



# People First

Year in Review  
2022-2023



**NORTH YORK  
GENERAL**

Making a World of Difference

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# 2020-2025 Strategic Plan — *Thinking Beyond*

## Strategic Directions

People come first in everything we do



Drive the future of integrated care

Be an exceptional learning community

Investing in a better tomorrow

Excellence | Respect | Integrity | Compassion | Collaboration

# Leadership Message

We proudly present North York General's (NYGH) 2022/2023 Year in Review, *People First*.

In 2022/23, NYGH emerged from the pandemic crisis, ready for the future. Last year also marked the mid-way point of our five-year Strategic Plan and a period of positive change, including pushing forward the most significant infrastructure renewal in over 50 years, which will transform health care in North York and beyond.

What motivates so many to work, volunteer, learn at, and support NYGH is people. *People Come First in Everything We Do* is the first direction in our Strategic Plan — it's what we're all about.

Our Year in Review celebrates some of the stories about lives changed by the unforgettable care and kindness received at NYGH and the exceptional people who put everything into doing their best for patients.

NYGH serves a fast-growing population of approximately 500,000. Our area also has the highest proportion of seniors in Toronto, along with many vibrant and diverse cultural communities and neighbourhoods. NYGH is here for our communities today and we're preparing for their needs tomorrow.

This report highlights our team's extraordinary efforts to keep people safe and well during an exceptionally challenging time in health care. Last year, we forged ahead with new services for our communities. We opened the first 60 beds of our new Reactivation Care Centre and welcomed patients to our innovative new Midwifery Care

Clinic, a one-stop service for post-partum care. We installed advanced MRI technology in our *Gulshan & Pyarali G. Nanji Family Foundation Centre for Medical Imaging* and helped more young patients at our expanded Children and Adolescent Eating Disorders program.

NYGH pushed the boundaries of people-centred care, working in true partnership with patients and families to deliver the highest quality of care.

NYGH is known for having strong teams who are passionate about our patients and communities. Last year, we celebrated hundreds of team members marking 20-plus years of service at NYGH. And we welcomed 1,027 new staff. We were honoured to receive the CARE Centre for Internationally Educated Nurses employer award, one of numerous recognitions earned by our team, including being named Canada's number one community academic hospital by Newsweek Magazine for the fifth year.

Putting people first means creating an environment where everyone can flourish. As part of our long-term commitment to equity, inclusion and anti-racism, we launched our first Anti-Black Racism Experience and team demographic surveys.

Through our North York Toronto Health Partners, we created a better-connected health experience and launched new initiatives that bring cancer screening and other health and wellness services into local neighbourhoods. Our digital health

innovations supported many thousands of patients, while enabling health professionals to deliver better, faster care.

A top choice for learners, NYGH educated more than 1,500 students last year. And our scientists made an impact at home and around the world through trailblazing work in AI, patient-centred outcomes, safety, chronic disease management and health equity.

NYGH is improving patient care today, while creating a sustainable future. Together with government, donors and other partners, we moved forward on plans to build our advanced New Patient Care Tower and one of Ontario's largest long-term care homes. These leading-edge towers will anchor North York's Campus of Care, offering our communities a full range of interconnected hospital and health services, and

doubling the number of NYGH beds. We would like to express our deep appreciation for everyone in our North York General community and our many partners who work together to put people first, every day.



*Bert Clark*

**Bert Clark,**  
Chair, Board  
of Governors



*Karyn Popovich*

**Karyn Popovich,**  
President & CEO

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## Special message from Karyn Popovich, President & CEO



Earlier this year, I announced my decision to retire after an incredible 42-year career with NYGH.

I will always feel a profound connection to NYGH — what it stands for, its amazing culture, the quality of care and, most of all, its people.

I'm grateful for the many kind, courageous and exceptional people I've worked with. I am also deeply honoured to have been able to serve, care for and partner with so many patients, residents and families over the years.

The NYGH community is truly remarkable. I can't wait to see what happens next!"

# North York General Hospital

North York General is known for its collaborative culture and interdisciplinary teams — qualities that enabled us to persevere and recover well following three years of the COVID-19 pandemic.

Our talented team is made up of physicians, nurses, and a wide variety of other clinicians, leaders and support service professionals. The high number of staff and physicians who build decades-long careers at NYGH as well as the many colleagues who return to NYGH at different points, reflect the value we place on teamwork and investing in professional growth.

Our workforce is growing. Last year, we brought on 1,027 new employees, and new roles to boost our care teams such as Internationally Educated Nurses, Externs and Patient Care Assistants.

**“Our new team models pair new staff with seasoned staff and introduce new clinical support roles. Not only does this help ensure a high standard of quality, but being mentored and supported by an experienced colleague sets our early-career professionals up for long-term success,”** says Susan Woollard, Vice President Clinical Services, Quality & Long-Term Care, Chief Nursing Executive.

Our team also includes passionate Patient Experience Partners, dedicated volunteers and students from a full range of disciplines — all of whom contribute to the quality of care at NYGH.

## NYGH'S PEOPLE 2022–2023



**4,101**  
Employees



**842**  
Active  
physicians



**287**  
Volunteers



**27**  
Patient Experience  
Partners

## LEARNERS 2022–2023



**712**  
Medicine



**608**  
Nursing



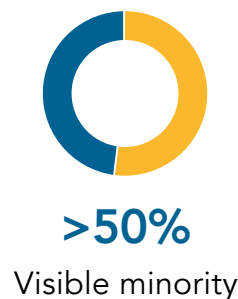
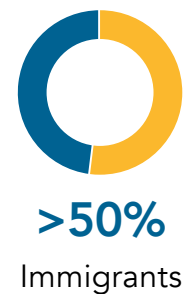
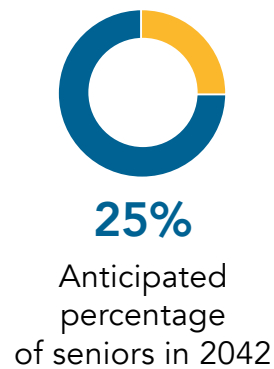
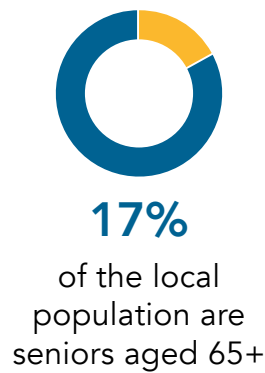
**208**  
Other Health  
Professions



**25**  
Administrative

# ABOUT NORTH YORK AND OUR POPULATION

NYGH serves approximately 500,000 people — those who live in our neighbourhoods and others who receive care at our seven-site campus. Some of our neighbourhoods are among the fastest growing in Toronto. North York is also an incredibly diverse area, which includes pockets of great affluence alongside significant poverty. Our area also has the largest percentage of adults over 65 in Toronto.



## Main languages (other than English)

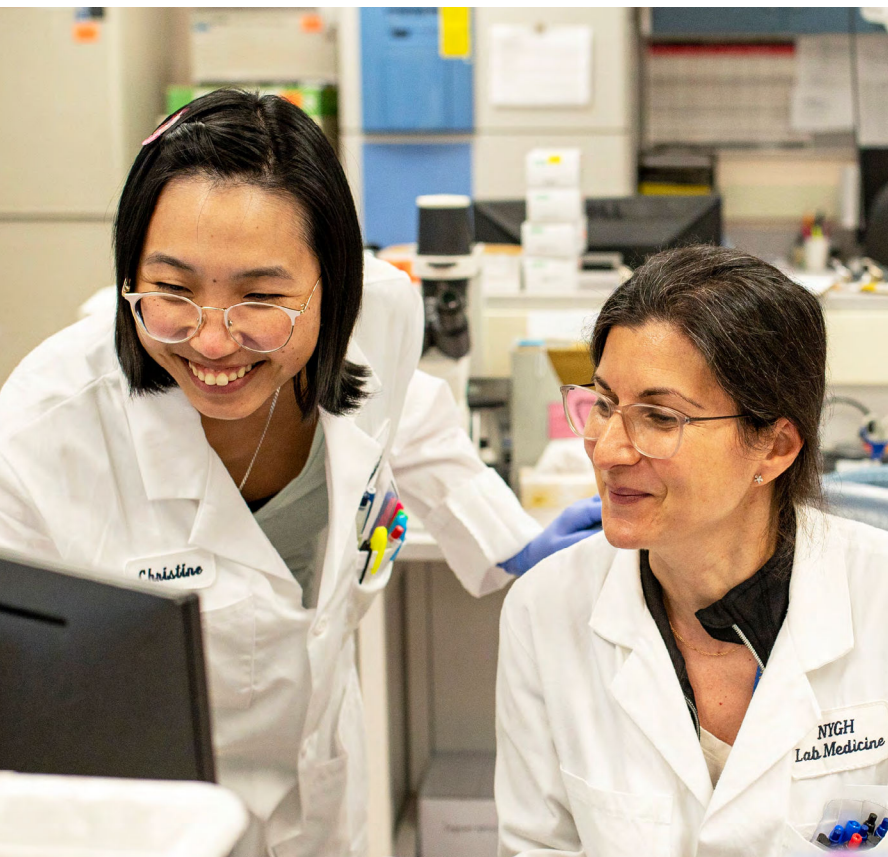
Cantonese  
Mandarin  
Farsi  
Korean  
Russian  
Tagalog  
Italian  
Spanish

## Neighbourhoods with >25% of seniors

Bayview Woods-Steeles  
Banbury-Don Mills  
Hillcrest Village

## Neighbourhoods with highest population growth 2017–2026:

Henry Farm — 77%  
Bayview Village — 71%



## OUR SERVICES



**27,795**

Inpatient discharges



**4,233**

Live births



**248,764**

Outpatient visits



**94,307**

Diagnostic/lab visits



**110,558**

Emergency visits



**29,707**

Day Surgery/  
Outpatient Operating  
Room Cases



**480**

Acute beds



**192**

Long-term care beds

# People Come First

NYGH is defined by the exceptional care and compassion provided to generations of patients and families. People turn to NYGH for high quality care throughout their lives and often it's the kindness and personal connections they remember most. Likewise, talented individuals choose to learn and work at NYGH because of our strong teams and commitment to patient empowerment.



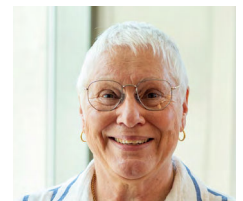
## People-Centred Care

NYGH staff and physicians work closely with patients, residents, and families/caregivers, including to design new services and facilities.

Through our People-Centred Care Strategy, our teams consider each person's environment, values and preferences in all we do.

Our Patient Experience Partners (PXPs) are former patients or family members of patients who volunteer to support a wide range of initiatives.

Introducing some of NYGH's Patient Experience Partners







Photos, top to bottom

Dr. Donna McRitchie,  
NYGH's Vice President,  
Medical and Academic  
Affairs

Dr. Fahima Osman, Surgeon

Brad Badeau,  
NYGH Board of Governors

## NYGH’s Breast Cancer Program and the Power of Compassion

When Brad Badeau’s wife Kath was diagnosed with breast cancer at North York General about 14 years ago, it was a scary time. She went on to receive surgery at NYGH and the hospital helped her through a successful recovery. A few years later, Brad’s sister also received breast cancer care at NYGH. What Brad remembers about both experiences is the culture of caring.

“It’s how you’re treated, how you’re communicated with,” he says.

**“Of course, it's possible to provide excellent care and act in a gruff or insensitive way. But that’s not good enough. Providers should strive to be the best they can be and that includes compassion, empathy and caring. At this hospital, it isn’t just the care you’re getting, but the feeling that the people helping you care about you. That’s the magic of this place.”**

Dr. Donna McRitchie, NYGH’s Vice President Medical and Academic Affairs performed the surgery on Brad’s wife. Dr. McRitchie, who was the hospital’s Medical Director of Critical Care and Division Chief of General Surgery at the time, takes pride in the culture of care that Brad described. She is particularly proud of the hospital’s breast cancer program, which she says provides a perfect combination of excellent multi-disciplinary medical care, and the compassion, empathy and respect that matter so much to patients.

“We have a multitude of specialties, including oncology, radiology, surgeons, nurses, social workers, pathologists, and technicians who dedicate almost their entire work life serving our patients. Not to mention our volunteers who do so much. The result is holistic care being provided by people who also really care. For everyone working at our breast cancer program, this is their passion.”

Breast cancer surgeon Dr. Fahima Osman points to the hospital’s Integrated Care Collaborative, which brings together providers, clinics, and services to focus specifically on breast cancer patients and their families at every stage, from diagnosis to at-home recovery.

“Our patients receive care that is both excellent and extremely fast. They receive education, support, and coaching. And they are made to feel important. For example, they know they are the subject of a weekly

discussion that brings together the entire team. This means that every single breast cancer that gets diagnosed has the input of all our expert colleagues during the patient's care. This is unique in Toronto and likely in Ontario."

Dr. McRitchie and Dr. Osman point out that NYGH is known for treating a high number of cancer patients, while also being widely respected for its outstanding standard of care. For the past five years, the hospital has won the Cancer Care Ontario (CCO) award for top performing hospital for wait time 2 (decision to treat to treatment) and for the second year in a row, the CCO award for meeting all targets for wait time 1 (time from referral to consult).

**Dr. McRitchie adds, "We're affiliated with the University of Toronto, like other academic hospitals, and we train many medical students, residents and fellows. Our work is unique because it's focused on improving real and immediate patient care needs within our communities. This approach is actually being applied in settings across Ontario and Canada."**

Ever since his wife's surgery, Brad Badeau has been, as he puts it, "all in" with respect to North York General and its importance to patient care within the community. He is a strong supporter of research at the hospital, funding a research chair and several other research and quality improvement initiatives. Brad also serves on NYGH's Board of Governors.

"I look at the care Kath and my sister received, at every single step, and they are the reason why I want to help other women have just as good an experience."

## MyJourney

The MyJourney platform developed by Dr. Fahima Osman and her team, in partnership and with the support of Brad Badeau and his family, is the first of its kind in Canada, providing patients with customized educational materials and resources, tailored to their diagnosis, and treatment plan. According to Dr. Osman, it is intended to make patients "mini-oncologists," so they can make the right care decisions for themselves and their families.

Badeau says he wanted to help with the project as soon as he heard about it.

"To be able to help a woman, soup to nuts, going from a bad diagnosis to hopefully a very successful outcome, to kind of hold her hand in a special way that makes her experience easier than it might have been ... I'm so passionate about this."

## Mental Health & Addictions Peer Navigators Taking Care of the Whole Person

In 2014, NYGH and the Krasman Centre — an organization that supports people with mental health, substance use and housing challenges — launched a Peer Navigator Program. As it approaches its 10th year, the program continues to help many people who are struggling.

“The Peer Navigator program began as a pilot project and was so successful that we decided to make it permanent,” says Sandy Marangos, Director of Mental Health at NYGH.

**“Partnering with the Krasman Centre has been so beneficial because their peer support approach showed we were underestimating lived experiences in our patients’ recovery.”**

Peer Navigator Murat Guler believes that his role helps fill an important gap by building trusted, empathetic relationships and offering a holistic approach to care. “I encourage peers to examine other areas of their lives that may help in their recovery such as nurturing healthy family relationships or discovering new hobbies,” says Murat.

Every interaction with a peer is unique and requires different support.

Adam Macleod, a Peer Navigator with the Rapid Access Addiction Medicine Clinic at NYGH, recalls taking an urgent phone call from a peer who was contemplating suicide.

“I can draw from my own personal experience to relate with others. In this situation, I spent time listening to this person's fears with no judgement and validating how they were

feeling. While it was necessary to involve emergency services, I was with the peer throughout, ensuring they were supported and listened to, that their dignity was maintained, and that they were always aware of their right to be involved in their own care,” says Macleod.

Since the program was established, Peer Navigators have supported more than 20,000 peers.

“The priority is improving people’s experiences,” says Susan Dobson, Executive Director of the Krasman Centre. “Each peer should be seen, heard, and feel empowered with the information and resources needed for their recovery journey.”



Sandy Marangos, NYGH's Director of Mental Health

# Equity, Diversity and Inclusion at NYGH

Fostering an environment where every person is supported and feels a sense of belonging is a long-term, organization-wide commitment.

To guide us, NYGH drew on the best evidence and experiences in Canada and beyond and launched its own [Equity, Diversity and Inclusion \(EDI\) Framework](#).



Our Office of Equity, Diversity and Inclusion provides expert support while our Employee Resource Groups — currently focused on Anti-Black Racism and 2SLGBTQIA+ inclusion along with a Diversity Council planned for 2023 — steer and help implement NYGH’s actions.



## 2022-2023 EDI highlights



Our education program includes wide-ranging topics and mandatory learning.



We implemented our first internal Anti-Black Racism Experience and demographic surveys and included EDI measures in our Staff Engagement survey. This information points to needed actions to tackle Anti-Black Racism and all forms of discrimination and oppression.



NYGH celebrates many cultural events and supports visibility of equity-deserving communities. Last year, we introduced the option of adding pronouns to staff ID badges to foster gender inclusion.



In 2023, NYGH is proud to launch an initiative to measure health equity among our patients. In practical terms, each patient at NYGH will be asked a set of social and demographic questions related to age, race, ethnicity, income, education, language, sexual orientation, gender identity and other parts of their background. The goal is to better understand our communities so that we can improve our services and make it easier for everyone to access health care.

“To reduce health inequities, we need accurate data about the individuals we serve, directly from those individuals,” says Mitch Birken, Vice President & Chief Human Resources Officer for NYGH. “This information will allow us to tackle the root causes of inequity, and ultimately, improve everyone’s health outcomes.”

**Birken adds, “Given the personal nature of these questions, we will take great care and seek advice from a wide variety of patients and community members regarding how we collect, share and use information to achieve better health care.”**

## Philanthropic support has been a cornerstone of NYGH since its opening more than 50 years ago.

Community donations have helped fund crucial needs across the hospital from upgraded equipment to new technology to new care environments that have benefitted generations of patients and their families.

**North York General Foundation** is the charitable arm of the hospital, dedicated to cultivating, securing, managing and recognizing donor funds to ultimately support exceptional health care now and in the future. As the hospital shifts to meet the needs of our growing community, North York General Foundation is working with donors to invest in programs and infrastructure that will transform how NYGH delivers care. Donors are part of the fabric of our organization, saving lives, improving the care experience, and shaping our legacy. We are forever grateful.

To learn more visit [NYGHfoundation.ca](https://www.nyghfoundation.ca).





## Awards and recognitions highlights 2022-2023

Named **Canada's number 1 community academic hospital** by Newsweek Magazine for the fifth year in a row

Ranked among **World's Best Smart Hospitals 2023** by Newsweek

**Ontario's leading hospital for the ED Pay-For-Results** program for improved ED wait times with consistently high volumes compared to over 70 peer hospitals.

17 physicians named **Post City Magazine's Top Doctors in Toronto**

**Seniors' Health Centre accredited**, in recognition of the long-term care home's dedication to people-centred care

Surgical Program achieved **Meritorious Status** from **American College of Surgeons**

Awarded **2022 Joan Lesmond Internationally Educated Nurse of the Year Award**

Our President & CEO Karyn Popovich was among those honoured last year for more than 40 years of distinguished service at NYGH. Karyn was also a recipient of the Queen Elizabeth II Platinum Jubilee medal, awarded by the federal government in recognition of her impact on patient care and the community, and was presented with a special certificate of service by the Honourable Sylvia Jones Ontario's Deputy Premier and Minister of Health.



# The Future of Care is Connected

People-centred care means that everyone receives the right care, at the right time.

When people need care — whether it's help managing a chronic condition or depression, treatment for a serious illness, or support during childbirth or one of life's other milestones — our expert team is there with them.

Our Ontario Health Team, North York Toronto Health Partners (NYTHP), continued to create a more connected, people-centred health system last year.


## North York Toronto Health Partners – Core Partners





## 2022-2023 NYTHP Highlights

 Strengthened **partnership with new members** from across health care and our communities

 Hosted a **delegation from New Zealand** and learned about new ways to deliver people-centred care

 230+ physicians are part of our **Primary Care Network**, working together to shape an integrated health system.

 Launched **NYCARES 4.0**, a unique home care program for older adults with multiple health and social needs.

 Toronto Ontario Health Teams launched **Toronto Health and Social Services Directory**, one-stop online information about local health and social services.

## Mary, Gord and Rosemarie — a story of dedication and love

Rosemarie, the only child of Mary and Gord, was their principal caregiver for about 20 years.



“

My Mom’s health challenges began with a diabetes diagnosis in the 1980s. However, her situation started to change in 2000 when she developed new symptoms — problems with her balance and gait, which led to falls. The physical symptoms were not nearly as frightening as the cognitive changes in 2012 including hallucinations and delusions. Late that year, my mother was diagnosed with Lewy Body Dementia.

Dementia is one of the worst diseases, because you mourn your loved one twice — as they disappear in front of your eyes, and then when they pass away. As awful as it was though, we were able to give my mother many great experiences. Trips to Dairy Queen, she particularly loved, and I’ll never forget those.

The reason we could do those things for my mother is that we were able to build a team around her. Team Mary was a combination of our family, the family physician, our physician at the Toronto Memory Program, a firm providing PSW support, our pharmacist, and of course Gloria, the fantastic care coordinator from what was then the CCAC, (now Home and Community Care Support Services). She began to fail after breaking her hip.

She was treated at North York General and a rehab hospital and, when the team at NYGH recognized she needed palliative care, they basically set up a palliative care unit at home. Ultimately my mom developed pneumonia and died in my arms, just shy of her 92nd birthday.

Creating a team was not easy but I was fortunate to be able to take the time to be a constant caregiver, along with my father. We had a skilled care coordinator, excellent hospital care, and my Mom was able to spend much of her end of life in my parent’s apartment at York Mills and Leslie. Together, the members of Team Mary were able to piece together what my Mom needed. But not everyone is able to do that for their loved ones. I want to see this kind of comprehensive and supportive care experience become the norm.

The years spent taking care of my mother wore my father down. Team Mary became Team Gord with some additional supports such as Meals on Wheels. His decline happened after a series of falls and an infection from which he never fully recovered. Like Mom, he was admitted to North York General. This time, I just didn’t know what to do after the hospital stay because he could not go to the apartment and was bedridden and needed around-the-clock care.



Team Gord came to the rescue, in the form of North York CARES, a North York Toronto Health Partners program that provides comprehensive and individualized care to patients who would otherwise be in hospital, so they can safely stay at home until they transition to another level of care. When they told me about it, it was such a weight off my shoulders. They literally wrapped care around my dad, setting up a hospital-like environment in the apartment while Gloria worked tirelessly to find a long-term care placement. That placement finally came through, and he lived at Thompson House until he died, also in my arms.

What I learned through all of this is the importance of integrated care or team care. Because, particularly for older seniors and during the late stages of life, people need all sorts of different care. No one person or organization can deliver it. It takes everyone, working together. That's what health care should be for everyone.

When my father passed, the priest said something that moved me so much that I had it tattooed on my arm. He said, "heaven is theirs, peace is yours." And I am at peace, despite having lost my parents. And, in part, I have Team Mary and Team Gord to thank."

## Community Health Information Fairs — Caring for our Neighbourhoods

Citlalli Rios arrived from Mexico seven years ago. While she just recently became a Canadian citizen, she does not yet have a family physician, which is why she was so pleased to find a flyer in her door telling her about a Community Health Information Fair (CHIF) in her neighbourhood.

**"I'd been worrying about getting my cervical cancer test, and I was also interested to see what this information fair was all about," says Rios. "So even though there was a big winter storm, I went over there. And it couldn't have gone better. Everyone was so helpful and nice."**

The CHIFs originated during the pandemic as a way to get as many people vaccinated as possible. In May 2022, they were launched in a broader form, providing health services and information to people who might not have easy access to these things.

### Community Health Information Fairs provide support with and access to:

- Diabetes prevention
- Breast cancer screening
- Food security
- Mental health and addictions
- Youth employment
- Seniors and Caregiver programs and supports
- Settlement services
- Connection to family physicians/primary care
- Social work
- Home care
- Adult Day Programs



Most people who received cervical cancer screening at a CHIF received a negative result. However, some received positive results and were referred for follow-up care.

For this reason and others, Dr. Rebecca Stoller, one of NYTHP's Primary Care Leads, is a big booster for this kind of health care.

"We feel very strongly that not having a primary care provider should not be barrier to accessing these potentially lifesaving tests, or being given this tremendously important information. So, while these fairs are open to everyone, our main focus is reaching individuals who don't have access to primary care."

Dr. Stoller is particularly proud of what are called community ambassadors. These are people who live in the community, who do the hard work of reaching out, explaining to their neighbours what the CHIFs do, why they're important, and how easy they are to access.

"The ambassadors have been such a powerful tool. They are known and trusted in the community, they can often bridge language and

other barriers, and they help us reach individuals, on the ground, who might otherwise never connect to our healthcare system."

Jen Quinlan is the CEO of the Flemington Health Centre, which has hosted several CHIFs. She says that these fairs fill a growing gap.

**"With the pandemic, we have people who were not able to get their regular healthcare needs met for three years, and now they're further struggling because they don't have access to primary care — it's a double whammy. So, for folks who are behind on cancer screening, if they need help with mental health supports or food security, they can come to these fairs, no appointment and no health insurance coverage needed."**

As for Citlalli Rios, she received her Pap test, a COVID-19 vaccine, a flu shot, as well as information about a nearby community kitchen and newcomer services. "They give you screening that you need, and information that you can use. For me, that's good health care."

## Improving the Lives of Older Adults

The Edwin S. H. Leong Geriatric Supportive Care Outreach Program started in October 2021, through a transformational gift from Dr. Edwin S.H. Leong, rooted in his deep commitment to improving the quality of life of older adults. This groundbreaking program enables nurses and physicians to provide compassionate care for the complex medical needs of vulnerable seniors with heart failure, chronic obstructive pulmonary disease, dementia, and Parkinson's disease, in the comfort of their own homes.

Last year, the Program made 1,033 outreach visits to patients and helped to avert ED visits and hospital admissions.

## Digital Health — Driving Connected Care

Through NYGH's Digital Health Strategy, we are using digital technologies to provide the best possible health outcomes and experiences. Each service, program and quality improvement effort for our patients is supported, in some way, by digital technology and innovation.



**>1,500** patients enrolled in SeamlessMD patient monitoring and education app - Jan. 2022 - March 2023



**90%** of NYGH patients reported feeling more confident due to SeamlessMD



NYGH patients can **securely access their health information in minutes** through MyChart



**240** languages and dialects available 24/7 through the Voyce on-demand medical interpretation service



**217** primary care providers onboard with SCOPE up to March 2023



**1,130** calls in 2022-2023



**95%** of calls to Medical Imaging averted an ED visit in 2022-2023

## Moving Evidence-to-Practice (E2P)

Ontario's E2P initiative emerged as one answer to a problem that has long frustrated modern medicine. Physicians and other clinicians know something is wrong and have a fairly good idea what it is. What they need to know, then and there, is what is the absolute best way to help their patient? What is the most widely accepted best practice for use in this exact situation?

NYGH is co-leading E2P, along with the Centre for Effective Practice and the eHealth Centre of Excellence. E2P is designed to simplify access to quality primary and acute care. To make the information clinicians need available to them, precisely when and where they need it — at the point of care.

According to Dr. Phil Shin, NYGH's Chief Medical Information Officer, the vast amount of research, knowledge and data that exists in health care today makes it more important than ever to distill the best current thinking and standards, and make them easily available to clinicians.

"Translating clinical guidelines or quality standards into actual practice is something that the healthcare system has been trying to solve for a very long time," says Dr. Shin. "E2P shows real potential to do exactly that, in a way that can be scaled across the province, and then across the country."

The initiative was launched last year with an initial three-year focus on heart failure, diabetes, depression, and anxiety. The idea is to embed best practices, along with the digital tools needed to apply those practices, directly into clinicians' daily routines using the hospital's or clinic's electronic health record.

Duska Kennedy, NYGH's Interim Vice President, Strategy, Digital and Insights & Chief Digital

Officer and recipient of Digital Health Canada's Women Leaders in Digital Health Award for 2022, has been living and breathing E2P. "Through E2P, we're ensuring that whatever is the best time on the patient journey for clinicians to have information, is exactly when it arrives. There are no delays, they don't have to ask anyone, and they don't have to use Google. What they get is evidence-based practices that are absolutely the best regarded in the field, at that moment."

To date, nine hospitals, including North York General, are implementing E2P while another 30 hospitals have helped develop the program in different clinical areas.

For Kennedy, the more institutions that sign on, the better it will be for everyone.

**"In health care, many of our systems are not as connected to one another or to all the information that exists, as they could be. E2P creates more equitable care for patients. Whether you're from North Bay or Toronto, you're going to receive the same standards and highest quality of care."**



Photos, left to right  
Duska Kennedy,  
NYGH's Interim Vice President, Strategy, Digital and Insights &  
Chief Digital Officer

Dr. Phil Shin,  
NYGH's Chief Medical Information Officer & Medical Director  
of Critical Care

# Exceptional Learning and Innovation

Through exceptional learning opportunities and groundbreaking applied research, NYGH is shaping the health care of tomorrow.

We continue to be a top choice for medical, nursing and other students and have the highest number of Family Medicine Faculty of any University of Toronto site.

## TEACHING AND LEARNING AT NYGH (2022–2023)



**>1,500**  
learners educated



**44**  
partner academic institutions



**>425**  
NYGH physicians have faculty appointments at University of Toronto's Temerty Faculty of Medicine

### Simulation prepares health professions for the real world

NYGH's Simulation Program helps participants experience real-life scenarios. Not only is this a highly effective way for students and health professionals to hone their clinical skills, simulation helps them develop essential non-clinical capabilities such as communication and decision making.

Using virtual gamification, competitive games, and other strategies, the Simulation Program assists teams to build skills in a non-judgmental environment.

Patients are involved in the development of training programs, which helps keep learning grounded in people's authentic experiences.

Simulation-based training equipment has been supported in part by generous donors.



## CLINICAL TRIALS



9

New trials opened  
in 2022-2023



16

Recruiting trials



30

Ongoing trials

NYGH is at the forefront of community applied research — research that addresses real-life problems and leads to tangible improvements in people’s health and wellbeing.

NYGH patients are often the first to benefit from our Research and Innovation program. Discoveries and findings are translated into better practices and programs here at NYGH and then shared across the province and beyond, including with other countries.

## Changing lives through knowledge and innovation

The way Michael Wood sees it, his job is to smooth the way for researchers to do what they do best, allowing their creativity and innovation to spread into the world. Wood is NYGH’s Director of Research and Innovation.

“I came here to help build a program that would take some of NYGH’s initiatives

beyond the walls of the hospital. There was a sense that this was a place where really good things were being piloted and more people should know it. What we all realized is that we’d have to follow a more systematic way of packaging the work so that others can understand it and adapt it for their own purposes.”

The Office of Research and Innovation was created to bring people to NYGH who knew how to do research and disseminate it. The strategy is designed to achieve tangible benefits for patients and spread community-based innovation across Toronto and Ontario.

**As Wood explains: “We already stand out as a first-class community hospital. Now we’re showing the world that we also excel at research in a community setting — research that addresses the pressing needs, and solves the pressing problems of patients in our community.”**

Our approach is built around Research Chairs in carefully chosen areas, vital to the care provided in a community hospital.

The Chairs program is, in turn, made possible by donor funding. According to Seanna Millar, North York General Foundation’s President and CEO, “Our donors have been central to realizing the hospital's vision as a centre for applied research that improves patient experiences, safety, and outcomes. Philanthropy is changing care delivery right here in North York, with learnings that can transform care within the greater system.”



Michael Wood,  
NYGH's Director of Research & Innovation

## RESEARCH CHAIRS

### **Kaitie Dainty, PhD**

Research Chair in Patient-Centred Outcomes

### **Michelle Greiver, MD, CCFP FCFP**

Gordon F. Cheesbrough Research Chair in Family and Community Medicine

### **Monika Kastner, PhD**

Research Chair in Knowledge Translation and Implementation

### **Ervin Sejdić, PhD**

Research Chair in Artificial Intelligence for Health Outcomes

### **Patricia Trbovich, PhD**

Badeau Family Research Chair in Patient Safety and Quality Improvement

# Evaluating the Safety and Efficiency of a New Chemotherapy Compounding Technology

Dr. Patricia Trbovich — Badeau Family Research Chair in Patient Safety and Quality Improvement

Chemotherapy compounding is the process of creating personalized doses required by a specific patient. No two cancer patients share the same comorbidities, genetic code, daily habits, and health history. As a result, everyone needs their medication compounded to fit their unique requirements.

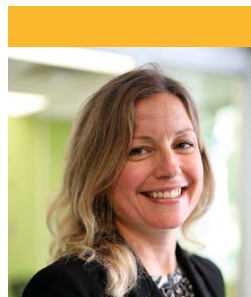
Traditionally, compounding has been done manually. That may not be the case for much longer, if Dr. Patricia Trbovich, the Badeau Family Research Chair in Patient Safety and Quality Improvement at NYGH, has her way. Dr. Trbovich is studying technology that automates aspects of the compounding process, to see if it reduces the potential for error. And it seems that it does.

**“The fact is chemotherapy compounding has always been a process with many checks and balances. But they are human checks and balances. And we know that humans make mistakes. They might misread a drug label, or a syringe measurement. Truth is, automation is often better than humans at doing very repetitive tasks in terms of efficiency, effectiveness, and safety.”**

When Dr. Trbovich and her team studied the automated system, called the Pyxis IV Prep (PIVP), they concluded that in comparison to manual compounding, the system improved safety through more frequent and rigorous checks, improved traceability, and enhanced error detection.

The Pyxis IV Prep (PIVP) system is now being used at NYGH and Dr. Trbovich is hoping it can be expanded for use in non-chemotherapy drug compounding. Her hope is that other hospitals also pick up on the idea.

“Automation has the potential to generate many positive changes across society, particularly in health care. Ongoing efforts to ensure that technology is designed to support humans are critical. This includes dealing with a very complex process, with specific aspects suitable to automation. Chemotherapy compounding is a good example of a task that can be supported by automation while simultaneously ensuring human involvement and oversight.”



**Patricia Trbovich, PhD**  
Badeau Family Research  
Chair in Patient Safety and  
Quality Improvement



# Diabetes Action Canada Knowledge Mobilization Program

Dr. Monika Kastner — Research Chair in Knowledge Translation and Implementation

There is a philosophical thought experiment: "If a tree falls in a forest and no one is around to hear it, does it make a sound?"

Dr. Monika Kastner might be tempted to adapt it in the following way: If a diabetes researcher uncovers something important but nobody ever hears about it, are any patients helped?

Dr. Kastner is the Research Chair in Knowledge Translation and Implementation at NYGH. Her job is to find ways of ensuring that when researchers uncover something important, people hear about it and use it. And in the process, she wants to teach researchers how to do that on their own.

"Researchers are trained to do the research, and that is hard, absorbing work," says Dr. Kastner. "There is really just so much work involved that knowledge mobilization, getting your results moved into the real world to have a positive impact, may not always be on their radar."

Julie Makarski, Manager of the Knowledge Translation & Implementation Research Program at NYGH, puts it this way: "Even though it may seem intuitive that what we uncover through our research will be used, that actually doesn't just happen organically or naturally. Obviously, sometimes word gets out, but for the most part, for any innovation to make a difference in the real world, you actually have to deliberately and strategically implement it so patients and the public can benefit. And there's a whole science behind that."

That science is what Dr. Kastner and Makarski specialize in, and they are using it in service of Diabetes Action Canada (DAC), a pan-Canadian organization that works with researchers, non-profit

groups, and governments to advance research projects that improve the outcomes and experiences of people living with diabetes.

As head of DAC's Knowledge Mobilization Program, Dr. Kastner's goal over the next few years is to make sure that when that tree falls in the forest, people hear it. This spring, she and Makarski launched new resources for DAC researchers, patient partners, trainees, and the community — a consultation service, educational videos and workshops on knowledge mobilization in plain language, and other resources and tools. The underlying claim, impossible to ignore, is that knowledge mobilization can decrease the time it takes to move research results into the real world from the average of 17 years to between one and five years. And for patients, that is a world of difference.

"Ultimately, the goal is to help improve the lives of people living with diabetes, whether it's to manage their diabetes, prevent complications, or to ensure that people are living well with the disease," says Dr. Kastner. "And the only way to do that is to get innovations into the hands of those who need them and will use them."



**Monika Kastner, PhD**  
Research Chair in  
Knowledge Translation  
and Implementation

# A Better Tomorrow

Advanced, people-centred infrastructure is essential to delivering the highest standard of care, and the best experiences for patients and health care teams.

Through partnerships with our communities, governments, and donors, NYGH has a long record of responding to community needs by creating healing spaces and expanding much-needed services. Last year was no different.

In 2022-2023, donors funded **renovations in our Charlotte & Lewis Steinberg Emergency**. The first is an Ambulatory Minor Procedures Area in our Emergency Department, a bright, comfortable and private space for patients and caregivers (June 2023 opening), and coming soon, a new mental health services unit which will enhance patients' safety and dignity.

Also last year, we installed new, **leading-edge MRI technology** in our *Gulshan & Pyarali G. Nanji Family Foundation Centre for Medical Imaging*, made possible by a lead gift from the Nanji family. We also installed a new donor-funded gamma camera that uses nuclear imaging technology to better assess the functioning of different areas of the body, such as the cardiovascular system.

Our Foundation also launched a campaign to create a **modern, integrated Birthing Centre** at the hospital — a leading practice service designed for all families and all communities. NYGH already has the most comprehensive maternal and newborn program at a community academic hospital in the province.

With our renewed birthing centre, our team will offer a new standard of experience, from pregnancy through to newborn care and beyond.



Dr. Ryan Margau,  
NYGH Chief and Medical Director, Medical Imaging



## Reactivation Care Centre (RCC)

In December 2022, through a substantial capital grant from the Ministry of Health, we opened the first 60 beds in our 120-bed Reactivation Care Centre — a fully renovated and beautiful facility at our 555 Finch Ave West site. The RCC’s team of nurses, nurse practitioners, physicians, social workers and other allied health professionals provides personalized restorative care to each patient.

Within months of opening, NYGH’s Alternate Level of Care days went down by 40 per cent. This means that more patients were able to leave hospital sooner and successfully transition to a community care setting, designed for their needs.

## Creating North York’s Campus of Care

Driven by a combination of aging facilities (our hospital was built 55 years ago) and a population served by NYGH that is older and growing faster than the Toronto average, NYGH is moving forward on the largest transformational redevelopment of our hospital in its history.



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**In 1969, our Emergency Department received 35,000 visits per year. Today, we see as many as 120,000 visits a year.**

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Rendering of New Patient Care Tower connected to New Long-Term Care Home

Between now and 2030, we will build a new acute care tower at our General site, adding 130 more inpatient beds. Our leading-edge **New Patient Care Tower** will house an expanded Emergency Department, a new surgical suite offering robot-assisted surgery, critical care and other high-demand services. The entire facility will be specifically designed for our paediatric and senior patients. For example, a unique model combining geriatrics, psychiatry and other specialties, will provide an advanced level of care for older adults with complex cognitive and mental health challenges.

The tower will offer 24/7 access to surgeries and other services, and walk-in mental health and addictions care. It will be fully integrated with long-term care and community services, including offering “hospital-at-home” care.

We are working with the Ontario Ministry of Health on approval to proceed to Stage 3 of the development process — the design phase.

Soon we will begin building our **leading practice long-term care (LTC)** home, steps from the hospital. Once open in 2027-2028, this new home will be among the largest in Ontario, if not Canada, bringing much-needed LTC beds to Toronto. It will offer residents as well as seniors in the community a range of wellness-focused programs and services.

According to Karyn Popovich, NYGH’s President & CEO, “Older adults will receive the highest standard of care in a home that they will want to live in. With the essential support of philanthropy and in partnership with government, we will offer 100 per cent private rooms and private bathrooms. Nothing is more important than each resident’s comfort and dignity.”

The home will be a special place. Despite its size, it will feel like home with small, intimate clusters of rooms, ample gathering spaces for families and activities, accessible green space and beautiful views. The home will be inclusive and support residents as their

needs change including on-site dementia care, behavioural support, specialized geriatrics, primary care and chronic disease management.

As the Vice President who is leading capital planning at NYGH, Rudy Dahdal sees NYGH's historic redevelopment as central to how the organization is reimagining the future of health care.

"Buildings and services should never stand alone," says Dahdal. "The best health care happens in a connected system that supports people to receive the right care, in the right place, throughout life. That is what our communities expect and it's what we are building for North York."

Our new LTC development and Patient Care Tower will be at the heart of a connected Campus of Care, designed for and with those living in our 18 North York neighbourhoods and people across Toronto and the GTA who come to us for care.

Dahdal adds, "When we launched our major capital projects, we had just under 600 LTC and acute care beds. When we open our new facilities, we will have almost 1200 beds."

All of NYGH sites will be connected to other services delivered by NYTHP partners including primary care, home care, community support services, mental health and addictions, LTC, and social care.

"The New Patient Care Tower and campus of care open up new possibilities for harnessing digital innovation to substantially improve safety, quality and equity of care," says Dr. Phil Shin, NYGH's Chief Medical Information Officer.

**"As a physician who has spent a career caring for patients with complex health needs, I'm excited about the opportunity to fully integrate patient health records throughout the care journey from the community to hospital to home. Our digitally-advanced New Patient Care Tower will act as an information hub, connecting and making sense of data about patients, so we can support everyone to receive the best care, faster."**

Reflecting on the momentous period, Seanna Millar, North York General Foundation's President and CEO, explains: "Our donors have been part of the backbone of North York General for the past 50-plus years. Community support is vital to realizing these new projects and philanthropy will help fuel this transformation and enable us to support the growing needs of our diverse communities."



## A Sustainable Future

When we think about the kind of future we want, NYGH is looking at the health of the planet, generations down the road. As a large community hospital and employer, we are committed to minimizing our environmental footprint.

NYGH's Environmental Sustainability Committee was created to drive grassroots efforts. As a Patient Experience Partner and member of the Environmental Sustainability Committee, Steve Wolinsky believes that collaborating with patients is key.

"During NYGH's Earth Day clean up, you wouldn't think of patients volunteering to help out. But you'd be surprised how many people were interested. There is a great reward in doing something positive for the environment. I'm a member of the local community and I'm part of the NYGH community, so I care a lot about our future. I bring a lifetime of experience that can help — as an Engineer with expertise in recycling and hazardous waste management."

## Surgery Program Takes Action to Keep Plastic Bags Out of Landfill

When the surgical team found the day surgery and endoscopy units were disposing of around 3,000 plastic garment bags every month — producing carbon emissions equivalent to driving a mid-sized car around the earth 2.5 times — they took action.

The trial, developed by frontline staff and guided by surgeon Dr. David Smith and other leaders, made an impact. Just six months after it launched, 52 per cent of scheduled surgery and endoscopy patients were bringing their own reusable bags, diverting some 1,500 plastic bags from the landfill every month.

According to Rudy Dahdal, "Our goal is to embed environmental sustainability in all aspects of healthcare delivery. We have a great opportunity to reduce our carbon footprint as we embark on major capital projects which will shape our future practices and care environments".

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4001 Leslie Street  
Toronto, ON M2K 1E1  
[nygh.on.ca](http://nygh.on.ca)

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