to speed up every step in the process, from triage to recovery. Today, their “Code Hip” program is standard practice at St. Michael’s, and wait times for emergency hip surgery have improved dramatically.
For families as well as patients, an overnight or extended stay at a hospital can be confusing and lonely. At St. Michael’s we believe that it’s the hospital’s job to make sure that patients and their families have the best possible experience during their time here.

This starts with top-quality treatment and safety – St. Michael’s first priorities. But it also includes ensuring that patients and their families are comfortable, understand what’s happening and feel confident that the different parts of their health care team are communicating and working well together.

“I can give patients and their families all the time that they need – whether in finding resources, direction or just need to talk. At the end of the day, I can go home knowing that I’ve made someone’s day just a little less stressful.” – Liaison Volunteer

Visit stmichaelshospital.com to learn more about the St. Michael’s volunteer program.

Faster recovery, better outcomes

Among the handful of Canadian facilities that own a da Vinci System surgical robot, St. Michael’s Hospital is the only one that regularly uses it to treat non-malignant gynecological disease. The robot can treat fibroids that would otherwise be too big or too numerous to remove without major open surgery or a hysterectomy, and its tiny incisions mean a faster recovery. Women are often able to return home the next day, and many go on to have healthy pregnancies.
A brand-new approach to shift changes

In a major milestone for patient-centered care at St. Michael’s, nurses on all medical and surgical units are now exchanging information about a patient’s medication and care plan at the patient’s bedside, rather than through notes or conversations at the nurses’ station. This means that the patient and his or her family can stay up-to-date and ask questions, and incoming nurses can make sure no information is lost before the previous day’s nurse goes home.

Leading the country in gastrointestinal treatment

The Advanced Therapeutic Endoscopy Centre at St. Michael’s is one of the largest and most advanced in Canada. Endoscopy is the examination of the gastrointestinal tract with a flexible videoscope. It’s “therapeutic” because the procedure can provide treatment in addition to a diagnosis. Therapeutic endoscopy is the treatment of choice for a growing number of problems, such as removing early-stage cancers, stopping internal bleeding and removing blockages. It is a minimally invasive procedure, meaning no incision is required and therefore patients have shorter hospital stays and recovery times.

Space-age technology in the operating room

St. Michael’s made headlines this year when Dr. Michael Cusimano became the first surgeon in Canada to use a 3D camera to remove a brain tumour. He guided the tiny camera – about the size of a grain of sand – up the nose of a 75-year-old man, to help locate and remove a benign tumour at the base of his skull. The camera helps our neurosurgeons work even more precisely and quickly than before, thanks to a much better view.

A place to reflect

In October 2012, St. Michael’s celebrated the official opening of its new Multifaith Meditation Room, located beside the chapel on the third floor of the Bond Wing. The room is available 24 hours a day, seven days a week for personal prayer, reflection or meditation. The room is oriented toward the east, and has been fitted with hand and foot wash stations for personal ablations. Everyone – patients, families, visitors and hospital staff – is welcome.
Care

Where It’s Needed Most

From day one, the care of Toronto’s inner city has been St. Michael’s top priority. By supporting the health of all of our neighbours, we are building a better Toronto.

St. Michael’s works closely with partners in the community to ensure that the right care is provided to the right people, in the right place. Often, the right place is outside of the hospital walls – St. Michael’s outreach teams work with patients, often intensively, in their homes, shelters or elsewhere in the community to try to coordinate care and address health problems before they turn into Emergency Department visits and overnight stays in hospital.
Home visits to the elderly

The Academic Family Health Team provides primary care home visits to frail elderly who can no longer travel to their doctor’s office. A St. Michael’s geriatrician, pharmacist, nurse practitioner and team of family doctors work with Community Care Access Centres to make sure that the patient’s health needs are met and that he or she can stay safe in their home.

Clinics for street-involved youth

The Department of Pediatrics runs a weekly clinic for street or street-involved youth at the Yonge Street Mission. Youth who may be hesitant to enter the hospital’s institutional setting can get the care they need at this drop-in, including treatment for illness and injury, medical check ups and lab tests.

Helping people with serious mental illness get the right support

When patients visit the Emergency Department frequently, it’s often an indication that they are having trouble accessing the support they need outside of the hospital – in particular, support related to mental health. St. Michael’s Department of Psychiatry offers several emergency services designed to reach and better serve people with serious mental health and addiction problems, before problems turn into crises.

Creative Works Studio provides a safe and accepting oasis for people facing the challenges of severe and persistent mental illness. The program’s goal is to improve members’ quality of life through the power of artistic expression.

St. Michael’s provides mental health services and follow up in the community for older adults with complex behavioral problems who live in long-term care homes. The goal is to prevent visits to the hospital and help elderly patients – and the homes they live in – function as well as possible.

In partnership with Toronto Police Divisions 51 and 52, the St. Michael’s Mobile Crisis Intervention Team responds to 911 calls involving emotionally disturbed persons. A St. Michael’s mental health nurse and a police officer work as a team to help prevent crises from escalating and/or leading to injury.

A new project is helping six downtown Toronto hospitals, four community mental health agencies and four Community Health Centres work together to better serve people with mental health and addiction problems who are frequent users of the Emergency Department. The goal is to help clients connect with health and mental health care in the community, and reduce preventable Emergency Department visits.

In partnership with Inner City Health Associates and Toronto North Support Services, St. Michael’s coordinates care for homeless people in downtown Toronto, connecting patients to primary and psychiatric care, peer support and short-term case management.
Research that Matters

The best care is informed by the best research. St. Michael's conducts world-class research on inner city health, basic science related to organ dysfunction, global health and knowledge translation (the study and development of strategies for getting the best available evidence integrated into practice and policy). St. Michael's is particularly proud of the improvements to care and health policies that our research has contributed to over the years. Here are just a few of the hospital's research accomplishments from 2012-13.

For more information about how our research is impacting patient care and public policy, locally and around the world, visit stmichaelshospital.com/research to read the Knowledge Translation: From Evidence to Impact report.

Photo above: Inspired by the 2003 SARS outbreak, Dr. Kamran Khan developed BioDiaspora, a unique and powerful web technology that can rapidly predict how diseases are most likely to spread across the globe.
Better surgeons through better education
New research by Dr. Teodor Grantcharov illustrated that surgical residents who received structured training in a simulated environment (such as St. Michael’s high-tech Allan Waters Family Simulation Centre) do much better when they start operating on patients. The results of the study were so convincing that the University of Toronto implemented Dr. Grantcharov’s training program even before his research was published. In 2012, Dr. Grantcharov was awarded the George Armstrong-Peters Prize and the Queen Elizabeth II Diamond Jubilee Medal.

Yet another reason to quit smoking
A world leader in global health research, Dr. Prabhat Jha discovered that smokers who quit before age 40 have a lifespan almost as long as people who never smoked. However long-term smoking cuts at least 10 years off a person’s lifespan and former smokers still have a greater risk of dying sooner than people who never smoked. Dr. Jha was appointed an Officer of the Order of Canada in 2013 and awarded the 2012 Luther L. Terry Award from the American Cancer Society for his influential work on tobacco control.

“Hands free” doesn’t mean “brains free”
How safe is it to use a hands-free cell phone while driving? To find out, Dr. Tom Schweizer put a driving simulator – complete with pedals and a steering wheel – inside an MRI to watch how healthy drivers’ brains responded to talking while driving. The study found that when the drivers were also involved in a conversation, the part of the brain that pays attention to things such as oncoming traffic, pedestrians and lights, significantly reduced its activity. Most serious traffic accidents occur when drivers are making a left-hand turn at a busy intersection, so when those drivers are also talking on a hands-free cell phone, it could be the most dangerous thing they ever do on the road.
A PLACE TO LEARN ABOUT

health

St. Michael’s is committed to empowering our people to act on the best, most-trusted health knowledge available. This includes not only helping health care providers to keep up-to-date with the latest health information, but providing patients with easy access as well.

Research has shown that a person’s ability to understand health information and make decisions based on that information is vital to his or her health and well-being. St. Michael’s provides patients with user-friendly tools and resources to help them understand and take charge of their health.

Patient and Family Learning Centre

St. Michael’s Patient and Family Learning Centre is a “one-stop shop” for all of our patients’ health education needs. Anyone is free to drop by and browse the books and pamphlets, or be guided through the materials by a trained volunteer. Patients can also request a free, custom information package to take home or be emailed to them.

Location: In the main lobby of the Donnelly Wing (Queen Street entrance).

Trusted, online health information

The St. Michael’s Online Patient Education Library is always open to support patient and staff education. It’s a substantial collection of high-quality, evidence-based education materials that have been endorsed by Harvard Medical School, the American Heart Association and the American Lung Association. Visit the library at stmichaelshospital.kramesonline.com.

Bite-sized tips from St. Michael’s experts

What is the single-best thing you can do to help you quit smoking? What are the signs of alcohol addiction? How can we make healthier, fast-food choices? St. Michael’s experts point to timely health articles and news pieces that can help you and your family stay informed and healthy. Visit the blog at healthtips.stmichaelshospital.com, or get your tips on Twitter at @StMikesHospital.

All of St. Michael’s online learning resources are available at stmichaelshospital.com/learn.
“I have been searching for some of this information for months, and I finally found it all in the course of one visit. [The Patient and Family Learning Centre volunteer] really helped me understand a couple of things that I was having trouble with. He gave me more information in 20 minutes than I’ve found in the last six months. It’s fantastic that your services are there for people like me.”

- VISITOR TO THE PATIENT AND FAMILY LEARNING CENTRE

St. Michael’s is educating the next generation of health care professionals, placing over 3,000 students each year. For more information about St. Michael’s role as an academic teaching hospital, visit stmichaelshospital.com/education-report.
Designing the St. Michaels’ of the Future

St. Michael’s Hospital is starting a massive renewal project that includes a 17-storey patient care tower at the northeast corner of Queen and Victoria Streets, a major expansion of the Emergency Department, the creation of new outpatient clinics and a number of other renovations to repurpose the existing building.
The hospital’s ability to remain a health care leader is compromised by aging facilities. There are still patients in an 80-year-old wing. The Emergency Department is like something out of M.A.S.H. Our Medical-Surgical Intensive Care Unit has too little room for families, equipment or even the inter-professional teams. And most operating rooms are just too small for the technology required today.

Patient and Family Advisory Panel

Patient and family involvement is crucial to the development and construction of this project. To lend your voice to St. Michael’s 3.0, please call (416) 864-5034 or email communications@smh.ca to join our Patient and Family Advisory Panel. You can give as much or as little time as you like. Learn more at stmichaelshospital.com/stmichaels3.o.

• St. Michael’s knows that families assist with care when a patient is in hospital and take over when the patient leaves. New inpatient and intensive care rooms will have a family area built in that makes an overnight stay more comfortable and allows families to participate in care if they wish.

• Modern design also improves patient safety. In the new tower, all inpatient rooms will be private which helps prevent infections. Each room will have a railing that leads from bed to bathroom that patients can hold onto, to prevent falls.

• Technology enables a host of new possibilities – chips that will help locate equipment and staff, individual controls for light and heat within each room and improved wireless access.

• Five new operating rooms will be equipped with medical imaging equipment right in the room, and be large enough to accommodate tomorrow’s high-tech equipment.
Excellence in Quality

Every year, St. Michael’s sets new goals to further improve the quality and safety of our care. The hospital’s progress on many of these goals is tracked and reported at stmichaelshospital.com, under Excellence in Quality.

Like all hospitals, St. Michael’s submits our highest-priority goals in a Quality Improvement Plan to Health Quality Ontario every year, and then reports back on our progress.

These goals are challenging. We are committed to doing better.

ACCESS TO CARE

The 2012-13 Quality Improvement Plan focused on one goal related to Emergency Department wait times: 90th percentile length of stay for patients who go on to be admitted to the hospital. St. Michael’s continues to improve processes to bring us closer to this important target.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2011-12 performance</th>
<th>2012-13 target</th>
<th>2012-13 performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>ER wait times (in hours): 90th percentile length of stay for admitted patients</td>
<td>23.6</td>
<td>22</td>
<td>23.9</td>
</tr>
</tbody>
</table>

PATIENT-CENTRED CARE

The 2012-13 Quality Improvement Plan focused on one goal related to the patient experience: patient satisfaction. St. Michael’s undertakes ongoing surveys to determine patient satisfaction. For the plan, we tracked responses to the question, “Overall, how would you rate the care and services you received at the hospital?” St. Michael’s met this goal.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2011-12 performance</th>
<th>2012-13 target</th>
<th>2012-13 performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient satisfaction (response to the survey question, “Overall, how would you rate the care and services you received at the hospital?”)</td>
<td>95.8%</td>
<td>95%</td>
<td>95.5%</td>
</tr>
</tbody>
</table>

EFFICIENCY

The 2012-13 Quality Improvement Plan focused on one goal related to efficiency. Total margin is the difference, either positive or negative, between the hospital’s revenues and expenses, as a percentage of total revenues. The other indicator is the percentage of acute care beds that are occupied by patients who would be better served by an alternate level of care (home care, rehabilitation services, long term care or complex continuing care). St. Michael’s met and exceeded both of these goals.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>2011-12 performance</th>
<th>2012-13 target</th>
<th>2012-13 performance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total margin (difference between revenues and expenses, positive or negative, as a percentage of revenues) above 0 is better</td>
<td>2.26</td>
<td>0%</td>
<td>2.45%</td>
</tr>
<tr>
<td>Patients awaiting transfer to an alternate level of care (percentage of inpatients) lower is better</td>
<td>10.2%</td>
<td>10%</td>
<td>9.7%</td>
</tr>
</tbody>
</table>
SAFETY

The St. Michael’s 2012-13 Quality Improvement Plan focused on five goals related to patient safety: increasing medication reconciliation, maintaining or reducing our low rate of Clostridium difficile, increasing hand hygiene compliance before patient contact, maintaining or reducing our low rate of central line blood stream infections and increasing the use of electronic discharge forms. St. Michael’s met or came close to achieving all of these goals.

PATIENT OUTCOMES

The 2012-13 Quality Improvement Plan focused on two goals related to patient outcomes: hospital standardized mortality ratio and readmission within 30 days for congestive heart failure. St. Michael’s met and exceeded both of these goals.

National recognition for St. Michael’s outstanding commitment to quality and safety

In 2012, the Canadian Institute for Health Information announced that St. Michael’s hospital standardized mortality ratio was the lowest (i.e. best) in the Toronto Central Local Health Integration Network for the previous year. That means there were many fewer deaths at the hospital than expected (based on the national average).

St. Michael’s also received accreditation with exemplary status. It is the highest designation an organization can receive from Accreditation Canada, an independent, not-for-profit organization that sets standards for quality and safety in health care and accredits health organizations across Canada and around the world.

Finally, St. Michael’s was selected as a Registered Nurses’ Association of Ontario’s Best Practice Spotlight Organization, an accomplishment that reflects the hospital’s commitment to care that’s based on the best-available evidence.
Funding St. Michael’s

The hospital receives most of its $635 million budget from the Ministry of Health and Long-Term Care through the Toronto Central Local Health Integration Network (LHIN). Other sources of revenue include insurance coverage for private rooms, inpatient and outpatient costs paid directly by patients, sales from our pharmacy and paid parking under the Li Ka Shing Knowledge Institute. This year, the hospital ran a small surplus on the budget of $13 million.

The hospital also received one-time money from the Ministry and the Toronto Central LHIN.

One-time funds and savings from the operating budget are used to help buy items the hospital needs that are not covered by government: equipment, information technology and renovations.

St. Michael’s Hospital has a large research program. Research studies are funded by granting organizations and companies, such as pharmaceutical firms doing clinical trials.

Some granting agencies allow a small portion of a grant to be used for overhead expenses such as the scientists’ salaries, electricity for the Li Ka Shing Knowledge Institute and the like. Companies are also charged an overhead fee. But, as with most research organizations in Canada, these fees do not cover the research organization’s expenses.

In 2012-13, the research shortfall was covered by the hospital, salary recovery and awards from the University of Toronto and other agencies, and by the St. Michael’s Foundation.

The hospital’s major renewal project, outlined on pages 13 and 14, is funded by the provincial government with the hospital’s local contribution raised by the St. Michael’s Foundation through its Inspire 2018 campaign.

### Foundation

This year, St. Michael’s Foundation raised $29.2 million. Almost 48,000 gifts were received during the year from 19,000 donors. During the year, grants of $9.7 million were made to support equipment, research, education and clinical priorities.
Number of births

2011-12: 3,199
2012-13: 3,079

Number of physicians

2011-12: 690
2012-13: 713

Number of employees

2011-12: 5,392
2012-13: 5,368

Number of volunteers

2011-12: 574
2012-13: 537

Number of students trained

2011-12: 3,280
2012-13: 3,357

Diagnostic, therapeutic and other visits (e.g. visits for x-rays, blood work)

2011-12: 285,137
2012-13: 280,756

Ambulatory (i.e. outpatient) visits

2011-12: 456,071
2012-13: 466,631

Inpatients

2011-12: 26,725
2012-13: 26,406

Surgeries (inpatient and surgical day/night care)

2011-12: 30,879
2012-13: 29,549

Emergency visits

2011-12: 70,508
2012-13: 71,951

Principal investigators (scientists and associate scientists)

2011-12: 181
2012-13: 185

Average length of stay (days)

2011-12: 6.1
2012-13: 6.2

Statistics as of March 31, 2012 or from April 1, 2012 to March 31, 2013
Creating a healthier world, through our culture of caring and discovery

At St. Michael’s, we recognize the value of every person and are guided by our commitment to excellence and leadership.

We demonstrate this by:

• Providing exemplary physical, emotional and spiritual care for each of our patients and their families
• Balancing the continued commitment to the care of the poor and those most in need with the provision of highly specialized services to a broader community
• Building a work environment where each person is valued, respected and has an opportunity for personal and professional growth
• Advancing excellence in health services education
• Fostering a culture of discovery in all of our activities and supporting exemplary health sciences research
• Strengthening our relationships with universities, colleges, other hospitals, agencies and our community
• Demonstrating social responsibility through the just use of our resources

Our values in action

The hospital’s values represent the philosophy and beliefs of our organization, guiding all of our decisions and actions.

Every year, St. Michael’s recognizes and honours individuals and teams across the hospital for their outstanding contributions to the organization and commitment to our core values.
Human Dignity
We value each person as a unique individual with a right to be respected and accepted.
2012 HUMAN DIGNITY AWARD WINNER
Pearl Edwards-Vialva
Admin/clerical coordinator,
Specialized Complex Care
“If you ever are in a room with Pearl and talking to her, it’s so evident that she cares about you and about your situation. It’s genuine... it’s just who she is.”
- Jonathan Fetros, clinical leader/manager,
Diabetes and Renal Transplant Clinics

Excellence
We value quality in care, work life, education and research.
2012 EXCELLENCE AWARD WINNER
Pharmacy Department
“We really, really work hard in the background to make sure that everything runs smoothly from a medication, safety and patient care perspective. Each person that comes to our hospital is unique. In working with the staff, we all keep that in mind, and ensure that everything we do will help to meet our patients’ special needs.”
- Jenny Lieu, pharmacy informatics specialist, Pharmacy

Compassion
We value a quality of presence and caring that accepts people as they are and fosters healing and wholeness.
2012 COMPASSION AWARD WINNER
Judy Martinez
Senior procurement specialist,
Procurement Services
“Whenever I feel stressed out or overwhelmed with the amount of work I have to do, I just pass by one of the Intensive Care Units or nursing units. It reminds me what my job is all about and that if I work harder to get a needed product or a service to the hospital sooner, the patients will benefit.”
- Judy Martinez

Social Responsibility
We value integrity and the promotion of the just use of resources entrusted to us for the enhancement of human life.
2012 SOCIAL RESPONSIBILITY AWARD WINNER
Critical Care Response Team
“We do our best to never consider where the patient is from, but more so the respect that every human being deserves, regardless of their social or economic background. That’s our social responsibility – looking after everyone with care and respect.”
- Eliane Stockler-Leite, registered nurse,
Critical Care Response Team

Community of Service
We value a work climate of mutual trust and harmony to enable healing, collaboration and the fulfillment of human potential.
2012 COMMUNITY OF SERVICE AWARD WINNER
Dr. Tony Barozzino
Staff physician, Department of Pediatrics
“One of the reasons I got into pediatrics was because it’s a part of medicine where I felt like I could do a huge amount of good. I love St. Mike’s – I knew right from square one that this was the place for me to be.”
- Dr. Barozzino

Pride of Achievement
We value our colleagues, our work and our accomplishments and take pride in bringing our rich tradition of hope and healing to every person in our care.
2012 PRIDE OF ACHIEVEMENT AWARD WINNER
David Bennett
Audio visual technician, Information Technology
“David goes above and beyond all the time. If he doesn’t know the answer to something, he’ll go home and research overnight, and come back the next day with the answer. It’s amazing what he does every day.”
- Bruce Bowman, team leader, end-user computing,
Information and Communications Technology
Message from the President and Chairman

This annual report is our first that is being broadly distributed within St. Michael's neighbourhood. About half of our patients come from that area; the rest arrive from all over Ontario. For us, the word community covers a lot of territory – those who live close to us and those who live farther afield but still depend upon us.

St. Michael’s is a leader in three broad areas of patient care: inner city health offering respectful care to the most vulnerable populations in downtown Toronto; critical care, including after trauma and acute cardiovascular and neurosurgical emergencies; and a variety of specialized services such as therapeutic endoscopy, adult cystic fibrosis, multiple sclerosis, complex cardiac and cardiovascular care and many, many others.

Where our patients come from

The map below shows the geographic distribution for the most complex patients who come to St. Michael’s: the 10 per cent who use the hospital most each year. No one wants to come to hospital but all too often, hospitals become the provider of last resort.

With our partners in health care, St. Michael’s is helping patients with complex problems to find better ways to receive health care. Throughout this report, you will have seen examples of what we did this past year to ensure patients are receiving the right care in the right place at the right time. And that does not always mean in-hospital.
A grateful thank you

We would like to express thanks to retiring board members who have given countless hours to guide St. Michael's: Dr. Guylaine LeFebvre, Dr. Rajiv Shah, Kristine Thompson, Dale Ponder, Rick Waugh and Bill Morneau. We would also like to thank our partners on the foundation board for their fundraising efforts on behalf of the hospital.

And finally, our particular gratitude to everyone who lives our values every day: our staff, physicians, volunteers and students. They make St. Michael's Hospital the very special place that it is.

Bill Morneau
Chair, Board of Directors,
St. Michael's Hospital

Robert Howard, MD
President and CEO,
St. Michael's Hospital

Visit us

St. Michael's Hospital
30 Bond St., Toronto, Ont., M5B 1W8, Canada

St. Michael's Hospital has four wings, 17 floors, four entrances and two information desks. To find your destination, you will need to know its wing, floor and room number. Some locations are available on our clinic and department locator on our website at stmichaelshospital.com.

Call us

Main line: 416-360-4000
Admissions: 416-864-5072
Patient Relations: 416-864-5215
Patient inquiry line: 416-864-5454
Pharmacy and prescriptions: 416-864-5110

Help us

If you would like to help us to continue to provide inspired care and generate inspiring science, please contact our foundation at 416-864-5000.

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Conceptual rendering courtesy Diamond Schmitt Architects. Final subject to change.