Implementing all that we set out to do in Year One of our ambitious three-year Strategic Plan is now complete.

It hasn’t been without its hurdles, but then again, nothing worth doing is, which is why we are incredibly proud of how much St. Michael’s has achieved this past year. Inside, we’ve highlighted a story in each of our patient-focused priority areas – we hope you find them as forward-looking as we do.

One major challenge we faced was a reminder of our aging infrastructure. A burst pipe forced us to close our Emergency Department and many labs due to flooding. The event had a major impact on patients, families and staff, but the extraordinary efforts of St. Michael’s staff in prioritizing patient safety were heartening to witness. It was a chaotic few days that we overcame with the tireless support of our staff as well as Toronto Paramedic Services and neighbouring health-care partners.

On a more positive note, we’ve made great strides in engaging with patients and our community. We established a residents’ health services panel comprised of local residents within our local geography who provide input on how to improve health services in our area.

We also began recruiting for the St. Michael’s Patient and Family Advisory Council, the goal of which is to get feedback on how to improve the patient experience.

The events of the past year have strengthened our organization and crystallized our commitment to working with our patients to serve them better. We look forward to continuing on our growth trajectory during Year Two of the Strategic Plan as well as the physical growth of our hospital – continuing the St. Michael’s 3.0 redevelopment project.

No matter how difficult a day or situation may seem, there is always something to be thankful for. We are particularly grateful to our St. Michael’s family of staff, physicians and volunteers, and community of donors and partners for your steadfast support. Just as we rose above the challenges of the past year with you in our corner, celebrating the successes was much more enjoyable and growth possible because of your involvement. Thank you.
We set out this year to find new ways to engage our local community to help us identify gaps in health services and recommend ways we can address them. Twenty-eight resident advisers, representative of our community, were selected to make up St. Michael’s Residents’ Health Services Panel. On behalf of the residents of mid-east Toronto, they have created a set of guiding values and key local health-care issues, and will be working with us throughout the year to inform specific projects. We hope this process will inform future engagement initiatives and possibly serve as a model across the LHIN.
Acute respiratory distress syndrome (ARDS) usually happens in people who are already critically ill. Patients with ARDS need mechanical ventilators to help them breathe because they suffer severe shortness of breath. In most critical care centres, the ventilator is set up the exact same way for every patient with ARDS.

As a centre of excellence in mechanical ventilation, St. Michael’s intensive care units have...

Dr. Nav Persaud, a physician in our Department of Family and Community Medicine, launched a research project to see how better access to life-saving medications for people with low incomes might improve health and control disease. Patients who can’t afford medication can suffer serious problems that could have been avoided with relatively inexpensive medication. This project will look at the effect of providing primary care patients with free and convenient access to a set of essential medicines.

Watch a video by Dr. Persaud and Dr. Mike Evans about medication access.

Advance systems of care for disadvantaged patients
Carefully selected and easily accessible at No charge Medications
CLEAN Meds project

Excel in the care of critically ill patients
Personalizing mechanical ventilation

As a centre of excellence in mechanical ventilation, St. Michael’s intensive care units have...
In April 2015, the hospital broke ground on our new patient care tower, celebrating the beginning of a redevelopment project that includes a new patient care tower to care for critically ill patients and renovations that will double the size of the Emergency Department.

By March 2016, construction of the Peter Gilgan Patient Care Tower reached a third of its 17 storeys. Columns to support the bright and spacious new lobby were poured. 

The project also includes renovations to existing parts of the hospital, including the upper floors of the Donnelly Wing. In March 2016, the staff in the hospital’s Pre-Admission Facility prepared to welcome patients to their new, renovated space on the 10th floor.

---

### FALLS PREVENTION

Falls rate per 1,000 patient days

<table>
<thead>
<tr>
<th></th>
<th>Current: 4.66</th>
<th>2015-16 target: 4.09</th>
</tr>
</thead>
</table>

We did not achieve our target, but there was an improvement in the corporate rate. In addition, the work on our General Internal Medicine unit has resulted in a significant 17 per cent reduction in its falls rate.

We are continuing to work to reduce our falls rate by focusing on new interventions for two units that have higher than expected falls rates.

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### HAND HYGIENE

Number of times that hand hygiene was performed before initial patient contact during the reporting period

<table>
<thead>
<tr>
<th>Hand Hygiene</th>
<th>Current: 63.6 per cent</th>
<th>2015-16 target: 65 per cent</th>
</tr>
</thead>
</table>

Hand hygiene continues to be a priority. Although we did not meet our target, we achieved an improvement of six per cent in our Moment 1 compliance rate. We are proud of this improvement and will continue to build on lessons learned as we continue our work on hand hygiene.

---

### MEDICATION RECONCILIATION

Total number of patients with medications reconciled in the Mental Health Program as a proportion of the total number of patients admitted to the Mental Health Program (inpatient only)

<table>
<thead>
<tr>
<th>Med Reconciliation</th>
<th>Current: 84.1 per cent</th>
<th>2015-16 target: 80 per cent</th>
</tr>
</thead>
</table>

The key success factors in surpassing our target were defining the roles and responsibilities of the medication reconciliation process for each clinician, education on how to do a quality Best Possible Medication History and improving accessibility of the patient’s BPMH information. We will continue to monitor the progress we have made and look for other opportunities to improve current workflows.

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### SMOOTHER TRANSITIONS

90th percentile Emergency Department length of stay for admitted patients

<table>
<thead>
<tr>
<th>Smooth Transitions</th>
<th>Current: 23.1 hours</th>
<th>2015-16 target: 21 hours</th>
</tr>
</thead>
</table>

We believe that in order to have a positive patient experience, our patients should be able to get the care they need with as short a wait as possible. Transitioning a patient from the ED to an inpatient bed in 21 hours is an ambitious goal, but we are striving to achieve our target by improving flow and throughput across the hospital. For example, improving the discharge process means shorter waits in the ED and better support when patients are discharged home.
VISION
World leadership in urban health

VALUES
Our values represent the philosophy and beliefs of our organization, guiding all of our decisions and actions.

Human Dignity
We value each person as a unique individual with a right to be respected and accepted.

Excellence
We value quality in care, work life, education and research.

Compassion
We value a quality of presence and caring that accepts people as they are and fosters healing and wholeness.

Social Responsibility
We value integrity and the promotion of the just use of resources entrusted to us for the enhancement of human life.

Community of Service
We value a work climate of mutual trust and harmony to enable healing, collaboration and the fulfilment of human potential.

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.

OUR VALUES IN ACTION
Every year, we recognize individuals and teams across the hospital for their exemplary demonstration of our core values. This past year we celebrated the following award winners.

Click the images to view each story.
Financial Statement

### Revenues

<table>
<thead>
<tr>
<th>Description</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ontario Ministry of Health and Long-Term Care/Toronto Central Local Health Integration Network/Cancer Care Ontario</td>
<td>$483,142</td>
<td>$486,905</td>
</tr>
<tr>
<td>Other funded programs</td>
<td>$20,130</td>
<td>$19,474</td>
</tr>
<tr>
<td>Preferred accommodation</td>
<td>$3,018</td>
<td>$3,508</td>
</tr>
<tr>
<td>In-patient</td>
<td>$6,083</td>
<td>$6,241</td>
</tr>
<tr>
<td>Out-patient</td>
<td>$17,854</td>
<td>$17,194</td>
</tr>
<tr>
<td>Sales and other revenue</td>
<td>$49,714</td>
<td>$47,777</td>
</tr>
<tr>
<td>Interest</td>
<td>$5,053</td>
<td>$2,355</td>
</tr>
<tr>
<td>Amortization of deferred contributions</td>
<td>$13,035</td>
<td>$10,693</td>
</tr>
<tr>
<td>Grants and donations for research and other purposes</td>
<td>$67,189</td>
<td>$68,083</td>
</tr>
<tr>
<td>Toronto Central Local Health Integration Network - Casey House</td>
<td>$6,930</td>
<td>$5,024</td>
</tr>
<tr>
<td><strong>Total Revenues</strong></td>
<td><strong>$672,148</strong></td>
<td><strong>$667,254</strong></td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and employee benefits</td>
<td>$430,488</td>
<td>$424,392</td>
</tr>
<tr>
<td>Medical and surgical supplies</td>
<td>$51,285</td>
<td>$54,558</td>
</tr>
<tr>
<td>Drugs</td>
<td>$41,679</td>
<td>$41,207</td>
</tr>
<tr>
<td>Other supplies</td>
<td>$94,750</td>
<td>$88,960</td>
</tr>
<tr>
<td>Bad debts</td>
<td>$1,068</td>
<td>$1,103</td>
</tr>
<tr>
<td>Interest accretion</td>
<td>$204</td>
<td>$238</td>
</tr>
<tr>
<td>Amortization of property, plant and equipment</td>
<td>$66,676</td>
<td>$25,052</td>
</tr>
<tr>
<td>Other funded programs</td>
<td>$22,312</td>
<td>$21,786</td>
</tr>
<tr>
<td>Toronto Central Local Health Integration Network - Casey House</td>
<td>$6,930</td>
<td>$5,024</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>$675,192</strong></td>
<td><strong>$662,320</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Description</th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net assets - Beginning of year</td>
<td>$233,819</td>
<td>$228,885</td>
</tr>
<tr>
<td>Net assets - End of year</td>
<td>$230,775</td>
<td>$233,819</td>
</tr>
</tbody>
</table>

Financial fluency benefits not only our hospital but the whole health care system. Watch how St. Michael’s is improving cost awareness and efficiency while still delivering high quality care.
Medical Advisory Committee
As at March 31, 2016

Voting members
Chair
Dr. Thomas Parker
Vice-chair
Dr. Glen Bandiera
President, Medical Staff Association
Dr. Aaron Hong
Vice-president, Medical Staff Association
Dr. Ralph George

Department chiefs:
Anesthesia
Dr. John Laffey
Critical Care
Dr. Andrew Baker
Emergency Medicine
Dr. Karen Lee
Family and Community Medicine
Dr. Glen Bandiera
Laboratory Medicine
Dr. Karen Wymian
Medical Imaging
Dr. Victor Tron
Medicine
Dr. Thomas Parker
Obstetrics and Gynecology
Dr. Michael Geary
Occupational Health
Dr. Linn Holness
Ophthalmology
Dr. David Wong
Otolaryngology
Dr. Michael Sigro
Pediatrics
Dr. Vicky Stergiopoulos
Psychiatry
Dr. Ori Rotstein
Surgery

Other appointments:
Executive vice-president and chief medical officer
Dr. Douglas Sinclair

Program medical directors:
Diabetes Comprehensive Care Program
Dr. Jeffrey Zaltzman
Heart and Vascular Program
Dr. Michael R. Freeman
Inner City Health, Core Services
Dr. Philip Berger
Specialised Complex Care Program
Dr. Jerry Teitel
Mobility Program
Dr. Earl Bogoch
Trauma and Neurosurgery Program
Dr. Andrew Baker
Perioperative Services
Dr. James Mahoney

Non-voting members
Other appointments:
President and chief executive officer
Dr. Robert Howard
Executive vice-president and chief nursing executive
Ella Ferris
Vice-president, Research
Dr. Arthur Slutsky
Vice-president, Education
Dr. Patricia Houston

Medical directors:
Quality and Patient Safety
Dr. Chris Hayes
Clinical Informatics
Dr. Michael R. Freeman

Board of Directors
July 1, 2015 to June 30, 2016

Dr. Richard Alway
Ella Ferris
Dr. Glen Bandiera
Dr. Aaron Hong
Wayne Barbise
Hazel Claxton
John Cruickshank
Ruth daCosta
William A. Etherington, vice-chair, St. Michael’s Hospital Board
Ella Ferris
Ralph George
Dr. Vivek Goel
Peter Gordon
Anthony R. Graham
Doug Guzman
Dr. Aaron Hong
Dr. Robert Howard, president and CEO, St. Michael’s Hospital
Colleen Johnston
Claude Lamoureux
Mary McConville
Noella Milne
Tom O’Neill, chair, St. Michael’s Hospital Board
Dr. Trevor Young

Executive Committee
As at March 31, 2016

Ella Ferris,
Executive vice-president, Programs, chief nursing executive and chief health disciplines executive

Dr. Patricia Houston
President, Education

Dr. Robert Howard
President and chief executive officer

Alayne Metrick
President, St. Michael’s Foundation

Dr. Thomas Parker
Chair, Medical Advisory Committee

Dr. Douglas Sinclair
Executive vice-president and chief medical officer

Dr. Arthur Slutsky
Vice-president, Research

Anne Trafford,
Vice-president, Quality, Performance, Information Management, and chief information officer