University Health Network’s (UHN’s) strategic planning process began with a fundamental assumption that our future would be based on the aspirations of the people who work at UHN. We estimate that more than 1000 people have contributed to the creation of UHN Strategic Directions 2016: Global Impact – Local Accountability.

Our staff and stakeholders told us that our vision, mission and purpose are appropriate and should continue to guide us over the next five years. Our vision – “Achieving Global Impact” – defines UHN’s brand as a research hospital and is recognized by staff, government, and the Ontario hospital industry. Our staff also respond to our purpose statement – “We are a caring, creative, and accountable academic hospital transforming healthcare for our patients, community, and the world.” The five underlined words of our purpose statement define the five domains of our Balanced Scorecard (BSC) and reflect UHN’s five-part commitment to our staff, our patients, research discovery, financial responsibility, and education.

With our vision, mission and purpose set, UHN’s new corporate strategic plan is informed by the strategic directions of our programs – the common themes from these plans are the basis for our organizational goals, objectives, and milestones. As such, UHN’s new strategic plan is designed to enable the innovative ambitions of our clinical programs. Greater detail on our program strategic plans may be found within an associated document – UHN Strategic Directions 2016: Clinical Program Strategy.

UHN’s five-year plan is also grounded in an external, third-party assessment of the demographic changes that we expect will modify our community’s healthcare needs. We have asked for the advice of healthcare, political, government, university, and business leaders about UHN’s role in our provincial health system. We have listened to our patients and families about the services we currently provide, how we provide those services, and what they expect from us in the future. We have analyzed international trends in healthcare delivery and we expect that changes in technology will alter the way we provide care. Finally, we employed a philosophy of participatory strategic planning so our staff could participate in shaping and owning UHN’s future.

We know that our managers and leaders think strategically on a daily basis – it is simply part of their job. However it is important to occasionally pause and collectively think about where we have been and where we are going. Over the past 10 years UHN has made tremendous progress in achieving our vision of global impact. In the five years ahead UHN will continue to pursue this vision, grounded in our local accountability, with a focus on becoming one of the world’s premier research hospitals.
Summary of Strategic Themes and Goals in UHN’s 2016 Strategic Plan

The following is a summary of UHN Strategic Directions 2016: Global Impact – Local Accountability, organized according to our purpose statement and five Balanced Scorecard domains.

**WE**

**STRATEGIC THEME – DEVELOP THE BEST PEOPLE WHO WILL ENABLE SYSTEM LEADERSHIP**
- Promote UHN’s brand and value proposition
- Continue to build organizational capability and capacity
- Exemplify local and global leadership

**CARING**

**STRATEGIC THEME – ACHIEVE AND DOCUMENT EXCEPTIONAL OUTCOMES FOR OUR PATIENTS**
- Become a world leader in documenting and improving patient outcomes
- Transform “patient-centred care” to “patients as partners in care”
- Measure and improve the value of care
- Lead health system integration

**CREATIVE**

**STRATEGIC THEME – BECOME THE RESEARCH HOSPITAL OF THE FUTURE**
- Further our understanding of the basis of health and disease through biology and technology platforms
- Leverage experimental therapeutics and health services to impact the lives of patients
- Enable the collection, analysis, and application of health information

**ACCOUNTABLE**

**STRATEGIC THEME – EXPAND OUR SPACE, DEVELOP NEW SOURCES OF REVENUE, AND BECOME A LEADER IN CLINICAL, ADMINISTRATIVE, AND RESEARCH INFORMATION INTEGRATION**
- Create new physical space for our clinical programs, operations, research, and education areas
- Develop new sources of revenue
- Optimize productivity and integration of care through next-generation information management and technology

**ACADEMIC**

**STRATEGIC THEME – DELIVER EXCEPTIONAL EDUCATION AT ALL LEVELS TO ENABLE THE SUCCESS OF TOMORROW’S HEALTHCARE LEADERS**
- Position UHN as the institution of choice for trainees
- Continue to pioneer new models of teaching and learning
- Enhance UHN’s commitment to promoting research in education
WHO WE ARE

Vision
Achieving Global Impact

Mission
Exemplary patient care, research and education

UHN’s Purpose Statement
We are a caring, creative, and accountable academic hospital transforming healthcare for our patients, community, and the world

Values
Caring
Excellence
Teamwork
Innovation
Integrity
Leadership
Respect
REFLECTING ON STRATEGIC DIRECTIONS 2011

UHN launched its first strategic plan *Strategic Directions 2011*, nearly 10 years ago. This plan was built upon the collective strengths of our three hospitals and charted a course for “Achieving Global Impact.” *Strategic Directions 2011* introduced seven program groupings and 10 future strategies to respond to major trends in our environment. Within the plan, 10-year milestones were formulated to measure our progress.

*Strategic Directions 2011* has provided an important roadmap for UHN and most of the objectives have been achieved. The one missed accomplishment – intellectual property (IP) revenues – was related to inadequate rigor and analysis with respect to target selection. We have made considerable progress over the past 10 years in commercializing our IP and we will continue to do so over the next five years. We now build on the successes of *Strategic Directions 2011* with *Strategic Directions 2016: Global Impact – Local Accountability.*

What have we accomplished in the *Strategic Directions 2011* plan?

<table>
<thead>
<tr>
<th>2001 – Where we were</th>
<th>2011 – Where we said we’d be</th>
<th>2010 – Where we are</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient satisfaction below average</td>
<td>Patient satisfaction above average</td>
<td>Patient satisfaction is a core strength of UHN</td>
</tr>
<tr>
<td>Staff satisfaction below average</td>
<td>Staff satisfaction above average</td>
<td>Exceptional staff satisfaction scores</td>
</tr>
<tr>
<td>UHN spends approximately $100 million annually on research</td>
<td>UHN spends $240 million annually on research</td>
<td>UHN invested $265 million on research in 2009/10</td>
</tr>
<tr>
<td>There are 34 endowed research chairs</td>
<td>There is committed funding for 150 endowed research chairs</td>
<td>UHN has 83 endowed research chairs</td>
</tr>
<tr>
<td>UHN has 400,000 square feet of research space</td>
<td>UHN research space reaches 800,000 square feet</td>
<td>UHN has exceed 800,000 square feet of research space</td>
</tr>
<tr>
<td>There are 135 full-time national and international clinical fellows per year</td>
<td>There are 350 full-time national and international clinical fellows per year</td>
<td>UHN has 442 full-time clinical fellows</td>
</tr>
<tr>
<td>Many buildings are old and poorly designed</td>
<td>All UHN buildings are replaced or renovated</td>
<td>Most UHN buildings have been renovated or replaced</td>
</tr>
<tr>
<td>Foundation fundraising almost $57 million per year</td>
<td>Foundation fundraising reaches $100 million per year</td>
<td>UHN’s Foundations raised $130 million in 2009/10</td>
</tr>
<tr>
<td>Intellectual property revenues approximately $200,000 per year and valuation of approximately $1.5 million</td>
<td>Intellectual property achieves cumulative revenues and valuation of $40 million</td>
<td>UHN is working to increase its intellectual property revenues</td>
</tr>
<tr>
<td>UHN total revenues are $766 million per year</td>
<td>UHN total revenues reach $1.4 billion per year</td>
<td>UHN’s total revenue was $1.4 billion in 2009/10</td>
</tr>
</tbody>
</table>

| | We’ve met or exceeded our target | We haven’t met our target but we are close | We have not made significant progress |

2001 – Where we were
- Patient satisfaction below average
- Staff satisfaction below average
- UHN spends approximately $100 million annually on research
- There are 34 endowed research chairs
- UHN has 400,000 square feet of research space
- There are 135 full-time national and international clinical fellows per year
- Many buildings are old and poorly designed
- Foundation fundraising almost $57 million per year
- Intellectual property revenues approximately $200,000 per year and valuation of approximately $1.5 million
- UHN total revenues are $766 million per year

2011 – Where we said we’d be
- Patient satisfaction above average
- Staff satisfaction above average
- UHN spends $240 million annually on research
- There is committed funding for 150 endowed research chairs
- UHN research space reaches 800,000 square feet
- There are 350 full-time national and international clinical fellows per year
- All UHN buildings are replaced or renovated
- Foundation fundraising reaches $100 million per year
- Intellectual property achieves cumulative revenues and valuation of $40 million
- UHN total revenues reach $1.4 billion per year

2010 – Where we are
- Patient satisfaction is a core strength of UHN
- Exceptional staff satisfaction scores
- UHN invested $265 million on research in 2009/10
- UHN has 83 endowed research chairs
- UHN has exceed 800,000 square feet of research space
- UHN has 442 full-time clinical fellows
- Most UHN buildings have been renovated or replaced
- UHN’s Foundations raised $130 million in 2009/10
- UHN is working to increase its intellectual property revenues
- UHN’s total revenue was $1.4 billion in 2009/10
UHN is Canada’s leading research academic hospital. Building on the strengths and reputation of each of its programs, UHN brings together the talent and resources needed to achieve global impact and provide exemplary patient care, research, and education.

Beginning with seven programs ten years ago, services at UHN today are organized within nine programs: Medical and Community Care; Surgical Programs and Critical Care; Multi-Organ Transplant Program; Peter Munk Cardiac Centre; Princess Margaret Cancer Program; Krembil Neuroscience Centre; Arthritis Program; Laboratory Medicine Program; and Joint Department of Medical Imaging. UHN has a dual accountability, being responsible both for acute care services to its local community as well as being a provincial and national resource for tertiary and quaternary specialty services.

The following is a brief description of UHN’s nine programs:

**Medical and Community Care (MCC)** – UHN focuses on the needs of complex medical patients in MCC. MCC is supported by 13 clinical elements, each contributing to UHN’s vision through innovative patient care, education, and research.

**Surgical Programs and Critical Care (SPCC)** – SPCC provides safe and effective peri-operative care, in addition to looking after the sickest patients who require critical care support.

**The Multi-Organ Transplant (MOT)** – The MOT program is the largest transplant program in Canada and is internationally recognized for its excellence in clinical care, research, and education.

**The Peter Munk Cardiac Centre (PMCC)** – The PMCC is a highly integrated and collaborative program, organized around six elements of care: congenital heart disease; ischemic heart disease; valve diseases; heart rhythm disorder; heart failure; and vascular disease. All of these elements are supported by advanced cardiac diagnostics.

**The Princess Margaret Cancer Program (PMCP)** – The PMCP has an overarching vision to achieve global impact as one of the top five comprehensive cancer programs in the world. The PMCP’s primary goal is to translate the science of cancer into practice.

**The Krembil Neuroscience Centre (KNC)** – The KNC offers outstanding care in all neuroscience elements (including neurology, neurosurgery, neuropathology, neuroradiology, neuropsychiatry, and Ophthalmology).
The Laboratory Medicine Program (LMP) – The LMP provides academic, clinical service, and reference testing leadership across multiple laboratory divisions: clinical biochemistry; hematology; clinical microbiology; and pathology.

The Arthritis Program (AP) – The AP program is dedicated to enhancing the quality of life for individuals with bone, joint, and connective tissue disease.

The Joint Department of Medical Imaging (JDMI) – The JDMI is an integrated program offering a full spectrum of advanced diagnostic and image-guided therapeutic services.

The development of UHN’s nine clinical programs have made UHN what it is today. We are a thriving, entrepreneurial, and accountable system leader focused on the future. We have committed and engaged interdisciplinary teams providing exemplary patient-centred care, dedicated teachers developing new methods to educate the healthcare professionals of tomorrow, and researchers eager to change the face of healthcare in this country with better outcomes for our patients.
We've known for some time that Toronto's Emergency Departments (ED) are overcrowded, and that often the care the elderly receive in an overcrowded ED is not ideal. As system leaders, nurses at UHN are constantly exploring ways to provide solutions to this problem. When long-term care home residents in west Toronto have health complications, it would normally mean a trip to the ED. However, rather than dialing 911, nurses providing care can now contact the Emergency Mobile Nursing Service from UHN for peer to peer consultation. As Mobile Nurses, we provide assessments and guidance over the phone and in person at the homes. We also visit homes regularly to catch issues before they build up. When we go to homes, we work together with everyone – the physician, the nurse supervisor and the staff nurses – to learn about the resident and the concern. Our main goal is to help keep residents at home, and as comfortable as possible, preventing a stressful trip to the ED. Creating this program has been incredible. We’re trailblazers, advocates not only for the elderly, but for all of long-term healthcare.

Alison Graham, RN., Jeannine McDonald RN., Gladys Mokaya RN., and Vinia Verdida, RN.
As we look forward to 2016, we have asked our staff, as well as stakeholders and experts outside UHN, how the healthcare environment will change in the next five years and how this may affect UHN’s strategy.

**MAJOR TRENDS IN THE HEALTHCARE ENVIRONMENT**
- Concern about healthcare costs and the need for innovative care models to contain costs
- Recognition that healthcare is increasingly important in developing economies
- Rising expectations around patient-provider communication and patient empowerment
- Aging population and workforce in the developed world
- The effects of urbanization, globalization, and multiculturalism
- The dual impact of technology: as a cost-driver and a cost-saver
- The need for cost-effective technology that works in all healthcare systems
- Changing consumer values and insistence of payers for enhanced value of care
- A strong focus on outcomes

**FEDERAL, PROVINCIAL, AND LOCAL HEALTHCARE PRIORITIES**
- Strong focus on fiscal sustainability for publicly funded healthcare
- Addressing diversity in our local environment
- Emergency Department services
- The importance of new models for primary care
- The “Excellent Care for All” legislation – linking healthcare funding to improved outcomes
- Alternate level of care impacts on acute care hospitals
- Chronic diseases
- Mental health and addictions
- Value and affordability
- Community engagement

**DEMOGRAPHIC AND MARKET SHARE TRENDS**
As interpreted by external consultants and health system experts
- UHN should strengthen its offerings of services that are not performed elsewhere
- UHN’s concentration on high acuity services is appropriate
- There will be growing demand for UHN services, despite growth in the 905 regional hospitals
- Projected growth in programmatic activity will vary, but the expected weighted average for UHN is approximately 15% expansion over the next five years
WHAT YOU TOLD US

VIEWS FROM PATIENTS AND FAMILIES

In order to continually improve the care experience for our patients and their families, UHN has invested in a variety of means to capture feedback on the care provided at our hospitals.¹

Overall, patients and their families are very pleased with their care experience. Through analysis of UHN’s Virtual Patient Focus Group ² and inpatient satisfaction survey results, ³ we know that:

- 91% of patients indicated that they were treated with respect and dignity while they were within our hospitals
- 86% of patients felt they received all the services they needed while within our hospitals
- 84% of respondents felt that the teams involved in their care communicated with them either reasonably or very well, and that their needs were met either most or all the time

At the same time, we need to improve in some areas, most notably improving communication between patients and their providers as well as enhancing care coordination at discharge for our patients.

Consistent with our philosophy of patient-centred care, UHN will continue to take steps to ensure ongoing education to improve staff approaches to care and coordination. By maintaining our focus on providing patient access, increasing patient empowerment, driving program integration for seamless care, and enhancing our health equity agenda, UHN will continue to transform the patient experience.

VIEWS FROM OUR STAFF

UHN employs approximately 12,000 dedicated people. Recent feedback from our staff indicates that 89% believe that UHN is a good, very good, or excellent place to work.

When asked what UHN should focus on over the next five years, the responses varied but the primary theme was consistent and clear – UHN should make strategic investments that enable the highest quality of care and outcomes for our patients. We need to develop strategies to address the ambitions of our staff, which include embodying patient-centred care as an organization, empowering patients and family members, and promoting an appropriate work/life balance for our employees.

¹ Feedback from UHN’s patients, staff, volunteers, and students was collected through surveys administered between 2008 and 2010.
² Based on 300 respondents.
³ Based on 11,100 inpatient surveys.
HIGHLIGHTS OF THE FEEDBACK WE RECEIVED FROM OUR STAFF INCLUDE:

“Enhance cultural competency to properly serve multicultural patients.”

“Become internationally recognized in academic achievement and healthcare.”

“Maintain facilities for our patients and staff.”

“Streamline IT processes for our patients and staff.”

“Become a centre of excellence in teaching and research in the world.”

VIEWS FROM OUR STUDENTS

UHN is one of the largest teaching hospitals in Canada, providing educational opportunities to over 3,000 students per year, the majority of whom are studying medicine and nursing.

Recent feedback from our students indicates that UHN provides an exceptional and challenging work environment in which to learn. In particular, UHN’s status as a leading tertiary/quaternary hospital is an important factor in enriching many of our student’s learning experiences.

Highlights of the feedback we received from our students include:

“As a teaching hospital, I can truly feel the benefits of a receptive and patient nursing staff and preceptor. I have learned so much this semester and I owe it to my preceptor who made this a great learning experience.”

“It was the best placement for me so far, with the staff so welcoming and ready to help. I was also able to see interdisciplinary team members come together for a goal. With my experience so far, I could not have asked for a better place. I look forward to future opportunities with UHN.”

“Not only did I learn many new things from the staff on the floor, but I also had a blast working with them. They were very welcoming and open to teaching us.”

VIEWS FROM OUR VOLUNTEERS

Volunteers at UHN are valued and visible participants within our interdisciplinary team, supporting patients, family members, and staff. The Volunteer Resources Department recruits people whose personal values complement those of our organization – individuals who are positive, caring, sensitive, energetic, customer-service oriented, and self-disciplined. In partnership with our staff, UHN focuses on the recruitment and retention of volunteers who are then assigned meaningful roles in support of enhancing patient-centred care.

A recent survey of our volunteers 4 indicates that over 87% value their volunteer experience, 90% feel appropriately recognized by staff and patients, and over 85% feel like a valued part of the team.

Over the next five years UHN will continue to rely on the exceptional spirit of giving that our volunteers bring to the organization.

4 Based on opinions from 382 survey respondents
THEMES FROM OUR STRATEGIC PLANNING PROCESS

The foundation of our strategic planning process involved listening to the staff in our clinical programs and corporate departments as they described their key strategic areas of focus over the next five years. Through an iterative process of programmatic and departmentally focused discussions at Senior Management Team meetings, Board of Trustees meetings, and the 2010 Board Retreat, we identified the following themes:

INTEGRATION
Integration of clinical programs and disciplines continues to be a priority in order to enable innovative and collaborative team-based care.

VALUE OF CARE
UHN must measure, improve, and report on the outcomes, quality, and cost of the care that we provide.

SYSTEM LEADERSHIP
We have established ourselves as a system leader in Ontario. We need to sustain this position and develop leadership in international healthcare. To do this, we must continue to invest in our people. System leadership at UHN is derived from developing leaders from our staff.

PROMOTING AND LEVERAGING PARTNERSHIPS
Partnerships extend our expertise, lend support to our teaching and research mandates, and allow for growth within a constraining fiscal environment.

THE “GOLDEN RULE” FOR GROWTH
Maintaining our clinical activity within designated funding envelopes is a commitment made by all programs at UHN. When assessing growth opportunities, we must understand the expected impact, revenue generating opportunities, and alignment with organizational goals before we grow any part of the organization.

STANDARD, COMPLEX, AND ADVANCED CARE
Providing the full complement of services within each clinical program – from the most standard care to the most advanced and complex interventions – is necessary for us to maintain our role as a teaching hospital and care provider for our local communities.

CLINICAL OPERATIONS MARKET STRATEGY
When developing clinical operations, UHN is both reactive – responding to the market, external demands, changes in best practice, and government priorities – and proactive – creating the market of the future through system leadership and innovation.

MAINTAINING OUR KEY ENABLERS
Several key enablers support UHN’s strategic themes – our expertise in clinical change management and staff development, the creation of new space and funding, and the enhancement of our information systems and technology.
MEASURING AND IMPROVING PATIENT OUTCOMES
To understand and improve the value of care, UHN must lead the world in the measurement and improvement of patient outcomes.

INTERNATIONAL, MEDICAL, AND “HOSPITAL OF THE FUTURE” ROADMAPS
UHN’s international program, medical Human Resources (HR) and “hospital of the future” plans are key initiatives that will enable exceptional patient care and help us to achieve global impact.

ARTICULATING UHN’S BRAND
Over the past 10 years we have emphasized the brand of UHN’s individual hospitals, programs, and centres. In the next five years we will continue to build awareness of the excellence of these elements but will also concentrate on the value proposition that UHN, as a whole, presents to our local community and to the world.

LEVERAGING INFORMATION TECHNOLOGY
Information technology / Information management (IT/IM) needs and constraints are a reality experienced by all clinical programs at UHN. IT/IM solutions are pivotal in facilitating healthcare transformation for our patients and the world.

ANDY DYKSTRA
Andy Dykstra, 57, had been waiting for a lung transplant since July 30, 2008. For over five years, he had been suffering from emphysema, making even simple tasks like answering his door impossible. “I could still breathe, but I wasn’t living.”

In December 2008, Andy’s life changed dramatically. Transplant surgeons broke new ground when they used a new technique – a world first – to repair an injured donor lung that was previously unsuitable for transplant. The set of donor lungs were then successfully transplanted into Andy.

The team of surgeons, led by Dr. Shaf Keshavjee, developed an “ex vivo” (or outside the body) technique capable of pumping a bloodless solution into damaged donor lungs. This technique allows the surgeons to heal donor lungs while they are outside the body and make them suitable for transplantation.

Recalling his difficulty with breathing, when walking in the front door of his home, Andy said that he waited only two seconds before deciding to be the first patient to receive the reconditioned lungs. Currently, only 15%-20% of donor lungs are acceptable for transplantation. These numbers can increase with this technique to treat and improve donor lungs.

“Life is sweet and I can breathe again. I am so grateful to Dr. Keshavjee and the lung transplant team. They changed my life.”
Review of our past performance, examination of current trends, consultation with patients, families, staff, students, volunteers, the UHN Board of Trustees, peers and partners, and reflecting on key themes gleaned from our clinical programs’ and corporate departments’ strategic planning processes, has revealed an overarching direction for UHN. Our ambition: In five years, UHN will be known as one of the premier research hospitals in the world.

To be recognized in this way, UHN will need to achieve the best outcomes at the optimum cost. We will need to drive innovation and provide system leadership within our local communities and around the world. This plan must empower our people to do the work that makes UHN Canada’s healthcare leader. We must also recruit and develop the leaders of tomorrow. Finally, we will need to tell our story in a coherent and compelling manner, to as many people as we can, here and around the world.

How will UHN be known as one of the premier research hospitals in the world?

Our road map is **UHN Strategic Directions 2016: Global Impact – Local Accountability** which is aligned to our Balanced Scorecard and our purpose statement:

**WE**
Develop the best people who will enable system leadership

**CARING**
Achieve and document exceptional outcomes for our patients

**CREATIVE**
Become the research hospital of the future

**ACCOUNTABLE**
Expand our space, develop new sources of revenue, and become a leader in clinical, administrative, and research information integration

**ACADEMIC**
Deliver exceptional education at all levels to enable the success of tomorrow’s healthcare leaders
“Develop the best people who will enable system leadership”

The goal of the We domain is to ensure that UHN has the best work environment so that our people will be inspired to achieve our organizational goals. HR has prime responsibility for the development of the work environment and the people at UHN. This includes the development of strategies that ensure that UHN has the skills and the environment required to drive excellence. UHN is comprised of 12,000 employees, 1,400 physicians, 1,796 volunteers and 3,400 students. The We domain also represents UHN as a whole – the sum of all our people – which is reflected within our focus on branding and local and global leadership.

TRENDS AND PRIORITIES

Over the past 10 years, UHN has achieved an organizational transformation which manifests as an inclusive, transparent culture with high levels of employee engagement and low levels of turnover. We have established a cohesive relationship amongst the three hospitals and a results-driven labour relations environment.

The challenge over the next five years will be to further these positive changes in the face of restricted health-care funding. To address this challenge, we will focus on our inclusive and transparent culture, promotion of partnerships, and maintaining high levels of employee engagement and performance to create the best work environment in the Canadian healthcare industry.

The We domain will also focus on evolving our branding strategies to not only emphasize the excellence of our sub-brands (Peter Munk Cardiac Centre, Princess Margaret Hospital, Krembil Neuroscience Centre, McEwen Centre for Regenerative Medicine, etc.), but also to describe the importance of the core brand associated with UHN. We will also leverage our expertise to provide leadership and partnership within both the local and global health systems.
1) PROMOTE UHN’S BRAND AND VALUE PROPOSITION
- Identify and promote UHN’s value proposition in Ontario and the global health industry

2) CONTINUE TO BUILD ORGANIZATIONAL CAPABILITY AND CAPACITY
- Create development programs for leaders and succession plans for key positions
- Create work environments that promote excellence and innovation in practice, education, and research
- Grow our international reputation in order to attract and retain top performers

3) EXEMPLIFY LOCAL AND GLOBAL LEADERSHIP
- Develop future system leaders
- Promote partnerships and collaboration that support health system integration and enhance value to the patient in Ontario and abroad

5-YEAR MILESTONES:
✓ UHN’s branding strategy will be developed and implemented
✓ Formal succession planning and leadership development will be implemented
✓ The medical HR plan will be implemented
✓ The employee organizational commitment score will increase
✓ Non-productive time (sick time, lost time, overtime) will be reduced
✓ Our partnership base will be expanded
UHN’S Caring Domain

“Achieve and document exceptional outcomes for our patients”

UHN’s Caring domain encompasses the full spectrum of clinical care at UHN. It is the sum of our nine clinical programs, with a vision of providing the best and most appropriate level of care for our patients while pushing the boundaries of innovation in a fiscally responsible manner.

TRENDS AND PRIORITIES

The Caring domain reflects the key strategic directions of UHN’s clinical programs over the next five years. An overarching trend, derived from these program plans, is the importance of the continuing integration of our clinical programs. The interdependence of activities amongst our programs contributes to our organizational impact. Sustaining efforts to integrate our clinical programs will promote greater interdisciplinary care, the sharing of expertise and technology, and superior patient outcomes.

There are also several priorities that are common to all of UHN’s clinical programs. These priorities – enhancing patient outcomes, information management integration, technology and innovation, innovative clinical care models, and system leadership – are the foundations for our clinical strategy over the next five years.

Responding to these priorities will allow UHN to address the numerous challenges that face our clinical operations, including securing dedicated Ministry of Health and Long-Term Care (MOHLTC) funding, maintaining our role as a leader in patient safety, and resourcing health innovations that transform patient care.

Extending our expertise globally allows us to disseminate innovations to the benefit of international patients and will also allow us to increase revenue to reinvest into Ontario’s healthcare system. UHN will continue to provide exemplary care for our local populations, consistent with our complex role as a local, provincial, national, and global leader.
1) **BECOME A WORLD LEADER IN DOCUMENTING AND IMPROVING PATIENT OUTCOMES**
   - Enhance our ability to capture and improve appropriate measurements of patient outcomes
   - Substantially reduce hospital-acquired infections
   - Enhance all elements of patient safety

2) **TRANSFORM “PATIENT-CENTRED CARE” TO “PATIENTS AS PARTNERS IN CARE”**
   - Improve patient access to quality treatment
   - Support patient empowerment through access to information
   - Enhance equity of access
   - Provide a clinical environment that promotes interprofessional care
   - Use community engagement strategies to inform the care we deliver

3) **MEASURE AND IMPROVE THE VALUE OF CARE**
   - Improve internal program integration, discharge planning and community transitions
   - Use outcome and cost information to measure and improve the value of care

4) **LEAD HEALTH SYSTEM INTEGRATION**
   - Enable seamless care across the continuum through integrated health information management
   - Use community engagement strategies to inform integration of patient services

---

**5-YEAR MILESTONES:**

- UHN's Hospital Standard Mortality Ratio (HSMR) score will be the lowest amongst academic hospitals
- Hospital-acquired infection rates will be substantially reduced
- Patient satisfaction will improve at all hospital sites
- UHN will be a global leader in reporting on patient outcomes
- Improved measurement of health equity will develop within our clinical programs
- Patient access will improve in scheduled and unscheduled care
- UHN will have established and implemented a “value of care” measure
- The connecting-GTA IT/IM integration project will be successfully completed
The Creative domain links inspiration to impact. UHN is home to some of the world’s best medical researchers and practitioners. By fostering an environment of relentless inquiry, UHN is committed to improving health outcomes based on innovation, integration, and partnership.

TRENDS AND PRIORITIES

The research goals of our various clinical programs, centres, institutes, and hospitals all depend on our ability to collect and utilize the data created through clinical practice. In the next five years we will focus on enhancing our IT/IM capacity to create a seamless integration of this rich clinical and research data. This will exponentially enhance our ability to provide optimal patient care while assisting our researchers to find new and better treatments for our patients and the patients of the world.

During this planning period, the research aspirations of UHN’s clinical programs and other areas of the organization have been synthesized and analyzed. A number of clusters of excellence have emerged from this analysis and these plans have coalesced into a UHN-wide commitment to build the “research hospital of the future.” UHN will be a living laboratory for determining the best way to achieve optimal health outcomes. The integration of research and clinical data is critical to the insights, ideas, and innovations which will drive our ability to provide the best possible patient outcomes.

The Creative domain has identified three core goals critical to accomplishing our objectives. UHN is building from a point of strength, with a number of key assets already in place, as we move forward in all of these areas.
1) FURTHER OUR UNDERSTANDING OF THE BASIS OF HEALTH AND DISEASE THROUGH BIOLOGY AND TECHNOLOGY PLATFORMS

- Apply latest advances in genetics, epigenetics, and proteomics to understand the basis for health and disease
- Lead innovation in the regeneration of cells, tissues, and organs
- Enable major expansion of UHN’s global reach through telehealth (including telemedicine consultations, teleradiology, and telepathology)
- Assemble expertise and assets to move technology concepts forward from the identification of unmet clinical needs to development, implementation, and practice change

2) LEVERAGE EXPERIMENTAL THERAPEUTICS AND HEALTH SERVICES TO IMPACT THE LIVES OF PATIENTS

- Pioneer “first in human” care solutions (such as ex vivo lung perfusion; deep brain stimulation; development and testing of novel drugs)
- Exploit UHN good laboratory/manufacturing practice capacity (human stem cells, immunology, vectors, and cell therapy for example)
- Harness opportunities provided by UHN’s advanced facilities such as the multi-purpose operating room
- Develop an integration platform for different components of UHN (research, operations management, and care teams) in stimulating health services research

3) ENABLE THE COLLECTION, ANALYSIS, AND APPLICATION OF HEALTH INFORMATION

- Implement a comprehensive IT system linking clinical and research information
- Integrate UHN-wide biobanking with clinical information
- Enhance the clinical trials platform
- Explore the science of informatics, including advancing clinical modelling technology, disease modelling, clinical decision-making, and market modelling

5-YEAR MILESTONES:

✓ Research hospital of the future 10-year road map will be developed and implementation underway
✓ Research hospital fund projects will be implemented
✓ GTx and I³ will be fully implemented and Techna will be a leading institute
✓ Research, clinical, and biobank databases will be integrated
✓ UHN-wide health services research platform will be launched
✓ UHN’s commercial portfolio will be substantially increased
UHN’s Accountable domain revolves around fiscal responsibility, as well as ensuring that the funding and space needs of the organization are addressed. The Accountable domain is also about continuing the journey towards a more complete electronic patient record (EPR), which is foundational to our mission of providing exemplary patient care.

TRENDS AND PRIORITIES

A primary assumption of the Accountable domain is that our city’s population is growing. The Greater Toronto Area is projected to experience the highest growth rate in the province over the next five years – a challenge for all hospitals and healthcare providers.

To address this population expansion, UHN must continue to grow with the communities that we serve and enable innovative IT/IM solutions, while continuing to balance our budget to uphold our fiscal commitments to the MOHLTC and Ontario’s tax payers.

There are numerous drivers of growth identified by UHN’s clinical programs that will impact our volumes and costs. These include an aging population, a greater proportion of complex patients, development of advanced therapeutics, and the increasing need for follow-up care that our patients require as they live longer with diseases which previously shortened life expectancy. It is UHN’s responsibility to address these drivers in order to enable strategic growth in our provincial and local program areas.

Information management has been a pressing topic at UHN for several years. All clinical programs at UHN have identified the need for information technology to manage and enable clinical, research, and teaching transformation. Our growing dependence on technology and information will be a challenge over the next five years.

To help address this challenge, advanced clinical documentation and IT integration must be accomplished within the next five years. Achieving these two goals will allow us to streamline the provision of care, provide business continuity, and enable safe and quality care for our patients while supporting our research and education programs. UHN will leverage the expertise within the Shared Information Management Services (SIMS) in order to address IT/IM challenges and enable innovative patient care and research solutions.

Based on historical trends and identified funding sources, the need for UHN’s services is expected to grow by about 15% over the next five years. To respond to this growth and still thrive in a time of fiscal restraint, we will have to consistently demonstrate UHN’s value of care.

The role of philanthropy through our Foundations is also critical in enabling the significant ambitions of our clinical, research, and educational programs.
DOMAIN GOALS AND OBJECTIVES

1) CREATE NEW PHYSICAL SPACE FOR OUR CLINICAL PROGRAMS, OPERATIONS, RESEARCH, AND EDUCATION AREAS
   - Facilitate growth of our clinical, education, and research programs
   - Enhance energy and environmental stewardship

2) DEVELOP NEW SOURCES OF REVENUE
   - Increase non-MOHLTC funding as a percentage of total UHN funding
   - Increase our philanthropic contributions
   - Explore opportunities to market our healthcare services around the world

3) OPTIMIZE PRODUCTIVITY AND INTEGRATION OF CARE THROUGH NEXT-GENERATION INFORMATION MANAGEMENT AND TECHNOLOGY
   - Implement advanced clinical documentation in ambulatory care clinics and inpatient areas

5-YEAR MILESTONES:

✓ 700,000 square feet of new space will be developed
✓ The percentage of operational activities and planning initiatives that incorporate sustainability criteria or goals will have increased
✓ Redevelopment of TWH operating rooms and McLaughlin Wing will be near completion
✓ Krembil Discovery Centre will be completed on time and on budget
✓ Completed master plans for University Avenue campuses will be implemented
✓ UHN will be a $1.8B organization
✓ Process improvement will be part of our culture
✓ Philanthropy will increase across our three Foundations
✓ Advanced clinical documentation will be implemented
UHN’s education programs are inspired by our past, guided by the present, and challenged by the future. The mission of educating future healthcare professionals is at the forefront of what we do and this happens in every unit, outpatient clinic and laboratory where students are practicing the art and science of their profession.

As an international leader in education, UHN’s Academic domain is committed to providing superb education and training to Canadian and international health professionals. We train over 3,000 students per year across all of the health professions; including medicine, nursing, physical therapy, occupational therapy, speech language pathology, social work, pharmacy, nutritional sciences, spiritual care, psychology, medical technology, medical engineering, medical radiation sciences, anesthesia assisting, and respiratory therapy. We will continue to build on this need as we train more students in every healthcare profession.

TRENDS AND PRIoRITIES

The provision of healthcare has become increasingly complex, posing challenges in providing high quality care to diverse patient populations. Therefore, our education programs must develop professionals able to continually adapt to changing care environments and requirements.

Recent global trends in education include:

**Strengthening Science Education** – Biological, clinical, and social sciences provide the basis for advancing healthcare. As a result, research interests and skills must be developed in more students to foster a new generation of health professionals with the training and knowledge necessary for discovery.

**Interprofessional Practice** – In the spirit of providing the highest quality of care that involves patients as partners in their care, it is critical for academic hospitals to train health professionals with the competencies to function within inter and intra-professional teams.

**Competency-Based Education** – Future health professionals gain a large proportion of the knowledge, skills, and attitudes required for competent practice during learning experiences in academic hospitals. With today’s focus on outcomes and accountability, it is essential that these foundational competencies are clearly defined and their achievement evaluated in clinical settings.

**Fostering Leadership** – Leadership is essential for both the care of patients and strengthening the healthcare system. Academic hospitals therefore must foster and encourage leadership, providing teachers and students with the tools and competencies to manage and transform systems of care.

**Dealing with the Hidden Curriculum** – Informal learning and institutional culture have effects on future professional interactions and clinical practice. We should seek ways to constructively address the potential negative elements of the hidden curriculum.
1) POSITION UHN AS THE INSTITUTION OF CHOICE FOR TRAINEES
- Increase the quality of educational experiences (trainee satisfaction)
- Increase the number of fellowship training experiences which are targeted to global health human resource needs

2) CONTINUE TO PIONEER NEW MODELS OF TEACHING AND LEARNING
- Implement new models of interprofessional teaching, learning, and practice transformation
- Increase the number of UHN health professionals trained and certified in interprofessional education
- Demonstrate leadership in telesimulation
- Expand the use of e-Learning and continuing education

3) ENHANCE UHN’S COMMITMENT TO PROMOTING RESEARCH IN EDUCATION
- Increase capture of peer reviewed education grants
- Increase the number of educational publications

5-YEAR MILESTONES:

✓ UHN will be the Canadian leader in the pioneering of new models of interprofessional teaching, learning, and practice transformation
✓ Each of our postgraduate medical programs will receive higher rotation effectiveness scores (RES)
✓ UHN will be a global leader in telesimulation training, continuing education, and e-Learning
✓ Increased numbers of international fellows will be trained for clinical and academic leadership positions
✓ e-Learning will be routinely used by UHN staff and our innovative models will be adopted by other health professional training institutions locally and nationally
✓ UHN’s health professional education grant capture and publication rate will be the highest in Canada
ROBERT LINTON

His friends and family started noticing something wrong. Robert Linton was forgetting things, not recognizing people he should know and generally had more trouble doing routine work around the house. After a trip to his doctor, Robert was diagnosed with Alzheimer’s disease. He thought it would mean going into a nursing home and dying. The 62-year-old former Brampton city councillor wasn’t willing to take that route.

When his doctor mentioned they were trying “new things” at Toronto Western Hospital, Robert couldn’t wait to sign up. In 2007, he was accepted into a world-first trial that tested the safety of Deep Brain Stimulation surgery on patients with early-onset Alzheimer’s disease. Dr. Andres Lozano and his team at the Krembil Neuroscience Centre showed that using Deep Brain Stimulation on patients with early signs of Alzheimer’s disease is safe and may help improve memory.

The father of two grown sons, Robert’s mental exam score increased after receiving DBS in 2008, as one of six patients involved in this initial study.

Robert says that the procedure has given him hope. He now wakes up “alive every morning.” He pays daily visits to the YMCA, plays computer games and chats with friends. “I’m convinced it’s working for me. I’m now looking forward to my future.”

UHN IN 2016 – CLOSING REMARKS

UHN is fortunate to be comprised of staff, students, and volunteers who are driven to provide exemplary patient care while pushing the boundaries of science to develop innovative health advancements for our patients.

_UHN Strategic Directions 2016: Global Impact – Local Accountability_ is an ambitious plan, that seeks to harness the aspirations of our staff and clinical programs to achieve global impact. Indeed, part of the culture of UHN is attempting to tackle the most difficult health-based challenges. UHN’s new strategy charts a detailed and ambitious course for the organization over the next five years, while still allowing us to retain flexibility to respond to local healthcare needs and challenges.

Starting as Canada’s pre-eminent research hospital, our goal is to be recognized as one of the leading research hospitals in the world by 2016, routinely translating research innovations into clinical impact for our patients in Toronto, and for patients around the world.
A 28-year old woman with congenital aortic stenosis became pregnant and developed significant chest pain, shortness of breath, dizziness, and tension in the chest at approximately 31 weeks of gestation. Her pediatric and adult cardiologists decided that because of her disabling shortness of breath, she was unlikely to survive delivery by caesarean section – they felt that her aortic stenosis needed to be corrected before she entered into labour; however, a conventional open-heart operation might be extremely dangerous for both mother and baby.

The plan therefore was to attempt an endovascular aortic valvuloplasty which would improve her aortic stenosis so that safe delivery could take place, but avoid the complications of an open-heart procedure.

A multidisciplinary team of nurses from UHN and Mount Sinai Hospital, adult and pediatric cardiology, obstetrics, neonatal critical care transport, cardiac surgery, perfusion, vascular surgery, anesthesia, respiratory therapy, and medical imaging was assembled in the Multi-Purpose Operating Room (MPOR) at the Toronto General Hospital.

Using techniques of real-time imaging and endovascular intervention, with approximately 23 people working on the case, the process was described by Dr. Eric Horlick; “Three hospitals came together around a 28-year old patient to get her through this intervention which could have had multiple outcomes. Everyone was so dedicated to providing state-of-the-art care in a particularly challenging situation and to rally around the young patient who was struggling. It brought out the best in everyone. I realized how lucky I am to work with such caring staff and to be part of something great.”

Amanda, the young mother-to-be, was grateful to everyone on the team for their efforts. “I would not want to be anywhere else in the world but here,” she said. “There was so much heart involved in everyone’s care. Now I can concentrate on the baby and not on my chest pain. Thank you to everyone.”