

TAHSN 2024 Climate & Sustainability Report

Sustainability Balanced Scorecard Results



TAHSN

Toronto Academic
Health Science Network



UNIVERSITY OF
TORONTO



COLLABORATIVE CENTRE FOR
Climate, Health +
Sustainable Care

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Executive Summary

This document reports on climate and sustainability initiatives and ambition across the Toronto Academic Health Science Network (TAHSN), which is being collated and monitored through the TAHSN Sustainability Balanced Scorecard.

Key accomplishments across TAHSN

Across TAHSN, organizations are prioritizing sustainability by embedding it within their strategic plans, leadership, and governance structures. Almost all of the organizations participating in this scorecard have established cross-functional teams – often called sustainability committees – to prioritize and lead organization-wide sustainability efforts. Sustainability priorities and initiatives vary across the network and are detailed in this report. Some are focused on improving the appropriateness and value of patient care and reducing clinical waste, while others are leading in reducing GHG emissions. This report spotlights organizations and initiatives with innovative and leading practices across the network.

Key opportunities moving forward

There is increasing attention to the need to develop key performance indicators (KPIs) for this vital work and embed sustainability within formal corporate performance reporting to senior leadership and boards to enable the prioritization and resourcing of sustainability teams and projects to drive further impact. In clinical care, there are opportunities to further improve stewardship of medications, reduce medication waste, and reduce the use of high-carbon inhalers. To drive further reductions in GHGs and waste, there is an opportunity to improve reporting on monitoring and KPIs and formally allocate resources to support reduction initiatives. TAHSN could further its commitment to sustainable procurement by developing statements and policies that reflect this commitment, embedding this as a priority in senior leadership portfolios, and collaboratively pursuing sustainable procurement opportunities. To improve preparedness for extreme and chronic climate risks – as well as compounding – organizations could apply a climate-specific lens to their risk assessments and preparedness plans and procedures.

Through collaboration across TAHSN, we can share learnings and leading practices, drive ambition and innovation for sustainability and climate action, and ultimately achieve greater collective impact for the health of our communities.

Introduction

Over the past two years, the TAHSN Sustainable Health System Community of Practice has been developing a Sustainability Balanced Scorecard, led by the Collaborative Centre for Climate, Health & Sustainable Care at the University of Toronto, to promote and monitor sustainability performance across TAHSN organizations by:

- Establishing common sustainability objectives and indicators
- Enabling TAHSN organizations to assess and celebrate annual improvements
- Complementing and supporting existing TAHSN performance monitoring
- Sharing progress and good practices among the network to encourage ambition

TAHSN Sustainability Balanced Scorecard

In 2023, V1 of the scorecard was developed through a process of literature review, documentary scans, and consultation led by a working group. TAHSN organizations were asked to submit information to test V1. The V2 was refined based on TAHSN responses to V1 and further consultation, led by a refreshed Working Group. See pages 36–38 for details.

The 2024 (V2) TAHSN Sustainability Balanced Scorecard consists of:

- 4 dimensions of organizational performance where sustainability can be integrated
- 2 sustainability objectives within each dimension (total of 8)



NB: Sustainability refers to both (i) reducing greenhouse gases (GHG) and overall environmental impact, and (ii) adapting to climate risks and developing resilience to climate shocks and stresses.

Assessment Process

Each dimension includes two sustainability objectives, the criteria for which were outlined in an assessment form, which included 5–7 questions that indicated the key components to achieve the objective.

- TAHSN organizations were asked to self-assess performance on each objective.
- Organizations selected *Yes*, *In Development*, or *No* for each question.
- Final scoring for each sustainability objective was based on how many questions the organization responded *Yes* to.
- For each objective, organizations received a score of achieved (green), partially achieved (amber), or not achieved (red). The number of *Yes* responses required for each question was pre-determined in consultation with the Working Group and other experts consulted in the development process.

Each organization received their compiled scorecard.

NB. To account for differing clinical services across TAHSN, Dimension 2. Caring includes the option to select N/A to items that are irrelevant to services provided and scoring is based on the proportion of relevant items.

The 2024 TAHSN Sustainability Balanced Scorecard (V2) and accompanying assessment form was sent to all 14 TAHSN organizations, for response by September 2024. This report summarizes the results from this assessment.



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Organizations

The following organizations participated in the 2024 TAHSN Sustainability Balanced Scorecard:

Baycrest Health Sciences

The Centre for Addiction and Mental Health

Holland Bloorview Kids Rehabilitation Hospital

Humber River Health

Michael Garron Hospital

North York General Hospital

SickKids Hospital

Scarborough Health Network

Sunnybrook Health Sciences Centre

Trillium Health Partners

Unity Health Toronto

University Health Network

Women's College Hospital



Dimension 1. Leading

1.1. Organizational Capacity

Organizations can build the foundational organizational capacity required to drive sustainability initiatives by developing and resourcing cross-functional teams to lead and support organization-wide sustainability efforts.

TAHSN Results	
Achieved	7
Partially Achieved	5
Not Achieved	1

1.2. Leadership & Governance

Organizations can develop the leadership and governance required to drive sustainability by integrating sustainability into senior leadership, strategic planning, and governance structures for reporting.

TAHSN Results	
Achieved	2
Partially Achieved	6
Not Achieved	5

1.1. Organizational Capacity

The scorecard assesses the following key features of cross-functional sustainability teams:

Structure & Composition:

- Include diverse membership that spans multiple organizational functions to facilitate implementation of sustainability initiatives organization-wide.
- Endorse member participation to allow for meaningful participation.

Terms of Reference & Sponsorship:

- Have Terms of Reference or similar documentation that outlines goals and timelines and defines KPIs to support the team in priority-setting and monitoring performance.
- Establish executive sponsorship to provide the necessary support for initiatives and facilitate change management.

Enablement:

- Formally resource teams to provide the needed human and financial resources to launch, progress and sustain cross-functional initiatives.

TAHSN progress on developing capacity for sustainability

Key accomplishments across TAHSN:

- Almost all participating organizations (n=12/13) have **established cross-functional teams** to lead their sustainability efforts, and all those **teams have executive sponsorship**. The one organization that does not currently have a team is in the process of developing one.
- Of participating organizations, the majority have **formalized their sustainability teams** by endorsing the participation of their members (n=9) and developing a Terms of Reference and/or an Action Plan that governs and guides their activities (n=11).

Key opportunities moving forward:

- Of participating organizations, almost half have identified **KPIs** for their sustainability teams (n=6/13); of the remaining, most are developing KPIs.
- Just over half of the organizations have started **formally resourcing their sustainability team activities** (n=7). Nevertheless, almost all (n=11) have launched, progressed, or sustained cross-functional initiatives within the last year.

TAHSN Develops Cross-functional Sustainability Teams

Almost all TAHSN organizations have formalized teams (also referred to as committees, task forces, or advisory groups) to lead sustainability efforts.

Membership: Sustainability teams across TAHSN include representation from a range of organizational functions. They often include clinicians, environmental services, facilities management, food services, logistics, pharmacy, Infection, Prevention & Control (IPAC), quality, medical device reprocessing, supply chain, and redevelopment. Other members vary and include strategy, communications, data science & analytics, nurse educators, emergency management, admin support, patient & family experience partners, and/or external community members.

Executive Sponsorship: All of the sustainability teams have executive sponsorship. The organizational roles of sponsors vary, including VPs of clinical programs, corporate services, finance, patient services, and planning & redevelopment.

Formal Endorsement & Resourcing: The most common form of formal endorsement and resourcing of sustainability teams is approval for participation and human resources. Endorsement of participation and protected time varies, ranging from direct manager approval for specific initiatives to leadership endorsement of all team member participation. Some organizations provide additional human resources, including through admin and project management, quality improvement, and energy and sustainability teams. Some organizations have access to funding for specific initiatives, and a few have funding for their teams.

Trillium Health Partners (THP) has had a Physician Lead for sustainability since 2023. This position includes protected time and administrative support. The lead engages with clinical staff, facilities, patient services and the development team to evaluate and improve the environmental impact of processes. Duties also include education of clinical staff and implementation of sustainability projects to decrease emissions and waste from the delivery of clinical care. THP is also in the process of developing a sustainability cost centre to reinvest savings from environmental initiatives to fund further cross-departmental sustainability initiatives.

Terms of Reference & Action Plans: Many teams have a Terms of Reference. A couple have developed Action/Work Plans to detail goals and monitor progress.

- **Baycrest** [Environmental Sustainability Team Terms of Reference & Work Plan \(Draft\)](#)
- **Holland Bloorview** [Environmental Sustainability Task Force Terms of Reference](#)
- **Humber River Health** [Sustainability Committee Terms of Reference & Action Plan](#)
- **Unity Health** [Environmental Sustainability Advisory Committee Terms of Reference](#)

Cross-functional Sustainability Teams across TAHSN

Humber River Health's Sustainability Committee was established in 2024 as part of a commitment to driving organization-wide sustainability efforts and integrating sustainable practices into clinical and operational activities. Key features of the committee include:

- **Cross-functional Team:** Representatives include contract management, procurement, biomedical and supply chain management, financial planning, projects and planning, redevelopment, patient & family advisors, IPAC, and physician leadership from multiple subspecialties.
- **Team Participation:** Members have protected time and support to enable participation.
- **Executive Sponsorship:** The committee is sponsored, with Humber's President & CEO as Executive Sponsor, and Vice President of Clinical Programs as Lead.
- **Terms of Reference & Action Plan:** The committee has a Terms of Reference and Sustainability Action Plan that defines goals, priorities, and timelines. Performance metrics are being aligned with the TAHSN Sustainability Balanced Scorecard framework to ensure measurable outcomes.
- **Resourcing:** The committee can request resources as needed to achieve goals; current initiatives rely on protected time rather than financial investments.

Sunnybrook Health Sciences Centre's Green Task Force was established in 2022 to guide sustainability initiatives and includes members from across the organization. Key features of the task force include:

- **Cross-functional Team:** Representatives include physicians, clinical teams, quality & patient safety, plant operations, pharmacy, strategy & integration, IPAC, environmental services, decision support, emergency preparedness, board and foundation, corporate planning, finance, admin and scheduling supports, as well as community members.
- **Team Participation:** Members seek the approval of their managers to participate and commit to attend monthly meetings.
- **Executive Sponsorship:** The task force is sponsored by and reports to Sunnybrook's CEO & President, Dr. Andy Smith, with Kristen Winter, Executive Vice President, Programs, People, Leadership as Executive Sponsor.
- **Terms of Reference & Action Plan:** The task force developed the GROW Framework to focus the efforts of the Task Force and its working groups (Green Buildings and Grounds; Research, Education, Culture; Clinical Operations, and Waste & Procurement). It has a Terms of Reference to define the purpose and goals of the taskforce. KPIs have been developed for key initiatives and are reported to the Governance & Nominating Committee of the Board of Directors.

1.2. Leadership & Governance

The scorecard assesses the following key features of embedding sustainability within senior leadership and board engagement:

Senior Leadership:

- Embed sustainability into senior leadership portfolios, which include annual performance goals to incentivize progress on sustainability.

Strategic Plans, Operational Plans, and Corporate Reporting:

- Include sustainability within an organization's strategic plan, annual operating plan, and corporate performance reporting to drive performance and prioritize sustainability initiatives.

Board Engagement:

- Report to the Board on sustainability goals and KPIs and include sustainability within Board Committee Work Plans/Terms of References to establish the necessary governance structures to monitor and drive performance.

TAHSN progress on developing leadership & governance

Key accomplishments across TAHSN:

- Over half of participating organizations have **prioritized sustainability in organizational strategy and leadership**, including embedding within leadership portfolios (n=8/13), strategic plans (n=8), or both (n=7).

Key opportunities moving forward:

- Of participating organizations, almost half have **reflected their sustainability priorities in corporate performance mechanisms**, including senior leadership annual performance goals (n=6/13), organizational operating/action plans (n=6), or sustainability KPIs in corporate performance reporting (n=6).
- Almost half of participating organizations have started **engaging their boards on sustainability** (n=6), either through reporting progress on sustainability goals and KPIs (n=6) or including within Board Committee Terms of Reference or Work Plans (n=4). However, all the organizations that are not currently reporting to their board on sustainability, are in the process of developing this (n=7).

TAHSN Embeds Sustainability into Leadership & Governance

TAHSN organizations have been embedding sustainability into strategic plans, leadership portfolios, and governance structures.

Leadership Portfolios: Integration of sustainability into leadership portfolios varies across the network but where included, it is often within Vice President and/or Executive/Senior Vice President portfolios ranging from Facilities & Redevelopment; Communications & Strategy; Corporate & Financial Services; and Clinical Programs, Patient Services, Clinical Support and Performance. Two senior leaders have sustainability included within their titles.

Corporate Performance: The structure of incorporating sustainability into corporate performance varies across TAHSN. Often, sustainability performance is integrated within an organization's corporate scorecard, Quality Improvement Plan, and/or corporate action plan. Sometimes, this is further detailed in an organization's annual operating plan, strategic plan, and/or specific sustainability plan.

Board Subcommittees: Some boards have included sustainability in the Terms of Reference of their subcommittees, including Nominating & Governance, Transformation & Innovation, (Human) Resources, and Quality.

University Health Network (UHN) Embeds Sustainability in Strategic Plan Commitments & Board Governance

- **Strategic Plan:** "Leading Environmental and Social Impact" was named one of four foundational commitments during UHN's launch of their new strategic plan. It's annual operating plan will be informed by the new strategic plan.
- **Corporate Performance Reporting & Senior Leadership:** Sustainability KPIs for corporate reporting include GHG emissions reductions, waste diversion, and utility cost avoidance. These are also included in the portfolio and goals for Executive Vice President of Clinical Support and Performance, and Executive Director, FM-PRO Operations.
- **Board Engagement:** UHN's Board adopted an ESG framework, establishing three subcommittees – Environmental, Social, and Governance – to oversee reporting starting in 2024/25. The board will review biannually, with full report at fiscal end.

TAHSN Embeds Sustainability into Leadership & Governance

North York General Hospital (NYGH) has embedded sustainability into the organization's Strategic Plan, Corporate Scorecard, and Quality Improvement Plan.

- **Strategic Plan:** NYGH's Strategic Plan 2020–2025 includes “Invest in a Better Tomorrow: Contribute to healthier planet by reducing our environmental footprint”.
- **Senior Leadership:** Sustainability is included in the portfolio of the VP of Planning, Redevelopment, and Clinical Support, who acts as executive sponsor for all related work.
- **Corporate Performance Reporting:** Sustainability targets are included on NYGH's Corporate Scorecard and the Quality Improvement Plan (QIP), which is reported to Senior Leadership, Committees of the Board, and the Board. Progress is reported on a quarterly basis, and targets are updated annually. The 2024/2025 metrics include GHG emissions reductions and waste diversion rate. NYGH also develops an annual Year in Review to celebrate environmental sustainability efforts and progress across the organization.
- **Board Engagement:** NYGH's QIP and Corporate Scorecard (both including sustainability priorities and targets) are reported to the Board.

Dimension 2. Caring

2.1. Appropriate Care

Healthcare organizations can reduce the environmental impact of care by minimizing low-value care and expanding high-quality care.

TAHSN Results	
Achieved	7
Partially Achieved	5
Not Achieved	1

2.2. Supply Stewardship

Healthcare organizations can reduce the environmental impact of care by transitioning to clinical products and supplies with a lower carbon and environmental footprint and minimizing waste.

TAHSN Results	
Achieved	7
Partially Achieved	4
Not Achieved	2

2.1. Appropriate Care

The scorecard assesses the following key features of ensuring appropriate care and expanding high-quality care:

Tests & Procedures:

- Reduce unnecessary blood use, lab tests, and imaging to minimize unnecessary waste and the environmental impact of clinical care.

Medication Stewardship Programs:

- Develop stewardship programs to promote appropriate use of medications and reduce medication-related waste.

Inpatient Food:

- Implement plant-forward menus and person-centred food services to improve patient experience and reduce environmental impact through minimizing food waste and including low carbon food items.

TAHSN progress on appropriate care

Key accomplishments across TAHSN:

- Of the organizations that have deemed blood use, lab tests, and imaging relevant to their clinical services, most have been implementing **initiatives to reduce unnecessary blood use** (n=8/10), **lab tests** (n=9/12), and **imaging** (n=6/11).
- All of the participating organizations (n=13), either have (n=12) or are in the process of developing (n=1) an **antimicrobial stewardship program**.
- Most organizations have implemented **person-centred menus and food services** (n=11/12).
- Over half are **prioritizing plant-forward food options** (n=8/12) and have already implemented (n=3) or are in the process of developing these offerings (n=5).

Key opportunities moving forward:

- A handful of participating organizations (n=5) have started **stewardship initiatives and programs for medications other than antimicrobials**.

TAHSN Prioritizing Patients in Food Services

Across TAHSN, most organizations have been working on developing food services that prioritize patient dietary restrictions and preferences.

Person-centred food services: For most organizations, this has involved expanding menu options to better accommodate allergies, dietary restrictions, and/or culturally mindful options (Indigenous, Halal, Kosher, etc.). Some organizations develop daily menus based on dietary restrictions, nutritional needs, and patient preferences, and at a few organizations, patients can select their upcoming meals (varying from next-day to real-time). Some TAHSN organizations have indicated that they are currently monitoring patient satisfaction and a couple are monitoring food waste, either ongoing or as part of specific initiatives to improve food services.

Michael Garron Hospital (MGH): MGH Food Services offers daily selection menus tailored to the dietary needs and preferences of patients and undertakes annual satisfaction surveys to inform menu changes. To increase Indigenous food offerings, MGH Food Services consulted Nourish's Sustainable Menus Guide (pg. 107) and implemented a "Three Sisters Soup" using a local recipe. They also collaborated with the Community Advisory Council to implement a new Halal menu.

Scarborough Health Network (SHN): SHN currently uses a spoken menu system, visiting patients daily to collect their meal preference for the next day, as appropriate. To further improve efficiency and satisfaction, SHN is now trialing a spoken preference system, visiting patients once after admission to determine meal preferences for their stay. Satisfaction is being monitored to determine the most effective and preferred approach.

TAHSN Prioritizing Plants in Food Services

Many TAHSN organizations are working on developing plant-forward menus by incorporating more plants into menu items, as well as items that are entirely plant-based, both for sustainability and patient nutrition.

Across TAHSN, organizations have been endeavouring to increase the variety of plant-based and plant-forward options and make plant-based options available at all mealtimes. A few organizations are completing taste panels or monitoring patient satisfaction to improve these offerings.

Michael Garron Hospital (MGH): MGH Food Services has been increasing plant-based options and replacing red meat with sustainable protein options, with the goal of having a plant-forward main available at all mealtimes for regular diets. MGH consulted [Nourish's Sustainable Menus Guide](#) (pg. 107) and the World Resources Institute's [Playbook for Guiding Diners Toward Plant-Rich Dishes in Food Service](#) to decrease offerings of ruminant meat, towards more fish, poultry, eggs and plant-based meat substitutes. MGH is now slowly transitioning away from fish towards increased legumes.

North York General Hospital (NYGH): At NYGH, plant-based options are available at all meals. A newly launched inpatient food menu has increased the variety of plant-based options and offers a plant-based option as the priority dinner twice every week. This new menu also reduces the number of priority dinner options with beef as the main protein (from three times to twice per week).

University Health Network (UHN): In UHN's new rotating patient choice menu, 50% of the options are vegetarian and almost 10% are vegan.

Unity Health: As part of their [Sustainability Strategy](#) (pg. 2 & 6), Unity Health aims to reduce food-related GHG emissions by decreasing red meat menu options by 60% and increasing plant-forward options by the same margin by 2030. A new menu is in development for this.

Medication Stewardship across TAHSN

Antimicrobial stewardship programs are well-established across TAHSN. There are also stewardship initiatives focused on other medications.

Polypharmacy: A few TAHSN organizations conduct medication reviews to address polypharmacy and assess opportunities for deprescribing.

- At **Sunnybrook Health Science Centre**, MDs and pharmacists perform 90-day medication reviews for patients and residents.
- At **Michael Garron Hospital (MGH)**, patients on docusate sodium, ASA, inhaled corticosteroid (ICS), proton pump inhibitors, and glyburide are assessed for deprescribing as part of the medication reconciliation process. There is a dedicated stewardship program for all COPD inpatients to reduce the inappropriate ICS in this population.

Opioids/Narcotics:

- **MGH** is monitoring opioid prescriptions for surgical procedures to ensure appropriateness and avoid overprescription, with reduction targets varying by type of surgery (from 30–67%). A surgical quality analyst prepares data for physician leads. Current reassessment of narcotic formulary and consolidation of strengths is ongoing.
- **Scarborough Health Network (SHN)** has an Narcotics Oversight Committee, which ensures proper usage and oversight of narcotics through regular reviews and multidisciplinary collaboration. Improvements in practice are shared organization-wide to enhance accountability.
- **University Health Network (UHN)** has developed an opioid monitoring policy.

Medication Stewardship across TAHSN

Anticoagulants:

- **UHN** has stewardship programs for anticoagulants to ensure that duration is optimized, including at the Toronto Western Family Health Team's pharmacist-led clinic.

UHN, MGH and Humber River Health have stewardship initiatives for venous thromboprophylaxis assessments.

- **MGH** has a pharmacist-led VTE treatment program to ensure the appropriate treatment and duration of anticoagulation is optimized, with appropriate outpatient follow-up as required. It also has a VTE stewardship program particularly targeted to the Alternate Level of Care population, with regular reassessments to assess for discontinuation of VTE prophylaxis, where appropriate.

Anti-psychotics:

- **Sunnybrook** has implemented an anti-psychotic stewardship program at their Veterans Centre, Reactivation Care Centre, and Holland Centre. This is also being planned for the St. John's Rehab Program. In addition, there is currently a review underway of all order sets that include benzos and zopiclone for appropriateness.

IV Iron:

- **Sunnybrook** has recently changed IV iron for outpatients to a formulation that requires only 1 or 2 infusions rather than 4.

2.2. Supply Stewardship

The scorecard assesses the following key components of reducing the environmental impact of clinical products and supplies:

Operating Room:

- Adopt sustainability strategies found within the TAHSN Sustainable OR Scorecard to reduce the footprint of operating rooms.

Reusable & Streamlined Supplies (Outside of Operating Room):

- Replace single-use textiles with reusables and optimize supply management to reduce unnecessary supply use and waste.

Medication

- Implement initiatives to optimize medication management practices and minimize medication waste and initiatives to reduce the use of high-carbon inhalers.

TAHSN progress on supply stewardship

Key accomplishments across TAHSN:

- All participating organizations have been implementing **initiatives to reduce the environmental impact of clinical products and supplies**, including **reducing unnecessary supply use and waste** (n=11/13) and **reusable textiles** (n=9).
- All TAHSN organizations with operating rooms (ORs) participate in the TAHSN Sustainable OR Scorecard, and most have achieved at least half of the sustainability strategies on the scorecard (n=8/11).

Key opportunities moving forward:

- Of participating organizations, over half have implemented **initiatives to reduce medication waste** (n=8/13).
- A handful of organizations, where clinically relevant, have implemented initiatives to **reduce the use of high-volume/high-carbon inhalers** (n=5/11).

TAHSN Supply Stewardship

The TAHSN Sustainable Health System Community of Practice has been leading collaborative initiatives on supply stewardship.

TAHSN Pilots to Implement Reusable Textiles & Reduce Unnecessary Glove Use

In 2024, the Sustainable Health System Community of Practice decided to implement multi-hospital pilots to evaluate two sustainability opportunities:

- **Reusable Textiles:** In partnership with Ecotex, four TAHSN organizations (MGH, SHN, Sunnybrook, NYGH) trialed reusable textiles. Each site selected textile(s) to trial, including surgical gowns (3 organizations), isolation gowns (1 organization, and drapes (1 organization). A common evaluation framework and tools were developed to evaluate experience, including clinical, logistics, administration & change management, and cost. This pilot is being completed and results will be reported to the Leadership Table.
- **Reducing Unnecessary Glove Use:** Led by Dr. Jeff Powis, Medical Director of Infection Prevention and Control (IPAC) at Micalha Garron Hospital, three TAHSN organizations (MGH, SHN, Holland Bloorview) implemented a pilot initiative to reduce unnecessary glove use, which included an educational intervention, followed by a Quality Improvement intervention on a subset of units at each hospital. MGH provided a toolkit of materials for implementation and evaluation, which the other sites were able to tailor to meet their needs. This pilot is being completed and results will be reported to the Leadership Table.

Improving Sustainability of Operating Rooms across TAHSN

Since 2022, the Sustainable Health System Community of Practice has mobilized a Sustainable Operating Room (OR) scorecard, which identifies 10 high-impact and achievable sustainability strategies that can be implemented within ORs.

- The scorecard was developed and refined by the Sustainable OR Working Group, with representation from each of the 11 TAHSN hospitals with ORs. The working group meets regularly to discuss how to progress on items in the scorecard and have identified reusable surgical gowns as a collective priority.
- Each year, ORs score themselves and results are shared with the OR teams, the Leadership Table, and the TAHSN CEO Committee. Since the launch of the Sustainable OR Scorecard, TAHSN OR teams have achieved significant improvements on all items.

Sunnybrook Health Sciences Centre Reduces Impact of Care

- **Supply Waste Management:** In 2022–2023, Sunnybrook included a medical supplies waste project in its Quality Improvement Plan (QIP). The initiative assessed workflow to standardize storage and reduce waste from overstocking. The Green Task Force also partnered with IPAC to develop a policy to allow for transportation of unused patient medical supplies during intra-facility transfers, reducing waste of unused supplies.
- **Glove Waste Reduction:** Sunnybrook's Green Task Force is collaborating with IPAC to reduce unnecessary glove usage through engineering controls, with plans for developing a campaign to address unnecessary glove use in the future.
- **Medication Management:** Sunnybrook has adopted an "Own Use" medication policy for short-term admissions at the Holland Centre. At the Bayview Campus, Sunnybrook is optimizing ward stock through annual reassessments to prevent medication expiry and waste.
- **Inhalers:** For outpatients, MDI reduction is being sustained in Respiriology clinics and at the Academic Family Health Team clinics. For inpatients, engineering controls have been implemented (order sets, low-volume MDIs, low-impact HFCs, DPIs available for all classes of inhalers, tamper-proof seals on prn inhalers, and redispensing if not used).

Dimension 3. Building

3.1. GHG Emissions Reduction

Organizations can drive reductions in greenhouse gas (GHG) associated with their energy and operations by implementing structures to enable GHG emissions estimating and reporting and developing and resourcing a reduction roadmap.

TAHSN Results	
Achieved	3
Partially Achieved	7
Not Achieved	3

3.2. Waste Reduction

Organizations can drive reductions in waste by implementing structures to enable waste monitoring and reporting and developing and resourcing a waste reduction plan.

TAHSN Results	
Achieved	4
Partially Achieved	3
Not Achieved	6

3.1. GHG Emissions Reduction

The scorecard assesses the following key features of developing and resourcing structures and plans to reduce GHG emissions:

Estimating & Reporting GHG Emissions:

- Develop a process to regularly measure and report internally on GHG emissions to establish a baseline, enable identification of opportunities to reduce GHGs, and monitor progress.

Reducing GHG Emissions:

- Develop a GHG Emissions Reduction Roadmap and formally allocate resources to support launching, progressing, and sustaining initiatives to reduce GHG emissions.
- Integrate low carbon emission standards into planning, designing, and constructing processes.

TAHSN progress on reducing GHG emissions

Key accomplishments across TAHSN:

- Almost all participating organizations are **measuring GHG emissions annually** (n=12/13).
- The majority have either developed (n=8) or are in the process of developing (n=3) a **GHG reduction roadmap or action plan**, with targets from identified baseline over a specified timeframe with milestones.
- Most organizations have either already **integrated low-carbon emissions standards into the process of planning, designing, or constructing redevelopments and renovations** (n=8), or are in the process (n=3).

Key opportunities moving forward:

- While most participating organizations are measuring GHG emissions, just over half have set up **internal reporting processing** on this (n=7/13).
- Of participating organizations, less than half have started to **formally allocate resources** to support GHG reductions (n=6). Nevertheless, almost all organizations have implemented **initiatives to reduce GHG emissions** within the last year (n=12).

TAHSN Targets for Reducing GHG Emissions

Unity Health Reducing GHGs by 50% by 2040

- **Monitoring:** Unity Health's utility reports are reviewed monthly with Facility Managers and GHG emissions are reviewed annually with the broader Facilities and Planning portfolio.
- **Roadmap:** The Unity Health Toronto Sustainability Plan (2024–2029) includes the target to reduce GHG emissions of existing facilities by 20% by 2030 and 50% by 2040, without purchasing carbon credits.
- **Resourcing:** Unity Health has formally allocated resources to support GHG emissions reduction, including a Director of Project Engineering and Energy, an Energy Project Manager, an Energy Project Coordinator, and a Sustainability Project Manager. Unity Health also reinvests all sustainability and energy savings into new opportunities through a greening account.
- **Initiatives:** Key GHG reduction initiatives in the last year include upgraded boiler systems, annual steam trap audits, and changing hot water heat exchanger designs. Potential areas of improvement are identified through assessments of heating and cooling plant systems and energy use tracking.
- **Redevelopment:** Unity Health's redevelopment will set and monitor sustainability targets for each project. For example: Providence Healthcare's redeveloped Campus of Care will be following Toronto Green Standards and KPIs are in development to track progress.

SickKids Net Zero by 2050

- **Monitoring:** GHG emissions, along with performance analysis and action plan, are reported to senior management every quarter.
- **Roadmap:** SickKid's Energy Conservation and Demand Management (ECDM) establishes a baseline for Scope 1 and 2 emissions, and includes the targets:
 - Net Zero GHG by 2050
 - GHG emission intensity by 2040: less than 40.09 kg CO₂ e/m²/year
- **Resourcing:** Internal funding applications are open to GHG reduction initiatives, which a committee reviews based on various criteria, including savings and GHG reductions.
- **Initiatives:** SickKids has implemented many cross-organization initiatives, including commissioning and re-commissioning initiatives and initiatives to encourage labs to close fume hoods, and energy retrofits such as installation of heat recovery chillers.
- **Redevelopment:** SickKids has integrated the following low-carbon standards into planning, designing, and constructing: Toronto Green Standard, ASHRAE 90.1, and LEED.

TAHSN Targets for Reducing GHG Emissions

University Health Network (UHN) Reducing GHG by 45% by 2030

- **Monitoring:** GHG emissions are reported in UHN's annual Sustainability Report, and reports to the Board.
- **Roadmap:** UHN's Energy Management Plan includes their GHG reduction target:
 - Reduce Scope 1 & 2 GHGs by 45% from 2010 levels by 2030
 - Development of UHN's "zero-carbon" pathway is ongoing and has been presented to the Board.
- **Initiatives:** UHN has implemented several GHG reduction initiatives, including:
 - **WET:** The world's largest raw wastewater energy transfer system ("WET"), which will go live by the end of 2024, will heat and cool UHN's Toronto Western site and the Krembil Discovery Tower by harvesting thermal energy from municipal sewers. This project will reduce UHN's overall direct greenhouse gas emissions by approximately 60% and will reduce UHN's utility costs by about \$1 M per year on average over the duration of the energy supply contract. The TW Tower (Project Aspire) will connect to the WET system for heating and cooling, minimizing the climate impact of the tower's operations. Cooling systems are sized based on future climate projections within the equipment's life cycle.
 - **Deep Lake Water Cooling Project:** Uses cold water from Lake Ontario to provide air conditioning at Princess Margaret, Toronto Rehab University Centre site and Toronto General, saving approximately \$2 M per year in utilities. A feasibility study is underway to explore innovative district heating and cooling options with Enwave to use the existing Enwave deep lake cooling network as a heat source.
 - **Energy management planning and projects** resulted in \$4.4M saved in utility costs this year, with cumulative savings of \$43M since 2012. These projects enabled avoiding 10,359 tonnes of greenhouse gas emissions (equivalent to removing 3,174 cars from the road last year).
- **Redevelopment:** UHN's Design and Construction Guidelines call for implementation of Passive House designs that contribute to GHG mitigation. Toronto Green Standard is implemented on a case-by-case basis. Larger projects aim to attain LEED certification and elimination/reduction of fossil fuels.

3.2. Waste Reduction

The scorecard assesses the following key features of developing and resourcing structures and plans to reduce waste:

Monitoring Waste:

- Develop a process to regularly measure and report internally on waste to establish a baseline, enable identification of opportunities to reduce waste, and monitor progress.

Reducing Waste:

- Develop waste reduction targets and Action Plan and formally allocate resources to support launching, progressing, and sustaining initiatives to reduce waste.

TAHSN progress on reducing waste

Key accomplishments across TAHSN:

- Most participating organizations are **monitoring their waste** (n=11/13), at least annually.
- All have either developed (n=6) or are in the process of developing (n=7) **targets and an action plan for reducing waste**.

Key opportunities moving forward:

- While most participating organizations are monitoring their waste, just over half have set up **internal reporting processing** on this (n=8/13).
- Of participating organizations, less than a third have **formally allocated resources** (n=4) to support waste reduction.
- While the majority have **implemented initiatives to reduce waste** within the last year (n=9), some are still working to develop this (n=4).

TAHSN Targets & Initiatives for Reducing Waste

North York General Hospital (NYGH) Waste Segregation, Reduction & Diversion

- **Monitoring:** NYGH is actively monitoring waste across the organization, including landfill, medical waste, e-waste, organics, and recyclables. Waste diversion rate (%) was included in this year's QIP and Corporate Scorecard, which is reported annually to Senior Leadership, Committees of the Board, and the Board.
- **Roadmap:** NYGH's 2024/25 QIP includes actions to improve waste diversion.
- **Resourcing:** NYGH has a Senior Project Manager responsible for waste reduction and diversion initiatives in close collaboration with Support Services leadership and teams across the organization. This year, NYGH hosted two university students dedicated to sustainability initiatives, primarily waste process improvement.
- **Initiatives:** Over the past year, initiatives included enhanced organization-wide rollout of the co-mingled recycling program (including standardizing signage and bins), development of staff educational resources, review of reporting practices, and piloting an improved organics diversion program at Seniors Health Centre. In addition to targeting an improved diversion rate, NYGH has sustained several reusables initiatives (bring your own bag, cups and mugs) and piloted a new opportunity to increase use of reusable linens (surgical gowns).

SickKids Improving Waste Diversion Rate to 75% by 2030

- **Monitoring:** SickKids is actively monitoring waste diversion and the following categories of waste: landfill, medical waste, e-waste, organics, recyclables, and water waste. Monthly and quarterly reports are reviewed by Facilities Management. Annual report is reviewed by Senior Management.
- **Roadmap:** Each building has an annual waste diversion rate target, with the goal of reaching 75% diversion rate by 2030. Staffing and budget are provided to support this goal.
- **Initiatives:** SickKids has implemented several initiatives in the last year, including expanding organics waste collection and the recycling of gloves and yard waste. SickKids also conducted annual hospital-wide waste audits and periodic departmental waste audits, and inventory and update of all recycling bins and signage. Recycling training is provided through eLearning modules and staff meetings.

Dimension 4. Shaping

4.1. Procurement

Healthcare organizations can improve the sustainability of their supply chains by committing to sustainable procurement and incorporating sustainability into procurement processes.

TAHSN Results	
Achieved	5
Partially Achieved	4
Not Achieved	4

4.2. Resilient Institution

Healthcare organizations can improve resilience to climate shocks and stresses by identifying key climate risks, developing management and mitigation plans, and prioritizing adaptation initiatives.

TAHSN Results	
Achieved	9
Partially Achieved	2
Not Achieved	2

4.1. Procurement

The scorecard assesses the following key features of prioritizing sustainability in procurement:

Corporate Commitment:

- Formally commit to sustainable procurement and integrate sustainable procurement into contract management and generic/template RFx through standardized sustainability language.

Sustainable Procurement Implementation:

- Identify key categories, products or services to target for sustainable procurement initiatives to trial and sustain change.

TAHSN progress on sustainable procurement

Key accomplishments across TAHSN:

- More than half of participating organizations have included **sustainability language in generic/template RFx** (n=8/13).
- More than half have implemented **sustainable procurement initiatives** (n=8), with most citing relying on Mohawk Medbuy (MMC) to lead on this.

Key opportunities moving forward:

- Of participating organizations, almost half have **integrated sustainable procurement into senior leadership portfolios** (n=6/13).
- A handful of organizations have a **formal commitment to sustainable procurement** (n=5), and a couple of organizations have **green/sustainable procurement policies**.
- The majority of organizations have already started to pursue sustainable procurement through **contract management** (n=4), or are working on this (n=7).

Sustainable Procurement across TAHSN

Most of the TAHSN organizations working on sustainable procurement are doing so by leveraging contract management, integrating sustainability criteria into RFx, and/or engaging with their Group Purchasing Organizations. A couple of organizations have developed sustainable procurement policies.

Unity Health Committing to Sustainable Procurement & Engaging Suppliers

- **Commitment to Sustainable Procurement:** Procurement is one of the four pillars of Unity Health's Sustainability Strategy (part of the [Unity Health Toronto 2024-2029 Sustainability Plan](#)). This commitment includes:
 - Building awareness of climate impacts on procurement and supply chain;
 - Engaging with suppliers to communicate sustainability values to learn and collaboratively advance climate mitigation and resiliency;
 - Incorporate EDI and sustainability scoring into procurement criteria.
- **Leadership:** Sustainable procurement is integrated into the EVP of Corporate Services and Chief Financial Officer's portfolio, and KPIs are in development.
- **Contract Management:** In 2022-2023, Unity Health engaged 11 of its top-spend suppliers to assess their public commitments to sustainability and measurable goals or targets. They are also in the process of developing an approach to complete a vendor scan (for more details, see [Unity Health Toronto 2024-2029 Sustainability Plan](#), pg. 9).
- **RFx:** Unity Health is developing weighted sustainability criteria to incorporate with recently updated domestic criteria in alignment with [Building Ontario Businesses Initiative \(BOBI\)](#).

Sustainable Procurement across TAHSN

Women's College Hospital (WCH) Embedding ESG & Reducing Single-Use

- **RFx:** WCH has worked with Mohawk Medbuy (MMC) to embed Environmental, Social, and Governance (ESG) language across RFx documents. They are in the process of piloting an increase in ESG criteria and weighting of up to 15%, and embedding ESG into the rest of sourcing processes.
- **Contract Management:** WCH is actively reviewing waste reduction strategies, particularly identifying single-use products that can be replaced with alternatives. Currently, this includes reprocessed medical devices from Stryker.

University Health Network (UHN) Green Procurement Policy & RFx

- **Policy:** UHN has had a Green Procurement Policy since 2001.
 - The green procurement policy denotes the waste hierarchy for vendor choices, with reusables at the top, followed by recyclable. This reusable first approach has resulted in a rate of 99% reusable isolation gown use and reusable boxes for 95% of sterilization instead of disposable blue wrap.
- **RFx:** UHN's RFx templates include a standard environmental exhibit for evaluating vendors with documented environmental and sustainable practices. A new working group has also been created with a focus on strengthening the language specificity in the environmental sustainability exhibit, with the intent of providing clearer guidance and metrics to bid evaluators and vendors to align procurement with corporate sustainability goals, and eventually allow increased weighting of the exhibit.

4.2. Resilient Institution

The scorecard assesses the following key features of evaluating and improving preparedness for climate risks to patient health, clinical services, and assets and infrastructure:

Risk Identification Process:

- Conduct a climate risk exposure screen to identify climate risks and impacts facing organizations and the communities they serve.

Risk Management Plan:

- Develop an ongoing assessment and prioritization process and risk management/mitigation plan for identified climate risks.

Preparedness Initiatives:

- Improve preparedness for identified climate risks by launching, progressing and sustaining initiatives.

TAHSN progress on climate resilience

Key accomplishments across TAHSN:

- Of participating organizations, over half have **identified climate risks to their organization** (n=7/13).
- Over half of participating organizations have a **risk management plans or procedures in place** for impacts to **patient health and clinical services** (n=7) and/or **infrastructure and assets** (n=8).

Key opportunities moving forward:

- In most cases, participating organizations are relying on existing risk assessment frameworks and emergency preparedness programs and procedures, which could be leveraged for climate risks. Only a few organizations are considering and **preparing for risks through a climate-specific lens**. Most are focused on extreme weather events (i.e. heavy rainfall, flooding, extreme heat), and less on chronic (i.e. sustained increased heat, poor air quality) and compounding risks.
- Of participating organizations, almost half have started implementing **initiatives to improve preparedness for climate risks to patient health and clinical services** (n=6/13), **assets and infrastructure** (n=6), or both (n=3).

Climate Risk Preparedness across TAHSN

Across TAHSN, some organizations have started initiatives to assess the climate risks to their operations and patients, and improve preparedness.

CAMH Initiatives on the Impact of Climate Change on Mental Health

- **Preparedness Initiative:** CAMH, in collaboration with Youth Wellness Hubs Ontario, is conducting a community-based research project to support youth experiencing climate-related distress. The project aims to foster youth agency in climate action by adapting Macy & Johnstone's (2022) Active Hope approach with and for youth. CAMH is focused on advancing interventions that promote the psychosocial well-being of youth facing climate change, integrating these strategies into youth clinical and social services.
- **Risk Assessment (In Development):** In the upcoming year, CAMH will undergo a process to develop clinical guidance for children and youth affected by mental health impacts due to climate change.

Sunnybrook Health Science Centre Leveraging Existing Emergency Preparedness for Climate Risks

- **Risk Assessment:** Sunnybrook conducted a disaster and emergency risk assessment in 2020, identifying high-priority hazards such as flooding, water disruption, pandemics, and severe winter weather.
 - They are interested in embedding climate risk exposure considerations into the risk framework ahead of the 2025 assessment.
 - A recent soil health assessment at the Bayview Campus included information on flood-prone areas; further assessment is needed.
- **Emergency Preparedness:** Sunnybrook's emergency code procedures, including a 24/7 command structure to manage emergencies and disruptions. This structure was effectively activated during the July 2024 Toronto Flood, with no reported disruptions to patient care, as well as during the 2023 wildfire smoke event and 2022 blizzard.

Climate Risk Preparedness across TAHSN

University Health Network (UHN) Identifying Climate & Extreme Weather as Top Organizational Risk

- **Risk Assessment:** UHN has identified "Climate Change and Related Extreme Weather Events" as a top organizational risk through its Enterprise Risk Management Framework. Assessments and updates are provided to the Board Committee bi-annually. Specific event impact responses also shared with the Board of Trustees (ex. July 16 Floods).
- **Emergency Preparedness:** UHN's Emergency Preparedness Plan and accompanying Emergency Code Procedures are regularly reviewed to manage emergencies, including extreme weather events and impacts (ex. floods, power outages, patient evacuations).
 - Procedures are in place to ensure staffing needs are maintained during extreme weather: Fan-out Policy, Service Continuity Plan, and Redeployment Centre.
 - Surge plans and capacity alerts are in place to support capacity challenges and the redistribution of patients during unplanned events.
 - Planning is underway to conduct an emergency exercise to test UHN's response plans for critical infrastructure events, including power outages and floods.
 - Comprehensive critical infrastructure shutdown processes and updated training curriculum are in place to minimize clinical disruptions at all sites during mandatory shutdowns of critical systems due to unplanned events.
 - Project Command Centre at Toronto Western coordinates construction in patient areas and provides a centralized means of coordinating responses to potential impacts to patient care, building services and utilities due to unplanned events.
 - The Patient Safety Ambassador program has been implemented to welcome patients and assist with traffic management, drop-off, and wayfinding in areas impacted by construction or heavy traffic. This program is leveraged during unplanned incidents, including extreme weather, to support patients upon arrival.
- **Infrastructure:** UHN has updated infrastructure to withstand severe weather, including enhancements building envelopes, upgrades to emergency power systems, and completed Critical Infrastructure Renewal at Toronto Western. Procedures are in place to ensure heating and cooling systems are maintained during unplanned events and these have been revised to incorporate redundancy following July 2024 flood experience. UHN collaborates with building owners of leased spaces to repair and strengthen aging infrastructure and assets to reduce the potential impact of extreme weather events.

Improving Preparedness for Heat

Across TAHSN, some organizations are assessing the risk of chronic and extreme heat on their operations and patients, and improving preparedness

Centre for Addiction and Mental Health (CAMH) developed a Heat Wave Response Clinical Guidance Document in 2024, which was disseminated to all CAMH clinical staff and physicians. In the upcoming year, CAMH will build upon this guidance document to engage hospital physicians, staff, and leadership, integrating the recommended processes into clinical and operational practices during heat events. This work will contribute to the development of an emergency preparedness plan in response to extreme heat events.

Sunnybrook Health Sciences Centre is collaborating with the North Toronto Ontario Health Team to develop a coordinated heat response. This is included in Sunnybrook's 2024/25 Quality Improvement Plan. In collaboration with Family Health Teams, Sunnybrook also launched a project through the AFP Innovation Fund to improve access to air-cooling devices for vulnerable older adults and adults with schizophrenia.

Holland Bloorview's code grey (shelter in place) policy is designed for instances of poor air quality such as extreme wildfire smoke. Holland Bloorview also monitors heat, smoke and other weather extremes for their on-site children's summer camps. Indoor back-up facilities are always on reserve in cases where summer camp weather creates unsafe conditions outside.

Scorecard Development Process

Development of 2023 (V1) Sustainability Balanced Scorecard

- **Decision to develop a balanced scorecard** (December 2022): The Sustainable Health System Community of Practice (CoP) decided to develop a scorecard to identify and assess performance on common sustainability goals for the TAHSN network. The balanced scorecard was selected as a structure to facilitate 1) alignment with TAHSN corporate performance and strategic priorities, and 2) collective priority setting and performance monitoring on a streamlined set of sustainability objectives. A working group was formed to guide development of the scorecard.
- **V1 framework development** (January–February 2023): The draft scorecard framework was informed by a rapid literature review and review of relevant TAHSN documents. The Working Group and CoP Leadership Table decided to develop a scorecard that would align with common dimensions within existing TAHSN corporate strategies and performance reporting frameworks and identify priority sustainability objectives within those dimensions.
- **Consultations to finalize V1** (March–May 2023): An initial draft of the TAHSN Sustainability Balanced Scorecard framework was sent to the Working Group, Leadership Table, and identified key stakeholders for feedback. A survey was also conducted across TAHSN to 1) raise awareness of the intent to develop a sustainability balanced scorecard, 2) validate the selection of sustainability objectives as relevant to TAHSN organizations, and 3) solicit suggestions for missing sustainability objectives. The sustainability balanced scorecard was further refined based on feedback and Working Group deliberation.
- **V1 tool development** (May–June 2023): In consultation with the Working Group and CoP Leadership Table, it was decided that the 2023 TAHSN Sustainability Balanced Scorecard would comprise:
 - **Scorecard Guide** to introduce the scorecard and provide information on each sustainability objective (background information, resources for implementation, and examples from TAHSN).
 - **TAHSN Information Request** document to solicit examples from TAHSN organizations on at least one objective per dimension (4 total), including a brief description of relevant initiatives, success stories and good practices, performance monitoring, key performance indicators, and recent performance (if available).
- **V1 information request** (July 2023): The 2023 TAHSN Sustainability Balanced Scorecard Guide and Information Request was sent to all 14 hospitals, for response by September, to inform further refinement.

Development of 2024 (V2) Sustainability Balanced Scorecard

- **V1 results review** (October–November 2023): An overview of results was presented to the CoP Leadership Table and TAHSN CEO Committee. V1 results validated the overall structure of the scorecard and highlighted opportunities to streamline the scorecard.
- **V2 development** (January–March 2024): The Working Group was refreshed to guide the development of the 2024 TAHSN Sustainability Balanced Scorecard. The Working Group decided to streamline the scorecard structure by selecting a smaller set of items that are of common priority to the TAHSN network and that represent higher potential impact to reduce environmental footprint and/or contribute to climate mitigation and resilience. In consultation with the Working Group, the Leadership Table, and the TAHSN CEO Committee, it was decided that the 2024 scorecard would include self-assessment scoring and that further consultation was needed to further inform the framework.
- **Consultations to finalize V2** (March–May 2024): Consultation meetings were held on each dimension and specific objectives within the scorecard to refine language and inform the development of an assessment and scoring framework.
- **V2 tool development** (March–June 2024): The 2024 TAHSN Sustainability Balanced Scorecard Assessment Form was developed in consultation with the Working Group.
- **V2 self-assessment** (July 2024): The 2024 TAHSN Sustainability Balanced Scorecard Assessment Form was sent to all 14 TAHSN hospitals, for response by September 2024. This report summarizes the results from the V2 assessment.

Working Group

We would like to acknowledge the engagement of the Sustainable Health System Community of Practice and leadership of our Working Group to develop the scorecard. Thank you also to Asma Adam, Jaclyn MacNeil and Madeline Dougherty for their support in the development of this report.

V1 2023	V2 2024
<ul style="list-style-type: none">• Dean Sabeen, Senior Project Director, Redevelopment Team, Centre for Addiction and Mental Health• Ian Rogers, Senior Director Facility Management, Building and Transportation Services, Holland Bloorview Kids Rehabilitation Hospital• Nina Malek, Project Manager, North York General Hospital• Kyle Robinson, Director, Facilities Operations, Sustainability and Support Services, SickKids• Christine Soong, Division Head, Hospital Medicine, Sinai Health• Genny Ng, Co-Chair of President's Environmental Sustainability and Greening Task Force; Manager, Quality & Patient Safety, Sunnybrook Health Sciences Centre• Geoff Anderson, Professor, IHPME, Dalla Lana School of Public Health, University of Toronto• Alexandru Titeu, Research Administration Officer, IHPME, Dalla Lana School of Public Health, University of Toronto <p>Secretariat</p> <ul style="list-style-type: none">• Fiona Miller, Professor, IHPME, Dalla Lana School of Public Health; Director, Centre for Sustainable Health Systems, University of Toronto• Brittany Maguire, Managing Director, Centre for Sustainable Health Systems, University of Toronto	<ul style="list-style-type: none">• Stewart Wong, VP, Communications, Strategy & Sustainability, Holland Bloorview Kids Rehabilitation Hospital• Jhanvi Solanki, VP, Clinical Programs Humber River Health• Genny Ng, Co-Chair of President's Environmental Sustainability and Greening Task Force; Manager, Quality & Patient Safety, Sunnybrook Health Sciences Centre• Chad Gyorfi, VP, Finance, Partnerships & CFO, Women's College Hospital• Katelyn Poyntz, Director, Project Engineering & Energy, Unity Health• Lucas Chartier, VP, Quality & Safety, University Health Network• Geoff Anderson, Professor, IHPME, Dalla Lana School of Public Health, University of Toronto <p>Secretariat</p> <ul style="list-style-type: none">• Fiona Miller, Professor, IHPME, Dalla Lana School of Public Health; Director, Collaborative Centre for Climate Health & Sustainable Care, University of Toronto• Brittany Maguire, Managing Director, Collaborative Centre for Climate, Health & Sustainable Care, University of Toronto

Maguire, B, Miller, FA. TAHSN 2024 Climate & Sustainability Report. Collaborative Centre for Climate, Health & Sustainable Care. University of Toronto, Toronto, Canada. March 2025.



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