

Misericordia Health Centre Redevelopment



2010-2011 REPORT TO THE COMMUNITY



MISERICORDIA
Health • Centre
The future of care

Redevelopment: The Future of Care

Misericordia Health Centre is under construction!



Premier Greg Selinger takes aim at the soon-to-be-demolished Maryland South building.



Kaye E. Dunlop, Q.C.
Board Chair

Our new health complex is becoming closer to reality as our Maryland Street landscape shifts to include a crane, diggers and drilling equipment.

Phase 1 of our redevelopment project was officially launched on a delightfully windy May 4 by Premier Greg Selinger, Health Minister Theresa Oswald and Winnipeg Health Region president and chief executive officer Arlene Wilgosh.

The blessing of our project by the Archbishop of Winnipeg, James Weisgerber, was especially significant as our Founders, the Misericordia Sisters, entrusted the ownership of our health centre to the Misericordia Corporation, of which the Archbishop is a member.

PHASE 1

The province is investing \$38 million in our Phase 1 renovations and construction, while our MHC Foundation is committed to raising \$7 million through their *Future of Care* campaign.

The Maryland South building will be demolished in the autumn, making way for our new two-storey complex to house our expanded programs, including

the consolidated Eye Care Centre of Excellence, an Ambulatory Diagnostic Centre and the new PRIME program – a health centre for seniors.



PHASE 2

The 105-year-old Sherbrook building will come down, making way for a new Misericordia chapel and other aesthetically pleasing features of our redevelopment including a spacious front entrance and a striking glass-walled atrium.

THE FUTURE OF CARE

Both phases of our redevelopment project are designed with the future of care in mind. Our specialized programs reflect a move toward community-based health care, while taking into account our aging population.

More than 90 per cent of health care today is delivered in an ambulatory setting where patients typically receive treatment within 24 hours. This is exactly what we do here at Misericordia Health Centre: our patients come to us for care – such as cataract surgery, cast settings, Urgent Care visits, physiotherapy, dental surgery, sleep studies and more – and then return to their own homes.

That's why the new PRIME program is a perfect fit for Misericordia. And why we'll continue to welcome new programs that complement our vision of ambulatory excellence and care designed for an aging population.



Rosie Jacuzzi
President & CEO



Misericordia Corporation Members

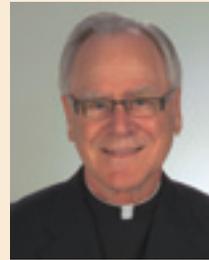
Our Founders, the Misericordia Sisters, entrusted the ownership of our health centre to the Misericordia Corporation members within the Archdiocese of Winnipeg.

It's important to note the Winnipeg Health Region acknowledges and respects our corporation as an independent entity with control of all MHC matters relating to ownership of property and assets, corporate structure, sponsorship, governance, mission, vision and values.

Our volunteer corporation members are also responsible for appointing and providing expert direction to our board of directors.



Mr. Jerry Kruk
CHAIR
Retired President & CEO
CAA Manitoba



Most Reverend V. James Weisgerber
Archbishop of Winnipeg



Ms. Kaye E. Dunlop, Q.C.
SECRETARY
Barrister and Solicitor
Deputy Chief Adjudicator
for Indian Residential
Schools Independent
Assessment Process



Mr. Raymond Cadieux
MHC Representative
to WRHA Board
Retired Partner
Pricewaterhouse Coopers LLP



Mr. Myron Musick
Retired Division Manager
Manitoba Hydro

2010–2011 Board of Directors

The volunteer directors of our Misericordia Health Centre board are accountable to the communities we serve, the Winnipeg Health Region and Manitoba Health for providing safe, compassionate care to our residents and patients while ensuring financial stewardship.

Most importantly, our board also ensures the Misericordia Sisters' Mission and values are emulated

through our staff and volunteers in their delivery of excellent faith-based care.

During this exciting time of significant construction at Misericordia Health Centre, our board of directors continues to be responsive to the changing health-care needs of Manitobans and advocate for an aging population.

This dynamic board consists of a diverse group of individuals who reside in and represent the communities Misericordia Health Centre serves. Our directors are a skills-based group with significant experience to guide our health centre as we build the Future of Care at Misericordia.



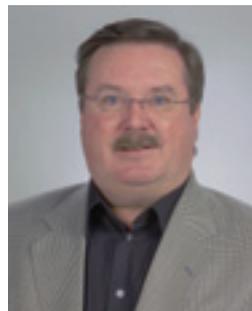
Ms. Kaye E. Dunlop, Q.C.
CHAIR
Barrister and Solicitor
Deputy Chief Adjudicator
for Indian Residential Schools
Independent Assessment Process



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VICE-CHAIR
President
Birchard Financial
Management and
Consulting Services



Mr. Garry Hammerback
SECRETARY
Trade Specialist
Manitoba Trade and
Investment, Department
of Competitiveness, Training
and Trade



Mr. Laurie Finley
PAST CHAIR
Vice-President
Sales and Marketing
Winnipeg Free Press



Rev. W. Richard Arsenault
ARCHBISHOP'S
REPRESENTATIVE



Mr. Raymond Cadieux
MHC Representative
to WRHA Board
Retired Partner
Pricewaterhouse
Coopers LLP



Mr. David Finley
Executive Director
Loss Prevention and Business
Operation Manitoba Public
Insurance Corporation

NEW



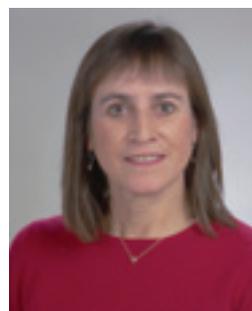
Ms. Maria Grande
Partner
Thompson Dorfman
Sweatman LLP



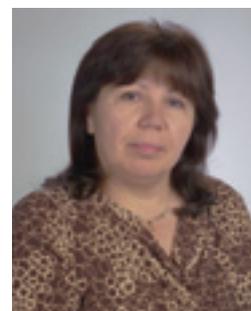
Mr. Kevin McCulloch
Retired, Vice President
Corporate Legal,
General Counsel & Corporate
Secretary Manitoba Public
Insurance Corporation



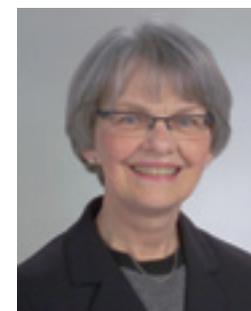
Mr. Jeffrey C. Rohne
President
Rohne & Associates Inc.



Ms. Elizabeth Sweatman
Manager of Patient Safety,
Quality & Risk
Health Sciences Centre



Ms. Marilyn
Tanner-Spence, BN, MA
Health & Business
Consultant, Teekca's
Boutique & Myleen's
Treasures Owner/Operator



Ms. Claudia Weselake
Retired Health Research
Technologist



Ms. Rosie Jacuzzi
(ex-officio)
President & CEO
Misericordia Health Centre

Redevelopment: a new home.....

EXPANDING: Eye Care Centre of Excellence

The entire second floor of Misericordia's new health complex will house our provincial Eye Care Centre of Excellence.



Dr. Mathen Mathen, Eye Care Centre of Excellence department head, examines Rosalie Coghill's eyes before her Lucentis injection.

We already live up to our name in service quality, but this new home for our Eye Care Centre of Excellence means we'll have the physical space to match. It's difficult being a centre of excellence in a crumbling 105-year-old building with tiny exam rooms and questionable climate control.

PATIENT-FOCUSED DESIGN

Absolutely everything in our new facility will be state-of-the-art, designed especially with patients' vision in mind. We're not exaggerating!

Our redevelopment architects worked closely with Eye Care Centre of Excellence experts to ensure we got every detail just right.

"Our new space pays special attention to lighting," explained patient care manager Barbara Ginter-Boyce. "For example, I know our retinal patients will appreciate dim lighting in their waiting room."

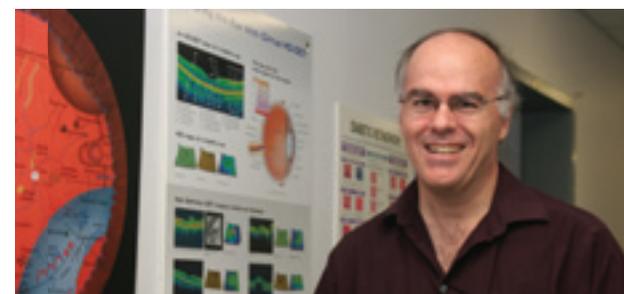
Simple changes like contrast flooring and obvious transitions between rooms will help our Eye Care Centre of Excellence patients feel at home in a new environment.

Modernizing our Eye Care Centre means retiring aging equipment and replacing with new, moving from laminate countertop to surgical-grade stainless steel and switching cramped quarters to spacious exam rooms. Exceedingly comfortable waiting areas are in the plans, too.

CONSOLIDATION IS KEY

"We're also improving patient flow," emphasized Ginter-Boyce. "Ultimately, that means faster service."

Right now, our Eye Care Centre of Excellence is located on a variety of levels in a number of buildings at Misericordia Health Centre. Ambulatory clinics are in the Sherbrook and Wolseley buildings, while the pre-operation area and Lions Eye Bank are in the Cornish South building. The new centre will consolidate these eye care services into one convenient location.



Ophthalmology Residency Program

When MHC's Dr. Lorne Bellan decided to become an ophthalmologist, he would have liked to have done his residency program in his hometown of Winnipeg, but that option wasn't available at the time and Bellan was forced to leave the province.

Starting in July, though, that won't be the case for budding Manitoba ophthalmologists as the University of Manitoba welcomes its first ophthalmology resident at our Eye Care Centre of Excellence.

Our redevelopment project incorporates space for the future Ophthalmology Residency Program, a modern teaching facility and resident clinic.

"Having a residents' clinic will provide another location for patients to receive eye consultations and help decrease wait times," said Bellan, who is past-president of the Canadian Ophthalmological Society and chair of the Wait Time Alliance.

"While the number of ophthalmologists is staying the same, our target population is almost doubling. So this is a good thing for our community ... it's critical for our future provision of care that we train doctors for tomorrow."

Redevelopment: relocation.....

EXPANDING: Ambulatory Diagnostic Centre

Location! Location! Location!

Our diagnostic imaging services – everything from X-rays to CT scans to ultrasounds – are moving adjacent to Urgent Care, saving patients and staff up to a kilometre of walking!

Right now, patients must register on the first floor of one building before heading to the fourth floor of another building to our diagnostic imaging department. Urgent and Ambulatory Care patients frequently make the same trek.

In 1909, when our diagnostic imaging department opened, the location probably made sense because it was close to operating rooms. Not today, though. It's too far removed from the programs that need it most.

"We're so excited to be moving downstairs," said Tamara Carriere, manager of diagnostic imaging. "Patients will be able to register and literally walk across the hall to see us."

LIGHTING CRUCIAL

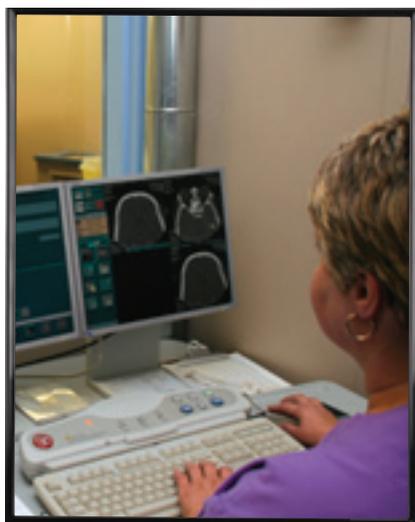
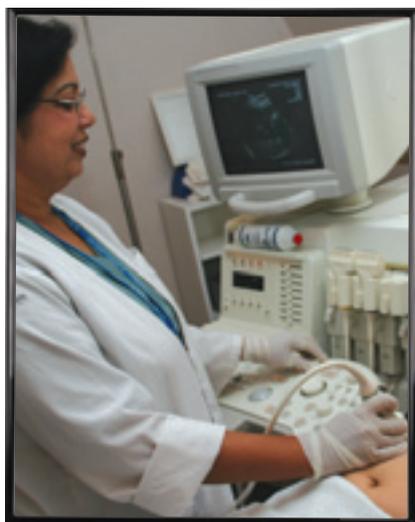
As with the Eye Care Centre of Excellence planning, architects were careful to involve diagnostic imaging staff with designing their new patient-focused space.

"One meeting alone was just looking at mock-ups of lights; there was a whole room of lights to choose from," recalled Carriere. "Lighting is crucial, especially to radiologists – they need to be able to turn the lights up or down to create an optimal environment."

The new Ambulatory Diagnostic Centre will be much larger than its current space with two new ultrasound rooms to make a total of six and a CT suite that includes a private interview room. The entire centre is designed to protect patients' privacy in a comfortable environment.



Diagnostic imaging manager Tamara Carriere pours over redevelopment architectural drawings in her 105-year-old office.



Waiting areas specific to either ultrasound or X-Ray and CT scans and discreet lockers to secure personal belongings are designed to help alleviate patients' anxiety before their tests.

LAB ON THE MOVE

MHC's laboratory, the other key element of our new Ambulatory Diagnostic Centre, also moves across buildings – from the Wolseley building to our new health complex – and conveniently closer to Urgent Care.

Our lab, operated by Diagnostic Services Manitoba, will also have space right in our Urgent Care department, saving both patients and staff valuable time.

Redevelopment: something new entirely.....

PRIME – a health centre for seniors



MHC is salvaging as many aspects of our old buildings as possible to incorporate into our new health complex. Here, architects show how our portico could be used inside our new building. We're actually hoping to use the portico as an entrance to the PRIME program.

The new PRIME program epitomizes the future of care. This one-stop shop for seniors is designed to keep an aging population healthy and in their own homes.

PRIME will have a prominent share of the first floor of our new health complex, with easily accessible space including a generous loop for drop-offs and pick-ups at our Sherbrook entrance.

TEAM APPROACH TO CARE

PRIME's range of health-care professionals – doctor and nurse practitioner, therapists, nursing staff, social workers, pharmacist, recreation facilitators and more – means seniors will have all their health-care needs addressed under one roof. The case manager, along with the participant and family, will build a dynamic and responsive care plan including Home Care for participants.

"PRIME truly represents a unique approach to care," said program manager Judy Ahrens-Townsend, a

social worker with more than 30 years of experience in geriatrics. "Our goal is to serve every aspect of a person's needs ... ranging from medical care to personal counselling to helping a home environment accommodate a wheelchair."

MHC's PRIME program will be Ahrens-Townsend's second site to manage; the first has been successfully up and running at Deer Lodge for the past two years.

"Those enrolled in PRIME generally have complex health issues," explained Ahrens-Townsend, "but still live in their own homes or with family. Without PRIME, many participants would have no alternative but to live in long-term care."

Available to seniors over the age of 65, MHC's PRIME program will operate 24 hours a day, seven

days per week. The Day Centre will be open 10 a.m. to 3 p.m. five days a week. Participants can come once a week or every day as they wish.

HELP JUST A PHONE CALL AWAY

Participants and families can call PRIME any time for after-hours support to discuss a range of health issues or arrange to have a member of the PRIME health-care team visit their home to provide assistance. Having such cohesive care means the PRIME team is able to offer crucial preventive care.

"Seeing participants frequently means we are able to notice subtle changes in them," said Ahrens-Townsend. "An illness may not be obvious, but we can catch it in the early stages before it becomes a more serious problem."

"In fact, prior to coming to PRIME many participants were frequent visitors at hospital emergency departments, only seeking care when it became a crisis. Through an all-inclusive approach to care we are able to prevent many of these crises now."

SOCIAL AND RESPITE OPPORTUNITIES

Maintaining social connections is another key component of PRIME. Participants learn new hobbies, enjoy healthy meals, exercise, listen to guest speakers and more – all while enjoying the company of other seniors. And at the same time, their care-givers at home have some much-needed respite.

Here at MHC, we're excited when our PRIME site opens in autumn 2013 our new all-season rooftop garden overlooking the Assiniboine River will already be open. A perfect opportunity for horticultural therapy or just to feel the touch of warm sun on a cold winter's day.



Manager Judy Ahrens-Townsend speaks with PRIME participant Bella Perera at Deer Lodge Centre.

A History of Caring

Back in the late 1800s, Winnipeg was home to a growing number of single mothers and babies being abandoned at churches.

The Archbishop of St. Boniface put out a request for help and was referred to the Misericordia Sisters in Montreal, who were dedicated to caring for vulnerable women and infants.

Four Sisters answered the call and travelled west in 1898, initially administering their care from a small building in St. Boniface.

They soon purchased land on Sherbrook Street and construction of the Winnipeg Maternity Hospital was completed in 1900.

While the facility's name and services changed as it became Misericordia General Hospital in 1917 and Misericordia Health Centre in 1998, faith-based care remains an integral part of Misericordia's values.

"It's not just caring for people, it's caring about them," said Father Vince Herner, Misericordia's director of spiritual care.

"It's putting into practice those values of caring, trust and respect. The care that we try to provide addresses the whole person and their family, so that it's not only the physical dimension.

"It would also include the emotional, the psychological, the spiritual relationship – things in our present day that are referred to as best practice or holistic care."

Herner is in his 16th year at Misericordia and says it's important those values remain a key component of the centre's interprofessional framework.

"That's why I'm here, why I stay," he said.



Connected to Misericordia

Few people are as connected to the history of Misericordia Health Centre as Genevieve Kemp.

The 99-year-old Winnipegger was born in January 1912 at what was then called the Winnipeg Maternity Hospital.

As a young girl, she had her tonsils out at the re-named Misericordia General Hospital. As an adult, Genevieve was at MGH again – this time to have her appendix out.

And earlier this year, she moved into Misericordia Place, the personal care home operated by the health centre.

"I'll probably be buried from here," Kemp said with a chuckle. "It's just like a circle."

Kemp has lived in Winnipeg all her life and her two younger sisters were also born at the hospital.

"That was *the* hospital back in the early 1900s," she said.

She remembers the care her family used to receive from the Misericordia Sisters in their long black-and-white habits.

It was a level of care and kindness she's always appreciated.

"I've donated to Misericordia because I was born there and my parents always went there if there was any need," she said.

Kemp lived in her own apartment for years until her eyesight and hearing began failing and she chose to move into Misericordia Place.

She's found some things never change.

"The staff is very caring," she said.



1947: five sets of twins born at Misericordia General Hospital

1919: operating room



1956: Misericordia Sisters examine building expansion plans

MHC THEN: 1898–2010.....

something
OLD

Responding to increasing community needs, the Sisters established the Winnipeg Maternity Hospital.



The Riverview Annex is constructed, housing the emergency department and intensive care unit.



Health Links-Info Santé, the first telephone nurse-based triage system in Canada, was launched at MGH with one nurse working five hours a day, seven days a week.

Winnipeg Maternity Hospital transitioned to Misericordia General Hospital (MGH) with 125 beds, 50 bassinets and 50 medical practitioners.

1900

1917

1971

1994

1898

1916

1954

1993



Four Misericordia Sisters from Montreal arrived in Winnipeg to care for abandoned children as well as single mothers and their babies, eventually establishing their mission on the corner of Sherbrook and Ida (now Wolseley).

The Sisters' Misericordia School of Nursing opened; graduates were highly sought after, primarily due to their faith-based training.



Construction began to expand the hospital with the additions of the Cornish and Wolseley West wings. This increased the total number of beds to 418 with 60 bassinets and a full range of diagnostic services. Single mothers and their children continued to live at MGH.



Provincial Eye Care Centre of Excellence established at Misericordia General Hospital.

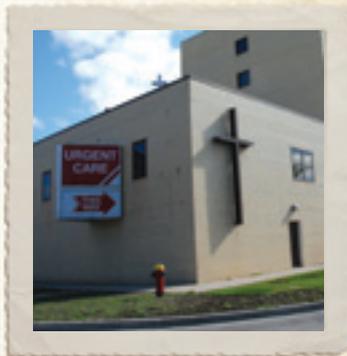
MGH obstetrics department and the School of Nursing close.



1997

1998

MGH is transitioned to what we are today: Misericordia Health Centre. The emergency room is closed, but we open the first Urgent Care centre in Canada.



Misericordia Place – a three-storey personal care home – opened, welcoming 100 long-term care residents.

2000

2003



The Provincial Health Contact Centre (PHCC) is created, with Health Links-Info Santé as its flagship program. Today, the PHCC is home to more than 30 clinical and non-clinical telephone programs.

MHC became a satellite site for pediatric dental restoration, seizing the opportunity to become a community surgery site to help reduce lengthy wait times in Manitoba.



2005

2004



The two remaining Misericordia Sisters return to the Motherhouse in Montreal. A brightly lit cross is placed atop the Sherbrook building to honour the Sisters' legacy.



Urgent Care Centre's \$1.7-million refurbishment is unveiled, including a spectacular waiting area replete with a slate brick fireplace, large windows overlooking the Assiniboine River and a comfortable children's play area.

2006

2008



MHC opened the provincial Sleep Disorder Centre, the first new program to arrive as part of Misericordia's capital redevelopment project.

Prospective contractors were invited to submit construction tender bids on Phase 1 of MHC's redevelopment project.



MHC NOW: 2010-2011



Misericordia Place residents, age 70-102, walked to God's Lake Narrows! Well, technically, they calculated their steps and kept track of their progress on maps. All the exercise helped everyone sleep better, improved their strength and even motivated two residents out of wheelchairs.



Lucentis, a drug to treat wet macular degeneration, launched at our Eye Care Centre of Excellence.

Misericordia Place, MHC's personal care home, hosted a festive 10th Anniversary garden party.



Provincial Treasury Board approved detailed designs of Phase 1 of MHC's redevelopment project.

2010

June

August

October

May

July

September



Focus on Falls Prevention Program received permanent funding through Manitoba Health. This unique program initiated at MHC demonstrates improved vision prevents falls.

Radiology Information System/Picture Archiving and Communication System (RIS/PACS) implemented, allowing our Ambulatory and Urgent Care health-care professionals almost instant access to X-Rays and eliminating the need to carry pictures across buildings.

Harley-Davidson Winnipeg riders treated our long-term care residents to an exciting "Show and Shine" visit.



The Royal College of Physicians and Surgeons approved the University of Manitoba Residency Training Program for Ophthalmology to be located at MHC's Eye Care Centre of Excellence.

St. Luke's Chapel (circa 1916) is formally transitioned to an interim chapel in anticipation of the demolition of the Maryland South building. A new chapel will be part of Phase 2 of MHC's redevelopment project.



Preetha Krishnan, our first-ever nurse practitioner, welcomed at Misericordia Place.



MHC began offering non-emergency blood transfusions to Winnipeg Health Region personal care home residents in our elder-friendly environment.



Biscuit, a life-size robotic dog, is gifted by Bob Town to interim care residents and swiftly melts hearts through barking, cuddling and wagging his tail. The therapeutic golden retriever is a hit with residents and staff alike.



A "Garden of Lights" was created in the Misericordia Place courtyard through the generous donations of the Richard Bracken family and Eecol Electric. Our long-term care residents will now be able to enjoy seasonal light displays year-round.

The Provincial Health Contact Centre began supporting the Triple P Parenting program, an effective approach to raising children that emphasizes the positive.

Foldable lenses for cataract patients now fully covered by Manitoba Health.



November

December

2011

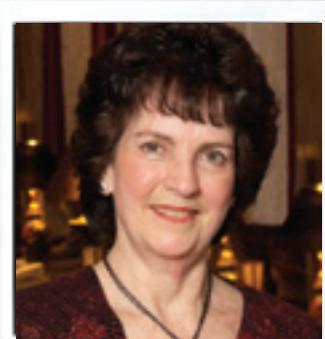
January

February

March

April

The Misericordia Family celebrated Monique Paulhus working with us in the laundry department for 50 years!



Ambulances transporting stable patients began arriving at Urgent Care as a pilot project designed to reduce wait times for patients and off-loading times for paramedics.



Sleep Disorder Centre expanded home sleep studies to meet the demand of increased referrals.

BIRD Construction awarded tender for Phase 1 of MHC's redevelopment project and begins to move equipment on site.



Misericordia Financial Report

2010–2011

We are proud to report Misericordia Health Centre is in strong financial standing as construction begins on our capital redevelopment project: for the fifth consecutive year, MHC has ended the year with another surplus.

We recently completed a thorough review of our financial practices across all MHC program

and service areas and continue to make significant improvements in a variety of processes.

We're committed to accountability. That means delivering the highest quality of care to our patients and residents while ensuring the best use of our resources.

REVENUE

MB Health/WRHA	88.2 %
Resident Income	6.6 %
Other Sources	5.2 %

EXPENSES

Salaries and Benefits	63.3 %
Drugs, Medical and Surgical Supplies	15.3 %
Other Supplies and Expenses	21.4 %

MHC program statistics

AMBULATORY CARE

25,221: visits to our cast clinic, wound and foot clinic, minor procedure clinic, Easy Street, physiotherapy and occupational therapy areas

DIAGNOSTIC IMAGING SERVICES

16,835: CT scans, ultrasound exams and ECG procedures performed

19,147: X-rays performed

EYE CARE CENTRE OF EXCELLENCE

9,081: ophthalmology surgeries performed

An additional **1,500** cataract surgeries were transferred from the Pan Am Clinic to MHC this year

5,102: fluorescein angiographies and fundus photography

2,268: macular degeneration treatments performed, including Lucentis

LABORATORY SERVICES

15,180: blood collections taken

LONG-TERM CARE

Our **100** long-term beds at Misericordia Place were full **99%** of the time, with **25** admissions

Our **150** interim care beds were full **93%** of the time, with **295** admissions

MHC FOR LUNGS

948: clinic visits addressing lung conditions such as emphysema, chronic bronchitis or chronic asthma

PEDIATRIC DENTAL SURGERY

961: pediatric dental surgeries performed

PROVINCIAL HEALTH CONTACT CENTRE

The PHCC received more than **576,000** calls

Almost **180,000** Manitobans called our Health Links-Info Santé health information service

370 clients enrolled in TeleCARE/TéléSOINS program to learn self management of either heart failure or Type 2 diabetes

SLEEP DISORDER CENTRE

4,503: sleep studies performed

An additional **1,200** annual home sleep studies supported by Manitoba Health and the Winnipeg Health Region this year

17,155 new and existing clients received treatment services

SOCIAL WORK

13,782: social work visits – here at Misericordia, and in the community

URGENT CARE

40,556: urgent care visits

MHC by the numbers

Almost **\$71 million** operating budget

341 university and college students trained with us – from medical residents to recreation facilitators to occupational therapists – logging more than **34,000 hours**

1,039 full-time, part-time and casual employees

Average age of staff is **47 years** and average length of service **9.1 years**, although **178** employees have been with us for more than **20 years**

4,729 security patrols inside and outside MHC

More than **900** volunteers – including **5 pets** – donated **19,096 hours** of their time

Youngest volunteer is just **10 months**, while our oldest is young at heart

Value of volunteer work: **priceless**

Health records clerks file **6,000 charts** a month

104,975 pounds of clothing personally laundered for our residents

28% of waste was diverted from landfill to recycling

279,011 meals served to our residents and patients and **86%** were satisfied with their meals

780 seniors vision-screened by Focus on Falls project and **228** health professionals attended vision screening education

something
OLD



M. A. O'HARA
Formerly Supervisor of
Manitoba Hospitals,
Royal Bank of Canada,
now Retired.

FINANCIAL STATEMENT

(Year Ending December 31, 1956)

REVENUE		EXPENDITURES	
Revenue from Patients	\$ 823,845.75	General Administration	\$ 64,027.59
Revenue from Departments	546,715.76	Salaries and Wages	848,278.47
Other Miscellaneous Revenues	40,392.24	Medical Supplies for Patient Care	193,107.00
	\$1,410,953.75	Provisions	102,087.23
Deductions—Provision for doubtful accounts, rebates, and allowances	50,642.11	Care and Maintenance of Buildings and Equipment	167,526.35
TOTAL INCOME	\$1,360,311.64	TOTAL EXPENDITURE	\$1,375,026.72
		EXCESS OF EXPENDITURE OVER INCOME	\$ 14,715.08

1956: Excess of Expenditure over Income ... \$14,715.08

MHC FOUNDATION: Donor dollars make a difference – always and forever!

Since its inception in 1983, the Misericordia Health Centre Foundation has played a key role in the improvement of health care for Manitobans. The facility has been through a number of very big changes – many of you have walked that journey with us.

None of what we have accomplished in the past or what is happening here today, and certainly none of what we envision for our future, would be possible without the tireless commitment and support of our many donors, sponsors and volunteers. On behalf of our board of directors we would like to thank you, our generous community.

We are proud to be able to share our time and expertise in support of the more than 700,000 people served by Misericordia each and every year. It is you, our generous and loyal donors, who make our work both gratifying and possible.

This year you have helped us accomplish so much: with your support we have raised close to \$1 million in support of the programs and services at the health centre and have begun raising funds for our redevelopment campaign, *The Future of Care*.

This year, donor dollars have allowed us to do some exceptional things in support of the health centre. We will highlight just a few:

- We've provided our Eye Care Centre of Excellence with equipment that is essential for ensuring the

success of the future residency program. The University of Manitoba will be partnering with our Eye Care Centre to teach up-and-coming ophthalmologists!

- We've been able to provide funding to our long-term care program in support of education, as well as equipment for Misericordia Place. This equipment includes things like a specialized scale, safety and alarm equipment and a lifting assistance device.
- We've also purchased equipment for our Sleep Disorder Centre.

Thank you!

And now our long-awaited redevelopment plans and our spectacular rooftop garden and solarium are soon to be a reality.

We are excited and we are working hard. We are looking to support the redevelopment at Misericordia Health Centre by raising \$7 million and we will do this with your support.

Our future is one of strength and is bright and we look forward to the success of our redevelopment

campaign, *The Future of Care*. We are honoured to partner with you.



Wynn Sweatman, Chair



Patti Smith, Executive Director



MISERICORDIA
Health Centre
FOUNDATION

204-788-8458

www.misericordiafoundation.com

2010–2011 Board of Directors



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President
Sweatman Insurance
& Retirement Services



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BOARD VICE-CHAIR
Senior Vice-President
Mackenzie Financial
Services Inc.



Patricia Hedden, MSc
BOARD VICE-CHAIR
Board Member



Nancy Adkins
Special Education
Resource Teacher
Winnipeg School
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MHC Foundation

NEW

DONOR GIFTS OFFER HOPE for MHC residents and patients....



Mr. Thomas Sill

NEW EQUIPMENT FOR OPHTHALMOLOGY RESIDENCY PROGRAM

The Thomas Sill Foundation Inc. has generously donated \$42,000 to the Misericordia Health Centre Foundation for new equipment for the future ophthalmology residency program. The program will allow University of Manitoba medical students access to advanced equipment and get hands-on experience.

The equipment includes an exam chair, instrument stand, refractor arm, acuity charts and more; everything an ophthalmologist needs to begin a residency program.

EDUCATION A PRIORITY AT MISERICORDIA

We are pleased to announce the Sir Thomas Cropo Foundation has donated \$10,650 to the Misericordia Foundation. Part of this gift – \$10,000 – will be used for end-of-life education for our long-term care staff, including nurses and health-care aides. The remaining \$650 is for printing complementary brochures.

Embracing the Circle of Life: Preparing for Death is a 15-page brochure designed to help care-givers by providing suggestions on how to assist loved ones during their final days of life. These brochures also recommend ways for care-givers to cope with the declining health of their loved one, such as sharing memories and asking for support from others. Education is an important part of health care and we are extremely grateful for this contribution.



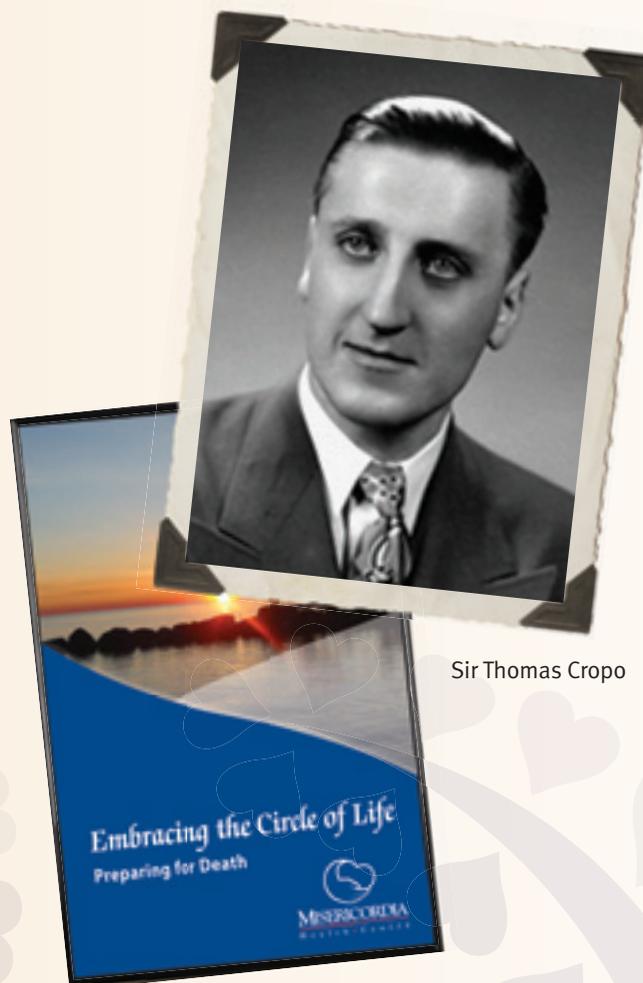
Dr. Alfred E. Deacon with his wife, Janet.

NEW MEDICAL EQUIPMENT ENSURES COMFORT

The Dr. Alfred E. Deacon Medical Research Foundation Inc. has graciously given \$25,000 to the Misericordia Foundation in support of important medical equipment for Misericordia Place, MHC's 100-bed personal care home, and the Sleep Disorder Centre.

The money has been used in part to purchase a specialized scale, safety and alarm equipment and a lifting assistance device for Misericordia Place. The contribution will also go toward paying for two bariatric beds for the Sleep Disorder Centre to accommodate patients who weigh in excess of 500 pounds.

A Winnipeg-based organization, the Deacon Foundation understands the importance of supporting health care across Manitoba. We appreciate their continued support and commitment to the Future of Care.



Sir Thomas Cropo



A RETIRED DOCTOR REMEMBERS MISERICORDIA WITH FONDNESS

Dr. Albert Rosenberg's association with Misericordia Health Centre began in 1953 and he was an invaluable physician for nearly 50 years. Close to the end of his career Dr. Rosenberg managed the facility bed space, was one of two physicians to the School of Nursing and to the Misericordia Sisters, as well as looking after hospital employees.

Dr. Rosenberg wasn't only concerned about being skilled in his professional life – he also recognized the importance of family and having strong, positive relationships between doctor and patient. His passion for health care has been passed down to his son and grandson, who both became physicians.

When Dr. Rosenberg was a young physician he would bring his daughter, Sheryl, to work with him. Her memories of spending time with the Misericordia Sisters while her father made his rounds are rich and plentiful. Highlights include being allowed to type in red ink on admitting office typewriters and wearing the miniature School of Nursing uniform – a cap and cape – the Sisters had made especially for her.

Sheryl's younger sister, Faye Beth, also spent years at the hospital as a teenage candy striper. At Misericordia, the Rosenberg sisters learned about their father's vital role in the community.

Today, Sheryl Rosenberg is an active member of the Foundation board, demonstrating Misericordia is more than a health centre: it is a place where families connect.



Dr. Albert Rosenberg with four-year-old daughter Sheryl.



Barb Leslie with her mother, Elsie Jackson.

Charlie Burns with his father, Dr. Charles Burns.

BOARD MEMBERS PLAY AN IMPORTANT ROLE IN MHCF

Barb Leslie is another board member with a history at Misericordia. Along with her siblings, Barb was born at Misericordia and feels a close bond with the health centre. Her grandmother lived at Misericordia's interim care until she passed away at age 108.

This year, her mother moved into Misericordia Place and Barb feels comfortable knowing she is receiving the same quality care her grandmother did. Barb enjoys spending time with her mother and being able to support the work that Misericordia does in her role as a Foundation board member.

Not only do our board members contribute much of their time to the continual improvement of the Misericordia Foundation, but they are also regular financial contributors. Their support is crucial.

Charlie Burns is one of these board members. Charlie and his brothers made a significant gift this past year toward long-term care education in honour of their father Dr. Charles Burns, who is also currently living at Misericordia Place. Charlie spends much of his time visiting his father and feels the Misericordia Place staff members are true angels for taking such good care of his father.

ROOFTOP GARDEN PLAN ALREADY BELOVED BY COMMUNITY

The rooftop garden and solarium is a special project Misericordia is incorporating into its redevelopment project. The garden will be for the primary use of our long-term care residents. We are delighted the community has reached out, already donating \$65,000 this past year toward the garden and solarium project. We appreciate every gift, no matter how big or small!

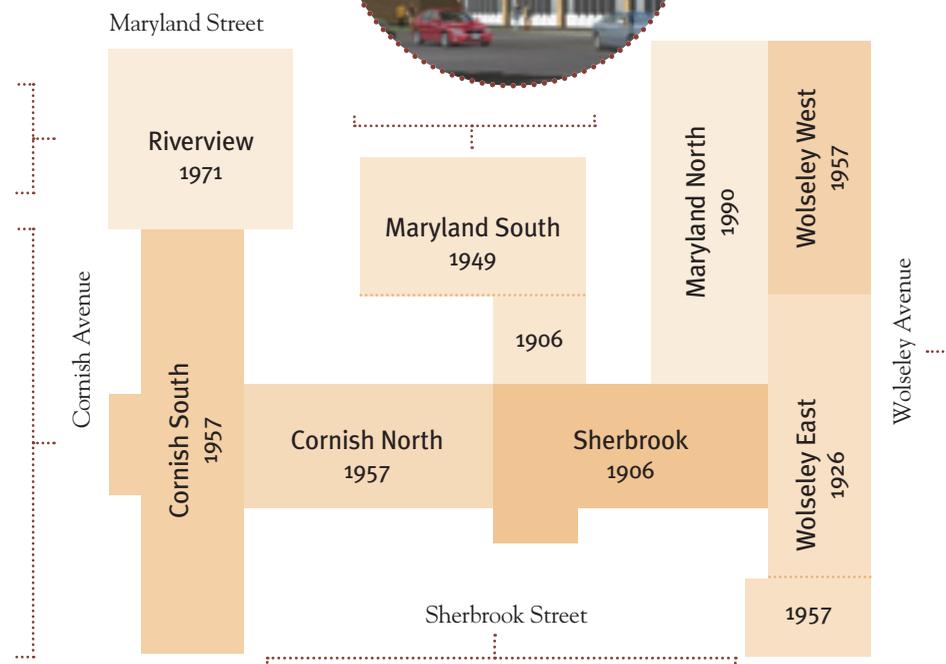


something
NEW

Misericordia Health Centre Redevelopment



PHASE 1



something
OLD



PHASE 2



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