

ACCESS + INNOVATION REPORT
2013

THIS IS THE FUTURE OF HEALTHCARE



WOMEN'S COLLEGE HOSPITAL
Health care for women | REVOLUTIONIZED

A MESSAGE FROM MARILYN EMERY AND JANE PEPINO



Marilyn Emery
President and CEO
Women's College Hospital

Women's College Hospital (WCH) has earned its distinguished reputation through its pioneering spirit of innovation, its commitment to the highest quality of patient care and the hard work of its dedicated physicians, staff and volunteers.

WCH's legacy is grounded in the work of remarkable women who had a single mission in mind: to be at the forefront of groundbreaking innovations in the health of women. And it is this legacy that has earned the hospital a distinctive place in Canadian healthcare and has led it to symbolize women's determination and devotion to equity and community.

Today, we are building on that admirable heritage by sustaining our foundational commitment to advocating for the health of women, by our ongoing dedication to innovation in healthcare for all, and through our focus on ensuring marginalized and hard-to-reach populations have access to the care they need.

To guide our continuing achievements, we have developed a strategic plan that is enabling us to revolutionize healthcare: to deliver unique programs for patients with chronic conditions, to improve the health of women from all backgrounds, and to develop much-needed health system solutions.

The move to our exceptional new building in May of this year has strengthened our capacity to pursue this plan and renewed our resolve to achieve our goals. It's a whole new kind of hospital: one designed around innovative models of care, where treatment, surgery, research and education are fully integrated. It's a hospital designed to keep people out of hospital.

From this new, state-of-the-art home, we are developing new programs that deliver ambulatory care solutions here at the hospital and beyond our walls. We are improving care at transition points in the healthcare system – points where patients are most vulnerable to falling through cracks. And we are creating new treatment strategies in response to the needs of the most complex patients.

In the past year, our many accomplishments have been grounded in our continuing focus on building partnerships with other healthcare providers and government organizations. These partnerships are at the core of everything we do and are central to our success in delivering health system solutions and attracting new funding to improve access and innovation across the board.

As a teaching hospital, we are training the next generation of healthcare professionals to work in integrated, ambulatory settings – the kind of settings that are most relevant to their future practice. Meanwhile, our scientists and researchers at Women's College Research Institute are undertaking vital research on the unique health needs of women. They are implementing new approaches that reduce inpatient hospitalization and foster prevention and disease management. In short, we're tackling the most pressing issues facing our health system today.

This is Women's College Hospital's leading-edge approach to emerging challenges.

This is the future of healthcare.

Our Strategy

Our strategic plan has been developed to bring renewed clarity to the work WCH does and to highlight why this work is so vital. This plan is guided by our vision, mission and values and the fact that the highest quality patient care is central to all that we do. The strategy revolves around our three main areas of focus and the innovation streams that enable us to develop, evaluate and deliver new models of care that help keep people out of hospital.

Who we are – Our vision & mission

Canada's leading academic, ambulatory hospital and a world leader in women's health. We advance and advocate for the health of women and improve healthcare options for all by developing, researching, teaching and delivering new treatments and models of integrated care.

What we do – Our 3 areas of focus:

Health for Women | **Health System Solutions** | **Complex Chronic Conditions**

How we do it – Our 6 Innovation Streams that guide us in delivering much needed health system solutions

- By driving systemic solutions in healthcare for women
- By preventing acute care admission and readmission
- By enabling superior coordinated care
- By transforming inpatient care models to outpatient care
- By enabling system integration and care transitions
- By building the virtual hospital

Why we do it – Our impact on the health system

- To deliver superior, cost-effective healthcare solutions that are adopted by other organizations.
- To improve care transitions so we can reduce avoidable hospital readmissions and emergency room visits.
- To offer equitable, personalized and accessible care for patients from all backgrounds and cultures.
- To prepare healthcare professionals to work in integrated, ambulatory settings that reflect the future of the health system.

Our Corporate Directives

There are three corporate directives in our Strategic Plan and these guide our decision-making and action planning. These directives also form the foundation of our various program and departmental objectives. The detailed goals under each of these directives are:

Drive the Innovation Agenda

Lead innovative, transferable health system solutions and new models of care that improve patient experience and outcomes by integrating clinical practice, education and research.

Build on quality and safety best practice systems that strengthen our innovations and improve patient experience and outcomes.

Leverage partnerships to generate tangible and sustainable health system solutions.

Strengthen our Capacity to Lead from our Mandate

Attract and develop engaged, innovative leaders who will advance our mandate.

Continue to strengthen our position as a critical system partner in integrated ambulatory care and health for women in Ontario.

Advance application of leading healthcare governance practices.

Grow our Academic Impact

Conduct and disseminate high-impact research in our focus areas, that advances practice, policy, and health outcomes in local, national and international contexts.

Lead sustainable capacity for knowledge creation and the translation and application of research in clinical practice.

Optimize the academic experience to attract and educate high-calibre health professionals and scientists.

WCH Strategic Mosaic

A synopsis of the key elements of our strategy.

OUR 3 CORPORATE DIRECTIVES

Drive the Innovation Agenda | Strengthen Capacity to Lead from our Mandate | Grow our Academic Impact

WHO WE ARE

Our Vision & Mission

Canada's leading academic, ambulatory hospital and a world leader in women's health. We advance and advocate for the health of women and improve healthcare options for all by developing, researching, teaching and delivering new treatments and models of integrated care.

WHAT WE DO

Our 3 Areas of Focus



HOW WE DO IT

Our 6 Innovation Streams

- Driving systemic solutions in healthcare for women
- Preventing acute care admission and readmission
- Enabling superior coordinated care
- Transforming inpatient care models to outpatient care
- Enabling system integration and care transitions
- Building the virtual hospital

WHY WE DO IT

Our Impact on the Health System

- To deliver cost-effective healthcare solutions
- To improve the quality of care transitions
- To offer equitable and accessible care
- To train the healthcare professionals of the future

OUR VALUES

Equity ■ Safety ■ Innovation ■ Relationships ■ Leadership ■ Collaboration

Putting our Strategy into Action

Our programs and clinics that exemplify our innovative models of care and demonstrate our commitment to improving access and equity.

HEALTH FOR WOMEN

- ▶ HIV & Women
Gynecology Program
Breast Cancer Program
- ▶ Reproductive Life Stages
- ▶ Bay Centre for Birth Control & Special Treatment Clinic
- ▶ SA/DVCC – Sexual Assault/Domestic Violence Care Centre
- ▶ CARES – Cancer Awareness: Ready for Education and Screening
- ▶ Toronto Birthing Centre
- ▶ WRAP – Women Recovering from Abuse Program
Advanced Gynecology Procedures
Women’s Mental Health Program

HEALTH SYSTEM SOLUTIONS

- ▶ WIHV – WCH Institute for Health System Solutions and Virtual Care
AACU – Acute Ambulatory Care Unit
- ▶ Medical Virtual Ward
- ▶ Mental Health Virtual Ward
- ▶ Shifting inpatient to Ambulatory Surgery
- ▶ Redesigned breast reconstruction process
- ▶ SCOPE – Seamless Care Optimizing the Patient Experience
- ▶ Family Practice Health Centre
- ▶ CACE – Centre for Ambulatory Care Education
- ▶ Crossroads Refugee Health Mohs Centre

COMPLEX CHRONIC CONDITIONS

- ▶ Integrated Diabetes Care
- ▶ Centre for Headache
- ▶ Brief Psychotherapy Centre
- ▶ Trauma Therapy Program
- ▶ Mental Health in Medicine
- ▶ Thyroid Program
- ▶ Respiriology Program
- ▶ Integrated Cardiac Care
- ▶ CCC – Complex Care Clinic
- ▶ ACTT – After Cancer Treatment Transition Clinic
- ▶ WISE – Wellness for Independent Seniors
- ▶ Musculoskeletal Program
- ▶ Dermatology Program
- ▶ Environmental Health Clinic
- ▶ Gastroenterology Services

▶ Indicates programs that include a focus on marginalized and underserved populations

WCH Partnership Highlights 2012-2013

At Women's College Hospital our partnerships are at the core of everything we do and are central to our success in delivering health system solutions. Below are listed just some of our partnership highlights from the past year that have allowed us to realize our strategic accomplishments and to attract new funding to improve access and innovation across the board.

PROGRAM	PARTNERSHIPS
Health Links	Toronto Central LHIN Mid-Toronto West Health Link Partners
Bridges SCOPE (Seamless Care Optimizing the Patient Experience)	Toronto CCAC University Health Network (UHN) Departments of Family and Community Medicine Solo Family Practice Doctors
Bridges H-SOAP (Hospital-Based Services for Opioid and Alcohol-Addicted Patients)	St. Michael's Hospital St. Joseph's Health Centre Toronto Departments of Family and Community Medicine
Toronto Birthing Centre	Seventh Generation Midwives Toronto
Ambulatory Clinic Optimization Project	Department of Mechanical and Industrial Engineering at U of T
Wellspring Cancer Support Network	Wellspring
Respirology Program	CAMH Nicotine Replacement Program; Ontario Lung Association
Chronic Pain Clinic	Mount Sinai Hospital; St. Michael's Hospital
Integrated Cardiac Care	Joint Department of Medical Imaging (UHN, Mount Sinai)
Mature Women's Health	Mount Sinai Hospital
Thyroid Program	Mount Sinai Hospital
Atrial Fibrillation Clinic	University Health Network (UHN)
Nephrology Clinic	University Health Network (UHN)
Transitional Care Diabetes Clinic	University Health Network (UHN)
CARES (Cancer Awareness: Ready for Education and Screening)	St. Michael's Hospital and community partners (e.g. Adelaide Resource Centre; Women's Residence; 416 Community Support for Women; Christie Refugee Centre; Thorncliffe Neighbourhood Office; South Riverdale CHC; Sherbourne Health Centre; Regent Park; Toronto Public Health; Access Alliance)
Crossroads Refugee Clinic	Refugee Health Network
Trauma Therapy Program – Women's Mental Health	SpeakART-AGO; Jean Tweed Centre
Young Women's Gynecology Clinic	Hospital for Sick Children and numerous referral site partners
Primary Care Services	YWCA Elm Centre; Sojourn House
Language Service Accessibility	Mount Sinai, UHN, Hospital for Sick Children, CAMH
Women's Exchange	Transitional partnership with ECHO
Partnering for Transformational Leadership	Saint Elizabeth Health Care Toronto Public Health



NEW CHAIR ENABLES INNOVATIVE RESEARCH IN FAMILY MEDICINE

Dr. Jim Ruderman, chief, department of family and community medicine at WCH,
with Dr. Onil Bhattacharyya, Frigon Blau Chair in Family Medicine Research

STRATEGIC PLAN AREA OF FOCUS: HEALTH SYSTEM SOLUTIONS

Family medicine is the foundation of the healthcare system: for most patients, it's their key access point for care, and their relationship with their family physician is one of the most important links affecting their health. It is also a focal point where health system solutions can be most effective. That's why Women's College Hospital's (WCH) first endowed chair in family medicine research focuses on quality and innovation in this crucial area.

The Frigon Blau Chair in Family Medicine Research was established as a partnership between the Department of Family and Community Medicine at WCH and the University of Toronto (U of T).

The chair was made possible by a generous endowment from Louise Fast, a longtime donor and supporter of the WCH Department of Family and Community Medicine. It is named for two family physicians: Fast's grandfather Dr. Rosaire Frigon, who completed his medical degree in 1902 and practised medicine in Quebec for over 50 years; and Fast's own family physician Dr. Nadia Blau, who joined WCH family practice in 1968 and practised here for more than 40 years, retiring in 2010.

The inaugural chair holder is Dr. Onil Bhattacharyya. A highly respected clinician scientist, Dr. Bhattacharyya is an associate professor in the Faculty of Medicine at U of T. He holds a degree in family medicine from the University of Montreal and a PhD in health services research from U of T. As a post-doctoral fellow studying social enterprise at the Harvard School of Public Health, he won first prize in the Harvard Business School business plan competition. He is co-lead of Building Bridges to Integrate Care, an incubator testing nine new models to integrate care for patients with multiple chronic conditions. Three of those models are based at Women's College Hospital.

"The chair is meant to focus on quality, innovation, evidence-based practice, and the ability to bring those practices to everyone," says Dr. Jim Ruderman, chief, department of family and community medicine at WCH. "I'm especially pleased that

we were able to attract Dr. Bhattacharyya, because these are all areas that he's already known for. This chair will enable him to do much more work in these important areas."

Dr. Bhattacharyya is acutely aware of the healthcare challenges looming on the horizon, with the population aging and an increasing number of people living with multiple chronic conditions.

"As a clinician scientist, I'm interested in developing new models of care and better defining quality of care through clinical practice guidelines," Dr. Bhattacharyya says. "As Frigon Blau Chair, my program of research will explore these themes using three approaches: co-leading an incubator to select, refine and evaluate models of care for complex patients, studying innovative models from low- and middle-income countries, and producing guidelines that are more likely to improve care."

The endowed chair enables WCH to broaden its commitment to health system solutions and complex chronic conditions at the primary care level. It contributes to academic excellence at WCH, and will help build family Medicine research at the hospital beyond the chair itself.

"When you create that focus, that critical mass of research, then it starts growing much more organically because people want to come here, they want to be part of it, they want to work with you," says Dr. Ruderman of the academic growth in family medicine at WCH. "It becomes a virtuous circle where things spin in a very positive way."

The Frigon Blau Chair in Family Medicine Research is one more avenue through which WCH is pursuing new approaches to some of the most pressing issues in healthcare. It's this approach that is attracting some of today's most groundbreaking researchers to WCH.

"Women's College Hospital's focus on the future of medicine is very inspiring," says Dr. Bhattacharyya. "I welcome the opportunity to build a more collaborative system with my colleagues here."



A NEW INSTITUTE FOR INNOVATIVE MODELS OF CARE

Dr. Danielle Martin, vice-president of medical affairs and health system solutions at WCH, and Dr. Sacha Bhatia, director of WIHV

STRATEGIC PLAN AREA OF FOCUS: HEALTH SYSTEM SOLUTIONS

One of the clearest expressions of Women's College Hospital's (WCH) strategic plan is the creation of the WCH Institute for Health Systems Solutions and Virtual Care – WIHV (pronounced weave).

Launched in June 2013, WIHV is focused on developing health system solutions, and will act as an innovation laboratory to design and test new ways of delivering higher quality healthcare more efficiently. WIHV is designed to advance new programs and policy approaches in the world of ambulatory care – and then scale them up across Canada and beyond.

“WIHV is a development platform for Women's College Hospital, the Ontario healthcare system and beyond to address system challenges related to quality, value and equity,” says Dr. Sacha Bhatia, a cardiologist and Harvard research fellow, who is joining WCH as the inaugural director of WIHV.

WIHV's three project streams – quality, value and equity – reflect WCH's overall mission and approach to care. The quality stream will create solutions to address some of the biggest emerging issues in healthcare, such as avoidable emergency department visits, hospital readmissions, and improved care transitions across the system.

“Transitions of care represent a set of cracks that people can fall through,” says Dr. Danielle Martin, vice-president, medical affairs and health system solutions at WCH, who will provide leadership to WIHV along with Dr. Bhatia. “It's so important to evaluate projects that aim to improve those outcomes on a system level.”

WIHV's value stream will focus on projects that ensure that when healthcare dollars are spent, they're being spent on interventions that are proven to enhance health. WIHV will identify ways to reduce waste and redirect resources to the most helpful interventions.

An equity lens will be applied to all of WIHV's work, and local and global health equity issues will be addressed through specific project work.

“For each project brought forth, we will ask ourselves what the considerations are for marginalized and vulnerable populations,” Dr. Martin explains.

Examples of current WCH programs that may be scaled up through WIHV following evaluation include:

- Medical Virtual Ward, in partnership with Toronto Community Care Access Centre (CCAC), St. Michael's Hospital, University Health Network (UHN) and Sunnybrook Health Sciences Centre
- Mental Health Virtual Ward, in partnership with Toronto CCAC and the Centre for Addiction and Mental Health (CAMH)
- Bridges SCOPE project (Seamless Care Optimizing the Patient Experience), in partnership with UHN and CCAC
- Post-Surgical Follow-up Mobile Application, in partnership with QoC Health Inc.

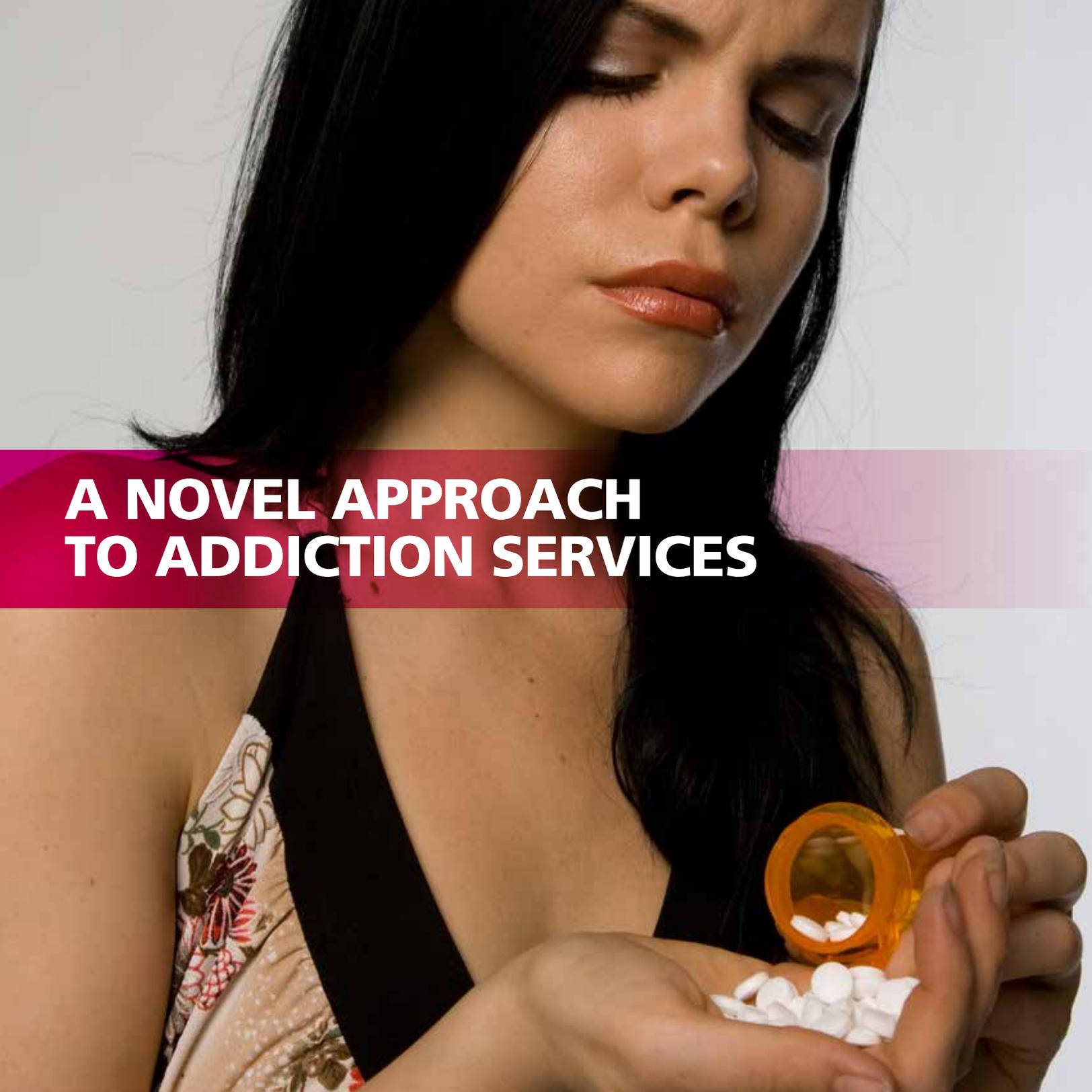
Strong and diverse partnerships will be the key to ensuring that the solutions developed and evaluated at WIHV do not just benefit patients at WCH, but are applicable across the healthcare system.

“Our partnerships in the community, with other hospital organizations, with primary care, with government, with policy-makers, with the university – those partnerships are what will allow us to disseminate our learning and share the successful projects so they can be implemented system-wide,” says Dr. Martin.

While individual patients obviously benefit from innovative healthcare solutions, the goal of WIHV is to look at the big picture, approaching problems and discovering solutions at the system level.

“We want to help fix the big problems in the system,” Dr. Martin says. “We're interested in applied, scalable, policy-relevant projects that hit the most pressing challenges of the day for policy-makers and healthcare providers.”

For more information on WIHV go to www.wchospital.ca/WIHV

A close-up photograph of a woman with long, dark hair. Her eyes are closed, and she has a somber expression. She is holding a small, orange plastic pill bottle that is tipped over, with white pills spilling out into her palm. The background is a plain, light color. A semi-transparent pink banner is overlaid across the middle of the image, containing white text.

A NOVEL APPROACH TO ADDICTION SERVICES

STRATEGIC PLAN AREA OF FOCUS: COMPLEX CHRONIC CONDITIONS

One of the challenges in meeting the needs of patients with substance use problems is that addiction treatment has traditionally been provided outside of the hospital system. However, people who access these services often have health issues, and are at high risk of using emergency departments and being admitted to hospitals.

“There’s a very high rate of morbidity and healthcare utilization,” says Dr. Meldon Kahan, medical director of the Substance Use Service at Women’s College Hospital (WCH).

That’s one of the reasons why WCH’s Substance Use Service does things differently. Not only is it one of the few hospital-based addiction programs in Ontario, but as a joint program of the departments of internal medicine and psychiatry, it can meet a broader scope of patient needs.

“We offer not only more comprehensive treatment, but also more accessible and flexible treatment compared to the traditional,” says Dr. Kahan. “The idea is that by being right in the hub of where patients with substance use problems are, we can see them quickly and we can offer both medical care and mental health counselling interventions.”

Compared to programs in more traditional locations, the WCH service may also be more acceptable to patients, particularly women, because of its location in a general care ambulatory facility. The Substance Use Service is housed within WCH’s Complex Care Clinic, which provides a very nonthreatening, non-stigmatizing environment for treatment and is staffed by specialists who understand the complexity of treating these conditions in a sensitive, compassionate manner.

The service sees a wide variety of addictions, referred from a wide variety of medical programs, agencies, family doctors and specialists both at WCH and beyond its walls. Some of the WCH programs that refer patients to the

service include the Virtual Ward, the Complex Care Clinic, and Bridges SCOPE (Seamless Care Optimizing the Patient Experience).

The most common problems treated by the service are alcohol dependence, opiate dependence and smoking. The WCH Substance Use Service is uniquely positioned to deal with not only addiction, but also with medical and psychiatric issues that may also be present. Typical referrals include chronic pain patients whose family doctors have prescribed opiates and are now concerned that the patients may be addicted, or older patients who are being treated with benzodiazepines that may be impairing their function.

“The program has the potential to offer something that’s unique in our system: a hospital-based, flexible addiction program that doesn’t put up barriers to patients, where patients can be seen quickly and offered combined medical treatment as well as counselling,” says Dr. Kahan.

“That is something that’s simply very different than what’s currently available for patients, and we think it will make a real difference in terms of outcomes: patients will be retained in treatment, they’ll use a lot less addictive substances, and their mood and their functions will improve. And in keeping with the mission of Women’s College Hospital, it will keep them out of emergency departments and hospitals.”

The program is currently being evaluated in a Bridges trial to explore how this innovative approach to treatment can lead to better outcomes.

“This is a unique health system solution for a very major problem,” says Dr. Kahan. “Addiction is a huge reason for morbidity and healthcare utilization.”



**A PARTNERSHIP CREATES NEW
OPTIONS FOR BIRTHING MOTHERS**

STRATEGIC PLAN AREA OF FOCUS: HEALTH FOR WOMEN

When the Toronto Birthing Centre opens later in 2013, women in the Toronto area will have another important option in their choices for giving birth. In addition to hospital birth or home birth attended by a midwife, women with low-risk pregnancies under the care of a midwife will be able to deliver at the new birthing centre. It will be a midwife-led facility where women who would prefer not to give birth at home can still choose to receive out-of-hospital, community-based care.

Women's College Hospital (WCH) has partnered with Seventh Generation Midwives Toronto (SGMT) to create the Toronto Birthing Centre which will focus on improving access to care for frequently underserved groups, including Aboriginal women, immigrant women, inner city women, women who identify as LGBTQ, refugees, teens and the noninsured. The centre will be open to all women under the care of a registered midwife, and will be located in a free-standing facility, in a high-needs neighbourhood, in the downtown area.

"Our experience has been that when you make care accessible to the most vulnerable, you're actually making it more accessible to everyone," says Cherylee Bourgeois, general registrant Aboriginal midwife with SGMT, a Toronto-based midwifery practice with a focus on Aboriginal women. "That's the same philosophy that we've tried to carry over in setting up the birth centre – looking at our systems and trying to create many points of access to the birth centre, making it as open as possible to reaching those communities."

A birthing centre provides an opportunity to move birthing care into an ambulatory setting. There will be different supports in the birthing centre than a woman may have access to in a home birth, and midwife-assisted out-of-hospital birth is expected to be a cost-effective alternative to hospital birth. This partnership renews WCH's association with birthing within the context of ambulatory care, and fits WCH's strategic plan goals of providing health system solutions, and identifying and filling care gaps in the health for women.

"Meeting unmet needs for women is really the focus," says Heather McPherson, vice-president, patient care and ambulatory

innovation at WCH. "We know that with many of the populations that we're targeting with the birthing centre there's a gap in services related to prenatal care and deliveries. Having an option that's not hospital-based would be very good for them and very good for the health system."

The Toronto location is one of only two birthing centres opening in Ontario with the support of the Ministry of Health and Long-Term Care. The second centre will be located in Ottawa.

"What's really exciting about this is that the Ministry of Health created a whole new designation for these birthing centres. They are going to be independent health facilities," says McPherson. "They've created a whole new structure and standards for birthing centres."

WCH will be providing institutional support and ancillary services for the Toronto Birthing Centre, handling elements such as human resources, security and infection control. SGMT patients also have access to prenatal classes offered at WCH, and as the partnership evolves, the hospital will also be a resource for referring midwifery patients for specialist care at WCH, such as mental health and diabetes management.

Another objective set for this centre is to be an education facility where learners from multiple health disciplines will be trained in low-risk birthing. This is another important goal that WCH fulfils as part of its role as an academic hospital.

WCH's partnership with SGMT and the Toronto Birthing Centre takes the hospital's institutional expertise in academic, ambulatory care beyond its walls and into the community. McPherson notes that the hospital's strategy of supporting healthcare for women is not always about providing services onsite at WCH.

"It's about the bigger picture of gaps in care for women, and helping to facilitate that," she says. "In this case, that means bringing administrative and infrastructure knowledge to the table and in so doing, improving patient care."

A young woman with short, dark brown hair and bangs is smiling warmly at the camera. She is wearing a teal-colored zip-up hoodie over a red long-sleeved shirt. The background is a blurred outdoor setting with a white railing and some greenery. A dark purple banner is overlaid at the bottom of the image, containing white text.

**BUILDING AN AMBULATORY
GYNECOLOGY PROGRAM
FROM THE GROUND UP**

STRATEGIC PLAN AREA OF FOCUS: HEALTH FOR WOMEN

Over the past 18 months, Women's College Hospital (WCH) has re-imagined and rebuilt its Gynecology Program almost from scratch. The result is an innovative and modern program that responds to women's health needs by bridging system gaps, building on strengths and forging collaborations with other areas of expertise within WCH.

One health system solution offered by the new Gynecology Program is the Young Women's Gynecology Clinic, the only clinic in Canada that focuses on the specific needs of women aged 17 to 25.

"It's a group of young women with unique healthcare characteristics that need to be addressed," says Dr. Lisa Allen, gynecology site chief at WCH.

The clinic provides specialized care and counselling for gynecological issues within this age group, in a safe, welcoming environment with age-appropriate handouts, information and atmosphere. The clinic also bridges the transition from pediatric and adolescent gynecology to adult care – a time when patients can fall through cracks in the system.

"Some of these patients have quite complex care. One of the main things we wanted to address is that they don't lose continuity of care when they transition to adult care," says clinic director Dr. Yolanda Kirkham, a gynecologist with subspecialty training in pediatric and adolescent gynecology. "For example, when a patient is too old to continue being treated at Sick Kids Hospital, they can now transition to the WCH Young Women's Gynecology Clinic, seamlessly maintaining specialist care in an appropriate setting."

Over the clinic's first year in operation, it has received excellent patient feedback. In an anonymous comment book patients expressed how they felt listened-to and well-informed, and that they had a positive experience in a safe environment.

The Gynecology Program at WCH specifically addresses areas of women's health that are best housed in an ambulatory environment. The Ambulatory Procedures Program is designed to perform procedures under sedation, rather than general anesthetic, so recovery is easier and women can return to their activities faster. Two key procedures offered by the program are global endometrial ablation and hysteroscopic tubal occlusion.

Global endometrial ablation is an effective treatment for abnormal uterine bleeding. But unlike an alternative procedure, it doesn't

require general anesthetic, and recent Canadian guidelines recommend it. Hysteroscopic tubal occlusion is a permanent method of contraception that provides an alternative to traditional tubal ligation. Instead of performing laparoscopic surgery through the abdomen, requiring general anesthetic, hysteroscopic tubal occlusion uses a scope inserted into the uterus to place small coils into the fallopian tubes – with no surgical incisions at all.

However, neither procedure is widely offered in Toronto acute care hospitals. Those hospitals will now be able to refer patients to WCH to access these treatments.

"We'll be a resource for the city in an area that no one else is taking on," says Dr. Allen, adding that WCH will also serve as a teaching resource. "We're going to have residents from the department of obstetrics and gynecology coming to Women's College Hospital to learn how to do these procedures so that we'll also be disseminating the knowledge and be able to expand the number of providers who will be able to do this for women in the future."

One of the other goals of the new Gynecology Program was to identify other areas of strength within WCH, and collaborate with those leading health experts to provide unique approaches to conditions affecting women's health.

Examples of these collaborations include the Vulvar Dermatology Clinic, which unites gynecology and dermatology; the Premature Ovarian Insufficiency Clinic, a joint program of gynecology and endocrinology that cares for women with a chromosomal abnormality called Turner Syndrome; and the Polycystic Ovary Syndrome Clinic that also joins gynecology with endocrinology.

"Those are a few good examples of how we tried to look at the strength around us and tried to position ourselves in working with other departments that have strong areas of need," Dr. Allen says.

The Gynecology Program also continues its vital work in urogynecology, and in cancer prevention through its colposcopy clinic that investigates and treats early signs of cervical cancer, and its work with women at high risk of ovarian cancer.

Now that these clinical programs are underway in WCH's new state-of-the-art building, Dr. Allen is looking ahead to her next objectives.

"Our next phase, and what we're really invested in now, is looking at the research and teaching we can do in these areas."

PUBLIC AWARENESS AND EDUCATION CAMPAIGN

A public awareness and education campaign was executed to build awareness amongst the public, stakeholders and health sector partners for the hospital's strategic plan. The campaign focuses on the three main pillars of the strategy – health for women, complex chronic conditions, health system solutions – by highlighting some of the programs within these pillars.

An architectural rendering of the Women's College Hospital building at dusk. The building features a prominent glass facade with a large, illuminated sign that reads "WOMEN'S COLLEGE HOSPITAL". A central glass-enclosed structure is highlighted with a red glow. The scene includes a street with cars and pedestrians, and a tall skyscraper in the background.

WOMEN'S COLLEGE HOSPITAL

**A HOSPITAL DESIGNED
TO KEEP PEOPLE
OUT OF HOSPITAL.**

WOMEN'S

The new Women's College Hospital that will open in 2015.

At Women's College Hospital we don't have an emergency room, we don't have a maternity ward, we don't even have patient beds. But we do have some of the world's leading health professionals, we deliver the most innovative healthcare programs and we perform vital, complex surgeries. And we do all this without requiring patient beds, because we know you'd rather sleep at home.

This is the future of healthcare.

Discover more at womenscollegehospital.ca





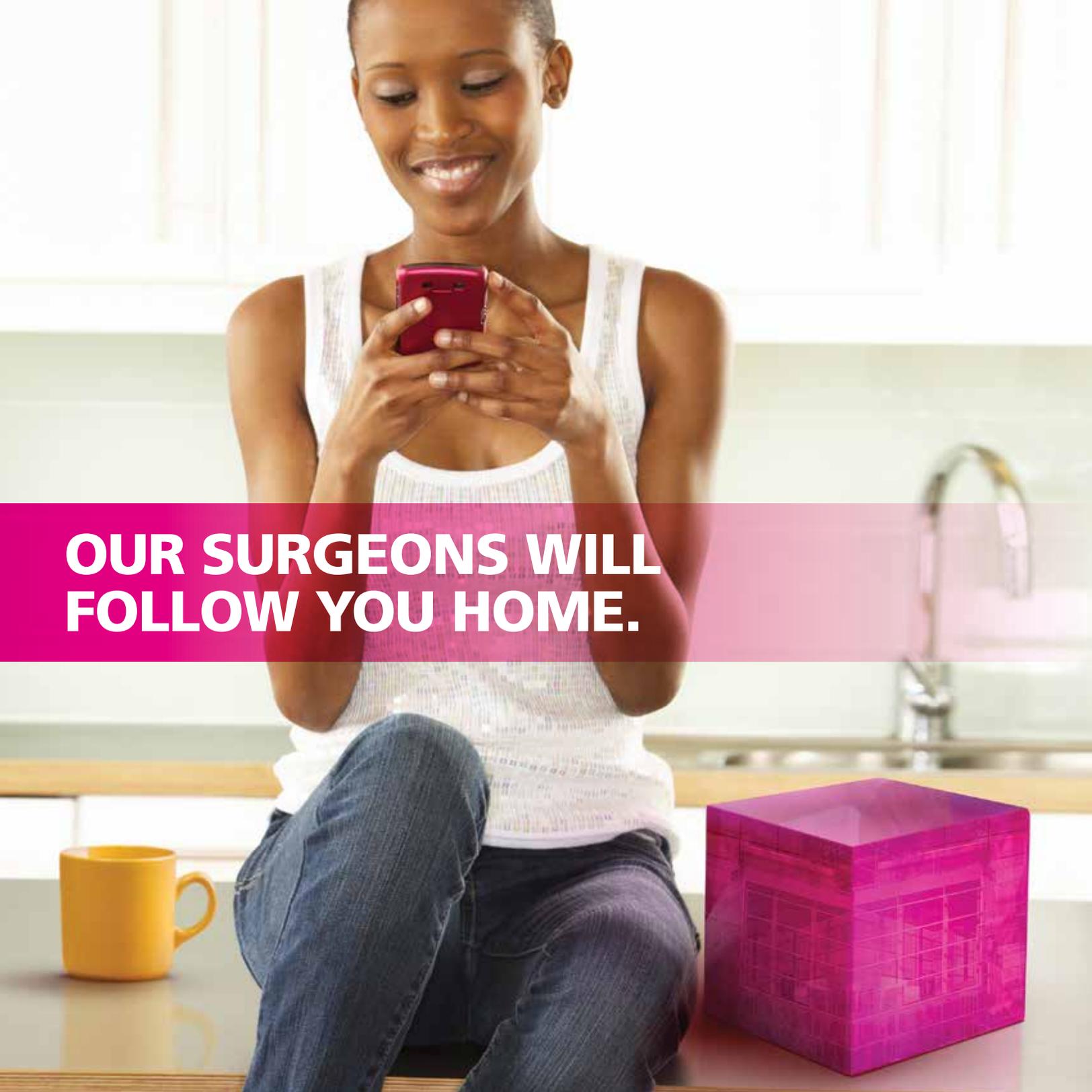
**NOW WE CAN DETECT
SOME CANCERS BEFORE
THEY EVEN EXIST.**

Family history and genetics increase the risk of cancer. So when our Research Institute discovered a genetic mutation that causes ovarian and breast cancer, it meant we could save thousands of lives. That's why today patients worldwide get genetic testing and can then have preventive treatments before their cancer even starts.

This is the future of healthcare.

Discover more at womenscollegehospital.ca





**OUR SURGEONS WILL
FOLLOW YOU HOME.**

Improving post-surgery care means lowering risk of infection, reducing a patient's anxiety during recovery and preventing avoidable complications. That's why our surgeons have been testing a unique mobile app that allows them to monitor their patient's recovery when the patient is back home. The patient is happier and so are our surgeons.

This is the future of healthcare.

Discover more at [womenscollegehospital.ca](https://www.womenscollegehospital.ca)





**EXPERT HEALTHCARE
IN THE COMFORT
OF YOUR OWN HOME.**

At least one in 12 patients discharged from hospital is readmitted within 30 days. That's why we developed our various virtual care programs. They include the best features of hospital care – fast access to health teams, personalized follow-up treatments and highly coordinated healthcare – all while the patients stay in the comfort of their own homes.

This is the future of healthcare.

Discover more at [womenscollegehospital.ca](https://www.womenscollegehospital.ca)





**A ONE-STOP SHOP
FOR TREATING
CHRONIC CONDITIONS.**

Increasingly, Canadian adults are living with two or more chronic illnesses, with a severe impact on their quality of life. So we developed a specialized program to deal with the complex needs of these patients. We coordinate all their treatments, medications and appointments and we help reduce their need for emergency room visits and hospital admissions. It's about making the most complex care a little simpler to manage.

This is the future of healthcare.

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A photograph of a doctor and a nurse in a clinical setting. The doctor, an older woman with glasses, is looking at an X-ray held by the nurse. The nurse is a younger woman with a stethoscope around her neck. The scene is brightly lit, and a desk with a keyboard and a purple cube is visible in the foreground.

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TOMORROW'S HEALTH
PROBLEMS BY CHANGING
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