It is with great pride that we celebrate the legacy of Mother Élisabeth Bruyère this year. On Feb. 20, 1845, 170 years ago, Élisabeth and a few Sister companions arrived in Bytown. They made their way in a snow storm, on a horse-drawn sleigh, travelling along the frozen Ottawa River from Montreal.

Mother Bruyère was top of mind this year as we completed our bold and ambitious 2015-20 strategic plan: *Enhancing Lives. Transforming Care*. The plan underlines the fundamental values that our founder instilled in our organization: compassion, learning, respect, accountability and collaboration.

*Enhancing Lives. Transforming Care.* calls for us to put the patients and their families first, by providing person-centered compassionate care. The plan focuses on three areas: sub-acute (those who suffer from chronic and complex medical conditions), geriatrics and palliative care.

Bruyère is unique in its provision of sub-acute care. We are Ontario’s largest provider and the sole provider in the Champlain Local Health Integration Network (LHIN). Although often associated with aging, chronic conditions can begin at any time. Bruyère delivers integrated and innovative services to adults of all ages with chronic conditions, who often require complex and continuing care. These include a wide variety of patients such as those who cannot breathe on their own and require ventilators, those on dialysis and those in our restorative care stream who have suffered a stroke and want to get back to their community.

We all know that Ontario’s population is aging. Evidence suggests that more people are living longer and are in better health. Bruyère sees aging as a celebration. *Enhancing Lives. Transforming Care.* pays special attention to ensure integrated senior care.
Bruyère continues to be recognized for its excellence in palliative care. We are leaders in the provision of acute inpatient care, pain and symptom management, as well as community consultation and palliative rehabilitation.

Today, Bruyère is a bilingual academic health care organization with several sites including two hospitals: Saint-Vincent Hospital, Élisabeth Bruyère Hospital; two long-term care homes: Saint-Louis Residence and Élisabeth Bruyère Residence, and our most recent development Bruyère Village, a wonderful place that promotes “aging in one place.” Over 22,000 student days of training took place at Bruyère in 2014.

Our Bruyère Research Institute (BRI) is the third largest research institute in Canada devoted to patient-oriented and population health research. In 2014, BRI had over $6 million in research revenues and 50 investigators. In addition, we continue to receive incredible support from our Bruyère Foundation team who passionately raises funds to accomplish our work.

Last year, Bruyère cared for more than 126,300 people from the Champlain region, including over 2,060 patients who were admitted to one of our rehabilitation, palliative, senior or complex continuing care inpatient programs and more than 61,700 visitors to our Primrose and Bruyère Family Health Centres.

We want to take this opportunity to recognize our most valuable resources: staff, physicians and volunteers including Board directors. We thank you for your commitment to *Enhancing Lives. Transforming Care*. 

Amipal Manchanda
Chair, Board of Directors
Bruyère
Over the past year, Bruyère has reaffirmed its commitment to improving quality of care and the patient experience. Physician engagement is fundamental to achieving these goals.

Our new corporate quality structure, a system to help align and emphasize commitment to quality in the quality improvement plan at various levels of the organization, is now solidly in place. The structure has three levels of responsibility: corporate, program and unit-based. The structure supports the development of clinical quality improvement at the bedside, the program and the organizational levels. Quality projects and initiatives carried out at these levels are supported by decision support and the quality department, and are aligned to the stated goals of the quality improvement plan. This quality plan was created in consultation with managers and looked at patient quality issues, safety reports, Ministry of Health data, and feedback surveys from patients, families and employees. Unit-based quality projects, which focused on identified areas of need, have been completed and presented at the Senior Quality of Care and Medical Advisory Committees. Bruyère will continue to build on the enthusiasm and success of its clinical quality teams to enhance and improve the patient experience over the coming years.

A fundamental precursor to achieving these quality initiatives is engagement of staff and physicians. At Bruyère, we recognize that engaged physicians can enable improvements in quality and better performance. Bruyère has supported the creation of the physician’s working group; a group of physicians tasked with developing the engagement of the medical staff to our collective goals of improvement in quality and patient care. This group, in collaboration with the Medical Staff Association, has overseen the completion of the physician engagement survey as well as focus group efforts to identify opportunities for enhancing physician engagement. The group is midway through the development of a comprehensive strategy, aligned to an endorsed framework and will continue the work through the coming year. Recognizing that this represents cultural change, the physician’s working group remains committed to seeing the process through to completion.

Recently, Accreditation Canada conducted an on-site survey of all of Bruyère’s programs and services which involved meeting with over 100 staff members and physicians, members of the Board of directors and patients and family members. The accreditation decision and final report were received and Bruyère was awarded accreditation.
Bruyère has undergone significant changes over the last few years, particularly at the Saint-Vincent Hospital (SVH) site. What once looked like—and had patients similar to—a long-term care home now admits patients who have much more complex medical, nursing and care challenges. The term often used to describe this new reality at SVH is sub-acute or post-acute. In addition, there has been an increase in complexity of patients admitted in rehabilitation and palliative care at the Élisabeth Bruyère Hospital site.

Through our participation in Partnering with Patients and Families for Healthcare, Bruyère has highlighted our commitment to: excellence in care, our people, education, research and innovation, and regional partnerships. We have engaged our patients and families to partner with physicians, nurses, allied health professionals, support staff and volunteers to transform the patient experience in our hospital.

Together, we use LEAN methods and tools to increase engagement, positive patient outcomes and satisfaction in all areas. Particular attention is paid at care “transition points” (admission, discharge and transfer), which have been identified as the most stressful events for patients and families.

Together with our patients and families, we have implemented:

- **Patient and Family Advisory Committee** which provides direct input into co-designing the development of policies, programs, practices and initiatives that affect patient care and promote excellence in care.

- **Volunteer Ambassador Program** where a specially trained volunteer meets with each new patient at admission to develop an individualized plan including a tour of the hospital and assisting families in arranging parking for example.

- **Care boards** are in addition to our communication white boards and were developed by patients and families to meet their specific needs.

Our commitment is to continue to partner with our patients and families to improve the experience of being in our care.
The Bruyère Research Institute (BRI), a partner of Bruyère and affiliated with the University of Ottawa, is one of Canada’s premier research establishments devoted to patient-oriented and population health research in aging and chronic conditions. Its 50 investigators have $6.6 million in annual research revenues, ranking it among the top hospital-based research institutes in Canada. Its national and international footprint of innovation underscores its proven impact and value in contributing new knowledge and evidence to improve the quality of life and care of the people cared for by Bruyère.

BRI’s research agenda, supported by strong methodology expertise in all aspects of health services research, is organized along thematic lines ranging from health systems strengthening, to equity, to brain health and cognition, to primary and community health and promising practices. Each of these areas represents topics of great immediacy in today’s health care environment and allows BRI and Bruyère to anticipate and plan for tomorrow’s health care challenges.

Among the many highlights of the past year is the news of the participation of four BRI investigators in the new Network of Centres of Excellence AGE-WELL; the launch of the Bruyère Best Evidence Review Group; development and validation of the e-consult platform to improve access to specialist consultation services for primary care providers; the development of guidelines for the prevention of delirium in palliative care; and the exploration of virtual reality technologies in stroke rehabilitation.
As we look to the future, based on this vibrant platform of innovative inquiry, we are excited by the potential of the planned data warehouse, an extension of Bruyère’s electronic health record, which will allow Bruyère investigators and clinicians to evaluate its clinical programs and outcomes. We are excited by the impact of Bruyère’s initiatives in the use of appropriate medications, including deprescribing guidelines and avoidance of the use of anti-psychotics. We are excited by the development of novel clinical and system approaches to the care of vulnerable populations, both locally and abroad.

We are looking forward with anticipation to the growing partnership between Bruyère Research Institute, Bruyère, the Bruyère Foundation and the University of Ottawa, as Bruyère exploits its full value as a research and teaching organization. This will be made possible through reconfiguration of Bruyère’s clinical programming and the development of new responses to the drivers that will shape our health care system over the next two decades.

The Bruyère Research Institute fully supports Bruyère’s new vision statement — 

Enhancing Lives. Transforming Care. It is aspirational as it reflects the growing opportunities and responsibilities as Bruyère itself evolves to meet the important social and health care challenges facing our society. This is a central part of our heritage and a vital component of our future.
The generosity of our community is helping to provide life-changing patient care and research at Bruyère. The Bruyère story began 170 years ago with the founding of Ottawa’s first hospital and continues with your support and generosity.

Your continued support helps Bruyère meet its commitment to Enhancing Lives. Transforming Care. across our community and country.

Bruyère is unique among major health care organizations and is focused on delivering exceptional care for seniors, patients with complex and chronic health conditions and people living with a life-limiting illness. Bruyère is already changing thousands of lives each year, but with a rapidly growing aging population and an increase in chronic diseases, there is more that can and must be done.

Thanks to your heartfelt commitment to the unique care found at Bruyère, we have seen significant financial support over the past year. 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 to the Ruddy-Shenkman Hospice fills a vital need for hospice beds in our community while improving the efficiency of our health care system.
Thanks to your support, Bruyère is continuing to meet the changing needs of our community. We count on you to work with us to address community priorities, deliver more patient-centered care, and fuel research and innovation. The future is now and with a new patient population with specific and unique needs, Bruyère is strategically poised to ensure the needs of the community continue to be met for years to come.

Thank you for believing in Bruyère.

Amy Desjardins
President
Bruyère Foundation

**Foundation Facts**

- Online transactions 10%
- Engaged, online community +200%
- Average online donation 9%
- Employee payroll participation 57.5%
- Monthly donors 9.4%
Message
from the Volunteer Resources Team

It has been two years since the Volunteer Resources team joined with Religious Services, Spiritual Care and Therapeutic Recreation Services to create a new department called Therapeutic Support Services. Over the past year, the team has developed a new service model designed to enhance the quality of life of our patients, residents and families, and provide an increased support to volunteers at the unit level.

This newly established collaboration between services, supports the successful integration of many volunteers throughout the organization. The model is designed to build on the interests and skill set of the volunteers, ensuring that each volunteer has a positive and rewarding experience. During the fiscal year 2014-15, a total of 837 volunteers contributed hours to the organization and presently, there are over 600 active volunteers a significant increase from last year.

One of the highlights this year was recognition of Bruyère volunteer Yih Lerh, who won the Accessibility Award at the Celebration of People Gala in December 2014. Yih volunteers with a team of professionals at Saint-Vincent Hospital, including assistive technologist Bocar Ndiaye. This dynamite team adapts conventional technology to help patients at Saint-Vincent Hospital with disabilities to communicate and maintain their independence.

Several training opportunities were organized throughout the year for those volunteers interested in enhancing their skill set in art and music reminiscence, and in March 2015, the department organized a 16-hour palliative care training attended by 40 volunteers. The goal is to establish teams of palliative care volunteers throughout Bruyère.

Therapeutic Support Services has created a new volunteer position designed to enhance the Bruyère experience. The volunteer ambassador role is presently being piloted at Saint-Vincent Hospital. All new admissions are greeted by a volunteer who provides them with information regarding their hospital stay and gives a guided tour.

The Therapeutic Support Services team is continuously adapting their service delivery model to meet the changing needs of the Bruyère patients and their families and will focus on building capacity by recruiting more volunteers in 2015-16.
Message from Catholic Health Sponsors of Ontario

Bruyère is one of 21 organizations proudly sponsored by the Catholic Health Sponsors of Ontario (CHSO). Sponsorship refers to the way in which the Catholic identity of health organizations is granted by the Catholic Church. For a health care organization to be considered Catholic, it must have a sponsor recognized by the Church. CHSO was created by the Holy See and has a Pontifical mandate to assume sponsorship of health organizations in Ontario when religious orders and congregations are ready to move on to other missions.

As part of CHSO, it is important for Bruyère to continue to prioritize serving the vulnerable and those most in need. This is the core to the legacy, mission and healing ministry of Catholic healthcare.

To achieve the vision of strong, unified Catholic health care in Ontario, Bruyère and all CHSO-sponsored organizations support strategic directions to add value to today’s health system and to create a high quality integrated health system for patients and their families. In particular, Catholic organizations are always going where the need is the greatest, identifying and meeting the needs of the vulnerable in local communities.

Congratulations as Bruyère celebrates 170 years of evolving to meet the needs of the people it serves.

John Ruetz
President and CEO
**Financials**

**Bruyère**

**Bruyère Combined Results**  
*Unaudited Statement*  

<table>
<thead>
<tr>
<th></th>
<th>March 31, 2015 (in millions)</th>
<th>March 31, 2014 (in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Revenues</td>
<td>$ 140.61</td>
<td>$ 136.68</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>$ 141.61</td>
<td>$ 137.17</td>
</tr>
<tr>
<td>Excess (deficiency) of Revenues Over Expenses Before Net Amortization of Leasehold Improvements</td>
<td>$(1.00)</td>
<td>$(0.49)</td>
</tr>
</tbody>
</table>

**Net Costs Per Patient / Resident Day**

<table>
<thead>
<tr>
<th></th>
<th>March 31, 2015</th>
<th>March 31, 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bruyère Hospitals</td>
<td>$ 707.34</td>
<td>$ 694.32</td>
</tr>
<tr>
<td>Élisabeth Bruyère Residence</td>
<td>$ 214.16</td>
<td>$ 214.16</td>
</tr>
<tr>
<td>Saint-Louis Residence</td>
<td>$ 216.65</td>
<td>$ 209.43</td>
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</tbody>
</table>

**Expenses by Categories**

<table>
<thead>
<tr>
<th>Expenses by Categories</th>
<th>March 31, 2015 (in millions)</th>
<th>March 31, 2014 (in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compensation</td>
<td>$ 110.49</td>
<td>$ 106.99</td>
</tr>
<tr>
<td>Supplies and Other Expenses</td>
<td>$ 26.08</td>
<td>$ 24.96</td>
</tr>
<tr>
<td>Medical Supplies and Drugs</td>
<td>$ 5.05</td>
<td>$ 5.22</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$ 141.62</td>
<td>$ 137.17</td>
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</tbody>
</table>

**Revenues by Source**

<table>
<thead>
<tr>
<th>Revenues by Source</th>
<th>March 31, 2015 (in millions)</th>
<th>March 31, 2014 (in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Health and Long-Term Care (MOHLTC) / Champlain Local Health Integration Network (LHIN)</td>
<td>$ 106.60</td>
<td>$ 103.46</td>
</tr>
<tr>
<td>Patient Revenues</td>
<td>$ 20.18</td>
<td>$ 21.86</td>
</tr>
<tr>
<td>Other Revenues and Recoveries</td>
<td>$ 13.73</td>
<td>$ 11.37</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$ 140.51</td>
<td>$ 136.69</td>
</tr>
</tbody>
</table>

* Audited financial statements available at bruyere.org
Financials
Bruyère Foundation

Bruyère Foundation Combined Results
Unaudited Statement *

<table>
<thead>
<tr>
<th>Source of Revenue</th>
<th>March 31, 2015 (in millions)</th>
<th>March 31, 2014 (in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donations</td>
<td>$ 3.749</td>
<td>$ 4.686</td>
</tr>
<tr>
<td>Special Events</td>
<td>$ 0.001</td>
<td>$ 0.154</td>
</tr>
<tr>
<td>Interest</td>
<td>$ 0.026</td>
<td>$ 0.044</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td><strong>$ 3.777</strong></td>
<td><strong>$ 4.885</strong></td>
</tr>
</tbody>
</table>

99.3% 0.0% 0.7% 95.9% 3.1% 0.9%

Statement of Revenue and Expenses

<table>
<thead>
<tr>
<th>Total Revenue</th>
<th>March 31, 2015</th>
<th>March 31, 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Operating Expenses</td>
<td>$ 1.193</td>
<td>$ 1.123</td>
</tr>
<tr>
<td><strong>Excess of Revenue Over Expenses Before Transfers</strong></td>
<td><strong>$ 2.574</strong></td>
<td><strong>$ 3.762</strong></td>
</tr>
</tbody>
</table>

Funds and Gifts In-Kind Transferred

<table>
<thead>
<tr>
<th>Funds and Gifts In-Kind Transferred</th>
<th>March 31, 2015 (in millions)</th>
<th>March 31, 2014 (in millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bruyère Research Institute</td>
<td>$ 0.412</td>
<td>$ 0.519</td>
</tr>
<tr>
<td>Bruyère Continuing Care</td>
<td>$ 3.451</td>
<td>$ 4.471</td>
</tr>
<tr>
<td><strong>Total Funds Transferred</strong></td>
<td><strong>$ 3.863</strong></td>
<td><strong>$ 4.990</strong></td>
</tr>
</tbody>
</table>

* Audited financial statements available at bruyere.org

Thanks to our generous donors, we accomplished some great initiatives together. Every gift is valued and every gift makes a difference. Highlights include:

- Meeting an urgent need in our community with the completion of the Ruddy-Shenkman Hospice campaign in addition to a substantial investment in equipment and infrastructure which in turn will create a safer and more efficient medication management system across Bruyère’s inpatient programs.

- To date, several million dollars have been invested in new equipment and substantial changes have been made to medication management practices. Collectively, these changes have been referred to as Bruyère’s Medication Transformation Initiative.
ANNUAL REPORT  2014-15

"My dad and our entire family couldn’t say enough about the people who cared for him. His nurses were his angels.”

Caroline Holt-Smith’s father Jim was a patient in Bruyère’s palliative care program.

"Life is so much better for us now, thanks to the Bruyère Memory Program. It is nothing short of miraculous and for Joann and me, it gave both of us a life well worth living.”

Dr. Hugh Lafave’s wife Joann is a participant.

"I helped found Bruyère Helpine 25 years ago and now I am one of the happy users. It keeps me safe and my wife happy.”

Norman Torontow, founder of Bruyère Helpline.

"Everybody who gives to Bruyère should know how much they are doing for so many people. When I get on the phone and reach donors, my heart seems connected directly to theirs.”

Leslie Sharkey, former palliative rehabilitation participant and Bruyère Foundation volunteer.

"Thanks to Bruyère, I feel free in the water and now I feel free on land too. I worked very hard. I like to work hard. The staff made me stand up. They made me walk.”

Chris Halstead, former patient in Bruyère’s stroke rehabilitation program and current patient in Bruyère’s outpatient stroke rehabilitation program.

Bruyère

- Total Physicians: 201
- Total Employees: 2,087
- Total Volunteers: 600
- Total Beds: 731

Primrose Family Medicine Centre: 22,822 patient visits
Bruyère Family Medicine Centre: 38,886 patients visits
Bruyère Village: 227 apartments

Programs

Complex Continuing Care
- Saint-Vincent Hospital

Palliative Care
- Élisabeth Bruyère Hospital

Rehabilitation
- Élisabeth Bruyère Hospital

Care of the Elderly
- Élisabeth Bruyère Hospital

3 Geographical Sites

Byward Market
- Bruyère Family Medicine Centre
- Élisabeth Bruyère Hospital
- Élisabeth Bruyère Residence
- Bruyère Research Institute

Ottawa Centretown
- Saint-Vincent Hospital
- Primrose Family Medicine Centre

Orléans
- Saint-Louis Residence
- Bruyère Village

Long-Term Care
- Saint-Louis Residence
- Élisabeth Bruyère Residence

Research for Care
- Bruyère Research Institute

Family Medicine Care
- Bruyère Family Medicine Centre
- Primrose Family Medicine Centre

170 Years of History

1845
Mother Élisabeth Bruyère arrives in Bytown and opens the first hospital

1924
Opening of Saint-Vincent House
- Approximately 30 beds

1932
Opening of Saint-Vincent Hospital
(actual site)

1993
Grey Nuns of the Cross change to Sisters of Charity of Ottawa
- SCO Health Service:
  Élisabeth Bruyère Health Centre
  Saint-Vincent Hospital
  Saint-Louis Residence
  Villa Marguerite

2008
SCO Health Service becomes Bruyère Continuing Care

2015
170th anniversary of Bruyère
Thank You
to Our Board Members
Winner of a United Way Community Builder Award

Bruyère’s new medication carts on wheels (Med WOWs and WOWs)

The Bruyère Research Institute team at their inaugural open house
HomeFirst
New resources for discharge planning

LEAN training provided by our partner organizations

Ontario Hospital Association president Anthony Dale visits Bruyère
Bruyère and the Canadian College of Health Leaders join forces to develop certified health leaders

Ruddy-Shenkman Hospice campaign a success thanks to our very generous donors

170th anniversary pancake breakfast