

Beyond the Data 2023–2024 Annual Report





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Cover Image (left to right) Sujitha Ratnasingham, Susan Bronskill, Baiju Shah, Michael Schull, Minnie Ho

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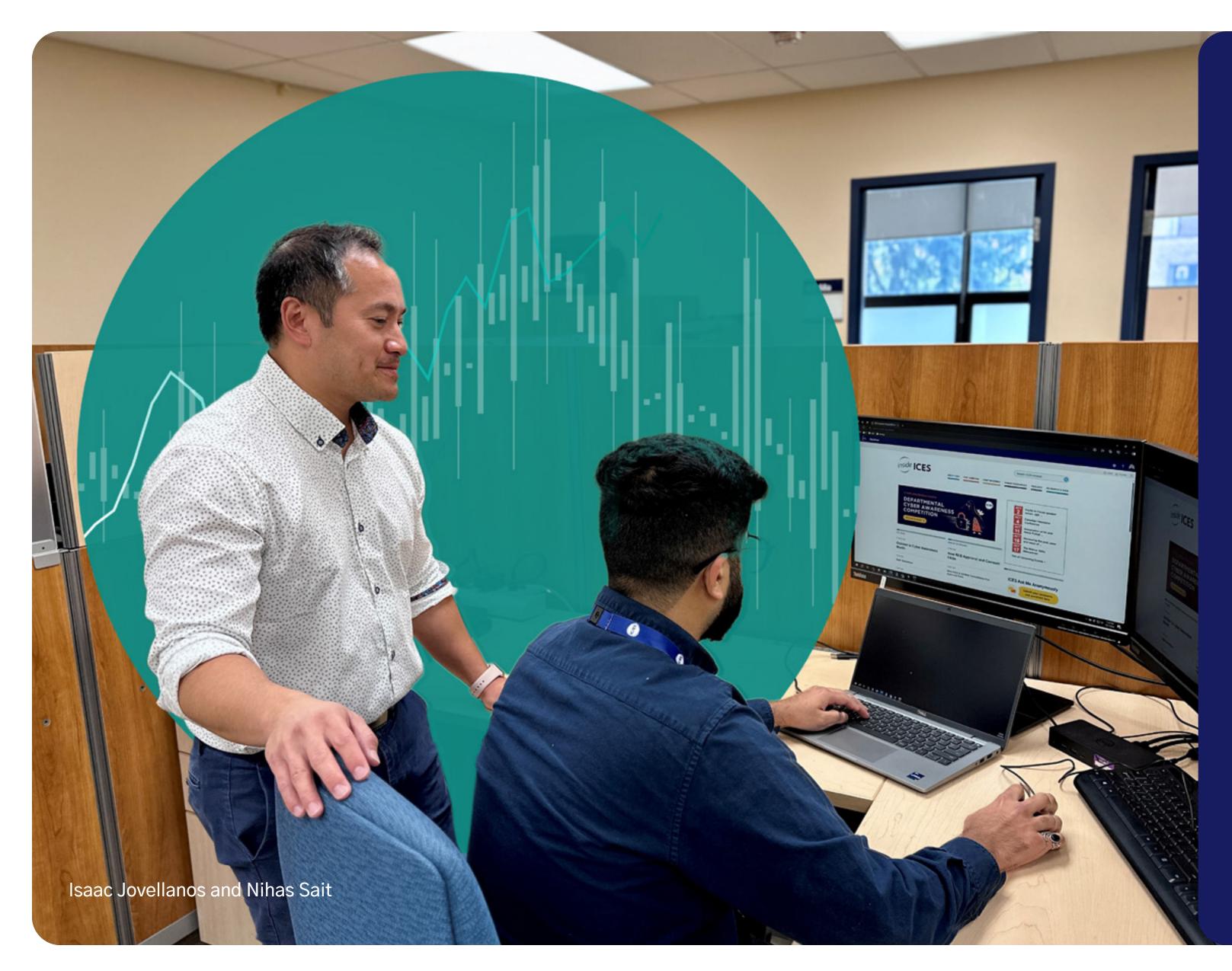
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Land Acknowledgment

ICES gratefully acknowledges the Anishinaabe, Huron-Wendat, Haudenosaunee, St. Lawrence Iroquoians, Mohawk, Algonquin and Attiwonderon peoples on whose land our seven sites are located. As an organization, we recognize the diverse rights of Inuit, Métis and First Nations peoples to Indigenous Sovereignty and self-governance. We commit to fulfilling our obligations of truth and reconciliation and ground our work in the principles of the United Nations Declaration on the Rights of Indigenous Peoples. We are grateful for the opportunity to perform this work, on this land, and as a community.





Who We Are

Committed to working with scientists, partners, and communities to help explore today's problems and inform solutions for better health and healthcare tomorrow.

ICES is an independent not-for-profit research and analytics institute and registered charity with seven sites across Ontario. Formed in 1992, ICES is governed by a Board of Directors and guided by a Scientific Advisory Committee and a Public Advisory Council, representing diverse regions and communities across Ontario. ICES is powered by a community of research, data, and clinical experts. Many are practising clinicians who understand the everyday challenges of healthcare delivery. Together, we produce insightful research and analytics that informs thoughtful policy.



Magda Nunes De Melo and Misty Pratt



What We Do

Founded on trusted evidence and informed by diverse expertise.

ICES leads cutting-edge studies and analyses evaluating healthcare policy, delivery, and population outcomes. As a trusted data steward, ICES holds more than 120 data sets of Ontario's demographic and health-related data sets, including population-based health surveys, clinical records, and administrative databases. In recent years, these holdings have grown to include data that enables a greater focus on health equity. The breadth of scientist and staff expertise in generating meaningful insights from linked data sets is the foundation of ICES's innovative and world-leading research and analytics.

We also foster an equitable environment that makes our data and analytic resources accessible to non-ICES researchers, scientists, students, and knowledge users, with dedicated and specialized staff and service models to respond to requests. These services are part of our commitment to improving health and healthcare in Ontario, guided by the principles of public benefit and transparency.



Letter from the CEO

The reputation that ICES has built over more than 30 years has been based on our world-leading data holdings, ground-breaking research and data analytics. The expertise of our scientists and staff and the discovery potential of our data are sought after by people across Ontario, around the country, and even the world to help drive science and answer pressing healthcare-related questions.

Indeed, we have a lot to be proud of. We are a trusted steward of Ontario's healthcare data and hold the largest collection of linkable, de-identified health data on 22 million people. We have published more than 3,300 research studies in the last five years, across eight research programs, using 121 data holdings, at seven sites.

These numbers are impressive, and you can see more of our year in numbers further in this report, but these accomplishments, while foundational, are not the final destination for ICES. Our commitment to improve health and healthcare, and the challenges our health system continues to face, means that the status quo can never be enough. Despite all our successes, through all our years, we continue to push the boundaries, strive for more, and seek to innovate in every aspect of the organization. That is truly the driving force at the heart of ICES.



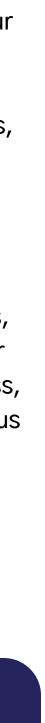
"Our commitment to improve health and healthcare, and the challenges our health system continues to face, means that the status quo can never be enough."

So, in this annual report, you will see and hear about some of the incredible accomplishments of our team this past year—the people behind the data who make the difference.

You will also notice that these accomplishments have replaced our long-standing impact stories, but rest assured that they are returning with a brand-new look—once again demonstrating that innovation is happening everywhere at ICES. In the coming weeks, we will launch a new section on our website dedicated to ICES' real-world impact on methodologies, healthcare practice, patient care, and policy.

I would like to express my sincere appreciation to our ICES team of staff, scientists and students, as well as our Board of Directors, Scientific Advisory Committee, and Public Advisory Council. Their support and collaboration are fundamental to our ongoing success, and together, we will continue to look beyond the numbers to focus on the tangible impacts of ICES research and analytics on people and communities.

Warmly, **Michael Schull** CEO, ICES





Board of Directors

April 1, 2023 to March 31, 2024

Chair

Dr. Kevin Smith¹ President and CEO, University Health Network

Directors

Helen Angus² CEO, AMS Healthcare Chair, Board of Public Heal

Bella Martin Former General Counsel ar University Health Network

Jane Badets Former Assistant Chief Sta

Dr. Sarita Verma³ Dean, President and CEO,

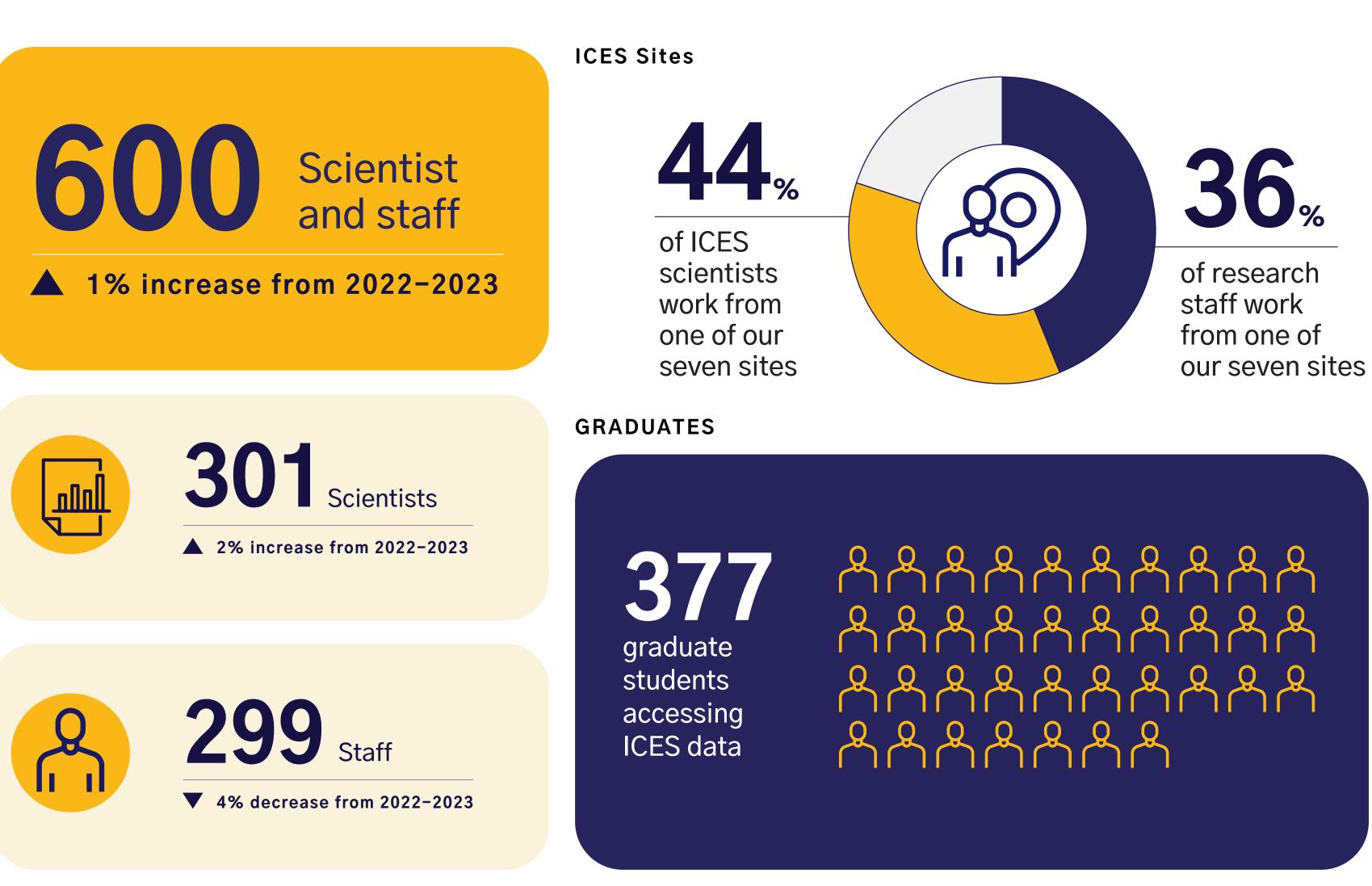
Dr. Mark Daley Chief Al Officer, Western U

	Dr. Charmaine Dean
	VP, Research and Professor in the Department of Statistics
alth Ontario	and Actuarial Science, University of Waterloo
	Neil Fraser
and Chief Legal Officer, k	Former President, Medtronic Canada
	Donna Kline
	Principal, Emerge Communications
atistician, Statistics Canada	
	Pierre Leclerc
	Former Justice of the Peace
, Northern Ontario School of Medicine	
	¹ Term ended in June 2024.
Jniversity	² Assumed role as Chair in June 2024.
	³ Term ended in June 2024.

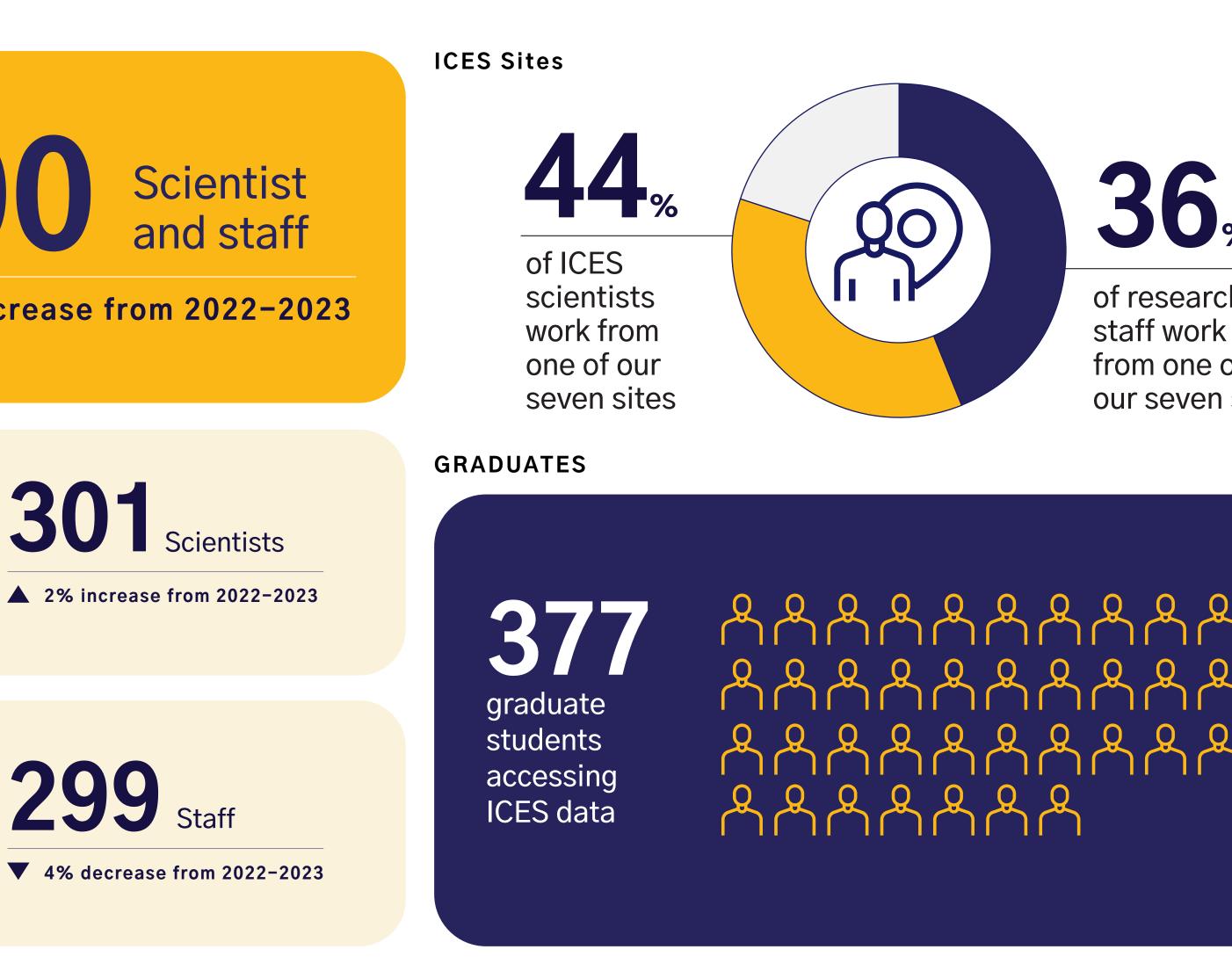
Our People

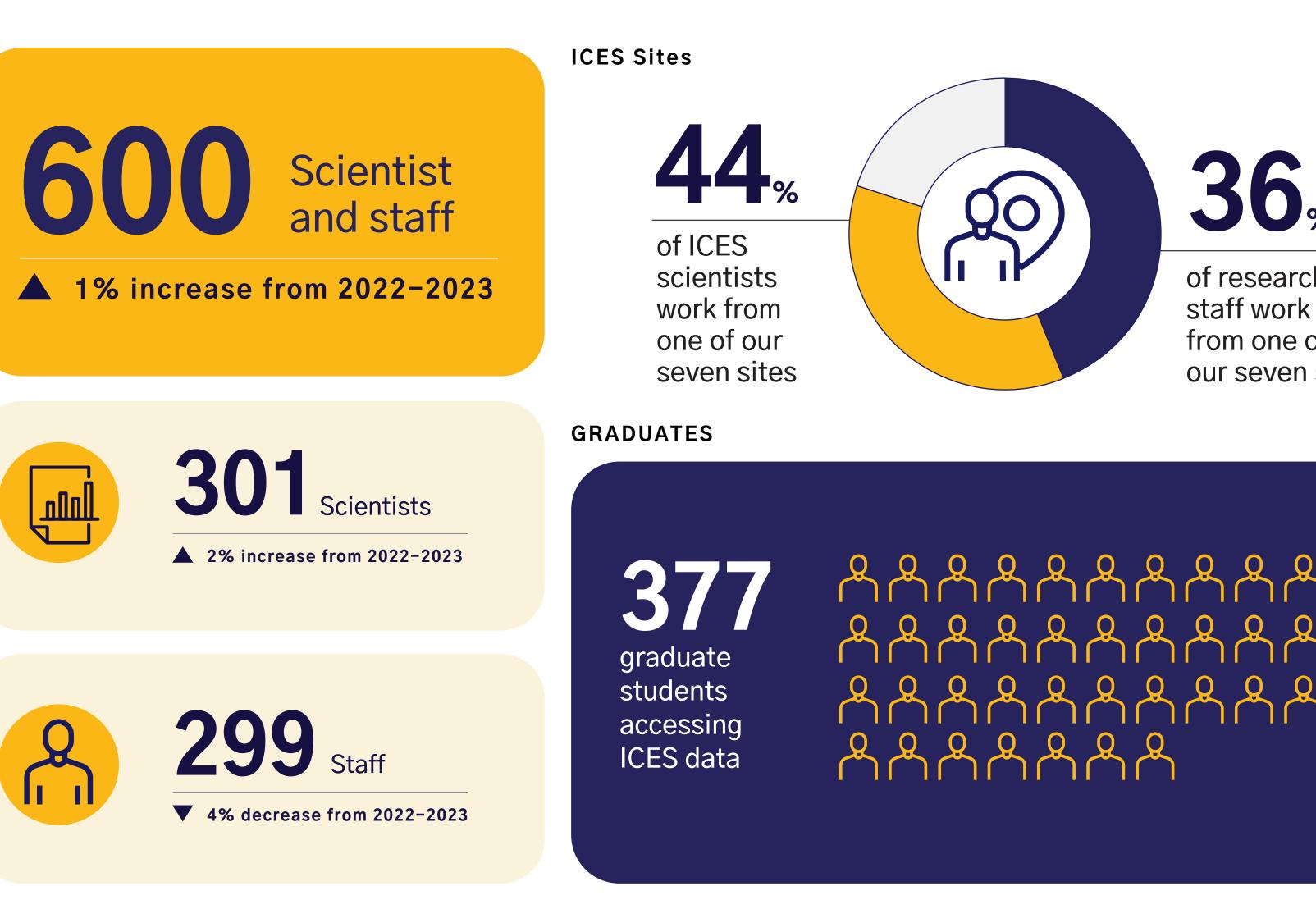
ICES is a research community, with staff and scientists located at seven sites (Central, McMaster, North, Queen's, UofT, uOttawa, Western) across Ontario. Non-ICES researchers, students and knowledge users can also access our data to answer scientific and healthcare policy-relevant research questions as part of our commitment to keeping data accessible.

YEAR IN NUMBERS









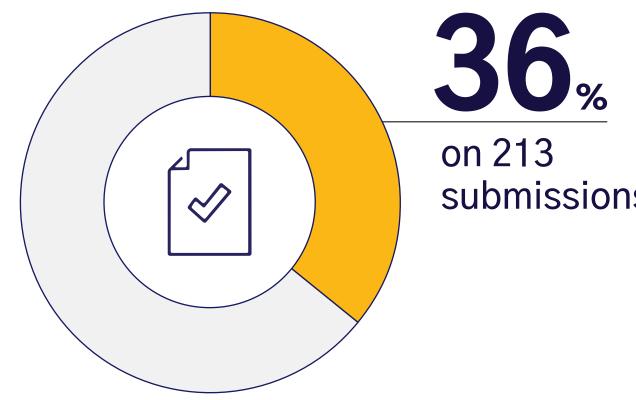
Research Capacity

Since 1992, ICES scientists and data experts have been developing and expanding the ICES data repository, which includes a vast, secure array of linked and desensitized health-related data. New data sharing agreements increase research capacity to inform the delivery of evidence-based healthcare in Ontario, across Canada and abroad.

YEAR IN NUMBERS



OVERALL GRANT SUCCESS RATE



O

0

217

agreements and amendments executed

primary data collection studies involving 58 sites

11

CIHR PROJECT GRANTS AWARDED TO-DATE FOR ICES-RELATED RESEARCH

165 CIHR project grants awarded, plus an

additional 40 bridge and priority announcement grants



Knowledge Generation

In addition to projects led by ICES scientists, the ICES Data & Analytic Services division (ICES DAS) offers services to researchers and students to access research-ready, linked health administrative data and analytic tools. They also support the Applied Health Research Question (AHRQ) program, which allows communities and other knowledge users to access analytics to inform planning, policy or program development that will benefit the Ontario healthcare system.

YEAR IN NUMBERS

new investigator-driven projects

ongoing investigator-driven projects

548

peer-reviewed publications



1,187

33

new Applied Health **Research Question** (AHRQ) requests received from 28 unique knowledge users

37

completed AHRQ requests

147

public and private sector requests to ICES Data & Analytic Services (DAS)

Knowledge Mobilization

ICES strives to translate research findings through investigative reports, media releases, pitching to non-media experts, infographics and our website, with the intent to engage researchers, stakeholders, healthcare leaders, and the public in important dialogue on healthcare practice and policy change.

YEAR IN NUMBERS









600 participants at ICES' Virtual 2023 Forum

in (

220_(2,640 total) media hits per month on average

104k (35% international) unique visitors to the ICES website

52% of media coverage

was international

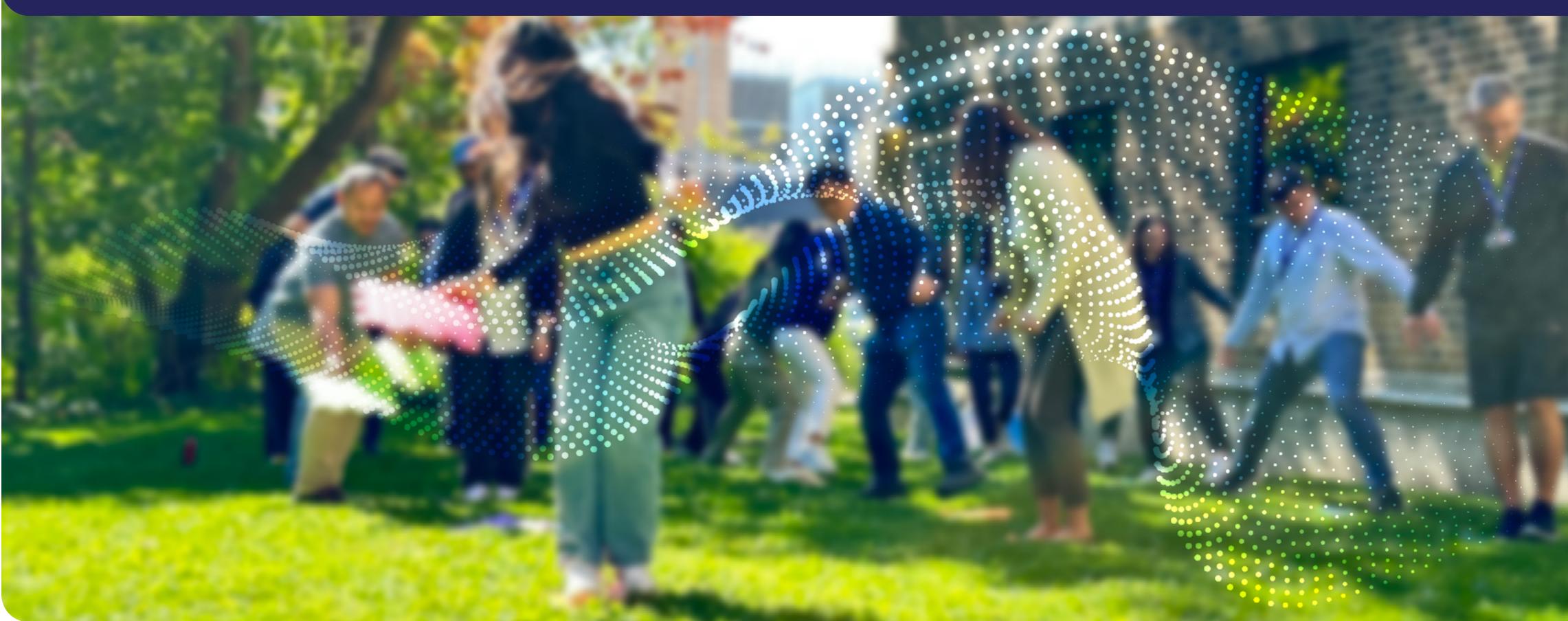






ICES infographics produced to help disseminate key research findings

Accomplishments





ACCOMPLISHMENTS $\mathbf{\Sigma}$

In February 2024, ICES announced that the Indigenous Portfolio would formally become its own department, **Indigenous Partnerships, Data and Analytics.**

Formalizing the Indigenous Portfolio department underscores our recognition of the unique rights of Indigenous Peoples and the importance of Indigenous Data Sovereignty. This shift will better position ICES to focus on and expand partnerships with Indigenous communities and organizations, to be responsive to a greater number of community requests, and to further refine our internal capacity building and external capacity strengthening efforts.

Creation of the Indigenous Partnerships, Data and **Analytics Department**

Indigenous Partnerships, Data and Analytics Team:

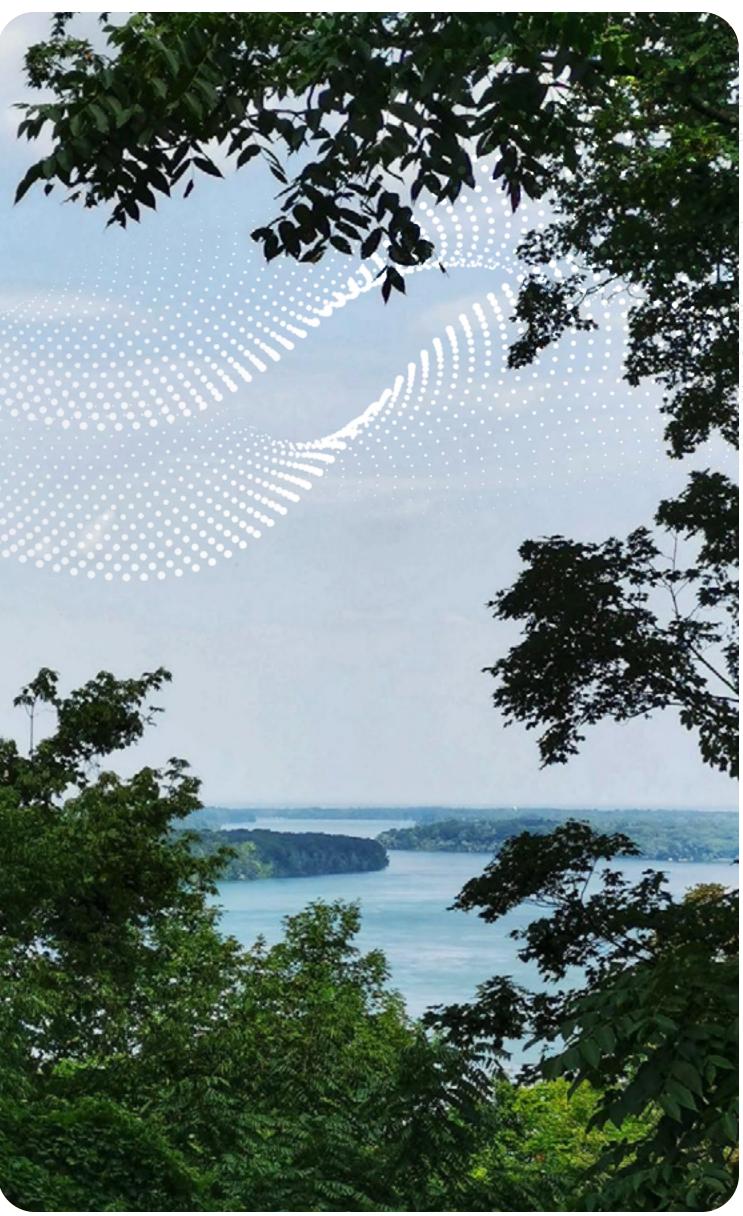
Dominique Legacy, Director, Indigenous Partnerships, **Data and Analytics** Jessica Jordao, Senior Research Project Manager Jennifer Walker, Senior Core Scientist, ICES Indigenous Advisor

Strategic Partnerships Team:

Sujitha Ratnasingham, Director, Strategic Partnerships Jenna Novess, Senior Strategic Partnerships Project Manager Sammy Clemente, Research Administrative Coordinator



Looking beyond 2023–2024: In July 2024, Dominique Legacy joined ICES as the inaugural Director of IPD&A. Read the interview Taking a seat at the table: A Q&A with Dominique Legacy, ICES' inaugural Director of Indigenous Partnerships, Data and Analytics.



Employee Engagement Survey

ICES Central conducted an all-staff employee engagement survey in fall 2023. With a participation rate of 86%, the survey was administered to 217 employees and 187 employees participated. The survey identified the areas in which ICES excels and where there is room for improvement. Following the survey, staff participated in an Action Planning Workshop to identify priority employee engagement initiatives for fiscal 2024–2025.

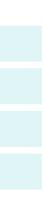
93%	I feel proud to be part of ICES
99%	I really want ICES to succeed
95%	I strongly believe in ICES' mission, vision and values
90%	I would recommend ICES as a good place to work
94%	My coworkers behave considerately towards me (greetings, sympathy, active listening and respect)



Human Resources Team:

Rosa Franzese, Director, Human Resources Dee Gavaric, HR Business Partner Mounika Abadeer, Senior Human Resource Associate Caitlin Mahoney-Bruer, Human Resource Associate





Community Organization-Led Projects

A key priority for ICES is to create pathways for organizations directly serving equity-deserving communities to access data analytics through the Applied Health Research Question (AHRQ) program. By increasing awareness of the AHRQ program and making data analytics more accessible, communities will have greater control to drive anti-oppressive research and serve the needs of their population. (Read more about ICES' commitment to health equity.) In 2023, VHA Home HealthCare, a not-for-profit charitable organization that offers home healthcare and support services, worked with ICES' Public and Community Engagement, Knowledge Translation team to tell the story of how they worked with the AHRQ program to access data and evidence to inform important decisions around their services. Learn how data can change conversations.

Science Office/Public and Community Engagement, **Knowledge Translation Team:**

Laura Ferreira-Legere, Senior Manager, Public and Community Engagement, Knowledge Translation

Elise Leong-Sit, Senior Public and Community Engagement, Knowledge Translation Officer

Sabella Yussuf-Homenauth, Senior Public and Community Engagement, Knowledge Translation Officer

Data and Analytic Services (AHRQ) Team:

Minnie Ho, Director, DAS Susan Bronskill, Senior Scientist and Program Lead, Life Stage Michael Paterson, Program Leader, Science Advisor, Research Delivery Sara Guilcher, Senior Adjun Luke Mondor, Staff Scienti Lesley Plumptre, Staff Scie Christine Warren, Epidemie Diana An, Senior Research Natasha Fortin, Research Project Manager

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Project Manager	
Project Manager	





\square ACCOMPLISHMENTS

Fuzzy Matching

During the past year, ICES' Data Quality and Information Management (DQIM) department successfully transitioned ICES record linkage from a process that heavily relied on manual review to a semi-automated process. Historically ICES record linkage was based on Probabilistic Record Linkage (PRL) which was a very time-intensive process. The manual intervention required for gray area resolution introduced human error and results could be impacted by subjective decisions. From a technology perspective, the software was not compatible with current systems.

The Fuzzy Matching approach which replaced the PRL method eliminated manual gray area resolution and achieved similar (or higher) record linkage rates while maintaining (or improving) accuracy. The advantages were improved data timeliness, savings on clerical review, and elimination of human error.

The fuzzy matching technique is well suited for record linkage of non-health data and places ICES in a better position to enrich its data with information on social determinants of health.

Looking beyond 2023–2024: This successful transition was recognized nationally and won a <u>CIO Canada award</u> in July 2024, for driving digital business growth through technology innovation and demonstrating business value.

Fuzzy Matching Team:

Mahmoud Azimaee, Director, DQIM Gangamma Kalappa, Lead Specialist – Data Science Charlotte Ma, Lead Specialist – Record Linkage Nan Wang, Senior Record Linkage Analyst Winnie Shen, Senior Record Linkage Analyst Jason Chai-Onn, Systems Engineer, Technology



(left to right): Winnie Shen, Charlotte Ma, Mahmoud Azimaee, Gangamma Kalappa, Jason Chai-Onn, missing Nan Wang



Spotlight on Three ICES Sites

ICES North

ICES North launched its first ever Project Award in March 2024 – a small grant that was available to researchers in Northern Ontario who were looking to partner with an ICES North Scientist to develop a research question specific to northern and rural health. Dr. Travis Marion (Orthopedic Surgeon at the Thunder Bay Regional Health Science Centre) was the successful applicant. He will be investigating the outcomes of hip fracture patients in Northern vs Southern Ontario.

ICES North Team:

David Savage, Site Director

Anu Nair, Privacy, Risk and Compliance Analyst and Facility Administrator

Jennifer Dumont, Facility Administrator

Joseph Caswell, Local Lead Analyst

ICES McMaster

ICES McMaster welcomed Dr. Aaron Jones as their new Site Director and Dr. Richard Perez as their first Staff Scientist. They also launched a new project that is the first to use data from ICES linked to the Canadian Longitudinal Study on Aging.

The Canadian Longitudinal Study on Aging (CLSA) is a large, national, prospective cohort study of 50,000 middle-aged and older adults that has recently been made available for linkage to other ICES data holdings. Dr. Jones is leading the first project to make use of this data linkage. Combining the comprehensive health and socioeconomic data in the CLSA to the exhaustive health service data in ICES, Dr. Jones and his team are investigating public and private use of home care services in Ontario. The objectives of the research are to describe the patterns of publicly-funded and privately-purchased home care and to examine how these patterns are associated with future changes in health and health service use.

ICES McMaster Team:

Aaron Jones, Site DirectorRichard Perez, Local Lead Analyst & Staff ScientistTim Miuccio, Finance and Administration Manager

ICES McMaster



Spotlight on Three ICES Sites

ICES Western

Research Bites

To commemorate ICES Western's 10th anniversary, ICES Western launched a lunch-time speaker series, Research Bites, in October 2023. The series spotlights the impactful work being conducted at ICES Western. Offered as a hybrid session, participants are encouraged to grab a bite, hear about ICES research, share ideas, network, and learn about research opportunities using ICES data!

In the past year, session topics included: impacts of cannabis legalization on psychotic disorders; health challenges of people experiencing homelessness during the COVID-19 pandemic; and risk of dementia associated with medications used for treatment of overactive bladder. These sessions were attended by members of research and clinical communities across Ontario.

Faculty Scholars Program 2.0

First offered in 2013, the ICES Faculty Scholars Program was initiated to grow the scientist base at ICES Western. The program was designed to support researchers in completing two ICES projects over a period of two years, satisfying the criteria for an ICES Scientist appointment. The program was offered for four cycles and supported 42 scholars from across the ICES network.

After a three-year pause during the COVID-19 pandemic, a revised offering of the program (ICES Faculty Scholars Program 2.0) was launched at ICES Western in early 2024. The training program has been redesigned with a focus on developing skills in population health research, regardless of intent to pursue an ICES Scientist appointment. The program is now offered on a rolling admission, with greater flexibility and tailored guidance in completing an investigator-initiated ICES project.

ICES Western Team for Faculty Scholars Program:

Kristin Clemens, Site Director Salimah Shariff, Associate Director of Research Operations and Strategic Partnerships / Staff Scientist Melody Lam, Program Manager (Faculty Scholars Program) Brooke Carter, Analytic Epidemiologist

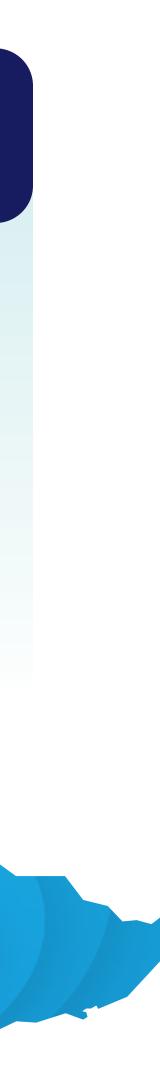
ICES Western Team for Research Bites:

Kristin Clemens, Site Director

Salimah Shariff, Associate Director of Research Operations and Strategic Partnerships / Staff Scientist

Theresa FitzGerald, Site Manager / Privacy, Risk and Compliance Analyst



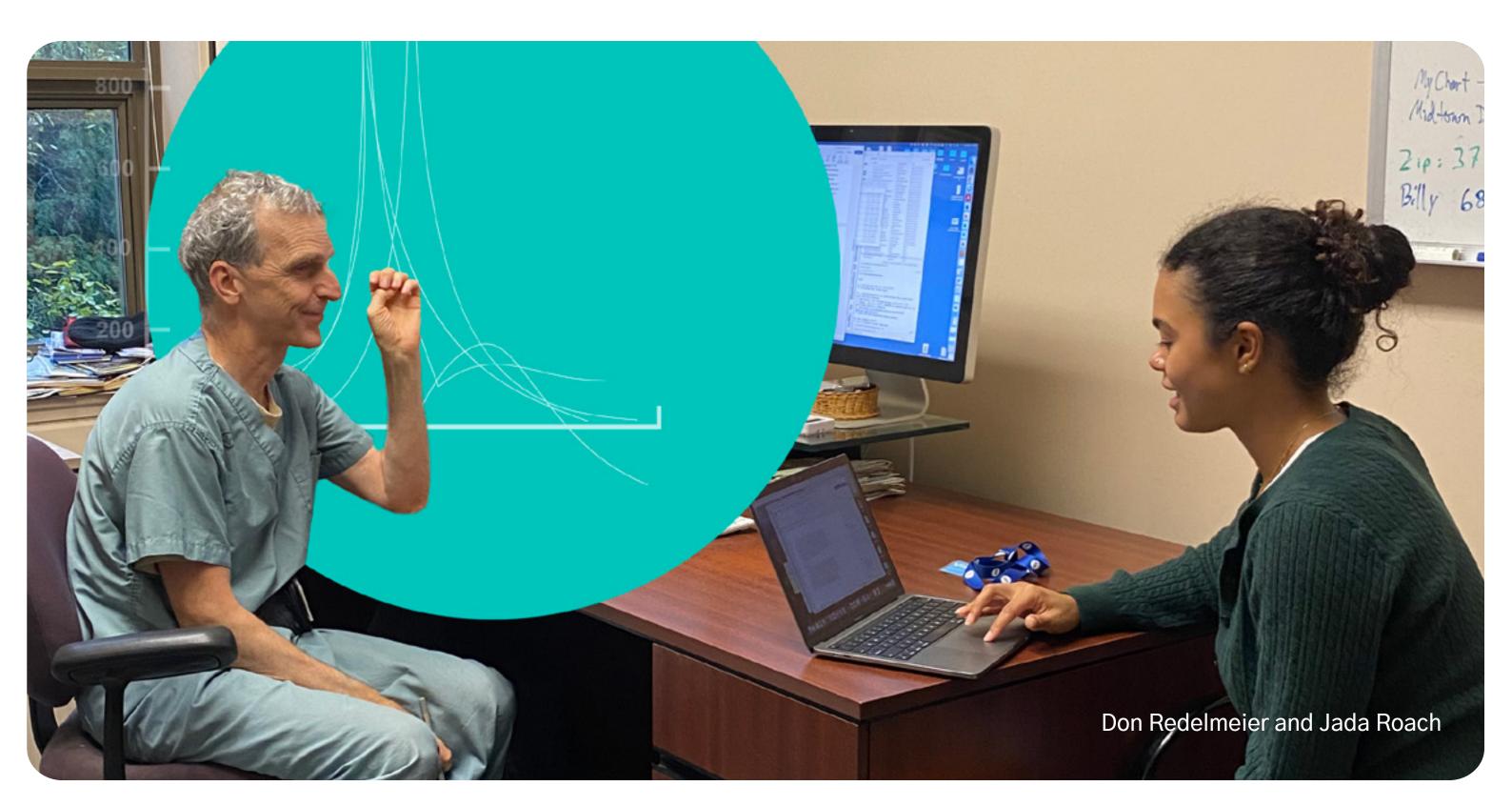


ACCOMPLISHMENTS

2023 IPC Triennial Review Approval

In October 2023, ICES received approval of its practices and procedures as a prescribed entity by the Information & Privacy Commissioner of Ontario (IPC). ICES is designated as a prescribed entity under both the *Personal Health Information Protection Act* and the *Coroners Act*, which means that every three years it must submit to the IPC a selection of its policies, procedures, and detailed statistics about its operations for a comprehensive review. Only once the IPC is satisfied that ICES continues to meet the high standards expected of prescribed entities to protect privacy and ensure confidentiality does it approve ICES as a prescribed entity for a further three years. This process is referred to as an "IPC Triennial Review." The Triennial Review process is a crucial step in maintaining ICES' reputation as a trusted data steward because it ensures ongoing high standards of privacy and security over the information in its care. Results of Triennial Reviews, including any recommendations made by the IPC, are also made publicly available.

Triennial Reviews are led by ICES' Privacy & Legal Office but require a collaborative effort across the organization with input from all Departments.



Privacy & Legal Office (PLO) Triennial Team:

Michael Smith, Director, PLO

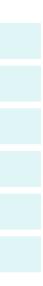
Kathy Li, Manager, Privacy

Jennifer Green ("JG"), Legal Counsel

Ash-Lei Lewandoski, Legal Counsel

Sae Park, Senior Risk and Compliance Analyst

Simona Santagato, Risk and Compliance Analyst



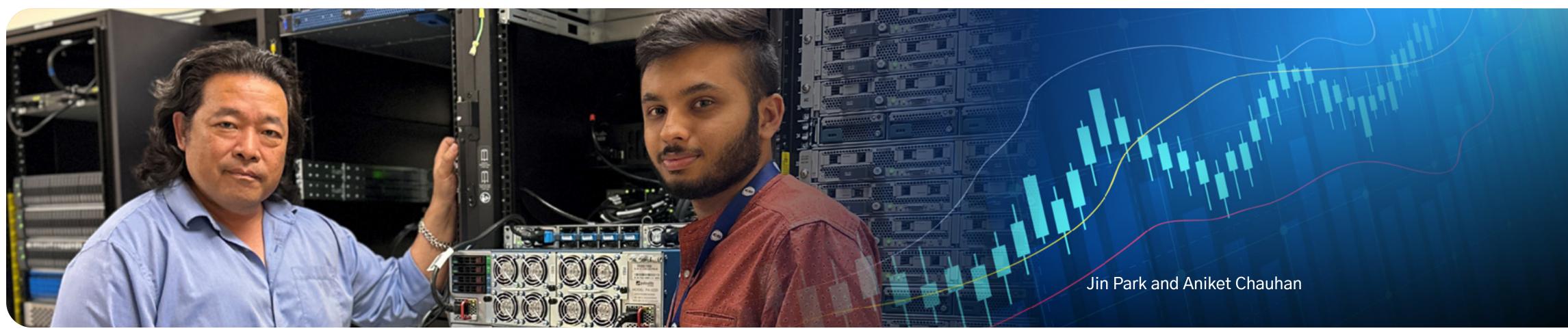
\square ACCOMPLISHMENTS

Safebreach

ICES, like all organizations, faces a continuous flood of probes and attacks from malicious actors determined to gain access to our information systems. To address this ever-growing threat, in March 2024, the Cybersecurity Team deployed a Breach and Attack Simulation (BAS) platform which supports a proactive approach in reducing the risk of data breaches by enabling the following practices:

- vulnerabilities and gaps in our security defenses.
- simulated attacks.
- security defences are always up to date.

BAS platforms automate many aspects of security testing, reducing the burden on the Cybersecurity Team. This helps alleviate security fatigue and allows our team to focus on strategic tasks rather than repetitive testing. Ultimately, BAS plays a crucial role in strengthening ICES' overall cybersecurity defences in a constantly changing threat landscape.



Tests that simulate real-world cyber-attacks, helping to identify

 Using the simulation platform, the Cybersecurity Team can validate the effectiveness of existing security controls, such as firewalls, intrusion detection/prevention systems, and endpoint security solutions, by testing how well they detect and block

 The BAS platform helps the Cybersecurity Team to conduct testing of our security measures throughout the year, ensuring that

Cyber Team:

Todd Smeed, Director, Cybersecurity

Carl Hill, Cybersecurity Analyst

IT Team:

Jacob Hipel, Systems Engineer

Tim Wang, Senior System Administrator

Keng-Yuan Liu, Senior System Administrator





Spotlight on ICES Early Career Researchers and PhD Students



Early Career Researcher: Dr. Daniel Myran

Dr. Daniel Myran is a public health and family medicine physician and researcher. His program of research involves using health administrative data to examine the burden and societal impact of mental health conditions and substance use. His primary focus is examining the health impacts of changes in alcohol and drug policies and their influence on health inequities. As a secondary area of interest, he uses big data to examine the health of physicians and their practice patterns.

Read the op-ed: <u>Opinion: There are good reasons to be anxious</u> about growing cannabis use in Canada – The Globe and Mail

Read the studies:

<u>Transition to schizophrenia spectrum disorder following</u> <u>emergency department visits due to substance use with or</u> <u>without psychosis</u>

Development of an anxiety disorder following an emergency department visit due to cannabis use: a population-based cohort study



Early Career Researcher: Dr. Rachel Savage

Dr. Rachel Savage is a scientist, Women's Age Lab and Women's College Research and Innovation Institute, Women's College Hospital, an assistant professor, Institute of Health Policy, Management and Evaluation, University of Toronto, and an adjunct scientist at ICES. Her research aims to improve the health of older adults, immigrants, and women. Her research investigates loneliness in older adults at the population-level to understand how we can improve the health and well-being of our aging population and the sustainability of our healthcare system. She is the principal investigator of Canadian Institutes of Health Research-funded research that links innovative datasets with health administrative data to understand how loneliness impacts healthcare transitions and how naturally occurring retirement communities can be enhanced to alleviate loneliness and support aging in place. Dr. Savage has over ten years of local and provincial public health experience, and a proven track record in conducting impactful, award-winning, and collaborative public health research.

Watch: Older Women and Loneliness

Read the study: <u>Sex-based trajectories of health system</u> use in lonely and not lonely older people: a population-based cohort study



PhD Student: Dr. Ryan Strum

Dr. Ryan Strum was a PhD student with ICES McMaster from September 2019 to May 2024. Dr. Strum works as a paramedic and is now an Assistant Professor at McMaster University.

Dr. Strum conducted the following studies at ICES, as part of his PhD program of research:

Watch: <u>The Impact of Paramedic Transports on Emergency</u> <u>Department Visits</u>

Read the studies:

Quantifying the escalating impact of paramedic transported emergency department visits for opioid-related conditions in Ontario, Canada: a population-based cohort study

Prehospital prediction of hospital admission for emergent acuity patients transported by paramedics: a population-based cohort study using machine learning



A C C O M P L I S H M E N T S

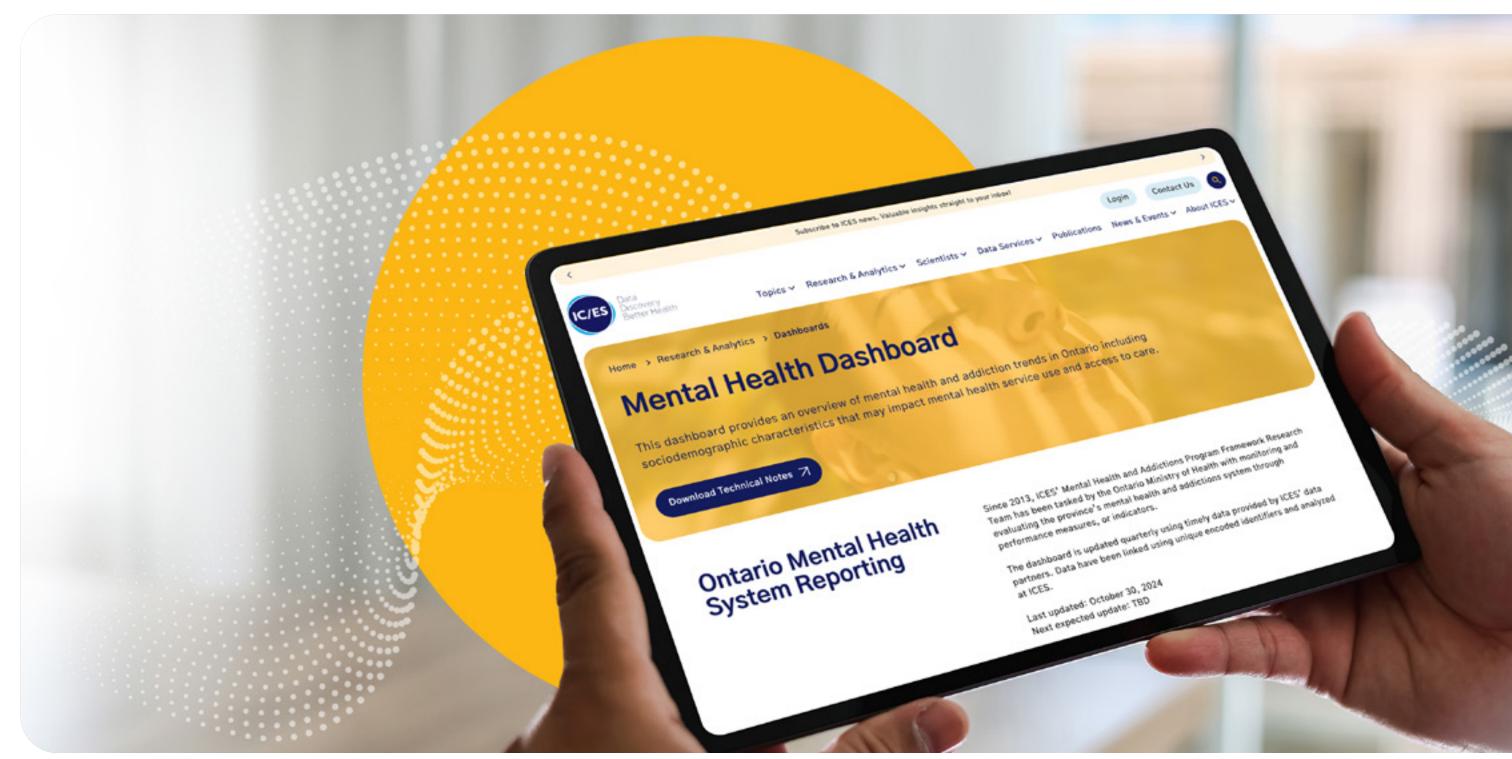
Mental Health Dashboard

In 2021, the Mental Health and Addictions Program Framework (MHAP) Research Team built internal capacity for routine reporting and created an interactive <u>Mental Health Dashboard</u> to facilitate the improved monitoring of shifting mental health and addictions (MHA) trends in the province, help target research areas of interest and provide more up-to-date research evidence to knowledge users in the sector. The dashboard is updated on a quarterly basis and describes comprehensive trends over time through several equity lenses.

The Mental Health Dashboard was expanded in fiscal year 2023–2024 to include regional breakdown of indicators, data on in-person and virtual visit modalities and eating disorder-related indicators. Knowledge user consultations were conducted with stakeholders from 34 unique organizations to provide an opportunity to better understand the data and gather feedback to identify and prioritize data needs.

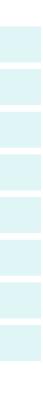
The Mental Health and Addictions Program Framework (MHAP) Research Team:

Amreen Babujee, Senior Ep Michael Campitelli, Staff So Kinwah Fung, Research Me Sima Gandhi, Research Pro Astrid Guttmann, Chief Scie Anjie Huang, Senior Research Paul Kurdyak, Senior Scient Samantha Lee, Senior Epide Hong Lu, Associate Research



pidemiologist	Adit
Scientist	Nata
ethodologist	Isob
ogram Manager	Ola
ience Officer and Senior Scientist	Méle
arch Analyst	Alèn
ntist and MHA Program Lead	Sime
demiologist	Fion
rch Methodologist	

Aditi Patrikar, Research Analyst Natasha Saunders, Adjunct Scientist Isobel Sharpe, Senior Research Analyst Ola Sule, Research Analyst Mélody Tondeur, Research Project Manager Alène Toulany, Adjunct Scientist Simone Vigod, Senior Adjunct Scientist Fiona Wong, Senior Research Project Manager





Project in a Can

Data & Analytic Services (DAS) at ICES works with external third party researchers (public and private sector clients) and Applied Health Research Question (AHRQ) program health system knowledge users. Clients and knowledge users often request data on specific cohorts (populations) but may not fully understand the capabilities of ICES data. To streamline complex projects, DAS developed the "%getbaseline" macro, a tool that standardizes definitions and pulls from existing datasets, significantly reducing the time needed for analysis and reporting.

The %getbaseline macro applies a suite of predefined baseline characteristics to any given cohort, ensuring faster delivery, greater standardization and quality control, and fewer analyst hours. Originally designed for external clients, it is now available across ICES to support internal researchers as well. The macro plays a key role in the "Project in a Can" initiative, a rapid-response service

Macro Team:

Jacob Etches, Staff Scientist
Luke Mondor, Staff Scientist
Lesley Plumptre, Staff Scientist
Refik Saskin, Staff Scientist
Yinan Li, Senior Epidemiologist
Erind Dvorani, Senior Epidemiologist
Shudong Li, Senior Research Analyst
Luis Palma, Senior Research Analyst
Brandon Zagorski, Senior Research Analyst
Drew Wilton, Research Methodologist

aimed at delivering analytic results within three months. The first pilot was completed in just six weeks, demonstrating the efficiency of the process.

Client feedback has been positive, particularly regarding the faster timelines. DAS plans to continue refining the %getbaseline macro to improve its application in future projects, helping analysts quickly generate comprehensive tables for healthcare costs, resource utilization, and other outcomes.

Project Team:

Minnie Ho, Director, DAS Jacob Etches, Staff Scientis Refik Saskin, Staff Scientist Luke Mondor, Staff Scientis Lisa Ishiguro, Research Prog Keresa Arnold, Research Prog

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ogram Manager
roject Manager





New Five-Year Funding Agreement

As 2024 drew to a close, ICES successfully concluded negotiations with the Ontario Ministry of Health for the renewal of its core funding agreement, which will provide \$95 million in funding over the next five years. This marks over three decades of sustained support from the Ministry, highlighting ICES' indispensable role and commitment to innovation, impact, and data stewardship. The Ministry's decision to renew its funding underscores ICES' role as an indispensable part of Ontario's health data ecosystem, and a trusted data steward dedicated to upholding the privacy, security, and confidentiality of healthcare data while also ensuring it accessible.

The renewed funding will empower ICES to further advance its mission to deliver high-quality research and analytics, evaluation, and access to data. It will ensure ICES maintains strong privacy and security safeguards. It will help us modernize infrastructure, expand data assets, and strengthen public and community engagement. This investment will not only bolster ICES' capabilities but will also contribute to the broader goal of improving health and healthcare for everyone.





Fangyun Wu

Jacob Hipel

Transfer Payment Agreement (TPA) Team:

Michael Schull, CEO

Marian Vermeulen, Senior Director, Research, Data & Financial Services

Charles Victor, Senior Director, Strategic Partnerships & Digital Services

Rosario Cartagena, Chief Privacy & Legal Officer

Magda Nunes De Melo, Associate Director, Strategic Partnerships

Mahmoud Azimaee, Director, Data Quality and Information Management

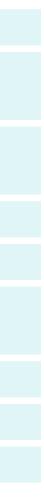
Darlene Borland, Director, Finance

Marina Milikhina, Financial Controller

Marvin Felix, Senior Financial Analyst



Sabella Yussuf-Homenauth and Melissa Stamplecoski





Statement of Financial Position

As at March 31, 2024 (in thousands of dollars) ASSETS Current Assets

Cash

Accounts receivable

Prepaid expenses

Capital assets

LIABILITIES AND FUNI Current Liabilities

Accounts payable and ac

Deferred revenue

Due to Sunnybrook Heal

Post-employment ben

Deferred capital grant

General fund

	8,871 20,099	7,646 17,267
	11,228 8 871	9,621
nts	1,092	733
enefits		
	9,158	7,983
alth Sciences Centre	1,556	659
	4,518	4,391
accrued liabilities	3,084	2,933
ID BALANCES		
	20,099	17,267
	1,092	733
	19,007	16,534
	992	910
	3,247	2,943
	14,768	12,681
	2024 \$	\$
	2024	<u>م</u>



Statement of Operations and Changes in Fund Balances

For the year ended March 31, 2024 (in thousands of dollars)

REVENUE

Grants - Ministry of Hea

Grants and other revenu

Amortization of deferre

Interest income

EXPENDITURES

Employee costs

Contracted services

Information, technology

Office and general

Amortization of tangibl

Professional fees

Premises

Excess of revenues over

General fund - beginni

Remeasurement of pos

General fund - end of y

	2024 \$	2023 S
ealth	16,136	17,728
านe	18,158	15,070
red capital grant	221	262
	549	299
	35,064	33,359
	27,605	27,298
	291	272
gy and cybersecurity	2,767	2,151
	914	726
ole capital assets	221	262
	1,189	950
	852	871
	33,839	32,530
ver expenditures for the year	1,225	829
ning of year	7,646	6,692
ost-employment benefits	_	125
year	8,871	7,646
ost-employment benefits	- -	



Statement of Cash Flows

For the year ended March 31, 2024 (in thousands of dollars)

CASH PROVIDED BY (USEI

Excess of revenues over

Items not affecting cash

Post-employment bene

Amortization of defer

Amortization of tangil

Investment interest

Changes in non-cash wo

INVESTING ACTIVITIES

Maturity of Investment

Purchase of tangible ca

FINANCING ACTIVITIES

Contribution to deferred

Increase in cash during

Cash - beginning of yea

Cash – end of year

ED IN) OPERATING ACTIVITIES	2024	2023
	Ş	
er expenditures for the year	1,225	829
sh		
nefits	73	9-
rred capital grant	(221)	(262)
jible capital assets	221	262
	_	(27)
vorking capital balances	789	(1,558)
	2,087	(665)
nts	_	2,374
capital assets	(582)	(180)
	(582)	2,194
ed capital grants	582	180
ng the year	2,087	1,709
ear	12,681	10,972
	14,768	12,68 ⁻



Acknowledgements

We would like to thank our core funders, the Ontario Ministry of Health and the Ontario SPOR Support Unit, for their ongoing support which makes it possible for ICES to engage in work that fosters health equity and improves health outcomes for all. We also want to thank federal and provincial partner organizations for the chance to collaborate and expand the scope and impact of our research and analytics. Thank you to: Canadian Institute for Health Information, Canadian Institutes of Health Research, Health Canada, Public Health Agency of Canada, and Public Health Ontario.

We also want to recognize and thank our Indigenous partners, who have worked closely with us to develop unique data governance agreements that have enabled Indigenous-driven analyses and research using ICES data: the Métis Nation of Ontario, the Chiefs of Ontario, Grand Council Treaty #3, the Kenora Chiefs Advisory, as well as Aboriginal Health Centres and communities.

Finally, we could not do the work we do without the creativity and dedication of our staff and scientists, whose work translates data into trusted evidence that makes policy and healthcare better and people healthier. Thank you to our entire ICES community.





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