

# Enhancing Lives Transforming Care.

2013-14  
Annual Report

*Bruyère Is There.*



[bruyere.org](http://bruyere.org)

SOINS CONTINUS  
**Bruyère**  
CONTINUING CARE





## Engaging With Our Community

“ I can tell you firsthand how Bruyère is impacting our seniors lives. Bravo à tous les employés qui font une différence jour après jour. ”

“ And that, my friends, is why we love Bruyère! ”

“ You are totally AWESOME!!! Helpline is an invaluable service that helps everyone. Once, when my mother needed to use the service, from the time she pushed the button to the time I arrived at her door, it was 10 minutes!! On top of all that, on her birthday, they gave her a "Happy Birthday" message. My mother was shy, and she loved knowing that there was someone out there who cared. This service that Bruyère provides, and Bruyère as a whole, do so much that many people are not even aware of. God bless all of you! ”

“ @bruyere\_care Thanks for telling me about your unique rentals! Story will air Monday morning. ”

“ @bruyere\_care @OttawaCancer: So exciting to get many #Ottawa communities involved! #EPICWALK #saintvincenthospital #eSAX #cancersurvivorship ”

“ It was an absolutely fun summer working with @bruyere\_care @BruyereResearch ”



## Greetings from the Catholic Health Corporation of Ontario

The 16 organizations that comprise the Catholic Health Corporation of Ontario Family offer a diverse range of programs across the health care continuum, serving residents of 10 communities in Ontario. Our common bond is the founding congregations of religious women that had the foresight and commitment to create each of these organizations, responding to an identified need, often times when resources were not abundant and when there were limited options for those needing care.

We are often asked: What is Catholic health care today? As sponsor of these 16 organizations, CHCO has a responsibility to ensure the Founding Sisters' legacy of the healing ministry of Jesus continues in times of change. This includes high quality care delivered through leading practice; identifying service gaps and offering new services to those most in need; caring for the whole person (body, mind, spirit); prudent use of resources; and strong governance and leadership.

As CHCO strives to achieve our vision of being a relevant and supportive sponsor, we are building relationships with Catholic sponsors across Canada, and sharing tools and leading practices. We have many opportunities to cultivate leadership within our family,

from sharing expertise, know-how, and successes that can be spread amongst organizations, to helping out an organizational family member in a time of need.

The Founding Sisters were innovators, and we need to follow their example as our health care system changes. Collectively, we are a strong and sustainable footprint of Catholic health care across Ontario. We are called upon to lead, collaborate, innovate and influence to improve health care and service where the needs are greatest, especially for the poor, vulnerable and marginalized.

We are proud to have Bruyère Continuing Care as a member of the CHCO family!

Lil Bergamo, Board Chair  
John Ruetz, President & CEO



## **Sandra Graham's Message to the Community**

As the chair of your board of directors, I am extremely honoured to be associated with an organization which is so steep in history and tradition of caring for the most vulnerable, and those with complex medical conditions. Our patients, residents and their families count on our dedicated, compassionate and innovative care provided by the staff and physicians of Bruyère Continuing Care.

The 2013-14 Bruyère Continuing Care annual report highlights the many accomplishments from what was a very difficult yet rewarding year. What I hope the readers of our annual report will see is the team behind our success and the difficult decisions that had to be made to meet the needs of the people under our care. We know we are making a difference from the stories that we hear in our hallways and throughout the community, the feedback we receive from staff and physicians, the awards that have been bestowed upon us, the Research grants ongoing with the Bruyère Research Institute (BRI) and the generous gifts received by our Foundation; but mostly from the countless letters and emails from our patients and their families who have received care from the many different programs and services under the Bruyère Continuing Care umbrella: Saint-Vincent Hospital, Élisabeth Bruyère Hospital, Élisabeth Bruyère Residence, Saint-Louis Residence, Bruyère Village, Geriatric Day Hospital, Bruyère Memory Program and Bruyère Academic Family Health Team.

None of this is possible without the heart of Bruyère—our people. I have had the honour of serving on the Bruyère board of directors for nine years and the transformation that I have seen over this time is astounding. Under the leadership of our president and CEO, Mr. Bernie Blais, and our new chief of staff, Dr. Shaun McGuire, we are a team. A team with common purpose to provide quality care for the patients and residents we serve.

Part of this team is the board of directors. Each member of the Board dedicates numerous hours—often 20 to 40 hours a month, fulfilling our stewardship and governance responsibilities in support of Bruyère Continuing Care and the senior leadership team. I wish to thank each member of the Board for their tremendous dedication, wisdom, commitment to ask the hard questions as well as for their time.

A great deal of our time and focus has been on who and what Bruyère needs to be in the future—what role do we play in Ottawa and the entire Champlain region; what our story is. We are developing the mission, values and strategic plan for the coming decade. This is not easy work, but it is critical. Guided by the kind of patients we serve now and will in the future, we have created a strategic plan which will define Bruyère Continuing Care. It is bold, innovative and necessary.

As I complete my term, I want to sincerely thank the entire Bruyère family, especially Bernie and Shaun, the newest members to our team. You are too many to name but it has been an honour and pleasure to work alongside each of you. Thank you for making our vision become a reality. Throughout this journey as chair, my guide-post has been my mentor and my greatest champion—my grandmother Bertha “Sis” Sage, who was a nurse in London during World War II. She lived to be 97 and was frail in body but not in mind. I know she would be as proud as I am about all we have accomplished.

Sandra



## **Bernie Blais'** **Message to the Community**

Over the last year, and building on the excellent reputation Bruyère Continuing Care has in the community, we have embarked on several key milestone initiatives that will forever transform the Bruyère patient and resident experience.

**QUALITY** is throughout Bruyère. Delivering quality care is the foundation for every act our clinical staff makes. Bruyère Continuing Care has reinstated how we communicate, deliver and measure quality. As an example, one enhanced method of ensuring quality is unit-based quality teams, whereby quality is brought back to the frontline staff and the bedside - where it belongs. Embedded into the structure is bi-directional communication. This process ensures corporate and program quality initiatives are communicated to the units, and unit quality initiatives are communicated back to the program and corporate level. The structure will also enable the creation of a central repository of quality initiatives throughout Bruyère which will help to support the positive, infectious spread of such initiatives and reduce duplication of initiatives.

Support for the quality initiatives will come from Bruyère Continuing Care's Decision Support Department, the Bruyère Best Evidence Review Group (BBERG) through BRI, and the Quality, Patient Safety and Risk Management Department. Significant support will be provided by the quality improvement coaches who have undergone the Health Quality Ontario (HQQ) quality facilitation training, as well as CIHI courses and obtaining their Lean green belt.

Two of these coaches will be assigned to each of the unit-based quality teams to help support the manager, facilitate quality initiatives and provide just-in-time teaching to staff on quality methodology so that they will be able to take this knowledge and use it in the future.

The BBERG initiative will provide 10 rapid reviews for programs. This initiative will enable programs to conduct larger scale reviews that will in turn help to generate quality initiatives to ultimately better patient/resident care.

**LEARNING** is one of Bruyère's five values. For both personal and professional growth, professional development opportunities can set new learning objectives, share knowledge, skills and experiences with colleagues while demonstrating accountability in enhancing the delivery of our care and services. This becomes even more important in times of change and transformation. To this end, I am excited to announce that as part of our new Bruyère Legacy Program leadership development initiative, there is a new training partnership with HQO. This particular element of the Legacy Program, entitled Quality Improvement (QI) Facilitation Training, is a three-day training session led by HQO. The goal of this training is to gain expertise in value streammapping; i.e. analyzing the current state or process and considering how to optimize it so there is minimum waste and maximum value.

The goal is to build QI capacity among Bruyère's leadership staff so that they can lead and support QI efforts in their respective fields and teach these skills to their own staff. Participants will have dedicated time to learn about QI theory and to practice applying QI tools to find sustainable solutions for issues that are presently pertinent to Bruyère's success.

As a provincial Centre for Learning and Innovation, Bruyère will gain the skills and ability to support improvement projects within and between the cross sector continuum of the health system. Employees will focus on improving patient/resident transitions through the health system, while further strengthening participants' ability to apply QI theory and tools.

When we look at the challenges which lay ahead for the health care system, it will be very important that our top priority of providing quality care be demonstrated every day. Developing a tool kit of knowledge allows us to empower more people to affect this kind of transformation.

**TRANSFORMATION:** Saint-Vincent Hospital has significantly changed over the last five to 10 years. What once looked like—and had patients similar to—a long-term care home, now admits patients who have much more complex medical and nursing challenges. The term often used is subacute. Not acute (i.e. The Ottawa Hospital) and not long-term care (i.e. Élisabeth Bruyère Residence or Saint-Louis Residence) but somewhere right in the middle. A rare place to be.

Over the last year, guided by strong data and analysis, an external review by peer leaders and best practice theories, Ontario's largest complex continuing care hospital began its transformation to evolve to Ontario's largest subacute hospital. Patients will value more regulated staff at the bedside, more efficient use of resources and space, and enhanced interaction between themselves and their care providers.

**TECHNOLOGY** provides an opportunity for Bruyère to invest in the infrastructure that will streamline processes and procedures, thereby allowing more time at the bedside engaging with our patients. As part of our electronic patient record implementation, we have recently implemented unit dose medication which means a reduction in medication errors.



*Premier Wynne meeting with staff and tenants at the Bruyère Village.*



**INSPIRATION:** I had the pleasure of touring several provincial politicians and influencers through one of Bruyère's five sites. Premier Wynne toured the Bruyère Village, (Former) Health Minister Deb Matthews, myself and Bruyère staff met to highlight some incredible research outcomes and share our subacute story. Ontario Senior Strategy lead, Dr. Samir Sinha, joined us for the second year in a row to provide input in our new strategic directions.

But the best is yet to come. Fall 2014 will see Bruyère take a new and bold direction with the provision of our health care services as we launch our 2014-19 strategic plan.

Together, with our employees, physicians, volunteers and our generous donors, we stand poised to transform the health care landscape of our region, now and for generations to come.

Thank you for your continued support on this journey — we are enhancing lives and transforming care.

Bernie



## **Dr. Shaun McGuire's Report to the community**

I'm pleased to present my first report to the community as Bruyère's chief of staff. I arrived at Bruyère from The Ottawa Hospital (TOH) in November 2013. Since then, I have had the opportunity to witness first-hand the importance of a collaborative relationship between both health care organizations.

As the former medical director of Medical Affairs at TOH, a staff physician with the Riverside Family Health Team and an assistant professor with the Department of Family Medicine at the University of Ottawa, I am thrilled to represent a health care organization so committed to enhancing the patient experience and providing kind, safe care.

Our medical leaders will continue to focus on achieving high patient safety and satisfaction results, operational efficiency and good clinical outcomes. To that end, Bruyère has implemented two initiatives designed to improve its overall quality and patient safety. The first initiative is the recent Saint-Vincent Hospital (SVH) Transformation Project.

Bruyère's SVH is the only institution in eastern Ontario providing exclusive complex continuing care. The complexity of care for Bruyère's complex continuing care patients is highest amongst our provincial peers. With 336 beds, SVH is one of the largest complex continuing care facilities in Ontario—if not Canada. It is presently advocating to be designated as Canada's first subacute hospital. As a subacute hospital, SVH is admitting patients from acute care with a high degree of medical complexity such as ventilator or tracheostomy care requirements as well as those requiring active management of medical issues that change with the course of their illness.

This transformation means SVH is moving away from caring for the more medically stable patient population as these individuals are now cared for in a more appropriate setting such as long-term care, group homes, assisted living, or in their own homes.

Bruyère has also identified physician engagement as an organizational priority. Engaging physicians and clinical leadership is critical to improving quality performance and is an essential precondition of providing safe high quality care. Through concurrent focus groups we will collect and analyze the physician's perspective regarding engagement in order to engage them in quality improvement for patients.

Health care presents a challenging environment and we, at Bruyère, look for opportunities for our physicians, employees, volunteers and health care professionals to continue to provide our patients and residents with the best possible quality of care and attention they deserve. A sincere thank you to the entire medical team for making 2013-14 a year of continued growth and advancement. Bruyère has such an important role in our health care system and I'm thrilled to be working with the team.

On behalf of Bruyère's board of directors, our thanks go out to interim chief of staff, Dr. Chris Carruthers, who expertly led our medical leadership team before my arrival.

Shaun



## **Bruyère Foundation's Message to the Community**

With your help, Bruyère Continuing Care continues building on a 170-year old foundation of compassionate care and respect.

The Bruyère story began with help from the community. Bruyère grows stronger every day because of our community and thanks to the personal commitment and generosity of people living and working in and around the nation's capital. People just like you.

The evolution of Bruyère Continuing Care is guided by our donors, physicians, researchers, patients, staff, volunteers and, of course, the Sisters of Charity of Ottawa. As Ottawa's first hospital, Bruyère has always cared for the most vulnerable patients and those whose health care needs are not being met elsewhere in the community. Proudly, Bruyère lives up to this commitment every day of the year.

The future is here and with it a new wave of patients with specific needs. Bruyère is strategically evolving to ensure the needs of the community continue to be met for years to come.

### **Through the continuing help of our generous donors, Bruyère is:**

- Leading the way in enhancing the way of life for people who are growing older.
- Providing the best care for people living with chronic diseases, recovering from catastrophic medical emergencies and coping with terminal illnesses.
- Remaining committed to building and sharing knowledge and constant innovation.
- Supporting the delivery of outstanding care not only at our own facilities but also throughout the communities we serve.

Thanks to your heartfelt commitment to the unique form of care found at Bruyère, the past year has resulted in record-breaking financial support. Your continued investment in our programs allows for new tools, strategies and technologies to enhance the quality of life and independence for friends, families and neighbors who are growing older and living with complex health conditions. Your investment in our expertise allows us to attract the best and brightest to the Bruyère Research Institute where a commitment to real life research helps us transform care. Your support of the Ruddy-Shenkman Hospice fills a vital need for hospice beds in our community allowing families to keep their loved ones close to home while improving the efficiency of our health care system.

You do so much for Bruyère and you should be proud. We encourage you to continue to GIVE and TELL. By donating funds, volunteering, participating in events and engaging with us online, you help us build a community of caring that reaches beyond our own walls.

Thank you for being a champion. Thank you for helping us deliver comfort, peace of mind and world-class care for those amongst us who need it the most.

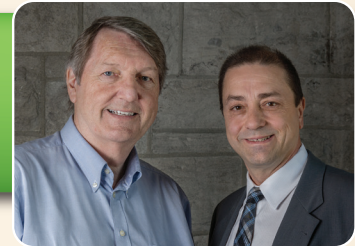
Sincerely,

Fiona and Amy



**Dr. Peter Walker**  
CEO and Scientific Director  
V.-P., Research and Academic Affairs  
*Bruyère Research Institute*

**Dinis Cabral**  
Chair  
Board of Directors  
*Bruyère Research Institute*



## **Bruyère Research Institute's Message to the Community**

This past year has been very significant for the Bruyère Research Institute (BRI).

In 2013, Bruyère Continuing Care gave us an enormous gift: Annex E, the property located at 85 Primrose Ave., near Saint-Vincent Hospital. This beautiful stone property was formerly held by the Sisters of Charity of Ottawa and served as a convent, a school and ultimately as a residence. Annex E overlooks LeBreton Flats, the Canadian War Museum and from some angles one can see Parliament Hill.

The property was offered to Bruyère Continuing Care with very favorable terms. After a significant renovation, BRI took possession of the building in November. BRI now houses critical masses of investigators at Annex E and Saint-Vincent Hospital (methods; equity and community care); Saint-Louis Residence (health systems) and the Élisabeth Bruyère Hospital (cognition and mobility). Investigators involved in the promising practices theme are located at all three sites.

### **Some highlights of the year include:**

1. Professor Vivian Welch received a prestigious Early Researcher Award from the Province of Ontario. Her project on improving the relevance of randomized trials for equity-oriented decisions is the first ever awarded to BRI.
2. Dr. Clare Liddy was honoured by the Ontario Medical Association for her pioneering work on the development and evaluation of eConsult, a tool that allows primary care physicians to seek rapid consultations with specialist physicians, improving access to specialized services. Dr. Liddy works closely with her colleague Dr. Erin Keely of The Ottawa Hospital.

3. Investigators from the CT Lamont Centre for Primary Care Research were enormously successful in the CIHR Team Grant Competition in Primary Care. Six CTLC investigators are leading three community-based primary health care team grants and are also part of two other team grants as co-investigators; having representation in 42 per cent of the funded team grants.
4. Investigators ratified the creation of five research themes with the intention of promoting greater degrees of collaboration and of fostering BRI's alignment with Bruyère Continuing Care.
5. We created the Bruyère Methods Group, an innovative entity that now comprises 14 investigators. In addition to pursuing their own independent research programs, the members of the group, lead by Vivian Welch, also provide support to Bruyère Continuing Care clinicians who wish to address important clinical questions. The group has expertise in systematic reviews, guidelines development and evaluation, health administrative database mining, biostatistics, qualitative and mixed methods, knowledge translation and education research.

We will continue to build on our strengths with ongoing collaboration between our investigators and Bruyère Continuing Care while conducting relevant, practical and leading-edge research on a regional and international level.

Peter and Dinis

# Financials | Bruyère Continuing Care

## Bruyère Combined Results

Unaudited Statement \*

	March 31, 2014 (in millions)	March 31, 2013 (in millions)
Total Revenues	\$ 136.68	\$ 133.13
Total Expenses	\$ 137.17	\$ 133.45
Excess (deficiency) of revenues over expenses before net amortization of leasehold improvements	\$ (0.49)	\$ (0.32)

## Net Costs Per Patient Day / Resident Day

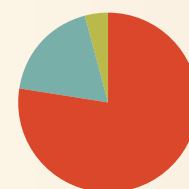
Bruyère Hospitals	\$ 694.32	\$ 662.41
Élisabeth Bruyère Residence	\$ 214.16	\$ 206.79
Saint-Louis Residence	\$ 209.43	\$ 198.27



	March 31, 2014 (in millions)	March 31, 2013 (in millions)
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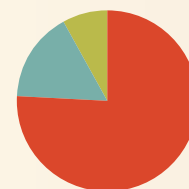
## Expenses by Categories

Compensation	\$ 106.99	\$ 106.57
Supplies and Other Expenses	\$ 24.96	\$ 21.61
Medical Supplies and Drugs	\$ 5.22	\$ 5.28
	<b>\$ 137.17</b>	<b>\$ 133.46</b>



## Revenues by Source

Ministry of Health and Long-Term Care (MOHLTC) / Champlain Local Health Integration Network (LHIN)	\$ 103.46	\$ 101.31
Patient Revenues	\$ 21.86	\$ 23.01
Other Revenues and Recoveries	\$ 11.37	\$ 8.82
	<b>\$ 136.69</b>	<b>\$ 133.14</b>



\* Audited financial statements available at [www.bruyere.org](http://www.bruyere.org)

# Financials | Bruyère Foundation

Unaudited Statement \*

	March 31, 2014 (in millions)		March 31, 2013 (in millions)	
<b>Source of Revenue</b>				
Donations	\$ 4.686	95.9%	\$ 3.414	94.5%
Special Events	\$ 0.154	3.2%	\$ 0.140	3.9%
Interest	\$ 0.044	0.9%	\$ 0.058	1.6%
<b>Total Revenue</b>	<b>\$ 4.884</b>		<b>\$ 3.612</b>	
<b>Statement of Revenue and Expenses</b>				
Total Revenue	\$ 4.884		\$ 3.612	
Total Operating Expenses	\$ 1.122		\$ 0.988	
<b>Excess of Revenue Over Expenses Before Transfers</b>	<b>\$ 3.762</b>		<b>\$ 2.624</b>	
<b>Funds and Gifts In-Kind Transferred</b>				
Bruyère Research Institute	\$ 0.519		\$ 1.135	
Bruyère Continuing Care	\$ 4.471		\$ 2.699	
<b>Total Funds Transferred</b>	<b>\$ 4.990</b>		<b>\$ 3.834</b>	

\* Audited financial statements available at [www.bruyere.org](http://www.bruyere.org)



# BOARD OF DIRECTORS for 2013-14

**Bruyère Continuing Care** thanks these dedicated people who contribute their valuable time, skills and experience as community leaders to ensure our organization is successful in achieving its mission to provide compassionate and quality care with a commitment to teaching, education and research.

## Elected Members



Sandra Graham  
*Chair*



Amipal Manchanda  
*First Vice-Chair*



Gini Bethell  
*Second Vice-Chair*



Victor Simon  
*Treasurer*



John Blakney  
*Chair, Governance and Nominating Committee*



John Riddle  
*Chair, Quality Management and Mission Effectiveness Committee*



Dinis Cabral  
*Chair, Bruyère Research Institute Board of Directors*



Fiona Gilfillan  
*Chair, Bruyère Foundation Board of Directors*



Timothy Howe



Barbara Kieley



Melissa MacKenzie



Carol Najm



Marco Perron



Louis Savoie



Dr. Sharon Whiting

*Bruyère Is There.*

## Ex-Officio Members



Bernie Blais  
*President and CEO*



Dr. Shaun McGuire  
*Chief of Staff*



Debbie Gravelle  
*Chief Nursing Executive*



Dr. Anne Monahan  
*President Medical Staff*



Joanne Yelle-Weatherall  
*Chief Professional Services*

## Community Members



Audrey O'Brien



Jean Pruneau

