TAHSN 2025 Climate & Sustainability Report

Sustainability Balanced Scorecard Results

TAHSN Toronto Academic Health Science Network

SUSTAINABLE HEALTH SYSTEM COMMUNITY of PRACTICE

UNIVERSITY OF TORONTO

COLLABORATIVE CENTRE FOR Climate, Health + Sustainable Care

Table of Contents

Executive Summary

This report reflects the ambition for sustainability and climate action across the Toronto Academic Health Science Network (TAHSN), with progress monitored and reported through the TAHSN Sustainability Balanced Scorecard, which is coordinated by the Collaborative Centre for Climate, Health & Sustainable Care at the University of Toronto.

Key accomplishments across TAHSN

Since the previous report, organizations across TAHSN have made meaningful progress in advancing sustainability and climate action. Increasingly, TAHSN organizations are embedding sustainability as a core value and priority by including sustainability and climate commitments in their strategic planning, reflected in leadership portfolios and governance structures. TAHSN organizations are also strengthening capacity to drive sustainability by formalizing and resourcing sustainability teams. Sustainability priorities and initiatives vary across the network and are detailed in this report. Organizations are improving appropriateness of clinical care, reducing the cost and carbon footprint of care, prioritizing reusables, and developing ambitious roadmaps to reduce greenhouse gas emissions. This report spotlights organizations with new, innovative, and leading practices.

Key opportunities moving forward

Based on the results of the 2025 scorecard reported herein, the following **opportunities have been identified to continue advancing sustainability** across the network:

- Reflect sustainability and climate commitments in corporate planning, performance reporting, and Board engagement.
- Establish adequate resourcing of sustainability teams to enable implementation.
- Advance clinical care sustainability efforts in medication stewardship, reducing use of high-carbon inhalers, prioritizing reusables, and expanding planetary health menus.
- Formalize plans, targets, and reporting structures on both GHG emissions and waste reduction to drive further reductions.
- Develop statements and policies that reflect TAHSN's commitment to sustainable procurement, embed this as a priority in senior leadership portfolios, and actively engage Group Purchasing Organizations and vendors on sustainability.
- Apply a climate-specific lens to risk assessments and integrate this into preparedness plans and procedures for patient health, clinical services, and infrastructure.

Through collaboration, the TAHSN Sustainable Health System Community of Practice works to share learnings and leading practices, foster ambition and innovation, and achieve greater collective impact for the health of our communities and the planet.

Introduction

The TAHSN Sustainable Health System Community of Practice has developed 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:

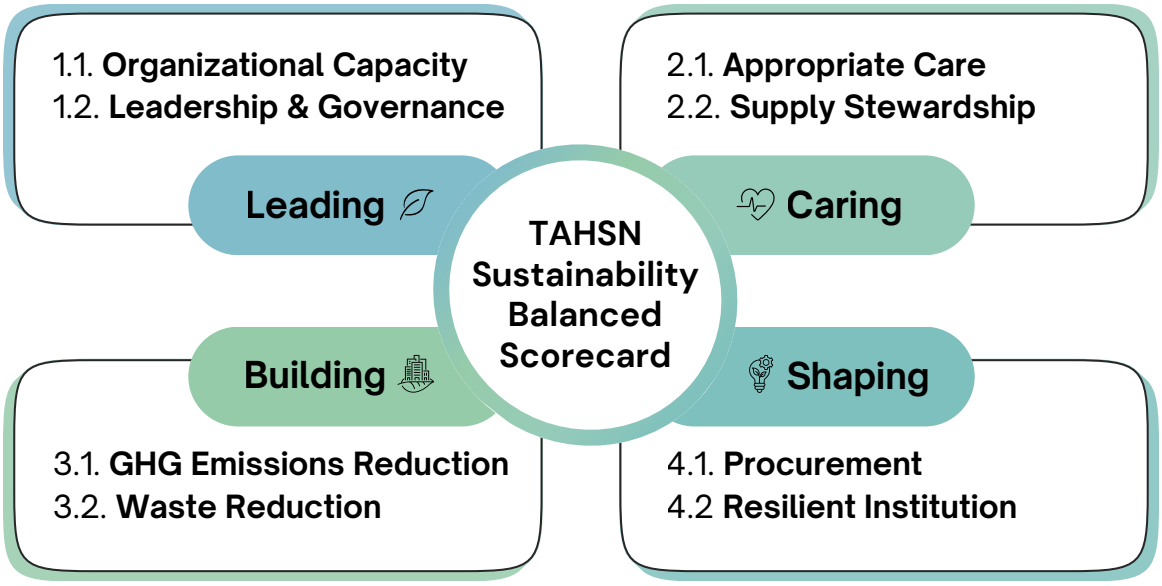
- Establishing common sustainability objectives and indicators
- Supporting TAHSN organizations in assessing and celebrating annual improvements
- Complementing and supporting existing TAHSN performance monitoring
- Sharing progress and good practices among network members to encourage ambition

TAHSN Sustainability Balanced Scorecard

The 2025 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 of the scorecard includes two sustainability objectives, the criteria for which were outlined in an assessment form.

- 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 differences in clinical services offered across TAHSN, Dimension 2. Caring, includes the option "N/A" for services that are not provided. Scoring is based only on performance on relevant items.

The 2025 TAHSN Sustainability Balanced Scorecard (V3) and accompanying assessment form was sent to all 14 TAHSN organizations, for response by September 2025. This report summarizes the results from this assessment.

SUSTAINABLE HEALTH SYSTEM COMMUNITY of PRACTICE

TAHSN Toronto Academic Health Science Network

Organizations

All 14 TAHSN organizations participated in the 2025 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
- Scarborough Health Network
- SickKids Hospital
- Sinai Health
- 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 capacity required to drive sustainability initiatives by developing and resourcing cross-functional teams to lead and support organization-wide sustainability efforts.

TAHSN Results	2024	2025
Achieved	7	10
Partially achieved	5	4
Not achieved	1	0

1.2. Leadership & Governance

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

TAHSN Results	2024	2025
Achieved	2	5
Partially achieved	6	6
Not achieved	5	3

Best in TAHSN: Organizational Climate & Sustainability Action

2025 Climate & Health Award:
Impact & Innovation in Policy & Practice

Sunnybrook Health Sciences Centre received this award in recognition of their leadership and commitment to climate and sustainability action, demonstrated by their Green Task Force.

The Collaborative Centre for Climate, Health & Sustainable Care annually recognizes innovative and outstanding work in the network through Climate & Health Awards.

1.1. Organizational Capacity

The scorecard assesses the development of cross-functional sustainability teams as a means of strengthening organizational capacity to lead on sustainability, including:

Team structure	Strategy & leadership	Enablement
• Diverse membership spans organizational functions to facilitate implementation of organization-wide sustainability initiatives • Endorsement of member participation to allow for meaningful participation	• Development of Terms of Reference or similar with goals, timelines, and key performance indicators (KPIs) to facilitate performance monitoring • Establishment of executive sponsorship to provide necessary support and facilitate change management	• Formally resourced teams to provide needed human and financial resources to launch, progress, and sustain initiatives

13 TAHSN organizations have cross-functional sustainability teams with diverse membership and executive sponsorship

Most teams have representatives from clinical, quality, pharmacy, environmental services, communications, facilities/redevelopment, and procurement/supply chain. Other department representatives vary across the network, including strategy, finance, infection prevention and control (IPAC), and emergency management, among others. For over half of the teams, chair roles have both clinical and administrative representation.

Endorsement of participation

Most teams formally endorse participation (n=12). Most often, this is done by including in role descriptions or performance goals, particularly for the leader/chair(s). The majority of organizations also provide members with protected time or approve participation.

Terms of Reference & KPIs

Most teams have a Terms of Reference and/or an Action Plan, as well as KPIs, to govern their activities (n=10). All other teams are in the process of developing these.

Formally resourced to carry out activities

Just over half of TAHSN organizations are resourcing sustainability team activities (n=9), either through a dedicated budget or other access to funds, human resources, or training. All teams (n=13) have launched, progressed, or sustained initiatives within the last year.

Formalizing Cross-Functional Sustainability Teams

TAHSN organizations are formalizing sustainability teams to lead work organization-wide.

Humber River Hospital's Sustainability Committee was established in 2024, as part of a commitment to drive organization-wide sustainability and integrate sustainable practices into clinical and operational activities. In their first year, the committee led many initiatives, including:

- Waste management evaluation in public areas, leading to an educational campaign and improved signage
- With the surgical team, a Bring Your Own Reusable Bag initiative
- With the pharmacy team, a medication conservation initiative
- With the clinical team, the launch of a formal virtual care model for the bariatric program, targeting a 90% reduction in staff and patient travel

North York General's (NYG) Green Representative Program was launched in 2024, and has recruited 22 Green Representatives to date, covering both clinical and corporate portfolios across the organization. The representatives are tasked with championing sustainability efforts within their programs and leading program-specific initiatives. In 2025, NYG also launched the following cross-functional initiatives:

- Co-designed with environmental services, facilities, and communications, the roll out of 49 new dual-stream bins across all 5 sites, standardizing waste separation practices across the organization
- Co-led with the Perioperative Green Team, labour delivery, and corporate sustainability leadership, the elimination of nitrous oxide waste via the existing centrally piped system

Holland Bloorview Hospital's Environmental Sustainability Task Force was launched in 2024, with a diverse team of staff and family leader volunteers committed to integrating sustainability across all aspects of the hospital (see Environmental Sustainability Task Force Terms of Reference & Work Plan). In its first year, the Task Force advanced several initiatives reported in the Environmental Sustainability Impact Report.

Sunnybrook Health Sciences Centre's Green Task Force was established in 2022 with members from across the organization to guide sustainability initiatives. In 2025, the Task Force led the following initiatives:

- Shutdown of central nitrous oxide system, targeting a 75% reduction in the nitrous oxide purchased
- Appropriate glove use training and reduction of unnecessary use
- Community outreach on climate change and health (see presentation on climate change and seniors)

Baycrest Health Sciences' Environmental Sustainability Team brings together staff, clinicians, and leaders across the organization to identify and support organization-wide sustainability opportunities. The team is advancing initiatives to reduce electricity use, improve water efficiency, and modernize infrastructure.

Building Organizational Capacity for Sustainability

TAHSN organizations are developing dedicated sustainability roles to increase their capacity to support existing sustainability efforts, identify new opportunities, and drive organization-wide action and alignment with organizational priorities.

North York General (NYG) has created a new role, Project Manager, Facilities Integration, Energy & Sustainability. This new position is a full-time, permanent, resourced role with responsibility for leading hospital-wide energy optimization, GHG reduction, and sustainability initiatives. This position advances the NYGreen program, integrating sustainability into all capital projects, energy efficiency initiatives, and hospital operations, and demonstrates NYG's commitment to resourcing climate action as an organizational priority.

University Health Network has a formal Energy & Sustainability Team, formerly called Energy & Environment, to manage projects and programs to advance low-carbon, high-quality care. This longstanding team has 9 full-time employees.

Sunnybrook Health Sciences Centre has grown their Facilities, Energy & Climate Action Team to three full-time employees on the basis of achieved results over the previous 15 years. The role descriptions for Plant Operations & Energy Managers include energy management and climate action as primary functions.

Sinai Health has created a new role, Sustainability Project Manager, to establish and coordinate organization-wide initiatives, advance existing efforts across different departments, and align with TAHSN partners on developing a plan for reducing the environmental footprint of health systems while enhancing patient and community well-being. The role will work towards building organizational structures for sustainability and providing a collaborative platform for all areas of Sinai to participate in substantive action.

Baycrest Hospital has a sustainability role, Project Manager, Sustainability & Infrastructure, which supports the Baycrest Environmental Sustainability Team and sustainability project implementation.

1.2. Leadership & Governance

The scorecard assesses the creation of leadership and governance structures to drive sustainability reporting and performance, including:

Senior leadership	Strategic planning	Board engagement
• Inclusion of sustainability in senior leadership portfolios with annual performance goals to incentivize progress on sustainability	• Creation of sustainability goals in an organization's strategic and corporate plans to prioritize sustainability • Inclusion of KPIs in corporate plan and/or scorecard to enable performance monitoring	• Development of structures for reporting to the board on sustainability goals and KPIs to drive performance

14+ **TAHSN senior leaders have sustainability in their portfolios**

11 **TAHSN strategic plans have sustainability goals**

Senior leaders

All TAHSN organizations (n=14) have integrated sustainability into senior leadership portfolio(s). The majority (n=9) have also defined related annual performance goals.

Corporate planning & performance

The majority of TAHSN organizations have included sustainability goals (n=7) in corporate planning and performance documents, which vary depending on the organization (corporate action plan, corporate scorecard, quality improvement plan).

KPIs

Most TAHSN organizations have defined sustainability KPIs (n=10) in corporate planning and performance documents, corporate sustainability reports/plans, and/or Energy Conservation Demand Management Plans that are endorsed by executive leadership.

Board reporting

Half of TAHSN organizations (n=7) are regularly reporting on sustainability goals and KPIs to their boards. The mechanisms for this vary and include leveraging their corporate scorecard, action plan, annual operating plan, risk matrix or management framework, or Quality Improvement Plan, as well as Board Committee Terms of Reference and work plan.

Sustainability in Strategic & Corporate Planning

TAHSN organizations are incorporating sustainability and climate action into their strategic plans, developing sustainability strategies and plans, and reporting on their progress.

Most TAHSN organizations have started incorporating **commitments to sustainability and climate action into their strategic plans**, including:

- **Baycrest** Hospital and Apotex Long Term Care Strategic Plan 2024-29
- The **Centre for Addiction and Mental Health (CAMH)** Connected CAMH Strategic Plan 2024-30
- **Michael Garron Hospital** Integrating Care. Bold Impact. 2025-35 Strategic Plan
- **North York General** World-Class Care, 24/27 Strategic Plan 2025-35
- **SickKids** 2030 Strategy
- **Sunnybrook Health Sciences Centre** Invent 2030 Strategic Plan
- **University Health Network (UHN)** Bold Resolve, for A Healthier World Strategic Plan

Several TAHSN organizations have developed **sustainability corporate documents** to outline their goals: **Holland Bloorview** Sustainability Policy, **Scarborough Health Network** (SHN) Environmental Sustainability Policy, **SickKids** Environmental Sustainability Strategy 2022-25, and **Unity Health** Sustainability Plan 2024-29.

Almost half of TAHSN organizations have developed **reports on their sustainability impact**, including:

- **Holland Bloorview** Environmental Sustainability Impact Report (most recent: 2025)
- **Michael Garron Hospital** Environmental Sustainability Annual Report (most recent: 2023)
- **SickKids** Environmental Sustainability Strategy Progress Update (most recent: 2025)
- **Trillium Health Partners** reports on sustainability in their Annual Community Report
- **Unity Health** Annual Sustainability Report (most recent: 2023-24)
- **UHN** Annual Sustainability Report (most recent: 2024)

Senior Leadership Portfolios

Sustainability has been integrated into a range of senior leadership portfolios across TAHSN, including:

- Baycrest VP Corporate Redevelopment & Facilities Management
- Holland Bloorview VP Communications, Strategy & Sustainability
- Humber River VP Clinical Programs
- North York General VP Planning, Redevelopment & Clinical Support
- SickKids VP Finance & CFO
- SHN AVP Support Services & Business Development
- Sinai Health VP Facilities & Capital Development
- Sunnybrook EVP Programs, People & Leadership and VP Corporate Strategy & Development
- Unity Health VP Redevelopment & Planning
- UHN EVP Clinical Support & Performance
- Women's College VP Finance, Partnerships & CFO

Board Engagement & Reporting on Sustainability

TAHSN organizations are establishing mechanisms to engage and report to their Boards of Directors on sustainability goals and key performance indicators (KPIs).

Holland Bloorview Hospital has begun reporting to the Board on sustainability and has included annual reporting on sustainability initiatives and goals on the Board's work plan.

Michael Garron Hospital reports quarterly on corporate strategic goals, including sustainability, to Board Committees (Governance and Human Resources).

North York General (NYG) includes sustainability targets on their Corporate Scorecard and Quality Improvement Plan (2025-26 Workplan, 2023-24 Progress Report), which is reported to Senior Leadership, the Board, and Committees of the Board. Progress is reported on a quarterly basis and targets are updated annually. Metrics for the 2025-26 QIP include reductions in GHG emissions (kg/SF) and elimination of nitrous oxide leakage from the central supply system.

SickKids has included GHG emissions as a KPI on the Corporate Scorecard, which is reported to the Board.

Sunnybrook Health Sciences Centre reports sustainability work to the Board through the Governance Committee and has built a dashboard to report on sustainability priorities at each committee meeting. Current KPIs are focused on waste management, culture of sustainability, and GHG emissions reductions. Sunnybrook is also encouraging their Board and Senior Leaders to complete the CASCADES *Orientation to Planetary Health & Sustainable Care*, which is a self-paced, 30-minute virtual course.

Women's College Hospital has identified sustainability as one of the top organizational risks within the hospital's Integrated Risk Management Framework, and monitors and reports on sustainability to the Board on a quarterly basis. Sustainability and energy conservation is also presented annually to the Board Resources Committee.

University Health Network's Board adopted an ESG framework, establishing three Board Committees – Environmental, Social, and Governance – to focus and oversee reporting on each element.

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	2024	2025
Achieved	7	12
Partially achieved	5	2
Not achieved	1	0

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 by minimizing waste.

TAHSN Results	2024	2025
Achieved	7	9
Partially achieved	4	5
Not achieved	2	0

Best in TAHSN: High Quality, Low Carbon Care

2025 Climate & Health Award:
Impact & Innovation in Policy & Practice

Scarborough Health Network received this award in recognition of their leadership and commitment to low-carbon, high-quality care, demonstrated by embedding "reducing low-value care" as an organizational priority.

The Collaborative Centre for Climate, Health & Sustainable Care annually recognizes innovative and outstanding work in the network through Climate & Health Awards.

2.1. Appropriate Care

The scorecard assesses the implementation of programs and mechanisms to promote appropriate and high-quality care, including:

Tests & procedures	Medication stewardship	Inpatient food
• Reduction of unnecessary blood use, lab tests, and imaging to minimize unnecessary waste and the environmental impact of clinical care, while improving patient care	• Development of stewardship programs to promote appropriate use of medications and reduce medication-related waste	• Implementation of sustainable and plant-forward menus and person-centred food services to improve patient care and reduce environmental impact

12 **TAHSN organizations are working on reducing unnecessary care**

13 **are working on sustainable and patient-centred food**

Unnecessary tests & procedures

Most TAHSN organizations, as relevant, have active initiatives to reduce unnecessary tests/procedures, including lab tests/studies (n=12/13), blood use (n=10/11), and imaging (n=8/11).

Medication stewardship

Almost all TAHSN organizations (n=13) have a formalized antimicrobial stewardship program, with the one remaining organization in the process of developing this. Less than half (n=6) have formalized stewardship programs for other medications.

Sustainable & plant-forward menus

Most TAHSN organizations (n=11/13) have implemented sustainable and/or plant-forward menu items. Organizations are sourcing local food (n=8), featuring local seasonal items (n=8), and sourcing sustainably produced ingredients (n=1). Organizations are also increasing plant-based/forward menu items (n=8) and consulting patients on this (n=5).

Patient-centred food services

All TAHSN organizations with inpatient food services (n=13/13) are working on patient-centred food services. Most often, organizations are conducting patient satisfaction surveys (n=13). Other initiatives vary and include daily selection menus (n=11), developing personalized menus (n=10), expanding culturally mindful options (n=10), consulting patients on new menus (n=6), and collecting dietary preferences post-admission (n=4).

Reducing Unnecessary Blood Use

Across TAHSN, organizations are working towards reducing unnecessary blood use, leveraging resources from Choosing Wisely Canada (CWC), Ontario Nurse Transfusion Coordinators (ONTraC), and the Ontario Regional Blood Coordinating Network (ORBCoN).

North York General (NYG) was the first hospital in Ontario to receive CWC's Using Blood Wisely Hospital designation and maintains its status by meeting national benchmarks. Key initiatives include**:**

- Evidence-Based Transfusion: >65% of transfusion episodes are single-unit; 80% occur with pre-transfusion hemoglobin <80g/L
- IVIG Optimization: Dosing is guided by the ORBCoN calculator to prevent overuse in patients with adjusted body weight, reducing unnecessary IVIG use
- Waste Reduction: NYG actively participates in the provincial redistribution program for blood components and plasma protein products
- Massive Hemorrhage Protocol (MHP) Accountability: MHP activations are tracked, with data shared provincially and with clinical teams to drive quality improvement
- Predictive Ordering: The Maximum Surgical Blood Order Schedule supports data-driven ordering

Scarborough Health Network (SHN) received the Using Blood Wisely Hospital designation from Choosing Wisely Canada's "Using Blood Wisely" program in 2023. Early work on blood conservation entailed establishing baseline data via audits, revising blood product order-sets, development of a transfusion guideline, and staff education. Currently, audits of blood product use are conducted twice annually to measure impacts and monitor sustained practice changes. Blood conservation metrics include:

- % of pre-transfusion hemoglobin <80 g/L
- % of single unit transfusion followed by complete blood count (CBC) reassessment
- % of inappropriate transfusion
- % of patients without a post transfusion hemoglobin
- % of patients with hemoglobin >100 g/L on first reassessment

Michael Garron Hospital received Using Blood Wisely Hospital designation, with blood conservation initiatives focused on:

- Timely reporting and follow-up of blood wastage incidents with education
- Updating the Massive Hemorrhage Protocol to include urgent blood requests and two-step activation to reduce unnecessary large volume blood product release

University Health Network publishes monthly/quarterly updates on using blood wisely KPIs in their BI portal and has active initiatives across all sites to reduce unnecessary blood product use, including:

- Cardiovascular Intensive Care Unit albumin utilization project: Achieved 75% reduction in use
- Gynecological Oncology: Set goals for patient blood management to correct iron deficiency anemia and non-anemic iron deficiency. Outcome measures are in progress

Reducing Unnecessary Lab Tests

Across TAHSN, organizations are working towards reducing unnecessary lab tests, utilizing resources from Using Labs Wisely to implement lab stewardship initiatives.

Michael Garron Hospital (MGH) has removed aspartate aminotransferase (AST) from its default liver panel order set. Instead, MGH uses the reflex testing functionality within the laboratory chemistry automation platform (COBAS), whereby AST is only performed when the criteria for elevated alanine aminotransferase (ALT) is met, with limited exceptions.

Scarborough Health Network (SHN) participated in Using Labs Wisely 2024-2025 cohort, which included submitting lab stewardship data since 2008 for comparison with peer hospitals. To date, lab optimization actions have included:

- Eliminating creatine kinase-Myocardial Band, folate and Erythrocyte Sedimentation Rate (ESR) tests
- Achieving below the median for AST to ALT ratio testing
- Achieving around the median for PTT to PT/INR testing and Urea to Creatinine Ratio testing
- Reducing vitamin B12 and urine culture testing

SHN is also implementing a Pause the Draw quality improvement initiative in critical care, minimizing unnecessary blood tests in intensive care units (ICUs) under the broader Using Wisely Lab strategy.

- The goal was to reduce unnecessary blood testing in ICUs across SHN by 15 % over the course of a 12-month period (March 2024-March 2025)
- SHN achieved a 14% reduction in unnecessary blood testing, diverted over 60,000 tubes and associated plastic parts from landfill, which they estimate will reduce their carbon emissions by over 10,000 kg CO_2e per year

Sinai Health included "reducing low-value laboratory testing" as an improvement initiative in their 2024/25 Quality Improvement Plan, with plans to sustain efforts in selected acute inpatient areas, implement an online feedback dashboard, identify additional areas, and engage stakeholders for implementation. They also achieved Choosing Wisely Canada Hospital Leadership Status for reducing repetitive lab testing and improving blood transfusion practices, as well as other efforts to reduce unnecessary care. Sinai continues to participate in Using Labs Wisely, with ongoing initiatives in reducing lab testing, particularly focusing on reductions at Hennick Bridgepoint Hopsital site.

University Health Network's Laboratory Medicine Program has partnered with the Canadian Society for Medical Laboratory Science (CSMLS) to validate the Lab Wisely Widget, which aims to:

- Help lab operators initiate change activities to reduce unnecessary laboratory tests
- Provide estimates on the financial and environmental impacts of reducing utilization of specific tests
- Support development of business cases for improvements and initiatives

Reducing Unnecessary Imaging

Across TAHSN, organizations are working to ensure appropriate use of diagnostic imaging and reduce unnecessary tests, following Choosing Wisely Radiology Recommendations.

North York General implemented a clinical decision support tool to support clinicians in selecting the most appropriate diagnostic imaging, aligning with Choosing Wisely Canada recommendations. Clinicians using the tool resulted in 2% order cancellation rate and 12-14% order change rate.

University Health Network (UHN) continues to advance sustainable radiology initiatives, including:

- Integration of 7 radiology recommendations from Choosing Wisely Canada and related literature into the Epic Health Information System to support clinician decision-making, including:
  - Guiding appropriate use of computed tomography (CT) pulmonary angiogram and when alternative diagnostic tests may be more appropriate, in alignment with Choosing Wisely's recommendations on CT Scans to Find a Blood Clot in the Lungs
- UHN also monitors medical imaging orders through their Clinical Decision Support tool and tracks KPIs related to imaging ordering, including:
  - Number of informational alerts triggered by the system to educate ordering clinicians
  - Number of averted duplicate/unnecessary tests (for active alerts)

Scarborough Health Network Diagnostic Imaging has initiated a collaboration with the Emergency Department (ED), Neurology, and Quality teams to review and implement initiatives to reduce unnecessary imaging in the ED, with a focus on CT head and CT angiography orders.

- ED physician-led chart reviews to identify instances of inappropriate ordering
- Collaborative review and modification of imaging pathways for the Urgent Stroke Clinic to optimize care for ED patients
- Ongoing monthly monitoring to track volumes and appropriateness of scans

Humber River Hospital's Sustainability Team has initiated a current-state assessment of medical imaging practices (phase 1) to identify opportunities to reduce unnecessary testing. Findings from this assessment will inform the development of a targeted implementation plan (phase 2), focused on reducing low-value imaging in the ED and inpatient settings.

The Joint Department of Medical Imaging – a collaborative network between Mount Sinai, UHN, and Women's College Hospital – facilitates access to a comprehensive selection of diagnostic options across the hospitals. Shared software amongst the organizations enables these organizations to reduce unnecessary duplicate imaging for patients who have completed imaging tests at a different hospital.

Medication Stewardship

Across TAHSN, organizations continue to promote medication stewardship through new initiatives and advancing those reported in the 2024 TAHSN Climate & Sustainability Report, and in alignment with the CASCADES Sustainable Hospital Pharmacy Scorecard and playbooks on Integrating Sustainability into Hospital Pharmacies and Medication Optimization for Sustainability in Inpatient Care.

Scarborough Health Network is implementing and expanding medication stewardship, including:

- Switching from IV to oral (PO) medication administration when equally safe and effective:
  - Hospital-wide quality improvement initiative (April 2023–March 2025) to convert IV pantoprazole and levetiracetam to oral/enteral formulations, as appropriate. This led to a 33% and 20% reduction in use of IV pantoprazole and levetiracetam, respectively, generating annual drug and supply cost savings of over $98,000 and an estimated reduction in annual carbon footprint of 3,823 kg CO_2e
  - Promoting IV to PO electrolyte replacements through audit and feedback mechanisms
- Reducing the use of benzodiazepines and other sedatives in elderly patients
- Supporting appropriate opioid prescribing post-surgery

Sunnybrook Health Science Centre's RECOVERED program promotes returning unused medications to support safe disposal and prevent opioid diversion. The program is voluntary and patients are informed about it during pre-admission, at discharge, and at post-operative visits.

- At the 6-week post-op follow-up, patients are asked to bring all medications, and ongoing opioid needs are assessed. Patients who no longer require opioids are encouraged to return any unused medication
- Data is collected on the number of patients returning opioids, prescriptions, and total quantity returned, which is used to further improve post-operative prescribing and discharge practices

Sinai Health has been working to promote medication stewardship through:

- Decreasing unnecessary prescribing of sedative-hypnotics
- Fostering antimicrobial stewardship by:
  - Formalizing a student pharmacist–led beta-lactam antibiotics allergy assessment service
  - Conducting a province-wide, AFP and CIHR-funded randomized controlled trial (RCT) evaluating peer-comparison feedback on antimicrobial prescribing among internal medicine physicians
  - Coordinating an antimicrobial stewardship pharmacy course and a two-year antimicrobial stewardship fellowship program for infectious diseases physicians with the University of Toronto

Michael Garron Hospital's medication stewardship efforts include penicillin allergy testing and allergy (de)labelling to promote optimal antibiotic use.

Planetary Health Menus

Across TAHSN, organizations are advancing planetary health menus - by expanding and improving plant-based options and enhancing patient choice - to support patient nutrition, reduce food waste, and improve sustainability.

Scarborough Health Network has expanded plant-based menu options for all meals. Patient satisfaction is also monitored to ensure these meals are acceptable to patient taste.

University Health Network (UHN) has increased their fresh menu items (not previously frozen) by working with a local vendor. They have also increased the variety of vegan and vegetarian menu options and are continuing to test new dishes.

Unity Health continues to work towards their target goal of reducing food-related GHG emissions by reducing red meat menu options by 60% by 2030 and increasing plant-forward menu options by the same. Currently, 25% of meals offered in the cafeteria and in-patient are plant-forward. Recently, Unity Health formed a menu committee, which includes patients and family partners.

Trillium Health Partners (THP) Credit Valley Hospital, Nutrition and Food Services is diversifying offerings by increasing plant-based meal options while reducing the frequency of beef-based entrées, as part of the ongoing commitment to better health outcomes and environmental sustainability.

- THP estimates that this will reduce their carbon footprint by 400 tonnes of CO_2e emissions annually
- These changes align with their patients' growing interest in plant-forward meals and support the hospital's strategic goals for financial and environmental sustainability
- Recently, THP hosted a taste panel with patients, families, and partners to gather feedback on potential plant-based menu items. Their insights are shaping the future of their patient meal offerings
- By gradually introducing plant-based entrées, THP aims to make a meaningful impact on both patient health and the planet by educating their community about delicious plant-based alternatives

UHN is enabling patients to select their meals electronically through the CBORD Patient App, launched across all sites, as part of UHN Nutrition Services' improvement initiative, myPlate. The app enables self-service meal ordering through which most patients can place their lunch and dinner options using their electronic devices. The project initially started as a 6 month trial in 2024 prior to full launch in April 2025.

North York General (NYG) Inpatient Food Services has partnered with Second Harvest to reduce food waste at their Finch site. Through this program, unserved food is packaged and donated to non-profits in their community, reducing food waste and GHG emissions while providing healthy food to people in need.

2.2. Supply Stewardship

The scorecard assesses the implementation of initiatives to reduce waste and shift to clinical supplies with lower carbon and environmental footprints, including:

Operating room	Reusable & streamlined	Medication
• Adoption of strategies found within the TAHSN Sustainable Operating Room (OR) Scorecard to reduce footprint of the operating rooms	• Replacement of single-use textiles and supplies with reusables • Optimization of supply management to reduce excess use and waste	• Optimization of medication management to minimize waste • Reduction in the use of high-volume, high-carbon inhalers

13 **TAHSN organizations have adopted at least one reusable textile**

14 **TAHSN organizations are reducing medication waste**

Sustainable ORs

All TAHSN organizations with ORs monitor their sustainability performance via the TAHSN Sustainable OR Scorecard.

Reusable textiles

Most TAHSN organizations (n=11/14) have initiatives outside of the OR to replace single-use textiles with reusables.

Streamlined supplies

Most TAHSN organizations (n=12/14) have initiatives to streamline supply management or otherwise reduce unnecessary supply use and waste. Initiatives include reducing unnecessary glove use and monitoring/reviewing supply carts to adjust inventory.

Medication waste

All TAHSN organizations (n=14) have initiatives to reduce medication waste.

Inhalers

The majority of TAHSN organizations (n=8) have initiatives to reduce high-volume, high-carbon inhalers, including strategies to reduce use, process for inhaler reassessment to reduce unnecssary use, low-volume alternatives on the formulary, and implement auto-substitution policies that do not switch to metered-dose inhalers.

Reducing Costs & Carbon: Anesthetic Gases

TAHSN has almost eliminated desflurane use, with most organizations (13/14) removing it from formulary or operating rooms. Several TAHSN organizations have either completely phased out centralized nitrous oxide or are in the process of decommissioning their centralized nitrous oxide systems.

Trillium Health Partners (THP) is completely decommissioning centralized nitrous distribution systems across all 3 acute hospital sites and the Peter Gilgan Mississauga Hospital will be built without this system. Instead, THP now offers delivery of nitrous oxide at point of care when patients need it. THP has reported on significant GHG and financial savings.

Sunnybrook Health Sciences completely turned off centralized nitrous oxide at both the Holland and Bayview Campuses as of December 2024. The large holding tanks for the piped systems have been physically removed from their facilities. Anesthetists now use small tanks on the anaesthetic machines, and systems are in place to ensure that they are checked and replaced regularly. This initiative led to a reduction of total nitrous oxide purchase across the organization by 75%.

North York General (NYG) is in the process of eliminating nitrous oxide waste by decommissioning the existing centrally piped system and transitioning to portable tanks by fiscal year end. This is being led jointly by the Perioperative Green Team, labour and delivery, and corporate sustainability leadership.

Unity Health is in the development phase of their "Nix the Nitrous" initiative, which includes the decommissioning of central nitrous oxide. Unity decided to start with decommissioning at St. Michael's Hospital as their clinical teams are engaged and the bulk tank has already been emptied and isolated. This was included in their Sustainability Plan 2024-29.

University Health Network made the switch from desflurane to sevoflurane and adjusted anesthesia machine settings to deliver only the medically necessary amount of gas rather than the default flow setting. Since 2019, these initiatives led to a reduction in anesthesia-related climate pollution by over 50% while surgeries increased.

Reducing Costs & Carbon: Unnecessary Supplies

TAHSN organizations are evaluating opportunities and implementing initiatives to reduce unnecessary supply use, avoiding carbon and financial costs, and improving care.

Organizations are streamlining supply carts to reduce waste of unnecessary inventory, including:

- At **Women's College Hospital**, **supply carts are checked regularly** and the max/min stock levels in the SAP system are adjusted based on actual use, reducing how much of each item is stored on the carts
- At **Trillium Health Partners**, **a review of ICU supply carts is underway** at multiple sites to identify opportunities to standardize commonly used items and reduce unnecessary products. Medicine unit supply is also being reviewed and streamlined to minimize excess inventory and support hospital-wide product standardization
- **University Health Network has instituted an educational campaign on reducing overstock and decluttering supplies** in patient rooms to reduce unnecessary supply waste on in-patient floors

Several organizations have been woking to reduce unnecessary glove use and improve hand hygiene:

- In 2024, Michael Garron Hospital (MGH), Scarborough Health Network (SHN), and Holland Bloorview participated in a TAHSN pilot to reduce unnecessary glove use (pg. 20)
  - **MGH recently hired an Environmental Sustainability Coordinator to lead the ongoing gloves initiative** with IPAC. This work will be supported by the IPAC Quality Improvement Specialist to ensure a strong evidence-based and collaborative approach
  - **SHN** is currently piloting gloves use reduction initiative in surgical inpatient units
- **CAMH has been providing education about unnecessary glove use in Nutritional Services**, promoting use of bare hands and proper hand hygiene as best practice
- **UHN launched a Gloves are Off campaign** with staff education and distribution of educational materials
  - The PPE policy has been amended to clarify when glove use is necessary for patient care
  - UHN estimates that this new campaign could reduce glove use by 18%, saving up to $720,000 or 12 million gloves
- **Sunnybrook Health Sciences Centre is reducing unnecessary glove use** by storing gloves outside of patient rooms and changing to boxes with shields that reduce gloves falling out of the box

North York General redesigned their surgical custom packs, eliminating ~9,000 single-use items annually. This initiative involved perioperative nurses, surgeons, supply chain, and sustainability leads working together to ensure clinical appropriateness while eliminating waste. Leaning custom packs is one of the sustainability strategies on the **TAHSN Sustainable Operating Room (OR) Scorecard.**

Reusables First

Across TAHSN, many organizations are replacing single-use products with reusables, where appropriate, in alignment with recommendations in the CASCADES playbook on a Reusables First Approach to Healthcare.

- **Unity Health Toronto has expanded use of reusable textiles,** including linens, surgical gowns, scrub hats, and drapes, where appropriate, along with education to raise awareness and encourage use. Unity Health also exclusively uses reusable laryngoscope blades and temperature probes
- **Sunnybrook Health Sciences Centre has achieved 50-60% reusables for towels and drapes**.
- **North York General uses several reusable textiles**, including isolation gowns, surgical drapes, and surgical gowns in labour and delivery
  - Reusable textile use is reported annually (volume used, reduction in natural resource consumption, GHG emissions, and water consumption)
- **Trillium Health Partners is working on minimizing unnecessary use of disposable absorbent pads**, including through educational outreach and a trial of reusable absorbent pads in 2026
- **Holland Bloorview, Scarborough Health Network, and Baycrest use reusable food serving ware**

Climate Conscious Inhalers

Several organizations are taking steps to reduce the use of high-volume, high-carbon inhalers, in alignment with CASCADES playbooks on Climate Conscious Inhalers (for Practices in Inpatient Care & Prescribing in Outpatient Care)

- **Scarborough Health Network reviewed use of high-volume inhalers to identify opportunities for reduction.** When formulary reviews are completed, non metered-dose inhalers (MDIs) are added as an alternative.
- **Sunnybrook Health Sciences Centre added dry-powder inhaler (DPI) options to its formulary.**
- The **Centre for Addiction and Mental Health added Spiriva (tiotropium) Respimat to its formulary** as an alternative to Handihaler format. This change was initiated because the HandiHaler device can no longer be procured without a 30-day supply (30 capsules) of tiotropium for daily use, which could result in the accumulation of unused capsules and medication wastage when patient admissions are shorter than 30 days.

Dimension 3. **Building**

3.1. GHG Emissions

Organizations can drive reductions in the greenhouse gas (GHG) emissions associated with their energy and operations by implementing structures to enable emissions estimation and reporting and to develop and resource emission reductions roadmaps.

TAHSN Results	2024	2025
Achieved	3	6
Partially achieved	7	6
Not achieved	3	2

3.2. Waste Reduction

Organizations can drive reductions in waste by implementing structures to enable waste monitoring and reporting and to develop and resource waste reduction plans.

TAHSN Results	2024	2025
Achieved	4	4
Partially achieved	3	6
Not achieved	6	4

Best in TAHSN: Low Carbon & Sustainable Buildings

2025 Climate & Health Award:
Impact & Innovation in Policy & Practice

Holland Bloorview Kids Rehabilitation Hospital received this award in recognition of their leadership and commitment to efficient and sustainable buildings.

The Collaborative Centre for Climate, Health & Sustainable Care annually recognizes innovative and outstanding work in the network through Climate & Health Awards.

3.1. GHG Emissions Reduction

The scorecard assesses the development of mechanisms to estimate, report on, and reduce operational GHG emissions, including:

Estimating & reporting	Roadmap & resources	Planning & design
• Development of process to regularly measure and report internally on GHG emissions to establish a baseline and identify reduction opportunities	• Development of GHG Reduction Roadmap • Allocation of resources towards initiatives to reduce GHG emissions	• Integration of low-carbon emission standards and climate resilience into planning, designing, and constructing processes

8 **TAHSN organizations have GHG Emissions Reduction Roadmap**

13 **have active initiatives to reduce GHG emissions**

Reporting

All TAHSN organizations are measuring GHG emissions annually (n=14), and just over half (n=8) have a process in place to report internally on their emissions.

Roadmap

Just over half of TAHSN organizations (n=8) have a GHG Emissions Reduction Roadmap and/or action plan towards becoming a low-carbon organization.

Resourcing

Most TAHSN organizations (n=10) have formally allocated resources to advance initiatives to reduce GHG emissions, either through dedicating human resources, providing a dedicated budget, and/or access to funds.

Planning

The majority of TAHSN organizations (n=9) have integrated low-carbon emissions standards into the planning, design, and construction of renovations and/or new developments. Standards being followed include LEED certification (Silver, Gold, Platinum) and Toronto Green Standard (Tier 2 or 3). Almost half (n=6) are considering future climate projections and climate resilience in renovations and/or new developments.

Developing GHG Reduction Roadmaps

Across TAHSN, organizations are setting GHG reduction targets, developing roadmaps to meet their stated targets, and implementing initiatives to achieve their targets.

Unity Health committed to reducing GHGs 20% by 2030 and 50% by 2040

- Reporting: Utility reports and GHG emissions are reported to senior management monthly
- Roadmap: Unity Health continues to implement and expand initiatives to meet GHG Roadmap targets
- Emission reduction initiatives to meet their targets include:
  - Reducing GHG emissions by 3,500 tonnes (15% of network) with potential to reduce it further by an additional 1,100 Tons (20% of network)
  - Monitoring GHG emissions and working towards a plan that will reduce scope 3 emissions
  - Determining potential of using geothermal energy (air source heat pumps) for a redevelopment at St. Joseph's Hospital

University Health Network (UHN) committed to reducing GHGs from utilities 45% by 2030

- Reporting: Emissions are reported on Power-BI and in the Annual Sustainability Report (2024 report; 2025 report expected spring 2026), and are reviewed by facilities and executive leadership and quarterly by the Board.
- Roadmap: UHN continues to expand and engage in ongoing emission reduction improvement projects:
  - The Wastewater Energy Transfer (WET) System: The world's largest raw wastewater energy transfer system at Toronto Western Hospital is expected to reduce UHN's emissions by 60% and enable public health wastewater research. In Q3 2025/26, the system achieved commissioning and is expected to reduce UHN's overall emissions by approximately 8,000 tons annually going forward
  - Energy management projects resulted in $5.3M saved in utility costs in 2024, cumulative savings of $51M since 2012, avoiding 67,268 tonnes of emissions, comparable to removing 20,608 cars

SickKids committed to reducing GHGs by 50% by 2040 and net zero by 2050

- Reporting: Internal quarterly reporting on energy and GHGs, and progress updates published (2025)
- Roadmap: SickKids is on track to meet their 2040 target, having decreased their GHG intensity by 21% since 2018.
- Initiatives to support their GHG reduction targets include:
  - Upgrading process chillers resulting in 30% reduction in research facility emissions, heating system electrification, and retrocommissioning old mechanical equipment
  - Eliminating desflurane from Operating Rooms
  - Integrating sustainability into the design of the new Patient Support Centre (PSC) building through efficient lighting and water use, and deep-lake cooling (DLC) technology to reduce reliance on energy-intensive chillers

Advancing GHG Reduction Initiatives

Across TAHSN, organizations are identifying opportunities and implementing a range of initiatives to reduce energy use and associated GHG emissions.

Women's College Hospital (WCH) is implementing the following initiatives towards a 25% reduction in total energy usage from their 2017 baseline by 2027, with an annual reduction target of at least 5%:

- Monitoring & Verification: Adoption of Building Automation System (BAS) and RETScreen Expert for ongoing monitoring of energy performance and GHG emissions, as well as a facility energy audit to identify further reduction opportunities
- LED Lighting Upgrades: Retrofitting fluorescent lighting with LED fixtures
- HVAC Optimization: After-hours setbacks on air handling units (AHUs) and reconfiguring variable air volume (VAV) systems to improve energy efficiency
- Demand Control Ventilation: Installing CO_2 sensors in high-occupancy areas to modulate ventilation based on actual occupancy to reduce both heating and cooling loads

North York General (NYG) surpassed their annual energy reduction targets, outlined in their Quality Improvement Plan, through operational improvements and strategic retrofit projects, including:

- Ontario's first large-scale hydronic air source heat pump system was introduced at NYG's Minor Procedures Centre. The Centre now operates at a carbon intensity of 2.26 kg $CO_2/ft^2/yr$, compared to the sector average of 9.32 kg $CO_2/ft^2/yr$, and within "high-performance" targets normally reserved for new builds. Overall, the facility's systems perform 25% better than ASHRAE 90.1-2013 energy standards
- A major AHU and Heat Wheel Optimization project reduced carbon intensity at their General site from 7.7 to 7.4 kg CO_2/sf. These improvements built on a multi-year program of retrofits, including smaller projects such as lighting upgrades and chilled water system optimization

Holland Bloorview has outlined targets in their 2024-2029 Energy Conservation and Demand Management Plan: 20% reduction in electricity consumption, 8% reduction in natural gas consumption, and 14% reduction in GHG emissions. They are working towards these targets through:

- Converting select air handling units from constant air volume (CAV) to variable air volume (VAV).
- Conducting a steam trap energy efficiency analysis and upgrading steam traps
- Adding variable frequency drivers (VFD) to pumps and motors
- Installing a solar panel array, with an estimated kWh production of 57,000 to 60,000 annually
- Upgrading to LED lighting, which is estimated to reduce energy load by 50%
- Upgrading to waterless urinals, which is estimated to save 14,000 L of water annually
- Redirecting rainwater to 114,000-litre reservoir that is used by the facility's irrigation system

New Developments & Renovations

Across TAHSN, organizations are integrating low-carbon and sustainable design in the planning, design, and construction of renovations and new developments.

Unity Health and University Health Network have developed internal construction guidelines that include sustainability and energy saving measures to standardize their practices for new projects.

North York General (NYG) is integrating sustainable and efficient design into their largest redevelopment since the hospital's founding – a Long-Term Care Development and a new Patient Care Tower – both of which are being designed to achieve or exceed LEED Silver Certification. NYG commissioned a sustainability and energy study to ensure alignment with GHG and energy performance targets, ensuring the design integrates advanced strategies, including high-efficiency building envelopes and low-carbon energy systems, as well as resilience measures.

Scarborough Health Network (SHN) is integrating low-carbon emissions design standards, targeting meeting Toronto Green Standard v3, LEED v4.1 Gold, and Fitwel v2.1.

- Energy Efficiency: Geo-exchange heating and cooling system using an open-loop geothermal heat pump system, which provides efficient heating and cooling, backed up by condensing boilers
- Energy Recovery Ventilators (ERVs): The mechanical system includes high-efficiency ERVs with CO_2-based demand control ventilation to reduce the heating and cooling demand by recycling heat from exhaust air. The energy model indicates a 26.7% energy savings compared to the reference model, exceeding the TGS v3 Tier 2 requirements
- Water Efficiency: Domestic Hot Water (DHW) system uses heat pumps to minimize energy consumption. Low-flow plumbing fixtures (e.g., water closets at 3.8 LPF, showers at 5.7 LPM) further reduce water consumption
- Embodied Carbon: Use of low-carbon materials such as mass timber, low-carbon concrete, and optimized aluminum framing for windows helped drive this reduction. The project achieved a 27% reduction in Global Warming Potential (GWP), compared to the baseline, achieving an absolute embodied carbon of 5,097 t CO_2e and an intensity of 280 kg $CO_2e/m2$
- Green Space: Integrated natural ventilation and other passive strategies to reduce energy demand. Additionally, green stormwater management systems are employed to manage runoff sustainably

Sinai Health re-evaluated the need for a new temporary chiller onsite to deliver sufficient cooling during the heatwaves of 2025. Instead, they worked with a consulting groups to help identify opportunities for improving the performance of the existing Deep Lake Water Cooling System through rebalancing of existing processes and management of overrides during the summer. As a result, Sinai was able to deliver cooling without an additional chiller, avoiding further GHG emissions through the use of a temporary chiller.

3.2. Waste Reduction

The scorecard assesses the development of mechanisms to estimate, report on, and reduce waste, including:

Estimating & reporting	Action plan & resources
• Development of process to regularly measure and report internally on waste to identify reduction and diversion opportunities	• Development of waste reduction targets and action plan • Allocation of resources towards initiatives to reduce waste

7 **TAHSN organizations have targets or an action plan for reducing waste**

11 **have active initiatives to reduce waste**

Reporting

Almost all TAHSN organizations (n=13/14) have a process in place to regularly monitor waste, usually monthly or quarterly. Most (n=11) also have a mechanism to report internally on waste for review, either in relevant committees or with senior management/leadership.

Targets & action plan

Half of TAHSN organizations (n=7) have targets and/or an action plan for reducing waste, and almost all of the remaining organizations (n=6/7) are working on developing these. Some organizations publish their waste and reduction targets, either internally on digital dashboards or publicly.

Resourcing

Less than half of TAHSN organizations (n=6) have formally allocated resources to advance initiatives to reduce waste, either through dedicating human resources, allocating a dedicated budget, and/or providing access to funds.

Initiatives

Waste initiatives vary across the network. Initiatives to reduce waste include identifying and minimizing unnecessary supply use and replacing single-use supplies with reusables. Some organizations conducted waste audits to identify opportunities for improved waste diversion, followed by improved and centralized sorting, standardized signage, and education. A few organizations have improved management of e-waste and/or organics.

Monitoring & Reporting on Waste

Across TAHSN, organizations are improving waste monitoring and reporting systems to better identify opportunities to reduce waste and improve diversion. Efforts include instituting regular internal reporting and review processes, developing digital dashboards for hospital-wide transparency and engagement, and publishing targets publicly.

North York General (NYG) tracks waste volumes monthly and is working on a digital dashboard. All major streams – landfill, recycling, biomedical, organics, and e-waste – are reported internally to Facilities and Environmental Services leadership. In 2025, NYG began developing a digital dashboard to provide hospital-wide visibility of waste performance to support targeted interventions. Waste reduction is also included in their Quality Improvement Plan (QIP) 2025–2026, and initiatives have been implemented across clinical and corporate areas, including leaning of custom packs, transitioning to paperless workflow in pharmacy, rolling out dual stream bins with standardized signage, and trialing reusable isolation gowns.

Women's College Hospital (WCH) publishes their waste report monthly on WCH's internal website, which is also reported at Environmental, Social, and Governance (ESG) Committee meetings. WCH also posts their waste diversion target and roadmap – to achieve a 2% waste diversion increase for 2025 – as one of the sustainability targets and plans on their website.

Sunnybrook Health Sciences Centre reports internally on waste. Monthly performance reports on waste diversion and recycling are reviewed by the Environmental Services and Quality Improvement Teams at SHSC. They also post the results of waste management audits on their waste management board.

University Health Network (UHN) reports internally and externally on waste. The Environmental Services Department and Energy & Sustainability Team meet bi-monthly to track and review metrics, work on waste reduction, and troubleshoot and improve processes. They share quarterly PowerBI waste reports internally. UHN publishes an annual Sustainability Report (2024 report; 2025 report expected spring 2026), which reports annual hazardous and non-hazardous waste volumes by site, cost savings from recycling, as well as updates and next steps on waste reduction initiatives.

Trillium Health Partners has been focusing on medical waste reduction, including tracking patterns of waste and exploring innovative solutions to reduce waste from avoidable product expiry.

Dimension 4. **Shaping**

4.1. Procurement

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

TAHSN Results	2024	2025
Achieved	5	8
Partially achieved	4	2
Not achieved	4	4

4.2. Resilient Institution

Healthcare organizations can improve resilience to climate shocks and stresses by identifying climate risks and developing management plans and procedures for key identified risks.

TAHSN Results	2024	2025
Achieved	9	8
Partially achieved	2	4
Not achieved	2	2

Best in TAHSN: Climate Health Equity

2025 Climate & Health Award:
Impact & Innovation in Policy & Practice

CAMH received this award in recognition of their leadership and commitment to climate health equity, demonstrated through the CAMH Mental Health & Climate Change Response Initiative.

The Collaborative Centre for Climate, Health & Sustainable Care annually recognizes innovative and outstanding work in the network through Climate & Health Awards.

4.1. Procurement

The scorecard assesses corporate commitment to sustainable procurement and integration of sustainability into procurement processes, including:

Corporate commitment	Contracts & RFx	Implementation
• Formal commitment to sustainable procurement • Inclusion of sustainable procurement in senior leadership portfolios	• Integration of sustainable procurement into contract management and generic/template RFx through standardized sustainability language	• Identification of key categories, products, or services to target for sustainable procurement initiatives to trial and sustain change

9 **TAHSN organizations have committed to sustainable procurement**

8 **have sustainable procurement initiatives**

Corporate commitment

Most TAHSN organizations (n=9/14) have a formal commitment to sustainable procurement and half have included sustainable procurement in senior leadership portfolios (n=7). This is achieved through public organizational commitments, commitment/statement within a plan/strategy, or policies/procedures to enact sustainable procurement.

Contract management

Half of TAHSN organizations (n=7) are pursuing sustainable procurement through contract management, most of which are engaging with their Group Purchasing Organization's Environmental, Social, Governance (ESG) committee to do so.

RFx

Just over half of TAHSN organizations (n=8) have integrated sustainability into RFx. This has been done by including a sustainable procurement section in RFx templates, adding sustainability/ESG questions, and weighting sustainability criteria.

Initiatives

Sustainable procurement initiatives vary across the network and include sourcing efficient equipment, reusable supplies, reprocessed equipment, recycled/recyclable supplies, reduced packaging, reduced waste, and sustainable or local food.

Sustainability in Procurement Policies & Processes

Organizations across TAHSN are incorporating sustainability into procurement processes, including by leveraging their Group Purchasing Organization's ESG work, where relevant.

Holland Bloorview Hospital has included a section on environmentally preferable purchasing in their Environmental Sustainability Policy which includes the following statements: "Enhance hospital procurement practices to align with environmental sustainability, including the use of recycled materials, reduction of single-use plastics, and adherence to fair labor practices" and "Foster partnerships with health care organizations to mutually advance environmental sustainability goals."

University Health Network's (UHN) RFx templates include a standard environmental criterion for evaluating vendors with documented environmental and sustainable practices.

- UHN has a Sustainable Procurement Reference Tool with guidance on procurement
- RFx templates include standard environmental criterion for evaluating vendors with documented environmental and sustainable practices. A working group has also been created with a focus on strengthening the language specificity in the environmental exhibit and scoring weights for future RFx
- Recent sustainable procurement initiatives include:
  - In vivo animal imaging system: The highest ranked proponent offered a system that could utilize either sevoflurane (GWP 130) or isoflurane (GWP 510) anesthesia gas. Following a discussion with internal subject matter experts and considering the sustainability impacts, they moved forward with sevoflurane, reducing the GHG emissions with no impact on functionality or cost
  - Temperature sensitive products: UHN is part of a group working with research vendors on temperature sensitive products to encourage them to reduce associated waste

In partnership with MMC, organizations have included sustainability in their RFx.

- **Sinai Health has included a statement reinforcing ESG as a priority in RFP documents.**
  - ESG questions are included in the RFP Business Criterion section
  - RFX templates include mandatory language on the Modern Slavery Act (Bill S-211) and amendments to the Competition Act (Bill C-59)
- **Scarborough Health Network's RFP language requests responses for environmental policies**, social responsibility, governance, waste minimization, net zero emissions, and environmental risk assessment
- **Unity Health has incorporated** Building Ontario Businesses Initiative **(BOBI) criteria and ESG evaluative criteria into their RFX template**
  - These requirements are reflected in both Unity's local RFPs as well as facilitated procurements. For example, in partnership with MMC, Unity issued an RFP as part of a multi-stage innovation procurement process looking to award market solutions to achieve future total outcomes in support of Unity's environmental emission reduction goals for their facilities:
    - A 50% reduction in Scope 1 and 2 GHG emissions from a 2020 baseline of 25,886 tonnes.
    - A reduction in average energy intensity from 58 kWh/ft2 to 30 kWh/ft2.

4.2. Resilient Institution

The scorecard assesses identification of climate change as an organizational risk and development of plans/procedures to improve preparedness, including:

Risk identification	Risk management & preparedness
• Identification of climate change and the related shocks and stresses as an organizational risk • Assessment of climate-specific risks	• Development of risk management plans and procedures for climate risks to patient health and clinical services, assets and infrastructure, and clinical supply chains

4 TAHSN organizations have identified climate change as a risk

12 have plans/procedures for at least one climate-related risk

Risk identification

Less than one-third of TAHSN organizations (n=4/14) have identified climate change as a risk to their organization and completed a climate-specific risk assessment (n=3). These have included assessing risks to clinical care and service continuity and supply chains, as well as physical assets, infrastructure, and campuses, particularly focused on flood risks.

Patient health & clinical services

Most TAHSN organizations (n=10) have plans/procedures for climate risks to patient health and clinical services. Most are focused on coordination with Emergency Management and/or Public Health, communications, procedures/support for staffing, and clinical service continuity. Some have guidelines or training for assessing risks to patients and adapting care, and some have done patient engagement on climate impacts to their health and care.

Assets & infrastructure

Most TAHSN organizations (n=10) have plans/procedures for climate risks to assets and infrastructure. Most have ensured equipment and power/fuel redundancy for operationally critical areas. Some are planning to invest in assets and infrastructure to improve climate resilience or have integrated climate risk and resilience into the planning, design, and construction of renovations or new developments.

Clinical supply chains

Most TAHSN organizations (n=10) have plans/procedures for climate risks to clincal supply chains. Most have assessed clinical supply chain vulnerabilities and developed plans.

Building Resilience to Flooding

Some TAHSN organizations have identified floods as a key risk and are implementing measures to enhance the resilience of new and existing infrastructure, plan coordinated responses, and minimize clinical disruptions.

University Health Network (UHN) has identified climate change and related extreme weather events as a top organizational risk. Management has made a multi-year commitment to enhancing UHN's ability to prevent, mitigate, and respond to flood events, including those due to climate-related stresses

- Reporting: Assessments and updates are provided to the appropriate Board Committee on a bi-annual basis. Extreme weather events, related impacts, and after actions are also reported to UHN's Board of Trustees, such as the 2024 Toronto Floods impacts and Management's response
- Risk assessment: UHN participates in the Risk Assessment Checklist Program provided by their insurer annually. As part of this self-assessment, UHN selected the water and sewage losses risk module as an area of focus this year, and updates are provided to the relevant Management and Board committees
- Initiatives to improve resilience in the event of flooding:
    - UHN's Emergency Preparedness Plan and accompanying Emergency Code Procedures are regularly reviewed to provide timely, integrated, and coordinated responses to emergencies, including extreme weather events and related events.
    - Comprehensive critical infrastructure shutdown processes and training to prepare staff and minimize clinical disruptions during shut downs of critical systems.
    - Ongoing revision of flood-specific emergency response plans and ongoing engagement with clinical leadership to support renewal of critical plumbing and drainage infrastructure

North York General has identified climate risks to buildings and other infrastructure – including flooding and encroachment of existing site on adjacent floodplain. Resilience planning and flood protection is being applied to both new facilities and existing their General site by integrating new infrastructure with existing facilities to ensure redundancy and relocating critical infrastructure.

Holland Bloorview has partnered with the Toronto and Region Conservation Authority (TRCA) on a Stormwater Outfall Remediation Project to rehabilitate stormwater sewer infrastructure and address ongoing slope instability in the Burke Brook ravine. The project mitigates flood risk to the hospital, improves climate resilience of the watershed, and contributes to protection of the public green space.

Michael Garron Hospital (MGH) has installed standby pump systems connected to sump pits to mitigate flash floods. Previously, floods forced operational shutdowns and extensive clean-up efforts. These disruptions have been eliminated since implementing these mitigation measures. In addition, specifications for all new projects now mandate risk management and climate resilience measures for assets and infrastructure, ensuring consultants design and build to these criteria.

Strengthening Resilience to Supply Chain Disruption

Some TAHSN organizations are building awareness of the risks of climate-related shocks to the reliable delivery of supplies and equipment, preparing for possible disruptions, and maintaining back-up inventory.

The **Centre for Addiction and Mental Health continually maintains a four-month supply of critical Personal Protective Equipment (PPE)** in the event of a significant disruption and supply shortages.

University Health Network (UHN) has partnered with Cardinal Health Canada, their warehouse provider, which guarantees a minimum of 300 pallet space to maintain availability of critical supplies. UHN has also assigned a dedicated Product Support Specialist who works closely with the clinical team in evaluating clinically acceptable substitutes in response to instability of supply.

Sunnybrook Health Science Centre includes supply chain challenges and associated mitigation strategies in Sunnybrook's Integrated Risk Management (IRM) inventory. This risk is also monitored by the Finance and Common Audit Committee through bi-annual updates.

Unity Health is building awareness of climate impacts to procurement and supply chains, including engaging suppliers to learn and collaboratively advance resiliency as well as climate mitigation efforts.

Preparing for Power Outages

UHN has prepared guidance to clinical units and leaders on appropriate and safe use of extension cords and power bars during outages to minimize disruptions to patient care. It has also been renewing emergency generators, with attention to the environmental impact and emissions during purchasing.

Sunnybrook Health Sciences Centre's cogeneration plant provides electricity and boiler redundancy, mitigating power quality events and reducing patient risk.

Women's College Hospital's facility provider has robust business continuity plans, including backup chillers and generators.

Preparing for Climate Risks to Patients & Staff

Climate change poses risks to patient health and well-being. TAHSN organizations are developing communications, educational content, guidelines, and response strategies.

The **Centre for Addiction and Mental Health's (CAMH) Mental Health and Climate Change Response Initiative is an organization-wide effort to make climate change and mental health a strategic priority**. The initiative addresses the mental health impacts of climate change with attention to equity through:

- Forming the CAMH Climate Action Steering Committee, a group of scientists, hospital leaders and staff focused on building a hospital-wide learning community to strengthen climate and adaptation efforts
- Influencing CAMH's strategic direction by recognizing as a core institutional commitment to "invest in research, education, clinical care, and action to respond to the compelling evidence that climate change impacts the developing brain and the mental health of people around the world"
- Developing heat response guidelines for clinicians, patients, and families, to promote preparedness
- Adapting a psychosocial resilience and hope intervention for youth facing climate-related distress
- Advancing research that centers lived expertise, including a mixed methods project involving women with severe mental illness and the climate crisis, to inform practice and service innovation
- Sharing of educational content regarding the intersections between climate change and mental health (via educational presentations, web-based curriculum, and a website)
- Coordinating a national network of researchers and experts on climate, mental health, equity, and poverty
- Leading policy advocacy and collaborating with government partners and public health authorities

Sunnybrook Health Sciences Centre is a member of the North Toronto Ontario Health Team, which has been developing a coordinated heat response plan for North Toronto, included in their 2024/2025 QIP.

Holland Bloorview has air quality and outdoor activity guidance on when to adjust outdoor activity based on air quality levels. They also send organizational-wide emails to notify staff of heat and air quality warnings, with recommendations for staff, links to additional guidance, and contact information.

Michael Garron Hospital (MGH) develops and shares resources with the community and staff on climate events that could impact health during different seasons (summer heat and fall rain, winter).

A group of physicians and staff from across TAHSN (CAMH, UHN, Unity St. Mike's, Sunnybrook, Baycrest) are collaborating to develop a strategy and a set of activities that will enhance preparedness among clinicians, patients, families, and communities in the face of heatwaves. Planned activities include broader TAHSN engagement to encourage greater participation, cross-sector outreach and collaboration, education and organizational preparedness initiatives, and the development of an implementation toolkit.

Scorecard Development

Development of 2023 (V1)

- **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)

- **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. See the 2024 TAHSN Climate & Sustainability Report for summary and results.

Development of 2025 (V3)

- **V3 tool development** (March-June 2025): The 2025 version of the balanced scorecard has been refined based on the results of the 2024 scorecard and in consultation with the Working Group and key experts across TAHSN and beyond.
- **V3 self-assessment** (July 2025): The 2025 TAHSN Sustainability Balanced Scorecard Assessment Form was sent to all 14 TAHSN hospitals, for response by September 2025. This report summarizes the results from the V3 assessment.

Working Group

We would like to acknowledge the engagement of the TAHSN Sustainable Health System Community of Practice and leadership of our Working Group to develop the scorecard. Thank you also to Malaika Thompson for her support with the data analysis for the development of this report.

V1 (2023)

- **Dean Sabean,** 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

Secretariat

- **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

V2 & V3 (2024-2025)

- **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

Secretariat

- **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, Nour, S, Miller, FA. TAHSN 2025 Climate & Sustainability Report. Collaborative Centre for Climate, Health & Sustainable Care. University of Toronto, Toronto, Canada. January 2026.

TAHSN Toronto Academic Health Science Network

SUSTAINABLE HEALTH SYSTEM COMMUNITY of PRACTICE

UNIVERSITY OF TORONTO

COLLABORATIVE CENTRE FOR Climate, Health + Sustainable Care