

Unity Health Toronto Community Town Hall

Tuesday, October 25, 4 p.m.

Thank you to everyone who tuned into our Community Town Hall. An agenda can be found below. You can watch the recording of the event [on YouTube](#).

We've broken down the agenda using time stamps for each item to help people view the sections of the meeting they are most interested in.

Agenda

1. Welcome – Colleen Johnston, Chair, Unity Health Toronto Board of Directors (0:00)
2. Mission Moment – Christopher De Bono, Executive Director, Mission, Values and Spiritual Care (07:29)
3. Board Chair Report – Colleen Johnston, Chair, Unity Health Toronto Board of Directors (11:57)
4. Patient story – Judi Richter-Jacobs (19:03)
5. President and CEO remarks – Dr. Tim Rutledge, President and CEO (24:10)
6. Q-and-A (40:19)
7. Wrap-up – Colleen Johnston, Chair, Unity Health Toronto Board of Directors (58:09)

Q-and-A

1. What is the forecast for COVID in late fall and winter? Is this now being treated similar to the flu, with a majority of folks vaccinated or immune and likely to not require a hospital stay? (41:12)
2. With growing pressures on hospitals, how will the Board ensure Unity Health has sufficient resources in place to support patients and the community? (44:00)
3. The Patient Family Council received Unity Health's anti-racism report earlier this year. Can you provide an update on where efforts are at today? (48:11)
4. What is the hospital's action plan to address the Truth and Reconciliation Calls to Action in Health? (52:39)
5. How will our artificial intelligence work expand beyond Unity Health? How does the Board guide that process? (54:54)

Questions unanswered live due to time constraints

1. What priorities and expectations is the Board setting to make Unity Health accessible by Jan. 1, 2025 as mandated by AODA?

Response: We are fully compliant with all requirements mandated by the Accessibility for Ontarians with Disabilities Act. However, we view compliance as the bare minimum. Our aim is equity – meaning that our patients with disabilities, as well as people with disabilities who work and learn at Unity Health, would ideally have the barriers they face eliminated. We have been following the work of the Health Care Standards Development Committee closely, and support the 20 recommendations that the committee has made to the Minister for Seniors and Accessibility. We hope these recommendations are accepted and appropriately resourced. We will be using these recommendations to inform the development of an updated, organization-wide accessibility plan, which we aim to have in place by the end of 2023.

2. What is St Joseph's plan for primary care?

Response: The Unity Health St. Joseph's family practice continued to provide patient care throughout the pandemic maintaining capacity for onsite visits to support patients needing primary care. With growing demand from patients seeking a family doctor, we are engaging with the Ministry of Health Primary Care Branch to explore opportunities for expansion of services.

Primary care in West Toronto is a big area of focus for St. Joseph's Health Centre. We created a Primary Care Physician Liaison role in 2020 to focus on primary care engagement. The hospital is reaching out to primary care practitioners in the community with the support of a nurse navigator to help physicians link to specialty care and advice. In addition, Unity Health is working with the West Toronto Ontario Health Team on two pilot projects; one for frail seniors and the other mental health and addictions populations. The connection to primary care is a major piece in the pilots and will be part of the larger scale rollout when complete.

3. Many Patient and Family Partners have commented on the positive effect of the Joy at Work strategic pillar at Unity Health. Has this also had a positive impact on retention or recruitment? If not, how is Unity addressing staff shortages?

Response: The Joy at Work model underpins all of our work in our People Strategy. Relying on it helps us ensure that significant dimensions for supporting, engaging and attracting staff are not overlooked. During these times of immense staffing pressures, the Joy in Work framework reminds us that our strategies related to our talent need to be balanced and multi-faceted. Our major efforts can largely be grouped into three large areas of focus:

1. Attract – increase our capacity by recruiting more staff faster, grow a compelling employment brand and create opportunities for current staff to grow in their careers within Unity Health.
2. Retention and Engagement – be responsive to staff work environment changes that they need to thrive such as robust learning and development, quality leaders, recognition and rewards.
3. Protect – be actively involved in promoting the health and wellness of staff through providing high quality benefits programs, wellness programming and supporting optimal workplace safety and staff attendance.

4. Do we have resources available to support a "pool" of casual staff to cover for staff illness? Perhaps even a pool that is "shared" with other hospitals in Toronto?

Response: Casual staff at Unity Health are an extremely important source of staffing across our clinical programs. Over the course of the pandemic, we have had the opportunity to expand casual opportunities across more programs and are increasingly relying on these roles to attract new staff including those who have retired and want to have a lighter work schedule. Our Interdisciplinary Resource Teams has been one of the most effective solutions for flexible health human resources to support the entire network. These teams enable Unity Health to hire full-and part-time staff into a large pool that can be deployed to different clinical areas when there are staffing challenges. These resource teams are also used in other hospitals. The entire health care system is currently experiencing staffing pressures which makes sharing these health human resources pools across hospitals difficult to

coordinate at this time; however, this could be something to consider revisiting with other hospitals in the GTA when staffing conditions return to closer to normal.