

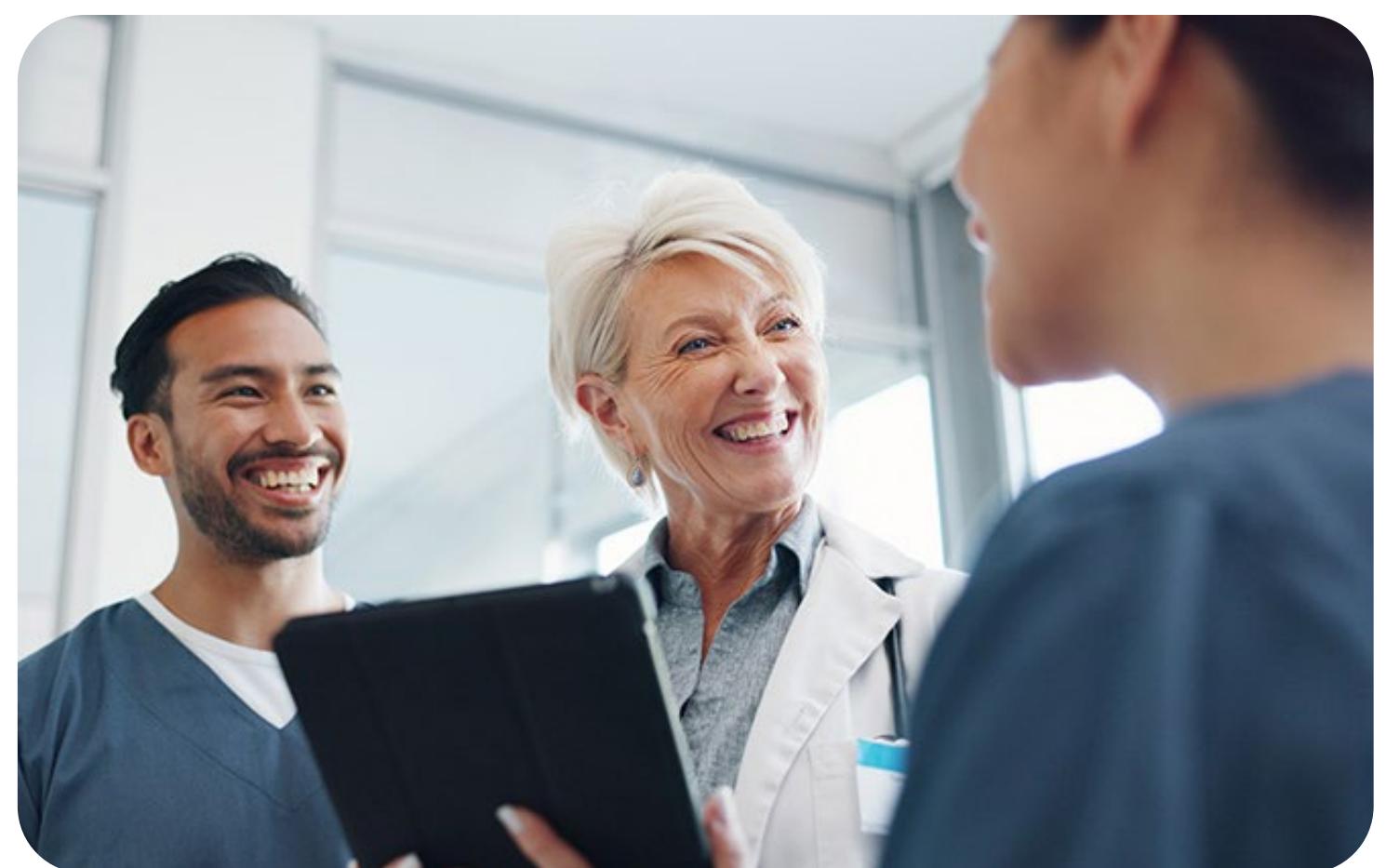
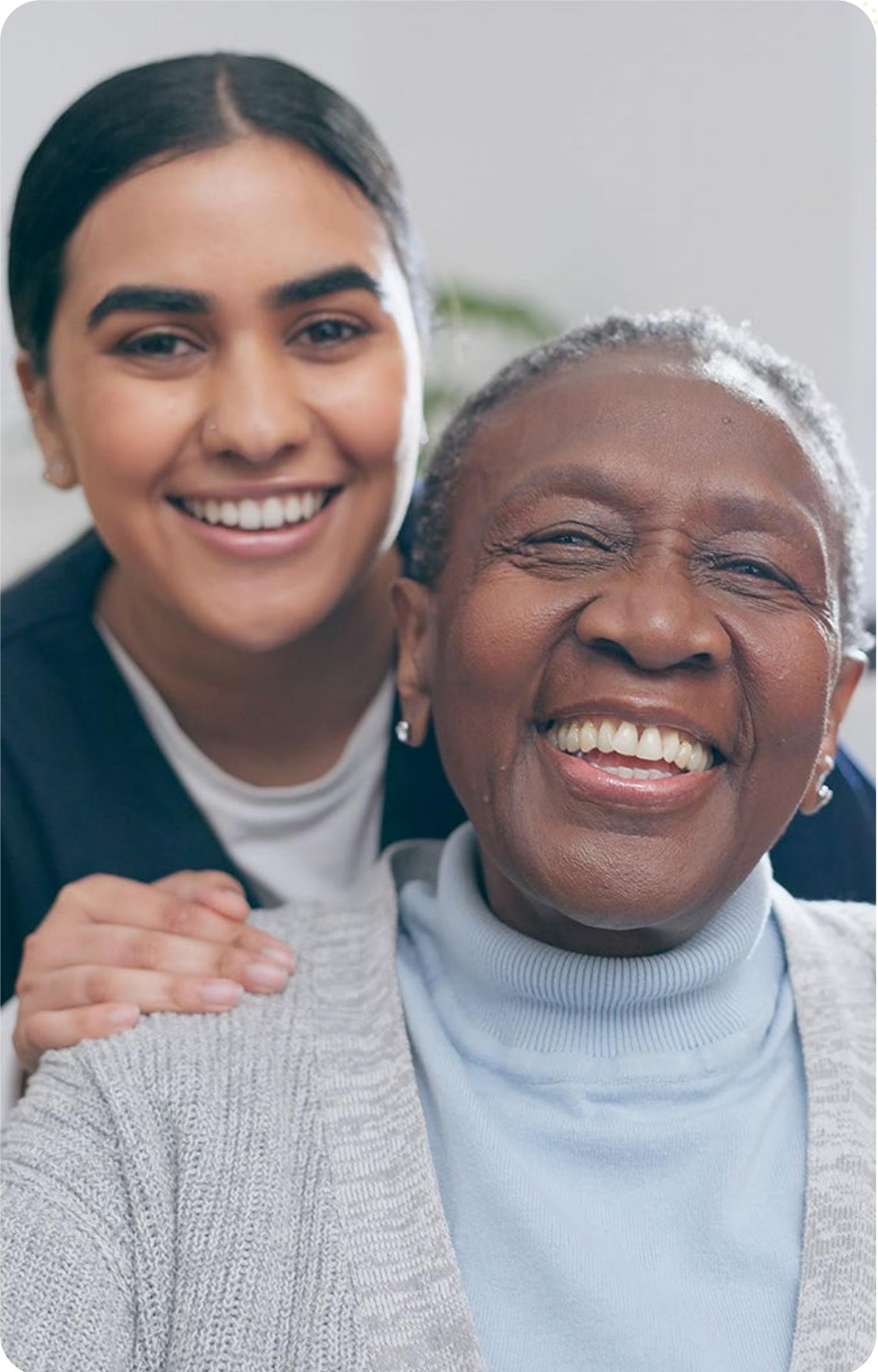


Data  
Discovery  
Better Health

# ADVANCING WITH EVIDENCE. INSIGHT. INNOVATION. IMPACT.



2024/2025 Annual Report



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Chippewas of Nawash Unceded First Nation, Saugeen Peninsula, Ontario (Photo courtesy of Alana Pawley)

## Land Acknowledgement

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.



ICES Philanthropy Committee



From left to right: Susan Bronskill, Program Lead, ICES Life Stage Research Program, Misty Pratt, Interim Director, ICES Communications

## Who We Are

**Committed to working with scientists, partners and communities to help explore today's problems and inform solutions for better health and health care 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 in the province. ICES is powered by a community of research, data and clinical experts who understand the everyday challenges of healthcare delivery. We produce insightful research and analytics that inform thoughtful policy.

## 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 122 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 enable 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 health care in Ontario, guided by the principles of public benefit and transparency.

# LETTER FROM THE CEO

● ● ●



**Michael Schull**

Chief Executive Officer  
ICES



**Astrid Guttmann**

Chief Science Officer  
ICES

This annual report shows how far we've come, and how much possibility lies ahead. Our Indigenous Partnerships, Data and Analytics department continues to grow, deepening relationships with First Nations, Métis and Inuit communities. Together, we are advancing a model of data sharing that respects Indigenous data sovereignty and supports ethical, community-driven research.

We are also embracing new tools and techniques. Artificial intelligence and machine learning are helping us uncover insights that once felt out of reach, and our partnership with GEMINI—the largest hospital data-sharing network in Canada—shows the power of collaboration to transform care. At the same time, we are modernizing our own research and data infrastructure and processes, ensuring ICES remains responsive in a rapidly changing world.

I'm also proud of our strong and enduring relationship with the Ontario Ministry of Health. Our renewed funding in 2024 is a testament to the ministry's long-term commitment to ICES and the indispensable role we play in the Ontario health data ecosystem.

Most of all, I am grateful for the remarkable people at ICES. Our leadership team, staff, students and scientists bring both expertise and heart to their work, and it is their dedication that has made ICES what it is today. The accomplishments you will read in the following pages showcase the immense talent we have at ICES.

This year marks a significant transition as I will leave ICES after 12 years as CEO. It has been the honour of my career to date to lead this organization, and I leave with deep gratitude for the

people and partners who have made ICES what it is today—our dedicated staff, scientists, students and partners, and the communities we serve. As I reflect on the past 12 years, I am proud of all that we have achieved, and I am confident in the road ahead. ICES is well-positioned to embrace new opportunities, adapt to an ever-changing world, and continue to lead with integrity, inclusiveness and scientific excellence.

The ICES Chief Science Officer, **Astrid Guttmann**, will take on the role of Interim CEO which will ensure continuity and continued excellence. Astrid brings enormous experience as a clinician, researcher and long-time ICES scientist and Chief Science Officer, and I have every confidence in her leadership. She embodies the values that make ICES strong: collaboration, integrity and a commitment to improving health for all.

Leadership evolves, but our vision remains constant: to improve health and health care for everyone through world-leading research and analytics.

With heartfelt thanks,

**Michael Schull**  
CEO, ICES



# BOARD OF DIRECTORS



April 1, 2024 to March 31, 2025

## Chair

### **Helen Angus**

CEO, AMS Healthcare

Chair, Board of Public Health Ontario

## Directors

### **Bella Martin**

Former General Counsel and Chief Legal Officer,  
University Health Network

### **Jane Badets**

Former Assistant Chief Statistician,  
Statistics Canada

### **Dr. Mark Daley**

VP Research, CIFAR

### **Dr. Charmaine Dean**

VP University Research and Professor of Statistics  
and Actuarial Science, University of Waterloo

### **Neil Fraser**

Former President, Medtronic Canada

### **Donna Kline**

Chief Communications and Engagement Officer, Ontario Health

### **Pierre Leclerc**

Former Justice of the Peace



# SCIENTIFIC ADVISORY COMMITTEE



April 1, 2024 to March 31, 2025

## Chair

### Dr. Mark Daley

Chief AI Officer, Western University

## Members

### Dr. PJ Devereaux

Cardiologist, Perioperative Care Physician, and Clinical Epidemiologist | Director, Division of Perioperative Care, McMaster University

### Dr. Chris Dibben

Professor, Geography, University of Edinburgh | Director, The Scottish Centre for Administrative Data Research, the Scottish Longitudinal Studies Centre, and Financial Data Service (FINDS)

### Dr. Alexandra King

Internal Medicine Specialist | Inaugural Cameco Chair, Indigenous Health and Wellness, University of Saskatchewan

### Dr. Kimberlyn McGrail<sup>1</sup>

Scientific Advisor for Population Data BC | Scientific Director and CEO, Health Data Research Network Canada

<sup>1</sup>Term ended in June 2025

### Dr. Kwame McKenzie

CEO, Wellesley Institute | Director of Health Equity, Centre for Addiction and Mental Health | Full Professor, Department of Psychiatry, University of Toronto

### Dr. Kate Mulligan

Assistant Professor, Social and Behavioural Health Sciences, University of Toronto | Founding Senior Director, Canadian Institute for Social Prescribing

### Dr. Christopher Mushquash

Full Professor, Department of Psychology, Northern Ontario School of Medicine University | Vice President Research, Thunder Bay Regional Health Sciences Centre

### Dr. Dani Prieto-Alhambra

Professor, Pharmaco- and Device Epidemiology, Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences (NDORMS), University of Oxford | Deputy Director, European Medicines Agency's Data Analysis and Real World Interrogation Network (DARWIN EU) Coordination Centre

### Dr. Arjumand Siddiqi

Professor and Division Head, Epidemiology, Dalla Lana School of Public Health, University of Toronto | Canada Research Chair in Population Health Equity



# PUBLIC ADVISORY COUNCIL



April 1, 2024 to March 31, 2025

## Chair

Simisola Johnson

## Members

Jemal Demeke  
Anujan Chandran  
Jerome Johnson  
Lisandra Hernandez  
Jean Beckett  
Emilie Veilleux  
Tracey Mackinnon  
Patrick Roncal  
Loretta Loon  
Vu Ngo  
Gail Campbell  
Natalie Kermany  
Nicola Samuels  
Christopher Rous

# YEAR IN NUMBERS



## 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.

### 1,005 Scientists, Trainees and Staff

615 scientists and staff | A 2.5% increase from 2023/24 ↗



**312** scientists

A 3.5% increase from 2023/24 ↗



**303** staff

A 1% increase from 2023/24 ↗



**42%** of scientists  
and **39%** of staff work  
from satellite sites



**321** graduate students  
accessing ICES data

(390 if undergraduate students, post-doctoral trainees and fellows are also included)

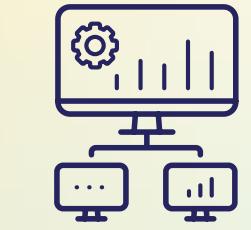


## Research Capacity

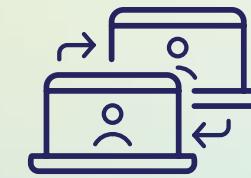
Since 1992, ICES scientists and data experts have been developing and expanding the ICES data repository, which includes a vast, secure array of linked and desensitized health-related data. New data sharing agreements increase research capacity to inform the delivery of evidence-based healthcare in Ontario,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



**8** research programs



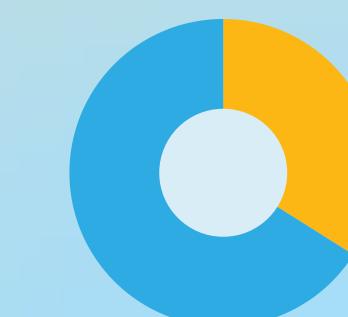
**122** data holdings



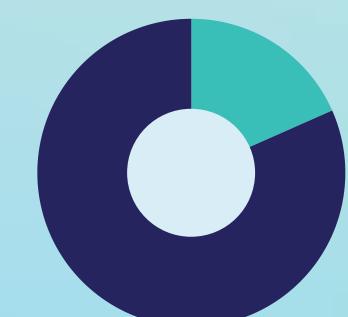
**184** new data sharing agreements and amendments executed



**11** active primary data collection studies



**34%** success rate on  
**216** grant submissions



**191** CIHR Project Grants awarded, plus an additional **43** bridge and priority announcement grants

(across the **18** competitions held to-date)

## YEAR IN NUMBERS



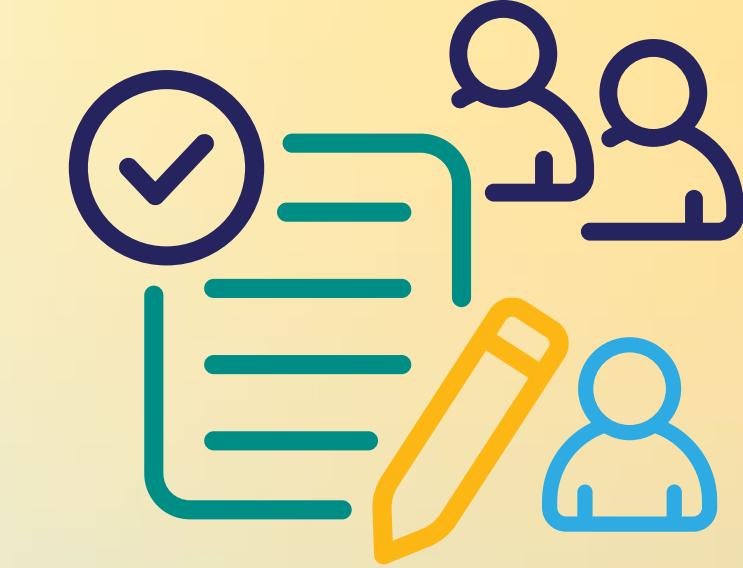
### Knowledge Generation

In addition to projects led by ICES scientists, the ICES Data and 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.



**358** new investigator-driven projects

**1,166** ongoing investigator-driven projects



**477** peer-reviewed publications

**56**

new Applied Health Research Question (AHRQ) requests received from 44 unique knowledge users

**27**

completed AHRQ requests

**83 + 30**

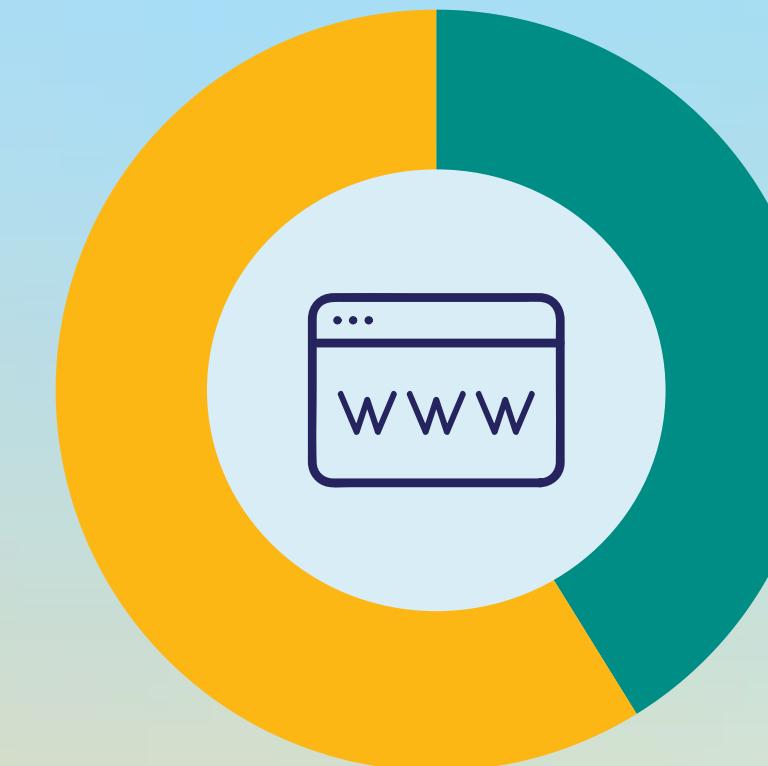
public and private sector requests to ICES Data and Analytic Services (DAS)  
(113 total)

## YEAR IN NUMBERS



### Knowledge Translation

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.



**145k** unique visitors to the ICES website  
**41%** international visitors ↗



**190** media hits per month  
on average



**61%** of media coverage  
was international



**568** participants at  
ICES' Virtual 2024 Forum



**25** infographics produced  
to help disseminate key  
research findings



**6** podcast episodes

# ICES ACCOMPLISHMENTS



## Indigenous Partnerships, Data and Analytics Department

Over the past year, the Indigenous Partnerships, Data and Analytics department experienced significant growth, marking an exciting chapter in its development. To support the department's expanding set of initiatives, ICES successfully welcomed two inaugural team members: Oliver Manidoka as Indigenous Partnerships Coordinator and Alana Pawley as Indigenous Engagement, Knowledge Translation and Exchange Coordinator.

Grounded in strong, respectful relationships, a commitment to reconciliation, and the essential principle of Indigenous data sovereignty, the department remains dedicated to sustaining the impactful work already underway. We are excited to explore new initiatives that are meaningful to First Nations, Métis and Inuit communities—supporting their leadership in research, data access, knowledge translation and analytics, and enhancing their ability to navigate and collaborate with ICES.



From left to right: **Oliver Manidoka**, Indigenous Partnerships Coordinator, ICES Indigenous Partnerships, Data and Analytics department, **Alana Pawley**, Indigenous Engagement, Knowledge Translation and Exchange Coordinator, ICES Indigenous Partnerships, Data and Analytics department

### Indigenous Partnerships, Data and Analytics team:

- **Dominique Legacy**, Director, Indigenous Partnerships, Data and Analytics
- **Oliver Manidoka**, Indigenous Partnerships Coordinator
- **Alana Pawley**, Indigenous Engagement, Knowledge Translation and Exchange Coordinator
- **Jessica Jordao**, Senior Research Project Manager
- **Jennifer Walker**, Senior Core Scientist, ICES Indigenous Advisor



## ICES ACCOMPLISHMENTS



### Natural Language Processing Models

The Data Quality and Information Management (DQIM) team focused on improving accuracy and efficiency by implementing AI/machine learning techniques in data cleaning in 2024. It began working on a natural language processing (NLP) model to clean Ontario Laboratory Information System (OLIS) C. Difficile data, which were previously cleaned with traditional techniques in SAS, and fine-tuned a BERT text-classification model developed by Google. Previously unlabeled data from 2021 to 2023 were used to validate the model's performance with support from our partner, Public Health Ontario. The model was ready for production by January 2025 and used to update the C. Difficile OLIS data to 2024. The DQIM team continues to build upon skills learned during the development of the C. Difficile model and work on developing different NLP models to clean other OLIS data more accurately and efficiently.

#### Team members:

- Elizabeth Monchesky, Data Science Analyst
- Shrey Virmani, Data Engineer
- Wei Liu, Senior Data Quality Analyst
- Gangamma Kalappa, Lead Specialist – Data Science
- Sean Ji, Manager, Data Quality
- Mahmoud Azimaee, former Director, DQIM
- Kevin Brown, Senior Scientist, Public Health Ontario

From left to right: **Laura Ferreira-Legere**, Senior Manager, ICES Public and Community Engagement, Knowledge Translation, **Melissa Stamplecoski**, Director, ICES Science Office, **Sima Rehemtulla**, Portfolio Manager, ICES Science Office



A smudge ceremony held at ICES Central in September 2025, led by **Dominique Legacy**, Director, ICES Indigenous Partnerships, Data and Analytics

## ICES ACCOMPLISHMENTS



### ICES Partnerships

#### 01. Indigenous Primary Health Care Council

ICES continues to advance our partnership with the Indigenous Primary Health Care Council (IPHCC), an Indigenous-governed organization supporting a network of Indigenous primary health care organizations (IPHCOs) across Ontario. These organizations include Aboriginal health access centres, Indigenous community health centres, Indigenous family health teams, and Indigenous interprofessional primary care teams.

ICES and IPHCC have focused on engaging IPHCOs around the sharing of their data with ICES. Recognizing the diversity in client populations and unique oversight models, ICES worked with IPHCC to co-develop a data-sharing approach that respects Indigenous data sovereignty and supports ethical research. This includes a secure and flexible model for posting IPHCO data in ICES' repository that is responsive to each organization's requirements.

Operationalizing this model at ICES required significant internal collaboration and innovation, particularly among the Privacy, Legal, Data Quality and Information Management, and Indigenous Partnerships, Data and Analytics teams. As a result, IPHCOs now have access to a suite of options for making decisions about data access and use. Obligations and data sharing agreements have been harmonized, and a secure, adaptable model for housing the data in ICES' repository has been developed—one that can respond to future changes in requirements.

The first agreements for broader sharing between ICES and IPHCOs were signed in 2024, and engagement with IPHCOs is ongoing. At ICES, the IPHCO data are currently being linked and are anticipated to be research-ready in fiscal year 2025/2026.

#### Strategic Partnerships team:

- + **Sujitha Ratnasingham**, Director, Strategic Partnerships
- + **Jenna Novess**, Senior Strategic Partnerships Project Manager



## ICES ACCOMPLISHMENTS



### ICES Partnerships Continued

#### 02. Immigration, Refugees and Citizenship Canada

ICES and Immigration, Refugees and Citizenship Canada (IRCC) continue to strengthen our longstanding collaboration to improve how immigration data are used in health research in Ontario.

A key focus has been the ongoing work of the Data Working Group at ICES, which was convened this year. This group is refining how data about Ontario healthcare users who arrived from outside of the province and those with temporary visas are linked and developing resources to support future analyses when these data are posted (anticipated for fiscal year 2025/2026).

In January 2025, IRCC hosted an in-person meeting with ICES which brought together teams from both organizations. The meeting included presentations on current research, data programs and future opportunities. It was a valuable opportunity to share updates, align priorities and explore new areas for collaboration.

To support this work, ICES and IRCC extended their information sharing agreement for another year. This ensures that data sharing and data access continue smoothly while both sides work on updating the agreement for the future.

These efforts reflect a strong and growing collaboration and a shared commitment to using data to support the well-being of immigrants, temporary residents and their communities.

#### ICES:

- + **Sujitha Ratnasingham**, Director, Strategic Partnerships
- + **Jenna Novess**, Senior Strategic Partnerships Project Manager
- + **Astrid Guttmann**, Chief Science Officer
- + **Susitha Wanigaratne**, ICES Fellow
- + **Christina Diong**, Associate Research Methodologist
- + **Tomi Odugbemi**, Senior Epidemiologist
- + **Hong Lu**, Associate Research Methodologist
- + **Charlotte Ma**, Lead Specialist – Record Linkage
- + **Sean Ji**, Manager, Data Quality
- + **Bing Yu**, Data Quality Specialist
- + Former members: **Gangamma Kalappa**, Lead Specialist – Data Science, and **Mahmoud Azimae**, former Director, DQIM

From left to right: **Sabella Yussuf-Homenauth**, Senior Public and Community Engagement, Knowledge Translation Officer, ICES Science Office, **Fiona Wong**, Research Project Manager, ICES Research and Analysis, **Méloidy Tondeur**, Corporate Project Manager, ICES Project Management Office



From left to right: Paul Kurdyak, Program Lead, ICES Mental Health and Addictions Research Program, Astrid Guttmann, ICES Chief Science Officer, Michael Schull, ICES CEO, Alison Blair, Associate Deputy Minister, Health Integration and Partnerships, Ontario Ministry of Health

## ICES ACCOMPLISHMENTS



### Mental Health and Addictions Symposium

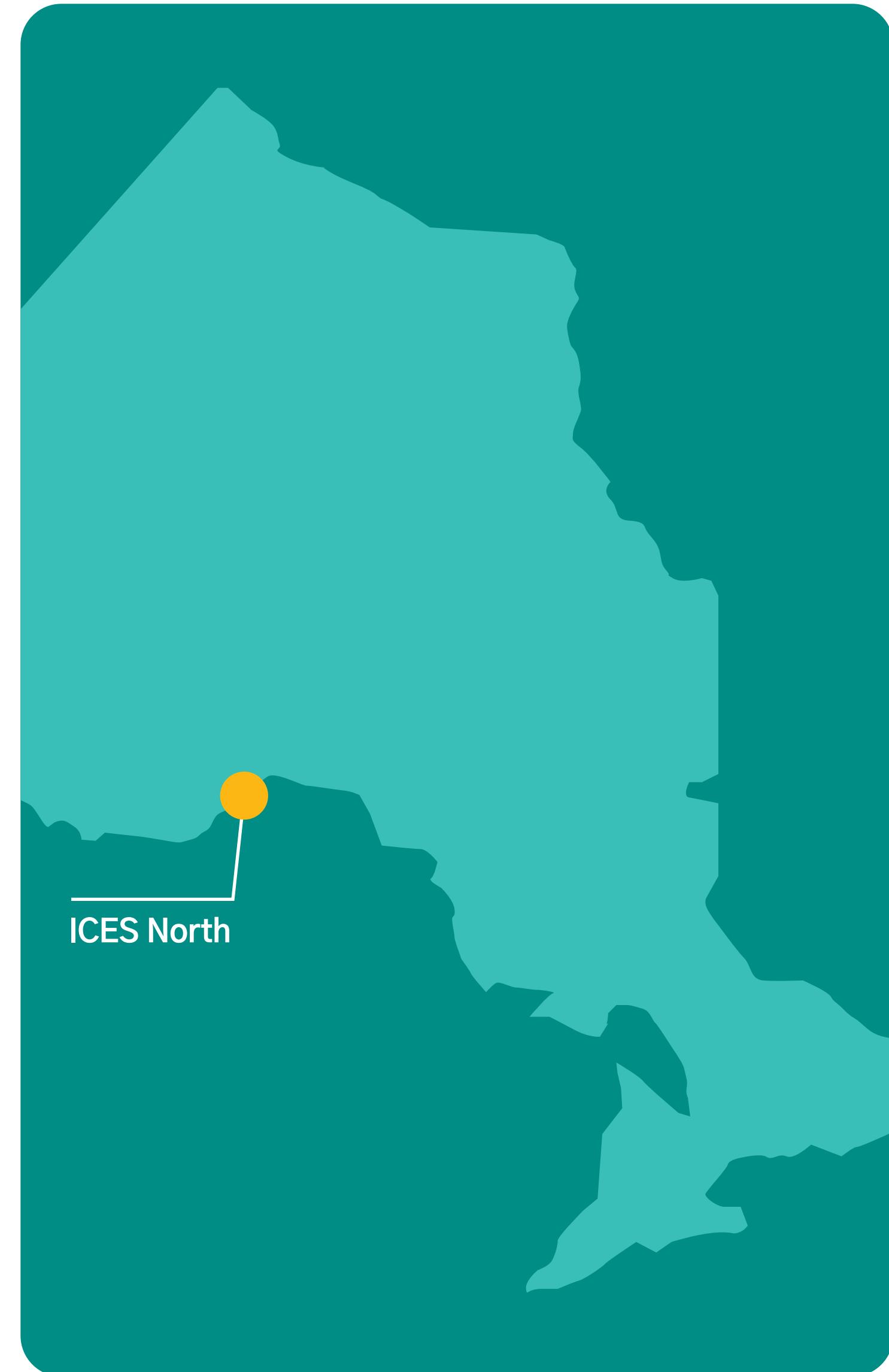
The 2025 Mental Health and Addictions Symposium, co-hosted by the ICES Mental Health and Addictions Program Framework Research Team and Ontario Health's Mental Health and Addictions Centre of Excellence, convened leaders from 25 unique affiliations across research, policy, clinical and community sectors to highlight the alignment of ICES and Ontario Health (OH) in driving evidence-based and data-driven system transformation within Ontario's mental health and addictions (MHA) system.

A showcase of the ICES-OH collaboration demonstrated how linked datasets are applied to drive the planning and implementation of an integrated care pathway for patients with substance use disorders. In parallel, OH presented emerging provincial data assets designed to inform service planning, capacity monitoring and resource allocation. The sessions focused on how ICES' data and analytic capacity directly informs OH's program and policy work. They also emphasized the complementary roles of the two organizations: ICES generating high-quality evidence and OH embedding that evidence into policy and system change.

The symposium advanced collaboration, trust and shared accountability, while reinforcing the critical role of data in shaping policy. Future policy-focused symposia will continue to expand partnerships and accelerate progress toward a stronger and more integrated MHA system.

### Acknowledgements:

- Mental Health and Addictions Program Framework Research Team (ICES MHA Research Program)
- **Charlotte Lam and Stella Ha** (ICES Communications)
- Mental Health and Addictions Centre of Excellence (Ontario Health)
- Preyra Solutions Group
- Funding from the Ontario Ministry of Health and the Ministry of Long-Term Care



## ICES ACCOMPLISHMENTS



### Spotlight on Three ICES Sites



#### ICES North: Dr. Kristen Morin – Harnessing Data for Health Equity in Northern Ontario

Dr. Kristen A. Morin is an assistant professor at NOSM University, an affiliated researcher with the Health Sciences North Research Institute, and an ICES North fellow. She has built a strong track record in health services research and health equity for more than a decade, publishing over 30 peer-reviewed studies using large administrative datasets. Her work frequently draws on ICES and related Ontario health data to examine issues like opioid agonist treatment, mental health comorbidity and access disparities in rural and northern communities.

Dr. Morin is currently leading the development of foundational cohorts of individuals with opioid use disorder in Ontario using ICES data. This research will provide comprehensive, longitudinal data on individuals receiving specialized addictions care, enabling robust evaluation of treatment retention, health outcomes and system-level impacts.

She is also leading the evaluation of hospital-based substance use supports in northeastern Ontario, leading to over 10 peer-reviewed publications demonstrating the effectiveness of targeted interventions in improving outcomes for people with substance use disorders and identifying gaps in services for subpopulations like youth and people presenting with different substance use disorders. Thanks to her work with the ICES North team, these findings will soon be linked with provincial data to provide actionable evidence for hospital-based harm reduction strategies and integrated care models.

By bringing together large-scale health data and regional insight, Dr. Morin's work with ICES North helps ensure that health policy and practice reflect the realities of care in the North.



## ICES ACCOMPLISHMENTS



### Spotlight on Three ICES Sites Continued

#### ICES Queen's: Alcohol Use in Young People

Alcohol is the most common substance used by Canadians with more than 75% having consumed it in the past year, and the liver and pancreas being two of the most common organs affected. Recent data suggested that over the past two decades, alcohol-related emergency rooms visits were rising fastest among adolescents and young adults (AYAs) in Ontario. Investigators from ICES Queen's, led by Site Director Dr. Jennifer Flemming, used ICES data to describe the epidemiology of the most severe form of alcohol-associated liver disease termed alcohol-associated hepatitis (AH) and alcohol-associated pancreatitis among AYAs aged 13–40 in Ontario from 2003 to 2021. They showed that incidence rates of both AH and alcohol-associated pancreatitis increased over threefold in this demographic with rates increasing most among females. In addition, among those AYAs who survived their first episode of AH, almost 25% developed cirrhosis within five years and the risk of cirrhosis was 50% higher among females compared to males. These data have gained significant attention from both the scientific community and the public, with multiple media appearances related to this work including *CBC's The Current, CBC News, and People Magazine*.

#### Watch the news:

[Who's drinking heavily is shifting and liver disease is up, research finds](#)

#### Read the studies:

[Alcohol-associated pancreatitis and liver disease among adolescents and young adults](#)

[Epidemiology and outcomes of alcohol-associated hepatitis in adolescents and young adults](#)

#### Acknowledgements:

+ **May Djerboua**, Senior Analyst, ICES Queen's



## ICES ACCOMPLISHMENTS



### Spotlight on Three ICES Sites Continued

#### ICES Western: Advancing Musculoskeletal Health through Data-Driven Research

ICES Western, in partnership with Western University's [Bone and Joint Institute \(BJI\)](#), launched a specialized funding competition titled the BJI Musculoskeletal Health Data Grants Program. This targeted funding initiative supported research projects that utilize ICES data to advance musculoskeletal health research, with additional funding support for those participating in the ICES Faculty Scholars Program.

Three applications were awarded funding through this program:

- **Dr. Jacquelyn Marsh** – *“Cost-effectiveness of a healthy lifestyle program: long-term follow-up of a pragmatic cluster randomized controlled trial”*
- **Dr. Jamie Fleet** – *“Osteoporosis management and fracture risk in Parkinson’s disease”*
- **Dr. Christina Ziebart** – *“Screening and treatment for osteoporosis post-spinal cord injury”*

Dr. Marsh previously completed the ICES Faculty Scholars Program, while Drs. Fleet and Ziebart have recently initiated their projects through the program.

#### Expanding Opportunities through the ICES Faculty Scholars Program

Hosted at ICES Western, the [ICES Faculty Scholars Program](#) continues to grow and evolve, now welcoming applications from **post-doctoral trainees**. With newly updated assignments designed to support those wishing to conduct their own analyses, we are excited to welcome our first post-doctoral trainee this fall.

For more information or to get involved, please contact:  [facultyscholars@ices.on.ca](mailto: facultyscholars@ices.on.ca)



Oliver Manidoka, Indigenous Partnerships Coordinator, ICES Indigenous Partnerships, Data and Analytics department

## ICES ACCOMPLISHMENTS



### Chiefs of Ontario, Ontario Drug Policy Research Network, and ICES Coordinating Efforts to Support Community-Specific Reports

A partnership between the [Chiefs of Ontario](#) (COO) and the [Ontario Drug Policy Research Network](#) (ODPRN) has supported a long-term collaborative effort with ICES aimed at developing First Nations-specific data on patterns of opioid use, access to treatment for opioid use disorder, and opioid-related harms among individuals belonging to the First Nations communities in Ontario.

A [series of public reports](#) has been co-developed by the COO and ODPRN through ICES research projects, with oversight by a COO Opioid Community Steering Committee, providing timely data on trends in opioid use since 2013 among First Nation Peoples across Ontario. These reports capture information on the following indicators, overall, and stratified by age, sex and residence within and outside of First Nations communities:

- 1. Prescription opioid use for pain**
- 2. Use of opioid agonist treatment (OAT; such as methadone and Suboxone®)**
- 3. Emergency department visits and hospital admissions for opioid-related toxicity**
- 4. Deaths due to opioid-related toxicity**

As this work has evolved, the project has sought to establish effective methods for transferring knowledge to the communities directly impacted by the ongoing opioid crisis. The Indigenous Partnerships, Data and Analytics (IPDA) department at ICES is taking an active role in supporting communities looking to access to their own data by developing a process with the ODPRN to ensure that First Nations communities can easily request a [community-specific report](#) on this topic.



## ICES ACCOMPLISHMENTS



### **Chiefs of Ontario, Ontario Drug Policy Research Network, and ICES Coordinating Efforts to Support Community-Specific Reports Continued**

As part of this commitment, First Nations communities can now request a community-specific report or ask related questions by contacting Oliver Manidoka, Indigenous Partnerships at ICES, through the dedicated inbox: [indigenous@ices.on.ca](mailto:indigenous@ices.on.ca).

This initiative marks an important milestone in ensuring Indigenous data sovereignty, fostering stronger relationships, and supporting community-led health research and action. The innovative approach of leveraging ICES' website to enable requests for community-specific research reports is also an important proof of concept, opening up new opportunities for ICES to make relevant research more accessible to other communities who can benefit from our data.

#### **Acknowledgements:**

##### **Co-leads:**

- + Zachariah General (COO)**
- + Tara Gomes (ICES/ODPRN/Unity Health Toronto)**

##### **Other co-authors on the report:**

- + Sacha Bragg (COO)**
- + Tony Antoniou (UofT)**
- + Jonathan Bertram (CAMH)**
- + Lorrilee McGregor (NOSM)**
- + Graham Mecredy (ICES)**
- + Tianru Wang (ICES)**
- + Anita Iacono (Unity Health Toronto/ODPRN)**
- + Samantha Singh (Unity Health Toronto/ODPRN)**
- + Bisola Hamzat (Unity Health Toronto/ODPRN)**
- + Nevena Rebić (Unity Health Toronto/ODPRN)**
- + Emily Schneider (Unity Health Toronto/ODPRN)**
- + Dana Shearer (Unity Health Toronto/ODPRN)**
- + Carmen Jones (COO)**
- + Roseanne Sutherland (COO)**

Special thanks to the COO Opioid Research Steering Committee.



## ICES ACCOMPLISHMENTS



### New Data Partnership to Expand Insights on Hospital Care in Ontario

In 2023, GEMINI data, a collection of detailed electronic health record patient level data from over 35 hospitals in Ontario, were linked at ICES. These data provide much richer details and information about hospitalized patients than is available through traditional administrative databases. This enabled research about trajectories of health before and after hospitalization and across healthcare settings, as well as long-term outcomes after patients leave the hospital. During this first stage, data were only available to GEMINI. On October 18, 2024, GEMINI and ICES signed a memorandum of understanding to increase opportunities for innovative research and analytics using the linked ICES-GEMINI data. The partnership will also facilitate the exchange of technical expertise and resources between ICES and GEMINI, and the alignment of technology and infrastructure, in a joint effort to build a stronger future for Ontario's hospital system.

### Acknowledgements:

- **Charles Victor**, Senior Director, Strategic Partnerships and Digital Services
- **Ferhana Khan**, Director, DQIM and former Acting Director, Research and Analytics
- **Gangamma Kalappa**, Lead Specialist – Data Science, DQIM
- **Kevin Liu**, Senior Database Administrator, DQIM
- **Magda Nunes De Melo**, Associate Director, Strategic Partnerships
- **Mahmoud Azimaee**, former Director, DQIM
- **Marian Vermeulen**, Senior Director, Research, Data and Financial Services
- **Michael Schull**, CEO
- **Michelle Wang**, Senior Information Management Analyst, DQIM
- **Sean Ji**, Manager, Data Quality, DQIM
- **Shrey Virmani**, Data Engineer, DQIM
- **Wei Liu**, Senior Data Quality Analyst, DQIM
- **JG Green**, Managing Legal Counsel, Manager Legal Services, PLO

From left to right: **Isaac Jovellanos**, Manager, ICES IT Service Desk, **Sherry Sanij**, Technical Support Analyst Student, ICES Technology, **Minnie Ho**, Director, ICES Data and Analytic Services



## ICES ACCOMPLISHMENTS



### Spotlight On ICES Early Career Researchers and PhD Students

#### Early Career Researcher: Dr. Kieran Quinn

Dr. Kieran Quinn is a general internist and palliative care clinician-scientist at Sinai Health in the Department of Medicine and Institute of Health Policy, Management and Evaluation at the University of Toronto and a full scientist at ICES. His research focuses on utilizing advanced analytical methods, artificial intelligence and large administrative datasets to accelerate knowledge creation, thereby improving access and delivery of high-quality end-of-life care for people living with heart failure and dementia. Dr. Quinn was awarded the Ontario Ministry of Health's Early Researcher Award, the Canadian Society of Internal Medicine's New Investigator Award, the Governor General's Gold Medal for Academic Excellence, and the John Charles Polanyi Prize in Physiology and Medicine. He advised the provincial government as a member of the Ontario Palliative Care Network. He also served as the Assistant Director of the Ontario COVID-19 Science Advisory Table, the Ontario Public Health Emergencies Science Advisory Committee and as an expert member of the Chief Science Advisor's National Task Force on the Post COVID-19 Condition. His early research success includes over \$36 million in competitive grant funding. Dr. Quinn has more than 120 publications in high-impact journals such as NEJM, JAMA, JAMA Internal Medicine, and BMJ. He has mentored 19 trainees who have published and won several awards for their work together.

#### Watch:

[Reimagining care for older adults with serious illness](#)

#### Read the studies:

[Comparison of physician-delivered models of virtual and home-based in-person care for adults in the last 90 days of life with cancer and terminal noncancer illness during the COVID-19 pandemic](#)

[Attending physicians' annual service volume and use of virtual end-of-life care: a population-based cohort study in Ontario, Canada](#)



## ICES ACCOMPLISHMENTS



### Spotlight On ICES Early Career Researchers and PhD Students Continued

#### Early Career Researcher: Dr. Tiffany Fitzpatrick

Tiffany Fitzpatrick, PhD MPH, is a scientist at Public Health Ontario and assistant professor at the University of Toronto's Dalla Lana School of Public Health. In addition to being a member of the Centre for Vaccine Preventable Diseases (University of Toronto), she also serves on the Executive Board of the Canadian Association for Immunization Research, Evaluation and Education (CAIRE). Dr. Fitzpatrick's current research focuses on the epidemiology and modeling of viral respiratory infections in pediatric populations, such as respiratory syncytial virus (RSV) and COVID-19, with an emphasis on informing prevention programs and policies to reduce social inequities in child health.

#### In the news:

[What you need to know about RSV and new vaccines in Ontario](#)

#### Read the studies:

[Pediatric acute respiratory virus hospitalizations: a population-based cohort study, 2017–2024](#)

[Family and child risk factors for early-life RSV illness](#)



## ICES ACCOMPLISHMENTS



### Spotlight On ICES Early Career Researchers and PhD Students Continued

#### PhD Student: Dr. June Lam

Dr. June Lam is an associate scientist with the Institute for Mental Health Policy Research at the Centre for Addiction and Mental Health (CAMH), and assistant professor in the Department of Psychiatry and at the Institute of Health Policy, Management and Evaluation (IHPME). He is also a psychiatrist working in the CAMH emergency department and the Gender Identity Clinic. He completed a Bachelor of Science Honours Pharmacology program at the University of British Columbia, his medical training at McGill University, and his psychiatry residency at the University of Toronto. He also completed a transitional age youth and transgender health research and clinical fellowship, as well as a PhD program in Clinical Epidemiology and Health Care Research (at IHPME) at the University of Toronto. Dr. Lam's academic and clinical focus is on care for 2SLGBTQIA+ communities, particularly using health services research to examine and improve access to mental healthcare for transgender and gender diverse (TGD) people. He has developed expertise in mixed methods research, uniquely integrating health administrative data and qualitative research to leverage the strengths of participant lived experience and population-level data.

#### Listen:

[Transforming gender affirming care with Dr. June Lam and Dr. Tori Anderson](#)

#### Read the studies:

[Exploring mediators of mental health service use among transgender individuals in Ontario, Canada](#)

[Physician follow-up among transgender and gender diverse individuals after psychiatric emergency department visits and hospitalizations: a retrospective population-based cohort study](#)



Back row, left to right: Michael Schull, Laura Ferreira-Legere, Patrick Roncal, Gail Campbell, Jean Beckett, Tracey MacKinnon, Vu Ngo. Front row, left to right: Elise Leong-Sit, Lisandra Hernandez, Sabella Yussuf-Homenauth, Simisola Johnson (PAC Chair), Natalie Kermany



From left to right: David D'Elia, Senior Technical Support Analyst, ICES Technology, Elise Leong-Sit, Senior Public and Community Engagement, Knowledge Translation Officer, ICES Science Office, Lesley Plumptre, Staff Scientist, ICES Life Stage Research Program

## ICES ACCOMPLISHMENTS



### ICES Public Advisory Council AHRQ Report

In 2022, the ICES Public Advisory Council (PAC) partnered with the ICES Applied Health Research Question (AHRQ) program to conduct a public-led research and analysis project. PAC members wanted to find out how people use mental health services based on where they live, their income and other social factors in Ontario. Through full participation in this project, the ICES PAC showed that public perspectives can add value and shed light on issues that may not be understood from data alone. There were multiple lessons learned throughout this project, including but not limited to:

- + Using multiple public engagement approaches suitable for different stages of the project lifecycle.
- + Sustaining public interest and engagement via ongoing communication, a clear and flexible timeline and real-time responsiveness to process feedback.
- + Sharing power throughout the process.

The practical strategies and lessons learned from this project can guide public partnership for future projects at ICES and beyond, as well as help improve trust, acceptance and interest in other initiatives using population-level health data. The [full report and supporting resources](#) were published in 2024 and are available on the ICES website and two PAC members also spoke about this project and public engagement more broadly on the [ICES In Our VoICES Podcast](#).

Past and present members of the [ICES Public Advisory Council](#)

#### 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:

- + **Michael Paterson**, Chronic Disease and Pharmacotherapy Research Program Lead and Science Advisor, Research Delivery
- + **Michael Campitelli**, Staff Scientist
- + **Luis Palma**, Senior Research Analyst

#### Mental Health and Addictions Program team:

- + **Astrid Guttmann**, Chief Science Officer and Senior Scientist
- + **Paul Kurdyak**, Mental Health and Addictions Research Program Lead and Senior Core Scientist

# FINANCIAL REPORT



## Statement of Financial Position

As at March 31, 2025  
(in thousands of dollars)

ASSETS	2025	2024
<b>Current</b>		\$
Cash	12,650	14,768
Accounts receivable	3,398	3,247
Prepaid expenses	1,562	992
	<b>17,610</b>	<b>19,007</b>
<b>Capital assets</b>		
	1,304	1,092
	<b>18,914</b>	<b>20,099</b>
<b>LIABILITIES AND FUND BALANCES</b>		
<b>Current</b>		
Accounts payable and accrued liabilities	2,831	3,084
Deferred revenue	3,236	4,518
Due to Sunnybrook Health Sciences Centre	450	1,556
	<b>6,517</b>	<b>9,158</b>
Post employment benefits	1,081	978
Deferred capital grants	1,304	1,092
	<b>8,902</b>	<b>11,228</b>
<b>Fund balances</b>		
General fund	<b>10,012</b>	<b>8,871</b>
	<b>18,914</b>	<b>20,099</b>



## Statement of Operations and Changes in Fund Balances

For the year ended March 31, 2025  
(in thousands of dollars)

REVENUE	2025	2024
Grants – Ministry of Health	18,530	16,136
Grants and other revenue	18,345	18,158
Amortization of deferred capital grant	258	221
Interest income	536	549
	<b>37,669</b>	<b>35,064</b>
EXPENDITURES		
Employee costs	30,041	27,605
Information, technology and security	3,064	2,767
Professional fees	1,152	1,189
Office and general	882	914
Premises	791	852
Contracted services	310	291
Amortization of tangible capital assets	258	221
	<b>36,498</b>	<b>33,839</b>
<b>Excess of revenues over expenditures for the year</b>	<b>1,171</b>	<b>1,225</b>
<b>General fund – beginning of year</b>	<b>8,871</b>	<b>7,646</b>
<b>Remeasurement of post-employment benefits</b>	<b>(30)</b>	<b>–</b>
<b>General fund – end of year</b>	<b>10,012</b>	<b>8,871</b>



## Statement of Cash Flows

For the year ended March 31, 2025  
(in thousands of dollars)

CASH PROVIDED BY (USED IN)	2025	2024
<b>OPERATING ACTIVITIES</b>	\$	\$
Excess of revenue over expenditures for the year	1,171	1,225
Items not affecting cash		
Post-employment benefits	73	73
Amortization of deferred capital grant	(258)	(221)
Amortization of tangible capital assets	258	221
<b>Changes in non-cash working capital balances</b>	(3,362)	789
	(2,118)	2,087
<b>INVESTING ACTIVITY</b>		
Purchase of capital assets	(470)	(582)
	(470)	(582)
<b>FINANCING ACTIVITY</b>		
Contribution to deferred capital grants	470	582
<b>Increase (decrease) in cash during the year</b>	(2,118)	2,087
<b>Cash, beginning of year</b>	14,768	12,681
<b>Cash, end of year</b>	12,650	14,768



# ACKNOWLEDGEMENTS



We would like to thank our core funders, the Ontario Ministry of Health and 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 our federal and provincial partners and interest-holders 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, Public Health Ontario, Métis Nation of Ontario, and the Chiefs of Ontario.

We also recognize our Indigenous partners, who have worked closely with us to develop unique partnerships that have enabled Indigenous-driven analyses using ICES data: the Métis Nation of Ontario, First Nations organizations and communities, the Kenora Chiefs Advisory, Grand Council Treaty #3, Aboriginal health centres, and the Chiefs of Ontario.

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.



## 2024/2025 ANNUAL REPORT



[ices.on.ca](https://ices.on.ca)

