It’s been one hundred years of groundbreaking innovation in health care.

what’s next?
A revolutionary approach to delivering care.
At Women's College Hospital, our mandate is to keep people out of hospital. That's a whole new idea in health care. And it's never been more timely.

The health needs of Canadians – particularly women – are not what they used to be. Today, more people are living longer but they're doing so with one or more chronic conditions – like diabetes, heart disease and osteoporosis. And many diseases that were once considered fatal – like cancers and HIV/AIDS – are now, for many people, lifelong conditions.

These complex health issues – which are affecting Canadians at every age – require ongoing support, care, education and disease management skills. Not hospitalization.

Women’s College Hospital is Ontario’s only stand-alone ambulatory hospital. That means we’re developing, testing and delivering new models of care that get patients home within 18 hours, that help people prevent and manage their lifelong conditions, and that make the health-care system more efficient. We’re training others to do the same. And, we’re building a new, state-of-the-art facility that will help us deliver care in entirely new ways – thanks, in large part, to the tireless work of the Women’s College Hospital Foundation.

It’s a big challenge. With no in-patient beds, organizing care is a very different endeavour. Ensuring that patients are out of hospital in record time while always providing the best care requires new treatments, new procedures and new clinical pathways. And it all demands strong relationships with in-patient hospitals and community partners. Women’s College Hospital is inventing that new, collaborative and efficient model of care, and we’re sharing it with experts throughout Canada, and around the world.

Preventing and managing diseases and conditions so that people can live longer and more independently is the future of health care. And Women’s College Hospital is quickly becoming an international leader.

This year’s annual report introduces just some of our most recent innovations in this new kind of care developed by our interprofessional teams from medicine, surgery, family practice, anesthesia, medical imaging, gynecology and mental health – together with our scientists at the Women’s College Research Institute.

As we celebrate our 100th anniversary, we pay tribute to the pioneers of health who made our legendary hospital what it is. And as we begin another century of breakthrough advances in health, we honour some of the world’s finest scientists, nurses, physicians, surgeons and health professionals who are reinventing health care right now – and right here at Women’s College Hospital.

Women’s College is indeed a new kind of hospital. A hospital that’s revolutionizing health care. We’re calling it the Hospital of the Future.
The TRAM flap procedure is one kind of reconstructive surgery for women who have had breast cancer. In the recent past, the procedure might have meant challenges with post-operative pain control and a hospital stay of up to five days. And that in turn, often meant a longer overall recovery period.

But thanks to an interdisciplinary team led by Dr. John Semple, chief of surgery at Women’s College, patients are now going home 18 hours after surgery – and with improved quality of care.

That’s because team members from Anesthesia and Nursing are using the most up-to-date methods of pain management – a process that involves administering pain-prevention measures before the surgery even begins. The result is far less pain post-surgery, and a quicker recovery.

What’s more, patients are receiving standardized information from nursing, physiotherapy, occupational therapy and social work – all before the day of surgery. The package includes a personalized toolkit – complete with educational resources, home care supplies and strategies for enhancing recovery. When it’s time to be discharged, most often the same day as surgery, patients feel well-informed and prepared.

According to Dr. Semple, this is indeed a pioneering ambulatory model of care. It’s better for patients because they recover faster. It’s better for the health system because shorter stays in hospital mean decreased costs. And it’s better for patients everywhere because this new clinical pathway can be easily applied to other hospitals in Ontario.
What if there were a surgical breakthrough that meant a fast and safe recovery in your own home?
Today, we’re rewriting how patients are treated, even after they’re cancer-free.

A patient’s cancer care doesn’t end once they are cancer-free.

That’s why Women’s College Hospital and Princess Margaret Hospital have developed Canada’s only After Cancer Treatment Transition Clinic (ACTT). Its purpose: to address the unique health-care needs of cancer survivors.

ACTT helps patients deal with the physical and psychological consequences of cancer and its treatments. The team monitors complications, new symptoms and cancer recurrence, and assesses for second cancers. It makes referrals to specialists. And it works with experts in oncology care and family practice to address patients’ individual needs.

For men with testicular cancer, for instance, anxiety and fertility might be concerns. For women who have survived breast or ovarian cancers, there might be physical side-effects or distress around body image or sexuality.

Each patient receives a ‘post-treatment care plan’ that describes their cancer, summarizes the treatments they’ve received, and provides them with ways to identify new symptoms and take charge of their own health.

The good news is that more Canadians than ever are beating cancer. Now we’re determined to help survivors stay healthy.
Today, we're rewriting how patients are treated, even after they're cancer-free.
With a simple click, women will soon have mental health care wherever and whenever they need it.

Some mental health issues affect women only. Some affect both women and men, but impact women quite differently.

That’s why a program dedicated to women’s mental health is essential. At Women’s College Hospital, we have one that’s unique in Canada.

Now we’re bringing that expertise to our new, cutting-edge mental health website.

Generously supported by Shoppers Drug Mart WOMEN, the Women’s College Online Mental Health Program is a place where women can get information about the mental health issues that affect them most – like depression, anxiety and trauma. And as the site develops, it will be a place where women can actually receive mental health care through online support groups, and where they will be able to connect with other women to share stories and experiences. Women will also be able to find out about resources in their communities and learn how to navigate the mental health system.

Women everywhere deserve the best treatment and support for their mental health issues. Now they can get it.

Visit us at www.womenshealthmatters.ca/mentalhealth.
With a simple click, women will soon have mental health care wherever and whenever they need it.
Imagine a new, efficient standard of care that treats you in the comfort of your home.

About 20 per cent of patients discharged from a Toronto hospital are back within three months. What’s needed are new models of health care to keep these people healthy and out of hospital.

The Virtual Ward – the first in North America – is a perfect example.

With funding from the Toronto Central Local Health Integration Network (LHIN) and the Ontario Ministry of Health and Long-Term Care, several hospitals have partnered with the Toronto Central Community Care Access Centre to create this pioneering model of care.

Located at Women’s College, the Virtual Ward takes the best principles of hospital care – 24/7 access, a single point of contact and an interdisciplinary health team – and uses them to provide care while patients who are at high risk of hospital admission stay at home.

Once a patient is discharged from hospital, the Virtual Ward team – which includes a doctor, a nurse, care co-ordinators and a pharmacist – meets daily to discuss their medical and social needs. Members of the team also visit the patient’s home, work with their family, arrange tests, order medication and co-ordinate medical details with other health-care specialists, including the patient’s family doctor.

Dr. Gillian Hawker, chief of medicine at Women’s College Hospital, calls the Virtual Ward a true innovation in ambulatory care. As she says, it’s designed to keep people out of hospital and at home.

For patients, that means less suffering and greater comfort. For the health-care system, it might just mean increased efficiency and reduced costs.
Imagine a new, efficient standard of care that treats you in the comfort of your home.

Dynna Bergit, Virtual Ward patient
Is it possible for patients with multiple conditions to be treated in a single place?

With an aging population living with multiple chronic conditions, the health system is stressed. But by managing problems better, we just might be able to keep people out of hospital.

That’s why Women’s College Hospital, in collaboration with the University of Toronto, is introducing a new model of care – the Centre for Ambulatory Care and Education (CACE) Complex Care Clinic.

The clinic is dedicated to helping people with complex medical problems manage their conditions so that they stay healthier and live more independently.

The clinic’s interprofessional team – made up of internal medicine and family medicine staff and residents, nurses, pharmacists, occupational therapists, dietitians, social workers, physiotherapists, respiratory therapists, health professional trainees and Community Care Access Centre providers – not only diagnoses and treats patients with multiple conditions, but also teaches them how to deal with their diseases at home. The clinic also works with other medical specialists and patients’ family doctors to ensure integrated and seamless care.

According to the experts, a model like this one is the best in ambulatory care for chronic disease management. It helps ensure that treatment is proactive rather than reactive, and that long-term care is provided by teams of diverse health professionals who collaborate on a patient’s treatment plan. That means patients get access to care when, and how, they need it most.

It is indeed, health care revolutionized.
Is it possible for patients with multiple conditions to be treated in a single place?
Here’s one more giant leap toward the future of care.

It used to be that patient health records were paper-based, kept in charts lining physician offices.

That’s all changing, and the result is going to be better, faster and more accurate care.

At Women’s College Family Practice Health Centre, patient records will now be maintained electronically. That means physicians can access patients’ charts from wherever they are. It means test results can flow directly from the lab to a patient’s chart and to the physician’s inbox. It means preventive care is that much easier because upcoming diagnostic tests (like Pap screenings and mammograms) and treatments (like flu vaccines and medication alerts) will pop up when patients are due for them. Physicians can even transmit prescriptions directly to pharmacies.

There is also an excellent research benefit. Because the system is essentially a database, patients can be grouped, categorized and analyzed to identify trends, common symptoms, and care requirements. Best practices can be developed and refined based on the distinct needs of patient groups.

No doubt electronic records will enhance patient care. And it’s the way of the future for the health system as a whole.
In 2015, we’re introducing a new, state-of-the-art facility to support our entirely new model of care.

A new model of care takes a new kind of facility.

So we’re building a state-of-the-art hospital designed unlike any other – built not around in-patient wards and (bed)rooms, but around specialized clinics and surgical suites that focus on prevention and disease management.

In fact, the design of the building is based on clinical neighbourhoods, where patients can see physicians, nurses, dietitians and therapists all in one place, and all at one time. Each of the neighbourhoods will combine treatment, research and education to ensure that patients are well-supported to manage their own health.

What’s more, our new building will reflect the diversity of our patients and of our staff – and their needs for accessibility, privacy and safety.

Most importantly, the new facility will embody and express the hallmarks of Women’s College Hospital: leading-edge care and unparalleled caring.
In 2015, we're introducing a new, state-of-the-art facility to support our entirely new model of care.
How can you help create the health care of tomorrow?

Women’s College Hospital Foundation raises funds to support Women’s College Hospital – and to ensure that it continues as a North American leader in women’s health and ambulatory care.

Right now, we’re engaged in a $70-million fundraising campaign to support the building of a new, state-of-the-art facility for Women’s College Hospital.

*The Campaign for Women’s College Hospital* has made significant headway in its early stages, with 41 per cent of its goal raised to date. Thanks to the talented campaign volunteers led by chair Sylvia Chrominska and vice-chairs Colleen Moorehead and Zabeen Hiriji, the campaign continues to gain momentum.

The foundation’s staff and volunteers are working hard to educate donors about Women’s College Hospital’s revolutionary work and its future facility. In fact, a number of the foundation’s signature events have raised both awareness and significant funds in the past year, including *An Evening With… John Furlong*, CEO, 2010 Vancouver Olympic and Paralympic Winter Games. With over 600 guests and 20 Olympic and Paralympic athletes, the gala raised more than $400,000.

Women’s College Hospital is deeply grateful to the foundation’s remarkable staff and volunteers for their extraordinary efforts and steadfast support.

For more information on *The Campaign for Women’s College Hospital* and upcoming foundation events visit [www.wchf.ca](http://www.wchf.ca).
How can you help create the health care of tomorrow?

Sylvia Chrominska, Chair, The Campaign for Women's College Hospital, at “An Evening with… John Furlong” with John Furlong, CEO of the 2010 Vancouver Olympic and Paralympic Games, Brian Williams, Master of Ceremonies, Martha & David Shaw, Co-Chairs of the event, and Chris S.L. Hoffmann, Chair, Women’s College Hospital Foundation Board of Directors.
A YEAR OF RECOGNITION

Our new building is already winning awards

Construction on Women’s College Hospital’s new facility began last August. But the hard work started long before.

Seems it’s paid off. The hospital – and our development partner – took home the Silver Award for Project Financing sponsored by the Canadian Council for Public-Private Partnerships. The national awards recognize public institutions that have demonstrated outstanding innovation and excellence through a partnership with a public sector counterpart.

In this case, the award paid tribute to the innovative approach to project financing which, according to Dan Hill, chief financial officer at Women’s College, was conceived in a way that fits perfectly with our mandate to revolutionize health care through everything that we do – including our new building.

Women’s College leaders among Canada’s Top 100

For the past 20 years, Marilyn Emery, Women’s College Hospital president and CEO, has made untold contributions to the health-care field through her leadership, courage and innovation. Now, for the second time, she’s been recognized for her achievements as one of Canada’s Most Powerful Women: Top 100, presented by the Women’s Executive Network. The Top 100 community is a powerful group of women who exemplify success and who empower the next generation of women.

Marilyn Emery certainly fits the bill.

Women’s College is doubly proud that Shannon MacDonald, a hospital board member and managing partner, Atlantic, Deloitte and Touche LLP, was also part of the 2010 Top 100 list. The pair join a list of exceptional women from across Canada who have received the award, including former governor general Adrienne Clarkson and Beverly McLachlin, Chief Justice of the Supreme Court of Canada.

Congratulations.

Dr. Samantha Nutt: A Transformational Canadian

Women’s College Hospital physician Dr. Samantha Nutt also happens to be the founder and executive director of War Child Canada, an organization that works with children around the world to reduce the effects of poverty, provide education, and defend and promote child rights.

Already a recipient of the Order of Ontario, Dr. Nutt has now been named one of 25 Transformational Canadians, a program sponsored by The Globe and Mail, CTV and Cyberpresse.

It’s no wonder that Dr. Nutt has been honoured for the impact she’s had on the world. She has worked in some of the most violent flashpoints around the globe to promote peace, human rights and social justice, particularly on behalf of the innocent women and children caught in the crossfire of war.

Samantha Nutt is determined to give the children of the world a better future. She’s helping to make it happen.

Celebrating nursing at Women’s College Hospital

The Council of Ontario University Programs in Nursing honours excellence in nursing education and scholarship.

This year, the prestigious Agency Recognition Award went to Women’s College Hospital – nominated by the Bloomberg School of Nursing at the University of Toronto – for its leadership role in training future health-care providers within an ambulatory setting.

Under the leadership of Jane Mosley, chief nursing executive, student nurses were placed in Women’s College centres such as family practice, wound care, cardiac rehabilitation and environmental health, where they learned health care in a whole new way.

One that’s consistent with the future of care in Ontario, and around the world.

Women’s College board member receives YWCA 2011 Woman of Distinction Award

For over 30 years, Joan Lesmond has worked tirelessly to improve the lives of women and girls in Canada and to shape health care for all Canadians. In the process, she’s advanced the nursing profession, strengthened the public health-care system and opened doors for women of all ethnicities and income levels. Lesmond has now been awarded the YWCA 2011 Woman of Distinction in Health Leadership.
The YWCA Women of Distinction awards recognize the contributions of bold women whose vision and determination have improved the lives of girls and women at home and abroad by inspiring dreams and leading change.

No one is more deserving than Joan Lesmond.

**A Thousand Voices for Women’s Health takes home highest honours**

Women’s College Hospital undertook an unprecedented research study when it asked 1,000 women from across Ontario – and who cover the spectrum of racial, cultural and religious communities, demographic and socio-economic backgrounds, sexual orientations and vulnerable life circumstances – what they want from a hospital, from care, and from services.

Now their responses are informing the very design of our new, state-of-the-art facility.

To unveil the research findings and to launch the construction of our new facility, Women’s College Hospital hosted a community and media event. Spearheaded by Janice Nathanson, then chief communications officer, along with Angela Robertson, director of equity and community engagement, the event was emceed by Frances Lankin, former CEO of the United Way of Greater Toronto, and underscored the hospital’s abiding commitment to working with and for diverse women from all communities. Other speakers included the Honourable Deb Matthews, Minister of Health and Long-Term Care, and community leaders from organizations such as Sistering – A Woman’s Place, Equality for Gays and Lesbians Everywhere, Immigrant Women’s Health Centre, Ontario Federation of Indian Friendship Centres, and Nellie’s Shelter.

It’s no surprise then, that Women’s College was awarded the gold prize for Community Relations Campaign of the Year by CPRS Toronto and the Gold Award of Excellence by CPRS National. The hospital also received the Award of Excellence from the prestigious Ovation Awards (sponsored by IABC Toronto) for our publication reporting the results of the research.
Since we began a century ago, Women’s College Hospital has led a world of breakthroughs in women’s health.

To celebrate our 100th anniversary, we hosted a series of spectacular events throughout the year. Some looked to the past as we paid homage to our history and to the pioneers who made Women’s College what it is today. Others looked to the future as we showcased our trailblazing work in reinventing how care is delivered. Throughout, we’ve celebrated the cadre of top health experts who are now revolutionizing health care at Women’s College Hospital.

In January, we hosted 100 Years of Women’s College Hospital: A Photography Exhibition – a gala reception to unveil some of the most compelling images in women’s health, and women in Canadian medicine, from over the past century. Held at Brookfield Place, the photo exhibit remained on public display throughout the month, as thousands of passers-by became acquainted with the progenitors of women’s health in Canada and the breakthroughs that transformed health care for women everywhere.

In April, we hosted Hooking Up with Health: A Conference for Girls. More than 175 girls, Grades 7 and 8, from different schools around Toronto gathered for dedicated workshops to address the health issues that are affecting them most: body image, bullying, sexuality, healthy relationships. There was no shortage of inspiration. Anne-Marie Mediwake, co-news anchor at CBC Toronto, hosted the event; Xania Khan, editor of Vervegirl, encouraged the girls to be proud of their uniqueness; and Jessica Yee, social justice activist and executive director of Native Youth Sexual Health Network, had the girls literally standing up for who they are. The Honourable Deb Matthews, Minister of Health and Long-Term Care, shared her story of being elected to office in order to make a positive change in the community.
In May, the Women’s College Research Institute hosted *The Spirit of Discovery in Women’s Health Research* to showcase our innovations. Nearly 200 people learned about new studies being conducted by our scientists: reducing cancers common in women; identifying gaps in chronic disease care; exploring stigmas in mental health and HIV; and the future of health care within an ambulatory setting. The keynote speakers made the statistics real. Following a session on violence against women, CBC reporter Mellissa Fung told her courageous story of being kidnapped in Afghanistan, and brought attention to the plight of so many Afghan women who are victims of violence and sexual abuse – just because they are women. And Ilana Landsberg-Lewis, executive director of the Stephen Lewis Foundation, reiterated the need to combine both treatment and prevention in the fight against HIV/AIDS in Africa. “I have a deep appreciation for how rare and remarkable Women’s College Hospital is,” she said. “The kind of care you provide is so scarce throughout the world.”

And more is coming. In June, we are hosting *Being She: The Culture of Women’s Health and Health Care Through the Lens of Wholeness*, together with the Gladstone Hotel. Photo-based artworks by Canadian artists explore issues of women’s empowerment, diversity, identity and embodiment. The exhibit was curated by Betty Ann Jordan of Art Insite, Christina Zeidler of the Gladstone Hotel and Deborah Wang of Come Up to My Room, with the help of curatorial advisors Sophie Hackett and Michelle Jacques of the Art Gallery of Ontario.

Finally, our staff, physicians and volunteers have put together a whole host of internal initiatives. We’re having a birthday party where a series of new awards – called the Century Tributes – will be presented to staff. We’re creating a limited edition 100th anniversary pin exclusively for staff, physicians and volunteers. And we’re working on a calendar with images from each decade of our history.

This year of celebration has been made possible by a group of extraordinary women who so generously gave their ideas, their energy and their time. We cannot thank them enough.

### 100th Anniversary Leadership Committee

<table>
<thead>
<tr>
<th>Chair</th>
<th>Marcia Gilbert</th>
<th>Ratna Omidvar</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sheila Block</td>
<td>Michele Landsberg</td>
<td>Maryam Sanati</td>
</tr>
<tr>
<td>Virginia Cirocco</td>
<td>Kathryn Lennox</td>
<td>Paulette Senior</td>
</tr>
<tr>
<td>Carol Cowan</td>
<td>Caro Macdonald</td>
<td>Nalini Stewart</td>
</tr>
<tr>
<td>Kathryn Giffen</td>
<td>Sarah Neville</td>
<td>Christina Zeidler</td>
</tr>
</tbody>
</table>
Ilana Landsberg-Lewis speaks at The Spirit of Discovery in Women’s Health Research

Xania Khan, guest speaker at Hooking Up with Health: A Conference for Girls, along with Lexi Salt

Being She: The Culture of Women’s Health and Health Care Through the Lens of Wholeness

Volunteer committee for Hooking Up with Health: A Conference for Girls

Meryl McMaster, 'Viage', from the series 'In-Between Worlds', digital C-print, 24x24 inches, 2010
REPORT OF THE INDEPENDENT AUDITOR ON THE SUMMARY FINANCIAL STATEMENTS

To the Board of Directors of Women’s College Hospital

The accompanying summary financial statements, which comprise the summary statement of financial position as at March 31, 2011, the summary statements of operations and changes in net assets for the year then ended, and related notes, are derived from the audited financial statements of Women’s College Hospital for the year ended March 31, 2011. We expressed an unmodified audit opinion on those financial statements in our report dated May 24, 2011.

The summary financial statements do not contain all the disclosures required by Canadian generally accepted accounting principles. Reading the summary financial statements, therefore, is not a substitute for reading the audited financial statements of Women’s College Hospital.

Management’s Responsibility for the Summary Financial Statements
Management is responsible for the preparation of a summary of the audited financial statements on the basis described in Note 1.

Auditor’s Responsibility
Our responsibility is to express an opinion on the summary financial statements based on our procedures, which were conducted in accordance with Canadian Auditing Standard (CAS) 810, “Engagements to Report on Summary Financial Statements.”

Opinion
In our opinion, the summary financial statements derived from the audited financial statements of Women’s College Hospital for the year ended March 31, 2011 are a fair summary of those financial statements, in accordance with the basis described in Note 1.

“signed” PricewaterhouseCoopers LLP
Chartered Accountants, Licensed Public Accountants
Toronto, Canada
May 24, 2011

Note 1 – Applied criteria in the preparation of the summarized financial statements
The criteria applied by management in the preparation of these summarized financial statements are as follows:
a) the information in the summarized financial statements is in agreement with the related information in the complete financial statements;
b) a summarized statement of cash flows has not been presented, as the relevant information can be obtained from the complete financial statements; and
c) the summarized financial statements contain the information necessary to avoid distorting or obscuring matters disclosed in the related complete financial statements, including the notes thereto.
## SUMMARY STATEMENT OF FINANCIAL POSITION

### AS AT MARCH 31, 2011

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Assets</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Current assets</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Cash</td>
<td>40,865,217</td>
<td>38,966,273</td>
</tr>
<tr>
<td>Investments</td>
<td>20,138,788</td>
<td>19,744,532</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>2,683,764</td>
<td>3,154,892</td>
</tr>
<tr>
<td>Inventories and prepaid expenses</td>
<td>1,502,188</td>
<td>1,125,609</td>
</tr>
<tr>
<td><strong>Total</strong> Current assets</td>
<td>65,189,957</td>
<td>62,991,306</td>
</tr>
<tr>
<td>Capital assets</td>
<td>17,991,208</td>
<td>21,057,054</td>
</tr>
<tr>
<td>Facility redevelopment</td>
<td>15,660,039</td>
<td>10,764,474</td>
</tr>
<tr>
<td><strong>Total</strong> Capital assets</td>
<td>98,841,204</td>
<td>94,812,834</td>
</tr>
<tr>
<td><strong>Liabilities</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Current liabilities</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Accounts payable and accrued liabilities</td>
<td>17,553,908</td>
<td>16,602,810</td>
</tr>
<tr>
<td>Deferred revenue and research grants</td>
<td>12,916,119</td>
<td>11,388,865</td>
</tr>
<tr>
<td><strong>Total</strong> Current liabilities</td>
<td>30,470,027</td>
<td>27,991,675</td>
</tr>
<tr>
<td>Post-employment benefit liability</td>
<td>2,917,900</td>
<td>2,609,814</td>
</tr>
<tr>
<td>Deferred capital contributions</td>
<td>13,788,939</td>
<td>14,367,695</td>
</tr>
<tr>
<td>Deferred redevelopment contributions</td>
<td>26,598,348</td>
<td>26,456,137</td>
</tr>
<tr>
<td><strong>Total</strong> Liabilities</td>
<td>73,775,214</td>
<td>71,425,321</td>
</tr>
<tr>
<td><strong>Net assets</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Investment in capital assets</td>
<td>7,011,500</td>
<td>6,796,006</td>
</tr>
<tr>
<td>Facility redevelopment</td>
<td>14,608,766</td>
<td>14,608,766</td>
</tr>
<tr>
<td>Capital acquisitions</td>
<td>2,181,845</td>
<td>2,181,845</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>1,176,826</td>
<td>(199,104)</td>
</tr>
<tr>
<td><strong>Total</strong> Net assets</td>
<td>25,065,990</td>
<td>23,387,513</td>
</tr>
</tbody>
</table>

## SUMMARY STATEMENT OF OPERATIONS

### FOR THE YEAR ENDED MARCH 31, 2011

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Province of Ontario</td>
<td>83,371,086</td>
<td>81,390,451</td>
</tr>
<tr>
<td>Patients and related agencies</td>
<td>347,608</td>
<td>253,499</td>
</tr>
<tr>
<td>Research grants</td>
<td>5,862,075</td>
<td>4,615,460</td>
</tr>
<tr>
<td>Ancillary services and other sources</td>
<td>9,466,088</td>
<td>12,862,878</td>
</tr>
<tr>
<td>Investment income</td>
<td>566,407</td>
<td>880,940</td>
</tr>
<tr>
<td>Amortization of deferred capital contributions</td>
<td>3,794,359</td>
<td>2,623,848</td>
</tr>
<tr>
<td><strong>Total</strong> Revenues</td>
<td>103,407,623</td>
<td>102,627,076</td>
</tr>
<tr>
<td><strong>Expenditures</strong></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Salaries, wages and benefits</td>
<td>70,876,498</td>
<td>71,637,699</td>
</tr>
<tr>
<td>Medical and surgical supplies and drugs</td>
<td>5,307,152</td>
<td>5,098,954</td>
</tr>
<tr>
<td>Other supplies and expenses</td>
<td>19,914,946</td>
<td>19,866,578</td>
</tr>
<tr>
<td>Amortization of capital assets</td>
<td>5,630,550</td>
<td>4,121,877</td>
</tr>
<tr>
<td><strong>Total</strong> Expenditures</td>
<td>101,729,146</td>
<td>100,725,108</td>
</tr>
<tr>
<td><strong>Surplus of revenues over expenses before gain on sale of capital assets</strong></td>
<td>1,678,477</td>
<td>1,901,968</td>
</tr>
<tr>
<td>Gain on sale of capital assets</td>
<td>-</td>
<td>14,586,508</td>
</tr>
<tr>
<td><strong>Surplus of revenues over expenses for the year</strong></td>
<td>1,678,477</td>
<td>16,488,476</td>
</tr>
</tbody>
</table>

## SUMMARIZED STATEMENT OF CHANGES IN NET ASSETS

### FOR THE YEAR ENDED MARCH 31, 2011

<table>
<thead>
<tr>
<th></th>
<th>Facility redevelopment</th>
<th>Capital acquisitions</th>
<th>Investment in capital assets</th>
<th>Unrestricted</th>
<th>2011 Total</th>
<th>2010 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance, Beginning of year</td>
<td>14,608,766</td>
<td>2,181,845</td>
<td>6,796,006</td>
<td>(199,104)</td>
<td>23,387,513</td>
<td>6,899,037</td>
</tr>
<tr>
<td>Surplus of revenues over expenses for the year</td>
<td>87,053</td>
<td>-</td>
<td>(1,836,191)</td>
<td>3,427,615</td>
<td>1,678,477</td>
<td>16,488,476</td>
</tr>
<tr>
<td>Internally funded capital assets</td>
<td>-</td>
<td>-</td>
<td>2,058,924</td>
<td>(2,058,924)</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Disposal of capital assets</td>
<td>-</td>
<td>-</td>
<td>(7,239)</td>
<td>7,239</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Balance, End of year</td>
<td>14,695,819</td>
<td>2,181,845</td>
<td>7,011,500</td>
<td>1,176,826</td>
<td>25,065,990</td>
<td>23,387,513</td>
</tr>
</tbody>
</table>
Board of Directors 2011

Kathryn Giffen, MA, JD, ICD.D, Chair
Helen P. Batty, MD, CCFP, MEd, FCFP
Akua Benjamin, PhD
Darleen Bogart
Lesley Byrne, PhD
Alice Dong, MD, FCBOm, ABPM
Marilyn Emery, President & CEO, Women's College Hospital
Tamara Finch, MBA, CFA, ICD.D
Margot Franssen, OC
Marcia Gilbert
Tekla Hendrickson
Christopher Hoffmann
Nan Hudson, Rev. Dr.
Michele Landsberg, OC, LLD
Joan Lesmond, RN, BScN, MSN, EdD
Shannon MacDonald, CA, MHSc, Treasurer
Mina Mawani, MHSc/HA
Jane Mosley, RN, MScN
Wanda O'Hagan, Secretary
N. Jane Pepino, CM, QC, LLD
Beverley Richardson, MD, FRCPC
James Ruderman, MD, CCFP, FCFP
Sheerin A. Sheikh, MBA
Catharine Whiteside, MD, PhD, FRCPC
Susanne Williams, RN, BNSc, MEd, Vice Chair

Honorary Members

Carol A. Cowan
Janet MacInnis, O.Ont
N. Jane Pepino, CM, QC, LLD
Gail Regan, PhD
Beverley Richardson, MD, FRCPC