

2010-2011: The year in review



Exceptional CARE with compassion.

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Contact us

Grand River Hospital – Kitchener-Waterloo Site
P.O. Box 9056, 835 King St. West
Kitchener, ON N2G 1G3

Grand River Hospital – Freeport Site
P.O. Box 9056, 3570 King St. East
Kitchener, ON N2A 2W1

Main switchboard: 519-742-3611

Automated attendant: 519-749-4300

Web: <http://www.grhosp.on.ca>

Email: info@grhosp.on.ca

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From Bryce Walker, chair of Grand River Hospital's Board of Directors



I'm very pleased to report to you on our progress in the 2010-2011 fiscal year.

It's difficult to focus on one area of success simply because of the efforts of the people in all our programs. We do know that 2010-2011 was the year of mental health at GRH, with successes

that mirror the hospital's vision. These include:

- The continuing focus on instilling hope, fostering recovery and family involvement;
- The expansion and redevelopment of acute facilities at our KW Site;
- The start-up of new services such as the specialized mental health unit at the Freeport Site; and
- The engagement of our partners in the community.

Overall, our 14 clinical programs and services continue to make tremendous strides in providing high-quality, patient-centered care. In 2010-2011:

- We were the most improved hospital in Canada in our hospital standardized mortality ratio, a key quality indicator;
- We opened a new intensive care unit featuring four times the space of the one it replaced, with more beds and better services for patients and care professionals;
- We added new beds in our neonatal ICU for newborn babies with serious health needs; and
- We've grown our renal program, providing life-sustaining kidney treatment for patients at hospital sites throughout Waterloo and Wellington, and in their homes.

Looking ahead, we need to do more to bring down emergency wait times. Our staff work very hard to help the nearly 60,000 patients who arrive at our emergency department every year. One project underway is the construction of 30 new inpatient beds in our medicine program. When these beds open, they will help us move admitted patients more quickly from the emergency department.

Our hospital has made a great deal of progress thanks to the hard work of our staff, physicians and volunteers. We look forward to continuing to meet the health needs of patients and their families. We also welcome our role as a partner in a system of care for patients throughout the Waterloo Region and Wellington County.

Bryce Walker
Chair of the GRH Board of Directors

Grand River Hospital is Waterloo Region's largest acute care hospital, with a focus on 14 clinical programs and services.

These include:

- Cancer care
- Childbirth
- Children's services
- Complex continuing care
- Critical care
- Emergency
- Laboratory services
- Medical imaging
- Medicine
- Mental health and addictions
- Pharmacy
- Rehabilitation
- Renal/kidney care
- Surgery

GRH: a partner in mental health for Waterloo and Wellington

Grand River Hospital is working to meet our communities' mental health needs and be a key partner in a system of care for the Waterloo Region and Wellington County.

According to the Canadian Mental Health Association, mental illness affects one in five people throughout their lifetime. Nearly half of all people who feel they suffer from depression or anxiety have never spoken with a doctor about their concerns. A recent Region of Waterloo report indicates suicide is a significant cause of mortality, claiming 42 lives in 2007 alone.

There has been a stronger focus on improving mental health care recently. The Ontario government has begun developing a 10 year strategy for mental health, with a key priority on system redesign. The recent provincial budget included investments in children's mental health, with funding to grow to \$93 million per year by 2013-2014.

A hospital is an important part of mental health care, but not the only part of it. GRH's programs focus on:

- Providing care for patients with acute needs who require stabilization, assessment and treatment;
- Helping patients transition back to the community; and

- Supporting programs working with patients in the community.

Within this framework, GRH's overall approach is to instill hope and foster recovery for people with a mental illness. This strategy recognizes a number of things:

- The importance of patients directing their care as much as possible, with a focus on their recovery;
- The vital roles that family members, community partners, and advocates play so that hospital care reflects the needs of patients and the community; and
- That mental health care will improve through building a better understanding of mental illness and reducing stigma related to it.

As you'll see in the next few pages, GRH has experienced growth and renewal through the renovation of our inpatient

facilities for adults, adolescents and children; the development of new regional services; and planning for further partnerships with our community providers.

Please visit www.grhosp.on.ca/Mentalhealth for more information about GRH's mental health and addictions program and links to community partners.



Specialized mental health brings much needed services closer to home



Program director Andrew Palmer stands outside of the new mental health entrance at the hospital's KW Site.

Andrew Palmer has seen a lot of change in how care is delivered throughout his 30 plus years working in mental health.

"The biggest positive change I've seen is that patients are now the centre of care and recovery rather than clinicians," says Andrew, the program director of Grand River Hospital's new specialized mental health program. "We've shifted to a recovery philosophy that recognizes the patient as a unique individual who is directing their journey of recovery."

Andrew works within the new program located at the Freeport Site. Staff care for patients with severe and persistent mental illnesses who will benefit from a longer stay in the hospital. Along with 50 new beds, the program is providing new outpatient services. These help support patients who've been discharged from inpatient care, but still need support while transitioning to community services.

Before this unit opened last year, patients from Waterloo-Wellington Region received this specialized care in London, Ontario.

The distance led to patients not receiving care in their home communities, and they had fewer visits from their family and friends...both factors that are vital to their care and recovery.

Bringing care closer to home has also strengthened community support to the hospital. A number of local artists and groups have donated time and funding for patients to provide therapeutic art projects as an example. Projects such as these help to reduce stigma associated with mental illness.

Andrew is quick to confirm that these positive changes are just the beginning.

"We're moving in a positive direction and will continue to do so," says Andrew. "To ensure we provide the best care possible, we regularly collaborate with mental health community supports, staff, patients and family members. As much as we spent 13 years planning for this, the evolution of mental health care in this region is just getting started."



GRH's Freeport Site has grown to include a new specialized mental health unit, which opened in November 2010. This unit helps people with longer-term mental health needs and includes a host of new community services.

Design of new child and adolescent inpatient psychiatry unit focuses on unique needs of patients



Amy (right) and her mother Brenda Kerr tour the courtyard incorporated into the KW Site's new child and adolescent inpatient psychiatry unit at the grand opening in May.

22-year-old Amy Kerr says the physical space for GRH's child and adolescent psychiatry unit (CAIP) now matches the high-quality care that's been provided for years.

Amy was 16 when she first stayed at CAIP. Staff there provide children and adolescents experiencing mental health challenges with inpatient support, counseling and crisis stabilization. At the time, CAIP was located in a cramped, dark hallway on the hospital's ninth floor with little space for activities or privacy and no access to the outdoors.

"I was definitely not a fan of the old yellow and green space," says Amy. "The care I've received was always attentive and patient focused - I was always treated with dignity, respect and kindness. Unfortunately, the design of the old unit just didn't match the care provided."

Now after three years of construction, CAIP patients have moved into a new spacious care area on the hospital's first floor. The bright new unit is three times larger and offers an outdoor landscaped courtyard.

Amy visited the new unit during its official opening and was immediately impressed.

"Someone has put a lot of thought and time into creating a space that is functional and friendly," she explains. "It's large enough to allow for personal space but not so large that it's overwhelming. The courtyard is leaps and bounds ahead in terms of healing. I especially like the quiet rooms for patients who need some extra care and time away from others."

Through the redevelopment of CAIP, the hospital has benefited from involvement from the artistic community. Singer/songwriter, James Gordon developed a song including lyrics from CAIP patients, while local artists and siblings Tanya and Rob Williams helped patients to design and paint an artistic mandala to mark their journey to recovery.

When asked about the care she received in the unit, Amy said, "Without this care I would not have recovered to the point I'm at now. GRH has done an amazing job hiring people who are concerned for the wellbeing of others. It shows that they care about their patients and that says a lot. It's encouraging and comforting to know that someone is going to take good care of you."

New adult inpatient mental health unit provides patient-centred environments to promote healing and recovery



Some of the staff in GRH's adult inpatient mental health unit include (left to right) clinical manager Christine McLellan, unit clerk Carolyn Ouellette, as well as registered nurses Josh Montgomery and Grace Ibrahima.

When planning began 11 years ago to design and build a bright, spacious new care space at GRH's KW Site for adults struggling with mental illness, no one anticipated just how much the new environment would impact patients, staff and families.

"I have worked in mental health for seven years now," says Josh Montgomery, a nurse in the adult inpatient mental health program at GRH. "We all knew that a new unit was under construction but when it opened last December, we were amazed to see the design, colours, rooms, and courtyard. The blueprints really didn't do it justice."

One of the new design features that supports exceptional care is the division of the unit into separate areas so that staff can more effectively provide individual and specialized care. There is a psychiatric intensive care area for patients who need a space that's safe and allows for a decrease in stimulation. The general stay unit serves patients who may require care that includes symptom management and intensive therapy.

For patients who need a more rapid assessment and brief treatment, there's the rapid stabilization unit.

"The old unit was one big space where all of our patients were together," says Josh. "Having three separate areas provides a more calming, quieter environment and better supports our recovery model of care."

The 52-bed adult inpatient mental health unit is located at Grand River Hospital's KW Site and provides counselling, group therapy programs, psychological testing, pharmacological intervention and education, and psychiatric assessment and diagnosis.

"It's an exciting time to work in the mental health program," says Christine McLellan, the clinical manager of the inpatient mental health unit. "We've got a large, beautiful new unit to support patient care, we're expanding our programs and services to help more patients and we're working to reduce stigma associated with mental illness for the patients we have today, and tomorrow."



Exciting times ahead for GRH mental health and addictions

Following such a busy year of expansions for mental health and addictions, Grand River Hospital is already hard at work on further growth and development.

“For us, the journey has just begun. We’ve built a foundation for much stronger hospital care for mental health patients. We think the years ahead will be exciting as our programs grow stronger roots in our communities,” says Judy Shearer, the hospital’s associate vice president of mental health and addictions.

“We intend to keep sight of several priorities. These include providing high-quality care focused on patient and family needs, and supporting individual recovery. We also want to continue working closely with our community partners to provide a coordinated system of care.”

Later this year, GRH will open a new mental health crisis assessment and short-term observation area in the KW Site’s emergency department. This unit will provide additional services for patients with emergency mental health needs. The hospital is also looking to support a regional mental health strategy.

As part of its community engagement commitments, GRH has also brought together a community advisory panel. It includes people with lived experience of a mental health and/or an addiction issue, family members, community partners and support agencies.



Dr. John Heintzman, GRH chief of psychiatry and Judy Shearer, associate vice president of mental health and addictions

The goal of this panel is to ensure that the voices of patients, families and community partners are included in hospital planning for the mental health and addictions program.

Within the next five years, GRH is also well placed to provide leadership in the training of new psychiatrists through the development of a fully-integrated residency program.

“We’re just embarking on this as a satellite of McMaster

University, and are very happy that one of our psychiatrists, Dr. John Vanderkooy, is our regional lead for that program,” explains Dr. John Heintzman, the hospital’s chief of psychiatry. “We will have 10 local psychiatry residents at a time split between GRH and Homewood once we reach full capacity.”



Regional patients benefit from better colorectal cancer screening and treatment

Grand River Hospital is a key centre in the Waterloo Wellington Regional Cancer Program's efforts to help patients detect colorectal cancer earlier and treat it more effectively.

The regional colonoscopy network (RCN), which includes GRH and partners across Waterloo and Wellington, has helped many area patients detect and treat colorectal cancer faster than before. The RCN has screened more than 1,300 patients and detected 31 cancers in just over a year of operation. Screening happens after patients do an at-home test for blood in their stool, or have a family history of colorectal cancer.

Asa Leobel, a 63 year-old resident of Guelph took an at-home test last year, with the result coming back positive. A follow-up colonoscopy through the RCN revealed colon cancer. After surgery last December Mr. Leobel has been told his prospects are very good.

"My family doctor urged me to do the test. I didn't think it was important because I didn't have any symptoms.

"I am blessed not only that my cancer was discovered, but that it was discovered in the early stages when it's most treatable," says Mr. Leobel.

GRH's Grand River Regional Cancer Centre (GRRCC) coordinates the RCN through a centralized referral office. In partnership with surrounding regional hospitals including St. Mary's, Cambridge Memorial, Guelph General and Louise Marshall in Mount Forest, patients are booked into the next available appointment closer to home.

For patients with cancer, the program offers the help of a gastrointestinal nurse navigator. The nurse navigator provides support and guidance to newly-diagnosed colorectal cancer patients and helps to speed up required testing

needed to proceed with treatment.

Screening and early detection is important for the best treatment of colorectal cancer. If you are over the age of 50 or have a family history of colorectal cancer, please speak with your family doctor or call Telehealth Ontario at 1-866-797-0000.



Some of the GRRCC staff helping to provide fast access to colon cancer treatment across Waterloo Wellington region include (left to right) Sara Kaune, Sandra Martin, Carol Gunsch and Monika Kalita.

Quick fact:

The Grand River Regional Cancer Centre (GRRCC) is among the top-rated cancer centres in Ontario, providing fast access to chemotherapy and radiation treatment.

Since 2003, GRRCC has provided chemotherapy to over 11,400 patients and radiation treatment to over 9,000 patients.

Patients and families receive better support with new intensive care unit

A major part of Grand River Hospital's KW Site redevelopment is now providing critically ill or injured patients with better care, and their families with more support.

Last December, GRH officially opened the new 15,000 square foot intensive care unit. The ICU development followed visits to leading hospitals, research into the latest and most effective designs, and extensive testing.

"A better facility makes major improvements for patient care and infection control.

We know our staff do an excellent job; this unit is allowing them to go that much further for their patients," said Dr. Paul Hosek, medical director for the ICU.

The new ICU is four times the size of the unit it replaced, and includes:

- Large, private, individual care spaces featuring plenty of natural light;
- Family-friendly services such as showers, sleeper chairs and quiet rooms to allow families to stay closer to loved ones; and
- Better technology for care providers including improved isolation systems for infectious patients, easy access to computers to review medical images and lab tests, and articulating arms hanging from the ceiling to hold heavy instruments, monitors and supplies.

The unit supports the needs of the hospital's many regional programs, and is part of Ontario's critical care bed capacity management strategy.

"The ICU is running 17 beds, up from 14 beds prior to the expansion. The new unit can increase to 20 beds as the region's growing population requires," said Michelle White, clinical manager of the ICU.

While patients, families and care providers are already benefiting from the new unit, the advanced ICU is also well-suited for a greater role in education for critical care

nurses and physicians.

Funding partners in the ICU expansion included the Government of Ontario, the Region of Waterloo and generous community donors through the Grand River Hospital Foundation.



Quick fact:

Every patient room in Grand River Hospital's new intensive care unit is a private room, which is more respectful of patients and families. Five of the rooms also offer improved isolation for patients who are dealing with or at risk of infections.

GRH's emergency department: providing excellent care, working hard to reduce waits



Some of GRH's emergency department nursing staff include (left to right) Jamie Brinston, Sue Harrop and Hailey Walsh.

Grand River Hospital's emergency department is a hive of activity around the clock.

Staff members see nearly 60,000 patients a year and begin care right away. They plan for admission to the hospital's inpatient units and sometimes arrange for patient transfers to other specialized centres.

Waits in emergency can be long as staff and physicians treat patients with severe conditions first, or cope with a high number of admitted patients.

"We know waits frustrate patients," says Sue Harrop, a nurse with 20 years of emergency experience. "We're doing a lot to improve, although the hospital faces some serious pressures."

GRH has taken several steps to help improve wait times, which include:

- Hiring more nurse practitioners and increasing physician coverage, providing faster care for minor treatment patients;
- Adding a new model of care to see patients with intermediate needs who can be managed safely in a chair and don't need to be on a stretcher, freeing up space for others; and
- Initiating care directives such as administering medication or arranging for diagnostic testing when appropriate after triage happens and before a doctor is available.

The hospital is also building 30 new inpatient beds to help relieve congestion. A crisis stabilization unit will open next to emergency later this year to serve mental health patients.

Sue has three key tips for a smooth emergency visit:

- Have a list of medications attached to your fridge door that you can easily grab before you make an emergency visit. This list should include your medications, their dosages and the number of times a day you take them. This information will help staff plan for your care more effectively;
- Bring something to do such as light reading; and
- Understand that there may be delays due to new emergent situations... such as a trauma case, a children's emergency or a patient with stroke symptoms.

"We will help all patients, although we understandably help people with life or limb-threatening conditions first," she explains.

More GRH progress in 2010-2011

Grand River Hospital has continued to grow and expand its programs and services, and made great progress in dealing with some difficult issues over the last year.

- The Grand River Regional Cancer Centre continues to be one of the top-rated cancer centres in Ontario for the best access to radiation therapy and chemotherapy, providing patients with excellent cancer care closer to home;
- Grand River Hospital's childbirth program continues to score 97 per cent satisfaction ratings from families. Over 4,300 babies are born every year at GRH's childbirth program at our hospital's KW Site;
- One of the most exciting developments within the renal program has been the amazing growth in our home hemodialysis program, supporting patients whose kidneys have failed. In less than 18 months, we have grown from three patients to 20 (and counting). Our patients are showing more interest in home dialysis options, and we continue to develop and build our program to meet the needs within our communities;
- In the Canadian Institute for Health Information's annual hospital standardized mortality ratio report for 2009 (released in December 2010), Grand River Hospital was the most improved hospital in Canada. The HSMR compares actual hospital mortality to that predicted by a national database of hospital outcomes. GRH's ratio improved from 119 in 2008 to 80 in 2009, with further decreases expected. The national average is 100;
- Grand River Hospital received an unconditional accreditation from Accreditation Canada in June 2010. Fewer than 20 per cent of Canadian hospitals receive unconditional accreditations;
- In March 2010, Grand River Hospital received a Greater Kitchener Waterloo Chamber of Commerce Business Excellence Award recognizing the hospital's efforts in workplace training;
- Working with the Waterloo Wellington Community Care Access Centre, we have implemented the Home First approach to help support patients in their homes after being discharged from hospital; and
- Working with St. Mary's General Hospital, we have put in place a standardized surgical safety checklist to ensure patient safety in surgery and better communication among operating room staff.



In October 2010, superstar hockey dad and stroke survivor Walter Gretzky visited area stroke survivors, EMS paramedics and GRH staff. Mr. Gretzky spoke about the need to dial 911 as soon as possible when stroke symptoms appear, including sudden blurred vision, weakness on one side, and sudden trouble speaking. GRH is the district stroke provider for Waterloo and Wellington, with a range of preventive, acute and rehabilitation services. Mr. Gretzky is pictured signing the shirt of GRH chief of neurology Dr. Scott Sloka.



Exceptional people, exceptional care

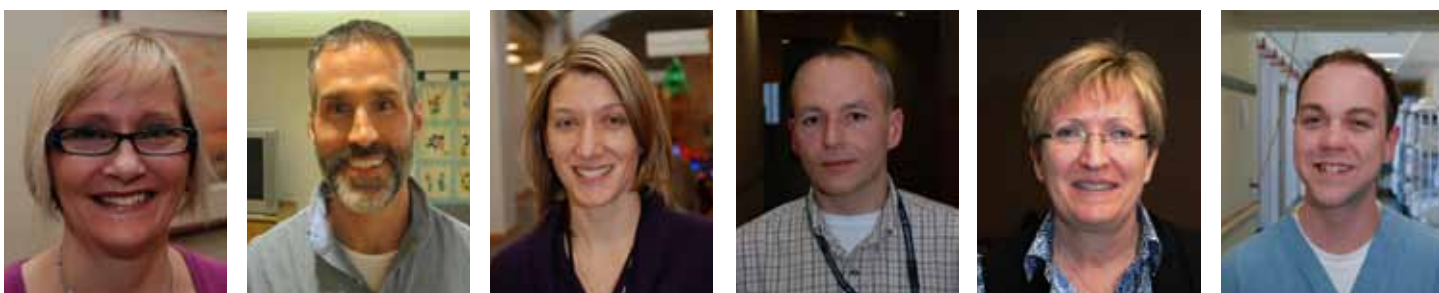
Grand River Hospital's quality of work life committee has focused on making work life improvements for staff, including a new monthly employee award of excellence program which started in May 2010. Open to all GRH employees and physicians, it's designed to recognize those who exemplify GRH values: professionalism, teamwork, positive attitude, respect and communication. Congratulations to all the award recipients of the past year!

Top row, left to right:

- Ruth Morrison was the first recipient of the employee award of excellence, marking her positive contributions to patient care with compassion and a friendly smile for everyone.
- Sharon Timmerman combines her compassion for patients and dedication to improving staff morale by going out of her way to comfort those she cares for.
- John Oshukany helps to comfort patients by remembering names and faces while portering them for radiation treatment.
- Robin Fischer's ability to adapt to change highlights her diversity as she works on a variety of units as part of the KW staff float pool team.
- Richard Wahl is very professional when assessing and diagnosing patients, which helps put them at ease.
- Duane Costa shows respect for both his coworkers and patients by being professional, dependable, and hard-working.

Bottom row, left to right:

- Janet Wellhauser is a strong advocate for patient needs and works hard to put new and improved processes in place.
- Dr. Michael Koke is thorough, compassionate, accessible, and caring while also showing appreciation for his entire team by consulting openly.
- By consulting with team members, Jennifer Parkins is always available to listen to coworkers while making them feel valued and unique.
- Ron Snelgrove helps facilitate patient care by making himself available outside of normal working hours to assist with morning startups.
- Cathy Beebe puts great effort into mentoring students and new staff, making her a role model while sharing her great sense of humour.
- Dieter Hendsbee offers assistance to patients and visitors while making them feel important. He always has a smile on his face and positive things to say.



GRH's financial report for 2010-2011

Grand River Hospital is pleased to provide you with our financial statements for the 2010-2011 fiscal year.

The hospital has completed the last fiscal year with a two per cent surplus in its operating budget, representing approximately \$5.5 million.

The surplus is a result of lower-than-expected costs in some key expense areas, especially drugs.

It also reflects the start up of new programs and expanded services within mental health, medicine, surgery and ambulatory care.

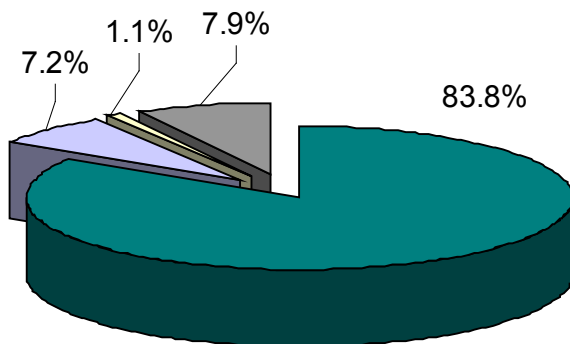
The surplus will help the hospital deal with on-going cost increases in future fiscal years. The hospital is budgeting for a balanced budget for the 2011-2012 fiscal year, with an expectation of no layoffs or substantial changes in services.

Statement of operations

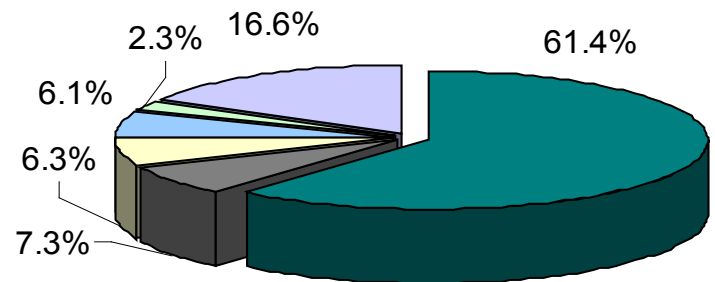
Year ended March 31, 2011 with comparative figures for 2010

| Expressed in thousands of dollars | 2011 | 2010 | % CHANGE | % TOTAL |
|-------------------------------------|----------------|----------------|------------|--------------|
| REVENUE | | | | |
| Ministry of Health & Long Term Care | 261,840 | 243,298 | 7.6 | 83.8 |
| OHIP and Patient Revenue | 22,558 | 21,474 | 5.0 | 7.2 |
| Equipment Grants and Donations | 3,377 | 2,913 | 15.9 | 1.1 |
| Other Revenue | 24,830 | 29,175 | (14.9) | 7.9 |
| | 312,605 | 296,860 | 5.3 | 100.0 |
| EXPENSES | | | | |
| Salaries and Employee Benefits | 187,117 | 179,404 | 4.3 | 61.4 |
| Medical Staff Remuneration | 22,234 | 20,970 | 6.0 | 7.3 |
| Drugs | 19,305 | 19,079 | 1.2 | 6.3 |
| Medical and Surgical Supplies | 18,714 | 19,147 | (2.3) | 6.1 |
| Equipment Amortization | 6,919 | 6,738 | 2.7 | 2.3 |
| Other Expenses | 50,527 | 51,425 | (1.7) | 16.6 |
| | 304,816 | 296,763 | 2.7 | 100.0 |
| Surplus from Operations | 7,789 | 97 | | |
| Building Grants and Donations | 7,069 | 6,106 | | |
| Building Amortization | (9,314) | (7,528) | | |
| HOSPITAL SURPLUS (DEFICIT) | 5,544 | (1,325) | | |

2011 revenue \$312.6 million



2011 expenses \$304.8 million



■ Ministry of Health & Long Term Care
■ Equipment Grants and Donations
■ OHIP and Patient Revenue
■ Other Revenue

■ Salaries and Employee Benefits
■ Medical and Surgical Supplies
■ Medical Staff Remuneration
■ Drugs
■ Equipment Amortization
■ Other Expenses

Statement of financial position

March 31, 2011 with comparative figures for 2010

| Expressed in thousands of dollars | 2011 | 2010 |
|--|----------------|----------------|
| ASSETS | | |
| Current Assets | 54,937 | 47,861 |
| Capital Assets | 185,599 | 178,852 |
| Accrued Pension Benefit Plan | 27,511 | 22,206 |
| | 268,047 | 248,919 |
| LIABILITIES AND NET ASSETS | | |
| Current Liabilities | 51,539 | 51,113 |
| Deferred Capital Contributions and Other Long-term Liabilities | 176,148 | 162,990 |
| Net Assets | 40,360 | 34,816 |
| | 268,047 | 248,919 |



GRAND RIVER HOSPITAL FOUNDATION

Message from the Board Chair, Theresa Fischer



This has been quite an exciting year to chair the Grand River Hospital Foundation.

I've been honoured to represent our board and donors at the opening of four new redevelopment projects throughout the hospital, funded in part through our Architects of Care fundraising program. These projects, which include mental health (at both our KW and Freeport Sites), intensive care, ambulatory care and surgical services, have a direct and positive impact on the care provided to the many patients, and family members who pass through our hospital every year.

It has been my pleasure to speak at the many events and presentations that have happened throughout the year, and have seen the generosity of our community in their continuing support of our hospital.

I have been fortunate to work with a committed board of governors, members of our various committees, Foundation staff, and the many volunteers and community partners who dedicate their time and efforts to making Grand River Hospital a top-notch facility.

Throughout this, I am reminded that none of our successes could be attained without the ongoing support of our community, and donors who support our hospital year in and year out. As I end my term as chair, and congratulate our new Foundation chair, Ron Caudle, my thanks goes out to everyone within our hospital and community for your hard work and dedication to Grand River Hospital over the past year.

Officers

Theresa Fischer, Chair
Ron Caudle, Vice-Chair
Mike O'Neill, Treasurer
Scot Dalton, Past-Chair
Nancy Hewat, Executive Director

Board Members

Carolyn Dysart
Rod Foster
Helen Friedman
Jamie Grant
Larry Gravill
Jim Kearns
David Kohler

Dr. Warren Law
Jeff MacIntyre
Malcolm Maxwell
Dr. Bob Rosehart
Dr. Yasmin Shamji
Caroline Willcox
Diane Wolfenden

Foundation Condensed Financial Statement

Condensed Statement of Operations & Changes in Fund Balances

| | 2010 | 2009 |
|--|----------------------|----------------------|
| REVENUE | | |
| Donations received from annual giving | \$ 5,481,459 | \$ 6,219,076 |
| Donations received from Campaign K-W | 500 | - |
| Donations received (repayment) from One Voice One Vision | (207,982) | (23,966) |
| Investment income (loss) | 1,630,987 | 2,313,596 |
| Donations-in-kind | 63,687 | 14,537 |
| | <u>6,968,651</u> | <u>8,523,243</u> |
| EXPENSES | | |
| One Voice One Vision expenses (recovery) | - | (5,301) |
| Annual giving expenses | 1,674,183 | 1,464,065 |
| Major and planned giving expenses | 229,184 | 211,254 |
| Operating expenses | 528,415 | 453,185 |
| | <u>2,431,782</u> | <u>2,133,203</u> |
| GRANTS | | |
| Grants to GRH Corporation | 6,394,263 | 3,527,324 |
| Grants to Sunnybrook Hospital Foundation Corporation | - | 129,617 |
| In-kind grants to GRH Corporation | 63,687 | 14,537 |
| | <u>6,457,950</u> | <u>3,671,478</u> |
| Excess (deficiency) of revenue over expenses and grants | (1,921,081) | 2,728,562 |
| Fund balances beginning of year | 27,937,460 | 25,208,898 |
| Fund balances end of year | <u>\$ 26,016,379</u> | <u>\$ 27,937,460</u> |

Year ended December 31, 2010, with comparative figures for 2009

Condensed Statement of Financial Position

| | 2010 | 2009 |
|--|----------------------|----------------------|
| ASSETS | | |
| Cash and cash equivalents | \$ 1,738,498 | \$ 1,263,834 |
| Marketable securities | 5,101,642 | 6,189,876 |
| Accounts receivable | 61,368 | 43,412 |
| Prepays | 44,050 | 37,703 |
| Investments | 20,508,080 | 20,891,035 |
| Capital assets | 44,086 | 26,653 |
| | <u>\$ 27,495,702</u> | <u>\$ 28,452,513</u> |
| LIABILITIES AND FUND BALANCES | | |
| Current liabilities: | | |
| Accounts payable and accrued liabilities | \$ 268,153 | \$ 75,828 |
| Due to Grand River Hospital Corporation | 1,211,170 | 439,225 |
| Fund balances | 26,016,379 | 27,937,460 |
| | <u>\$ 27,495,702</u> | <u>\$ 28,452,513</u> |

Year ended December 31, 2010, with comparative figures for 2009

The financial statements presented in this update are audited by KPMG LLP.

Audited financial statements are available by contacting:

* Grand River Hospital Public Affairs at 519-749-4300 ext. 3899 or

* Grand River Hospital Foundation at 519-749-4205

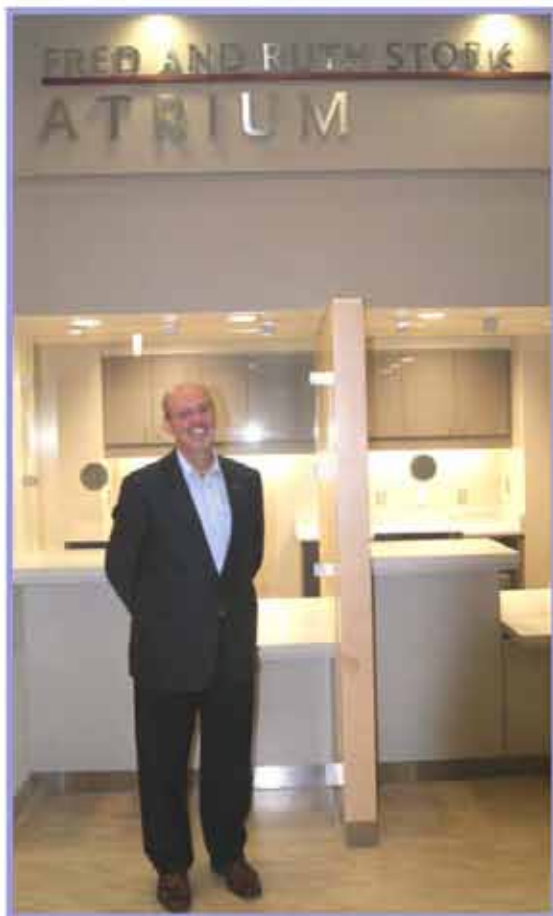


Architects of Care
building upon a healthy community

Thank you Architects of Care Donors including:

- BMO Bank of Montreal
- Bob and Judy Astley
- Deer Ridge Charity Pro-Am Golf Tournament
- Dr. Frank and Juliana Wong
- Faithlife Financial
- Former Owners of NDI, in honour of Jerry Krist
- Kiwanis Club of Elmira
- May Court Club of Kitchener-Waterloo
- MerSynergy Foundation
- QLO Management
- Retired Teachers of Ontario, District 11
- School Sisters of Notre Dame
- Steed & Evans Limited
- Tour de Waterloo

And numerous other individual community supporters.



Mike Stork, son of the late Fred and Ruth Stork, stands in the atrium named after his parents. Mr and Mrs Stork made a gift of \$1 million to Grand River Hospital



Linda MacKenzie and Sandy Delamere of Sun Life Financial in the CAIP quiet room



Tom Hallman, Stan Nahrgang and Susan Rempel of the Lyle S. Hallman Foundation in the activity and dining room in the new CAIP unit



Rob Wallace and Paul Straus of Home Hardware Stores Limited in the new ICU.



The Huber family outside the new intensive care unit



2011 marks the **8th annual Grand River Motorcycle Ride for Dad** for prostate cancer research and education. Motorcycle enthusiasts took part in this one-day pledge ride embarking on a 200km tour with stops in Waterloo, Guelph, Brantford and Cambridge.

Since 2004, the Grand River (Kitchener) Ride for Dad has raised nearly \$800,000 for prostate cancer research and education.



105.3 KOOL-FM Poster Boy Campaign finishes on a high note



(l to r: KOOL FM General Manager Paul Cugliari, Poster Boy Brian Bourke, and GRHF Executive Director Nancy Hewat)

After 12 years of supporting GRH's cancer programs, Brian Bourke climbed down from his perch for the final time as the 105.3 KOOL-FM Poster Boy, raising \$100,528 in this year's campaign.

Since joining forces with GRH in 1999, the Poster Boy Campaign has raised over \$1.9 million.

Thank you Brian and the rest of the 105.3 KOOL-FM team for your support!



Thank you to all of our donors who supported Grand River Hospital in 2010 through one of our three community appeals. In total, our donors in Kitchener-Waterloo and surrounding communities gave over \$610,000.

Funds raised from these appeals supported MRI technology upgrades, a digital breast biopsy system at Grand River Hospital's Waterloo Wellington Breast Centre, and other patient care equipment. Your support helps Grand River Hospital provide exceptional care in our community.



GRH Volunteer Association gives more than their time

The Grand River Hospital Volunteer Association gives the hospital and Foundation more than countless hours of service and dedication.

At its 2011 meeting, the GRHVA donated \$160,000 to be used towards the purchase of patient infusion pumps, an ultrasound unit for medical imaging, and vital signs monitors for the emergency department. As well, funding was provided for paediatric staff training.



Ride With Lance raises funds for GRH's cancer programs

Ride with Lance participants rode 117km through Waterloo Region and surrounding areas in what was, for most, the fulfillment of a dream come true – the chance to not only ride but interact with Lance Armstrong and other legends of the cycling world.

Cancer survivor and seven-time Tour de France champion, Lance Armstrong, was joined by cycling professionals, Steve Bauer and George Hincapie, as well as the "Voice of Cycling" Phil Liggett and 52 riders to raise funds for the Grand River Regional Cancer Centre.



Prior to "Ride day", Lance Armstrong and New Jersey Devil David Clarkson met young patients from Grand River Hospital's Paediatric Oncology Group of Ontario (POGO) satellite clinic at the August 27, 2010 appreciation event honouring childhood cancer care professionals.

Grand River Hospital honoured the fundraising efforts of Caudle's Catch Seafood by naming the regional cancer centre's patient education room in their honour.

Their annual golf tournament has raised over \$100,000 for the regional cancer centre. Owners Sylvia and Ron Caudle and their staff attended the naming ceremony.



The Grand Experience takes a bite out of the Big Apple!

Grand River Hospital Foundation hosted its third annual Grand Experience on November 6th, 2010.

This year's theme was "The Grand Experience...a New York State of Mind". The venue was magically transformed into New York City for the evening featuring the Statue of Liberty, the Brooklyn Bridge, and the city skyline.

Over 300 people enjoyed an evening filled with excitement, glamour, wonderful food and incredible memories, all in support of a digital breast biopsy system at Grand River Hospital's Waterloo Wellington Breast Centre.



Pictured above (l to r) are the Signature Event's "cover ladies"; Jennifer MacKinnon, Cheryl Evans, Lori Temple, and Jenny Rajaballey

HOW TO REACH THE FOUNDATION OFFICE:

In Person: Ground Level (fourth floor) of the K-W Site's
Kaufman Building - 40 Green Street

By Phone: 519-749-4205 Online: www.grhf.org

By Mail: Grand River Hospital Foundation, 835 King St W.
Kitchener, Ontario, N2G 1G3

I WANT TO HELP!

06/11

First Name _____ Last Name _____

Street Address _____

City _____ Postal Code _____

Telephone Number _____

Email Address _____

Please accept my one time gift of:

☐ \$50 ☐ \$100 ☐ \$300 ☐ \$500 ☐ Other: \$ _____

Gift To: ☐ New ultrasound unit for medical imaging

☐ Architects of Care Program for redevelopment of
intensive care unit, mental health services, surgical
services and consolidated outpatient care

Method of Payment:

☐ Cheque (payable to Grand River Hospital Foundation)

☐ Visa ☐ MasterCard ☐ American Express

Card No: _____

Expiry Date: _____

Signature of cardholder: _____

☐ I authorize GRHF to process my donation as indicated above.

Return to: Grand River Hospital Foundation
835 King Street West, Kitchener, ON N2G 1G3

Supporting GRH through monthly giving is another convenient
and cost effective way to give. Please contact us at
519-749-4205 or visit www.grhf.org to learn more.

GRAND RIVER
HOSPITAL
FOUNDATION

A receipt will be issued for income tax purposes. No. 88918 0394 R0001



Pam Dillon stands in front of the radiation suite waiting room named for her late husband Jim. The Dillon family gave a gift of \$125,000 in Jim's honour for the purchase of patient infusion pumps.

I Love To
Be Me



Kate Lilja

Kate Lilja was born with a heart condition that kept her in Grand River Hospital's neonatal intensive care unit.

Now a bright, healthy teen, Kate's mission is to give back to the hospital where she was born by raising funds for the neonatal intensive care unit through her book "I Love to Be Me", which she wrote at age 7.



A presentation of \$5,200 from the NHLOA Zebras Care program was made to purchase new sleeper chairs for the inpatient children's unit. Pictured are Brandon Springer, referee Dean Morton and linesman Greg Devorski.