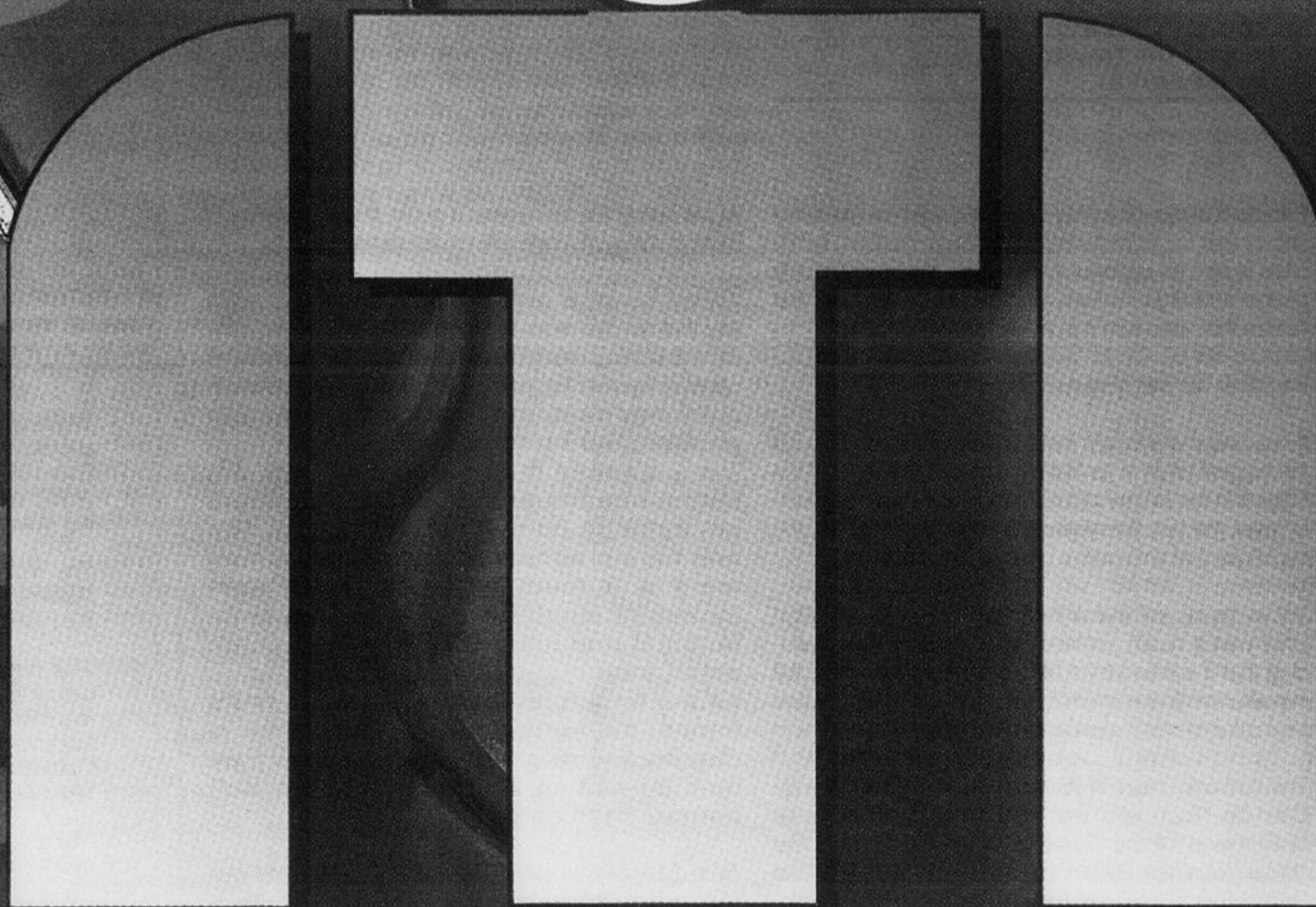
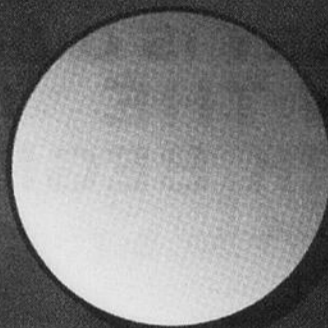
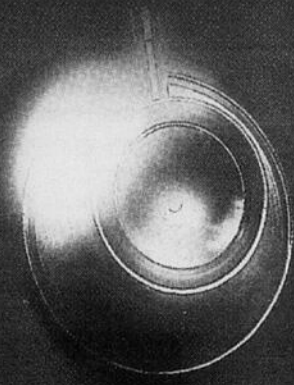


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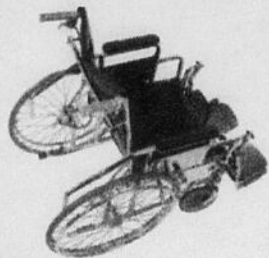


Tenacity and perseverance



5 STARS
HOSPITAL

MONTFORT HOSPITAL



PIERRE J.C.
LEFEBVRE

BY PIERRE J.C. LEFEBVRE
CHAIR, BOARD OF TRUSTEES,
MONTFORT HOSPITAL

VICTORY IS OURS, NOW THE WORK BEGINS

Paradoxical though it may seem, experience invariably shows that for individuals and for organizations, every crisis is also an opportunity. It shows, too, that it is only people and organizations with backbone that can first realize this, then turn it to advantage.

It's rather like catching a wave.

It has become a truism that Montfort has been through the biggest crisis in its history, and certainly one of the biggest in the history of the Franco-Ontarian community, over the last five years. Like that community, you could say that we know a crisis when we see one.

Yet we had to pull out all the stops in order to transform what was a death sentence into a victory so resounding that it will be years before we can assess its full impact. Montfort rewrote the book on how to manage a crisis and how to emerge from it even stronger.

The bedrock I have in mind is people like Michelle de Courville Nicol, who was absolutely unshakable as Chairperson of the Board of Trustees through five critical years; like Gisèle Lalonde, a living legend; like Gérald Savoie, a Chief Executive Officer of exceptional courage and leadership, who maintained the unity and solidarity of the Montfort's people from beginning to end of the crisis; like the staff, the professionals, the doctors and the volunteers of the Montfort, the heart of the institution; and like every member of the Franco-Ontarian community, which mobilized as never before.

IN TRUTH, WE SHOULD NOT BE SURPRISED. MONTFORT HOSPITAL IS AN INSTITUTION THAT WAS BUILT BY THE INDIVIDUAL EFFORTS OF MEMBERS OF THE FRANCO-ONTARIAN COMMUNITY, A PROCESS THAT HAS BEEN ELOQUENTLY DESCRIBED BY THE LATE FRANCO-ONTARIAN SOCIOLOGIST, ROGER BERNARD. ALTHOUGH IT WAS A LABORIOUS PROCESS, THE RESULT IS THAT IT IS ANCHORED IN BEDROCK, AND EVERY BRICK OF THE MONTFORT IS AS SOLID AS THE ONE IT RESTS ON.

Allow me to draw a comparison between what happened to us and an election victory. There is no better feeling for a politician than the excitement of victory after what is almost always a hard-fought campaign. On victory night, you celebrate. You had better, because the real work, most of it unseen and unsung, starts the morning after, and lasts four years.

At the end of the four years, a public that is unaware of most of the work done will render its verdict.

Without wishing to dampen our collective joy, I want to say that our real work at Montfort has just begun. After the intoxicating moments we have all shared since the opening insult of February 1997, after the roller-coaster ride, there is a strong temptation to feel that we have just slipped back into the routine.

This is a mistake to be avoided at all costs. The Montfort saga continues, more quietly and perhaps less gratifyingly, but nevertheless it continues. Now more than ever we need the individual efforts of every one of us, to ensure that this our greatest victory becomes the springboard to a limitless future for the Montfort Hospital and for all francophones in Ontario and in Canada.

We shall not disappear from the public stage. On the contrary, the Montfort will remain the focus of observers who will render their verdict a few years down the road on what our struggle has really produced: the price of glory.

Time did not stand still on December 9, when the Court of Appeal of Ontario handed down its judgment. In fact, the clock started ticking. The Hospital's management has redoubled its efforts to bring some major projects to completion, all designed to improve, diversify and expand the care and the services we provide.

You don't need a degree in hospital administration to understand that success depends largely on the funding we are able to obtain. The management is sparing no effort to see that the Montfort, now the least well funded hospital in Ontario, finally gets proper government funding.

To achieve our objectives, however, and meet the expectations of the francophone community, the Montfort will have to do even more. This is why the Montfort Hospital Foundation will be embarking officially this year on a major fundraising campaign; this will be the biggest in its history, and the biggest in the history of the Hospital. The Foundation has already been actively working on this campaign for the past two years.

It is by successfully executing all our projects for the good of the public that we will truly do justice to our struggle for victory and to all those who gave so much to earn it.

MICHELLE DE COURVILLE NICOL WENT BEYOND THE LIMITS OF HER MANDATE

MICHELLE DE COURVILLE NICOL LEAVES AN INDELIBLE MARK ON THE HISTORY OF THIS INSTITUTION AND OF THE FRANCO-ONTARIAN COMMUNITY. THUS, WE ARE MERELY GIVING BACK ONE SMALL PART OF ALL THAT SHE HAS GIVEN US, IN PROVIDING THE HOSPITAL WITH A MEMENTO OF HER UNFORGETTABLE TENURE.



MICHELLE
DE COURVILLE NICOL

BY PIERRE J.C. LEFEBVRE
CHAIR, BOARD OF TRUSTEES,
MONTFORT HOSPITAL

The honour is a modest one in comparison to the enormous task she accomplished, but it is with enthusiasm and gratitude that the Board of Trustees of Montfort Hospital has immortalized the name of Michelle de Courville Nicol, our outgoing Chairperson, who led the Board through the five-year struggle to save our Hospital.

The Board's meeting room will henceforth be known as the Michelle de Courville Nicol Room, in honour of this great leader of the Franco-Ontarian community.

This unprecedented gesture will not only serve to honour our outgoing Chairperson, but the name bestowed on our meeting room will remind all those who have difficult decisions to make in the future, affecting the development of Montfort and the Franco-Ontarian community, of the fine example of leadership set by Michelle de Courville Nicol in her unswerving commitment.

As a volunteer Chair, Michelle did not just fulfil her mandate in every sense: she went far beyond its outer limits.

First, and exceptionally, the Board renewed her term as Chair for a sixth year in a row, when after she served out the mandate of Gérard Raymond and two mandates in her own right, the members of the Association made a special request that she stay on the job for an additional year. This decision in itself was evidence of the trust Michelle inspired in her colleagues.

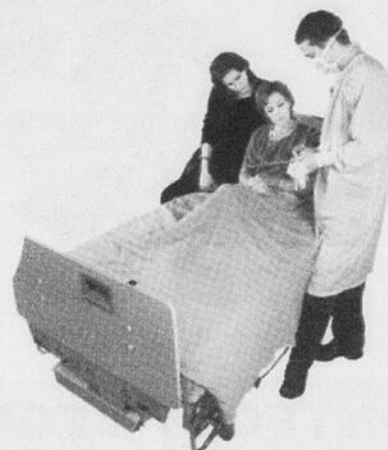
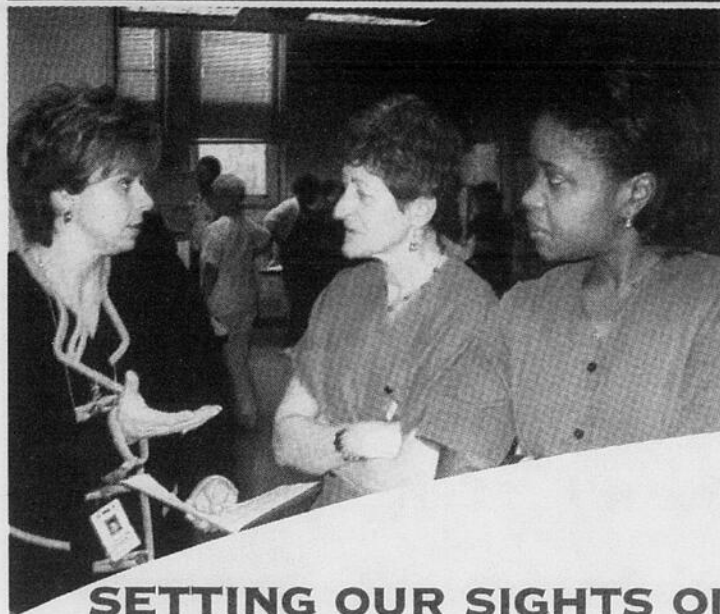
She had unexpectedly inherited the gravest crisis in the history of Montfort, and it is in times of crisis that we recognize real leaders. Through the ups and downs of a five-year battle, she bore the burden of office and the enormous responsibilities that go with it, and never flinched.

She responded every time we turned to her – which meant several times a week for five years – balancing the demands of her daily work, her family and the even greater and more stressful demands of Montfort case. Everyone who was with her through those times could only marvel at the energy, the tenacity and the toughness she displayed.

Michelle also elected to be a co-applicant, with Gisèle Lalonde and the Montfort Hospital, in the court case that led to a stunning victory in the Ontario Court of Appeal on December 7, 2001. This, too, was an act of courageous leadership, utterly in keeping with her performance in general.

She built herself a reputation as someone wielding an iron fist in a velvet glove. Rarely did we glimpse any fiery pronouncements on Michelle's part, but the President of SOS Montfort, Gisèle Lalonde, who is known and admired for her forthrightness, has described Michelle as complementing her with an image of calm determination amid the tumult of battle.

Gisèle adds that in private, "Michelle was worse than I was," in speaking of their foes in the battle to save the Hospital.



SETTING OUR SIGHTS ON QUALITY OF WORKING LIFE

GÉRALD R. SAVOIE
PRÉSIDENT AND CHIEF EXECUTIVE OFFICER,
MONTFORT HOSPITAL

THE MEDAL ADORNING THE COVER PAGE OF THIS YEAR'S ANNUAL REPORT IS FRAUGHT WITH MEANING.

This decoration, which was awarded to all Montfort employees, health-care professionals, physicians and volunteers in March after confirmation of our legal victory, symbolizes what the "Montfort" name is all about.

"Tenacity and perseverance" reads the medal, which is overlain by the five stars that represent our mark of excellence. These two words alone represent the Hospital's entire history, from its five-year struggle for survival to its upcoming 50th anniversary in 2003.

The medal was awarded in recognition of everyone at the



Hospital who stayed on or joined us during the crisis, despite the enormous cloud of uncertainty that hovered over the institution. They are entirely responsible for the fact that, five years later, the Hospital is not only still providing top-quality care as one of the province's most outstanding health-care establishments but has continued to grow, dispensing even more services than before.

We had every reason to acknowledge those without whose efforts our final victory would never have been achieved. Gisèle Lalonde and Michelle de Courville Nicol, the two appli-

cants in the Montfort's legal action, head up this list, and of course the tireless efforts of "S.O.S. Montfort" and the Hospital would have been in vain without the indefatigable support of our wonderful Franco-Ontarian community.

But where would we be now if our staff had not kept up the good fight? What would our victory be worth if our physicians had not all decided to stay on? How could we have hoped to prevail if health-care professionals from all over had not decided to come to the Hospital despite the fact that their careers were far from being guaranteed?

It is painful to recall that 1997 state of affairs, but without the unwavering loyalty of our staff, the government of Ontario would have been right: the Montfort would have been nothing more than "bricks and mortar".

It is precisely because the Hospital has always been more than this, because it has a soul—because the spirit of our pioneers can be felt in each corridor, because the people who work here are in a class by themselves—that we managed to succeed where other institutions have failed.

Management will forever owe our employees, professionals, physicians and volunteers a debt of gratitude.

REPAYING THEIR EFFORTS

While we made a commitment to that effect three years ago, over the past year the Hospital has launched specific initiatives aimed at meeting the institution's number-one goal. An internal survey was conducted, and a special committee established to determine how to improve the quality of working life here at the Hospital.

Client surveys giving the Montfort a five-star rating would seem to indicate that such improvements are not needed. However, the fact is that our staff had to make a superhuman

THE TIME HAS THEREFORE COME FOR MANAGEMENT TO CONSIDER THOSE WHO GAVE SO MUCH AND EARNED US A NATION-WIDE REPUTATION, AND TRY TO MAKE THE MONTFORT A PLACE WHERE THE QUALITY OF WORKING LIFE IS THE BEST IN THE COUNTRY.

effort to make it through the past five years, and the budget cuts imposed over the last several years meant our resources were stretched beyond the breaking point.

Our ability to improve the quality of working life is just as important for our clients as it is for our staff. An environment in which people enjoy working and can communicate well, that can boast the latest equipment and has enough employees to ensure that no one is overloaded, is one that cannot help but be better for patients.

A hospital is an institution in which service quality depends directly on the willingness of staff to give their all. The Montfort cannot afford to rest on its laurels, taking for granted that things will always turn out for the best. In the interests of everyone, we must act.

Canada's health-care system is currently experiencing one of the worst staff shortages ever seen. There is a lack of nurses and health-care professionals everywhere, and even our large urban centres do not have enough physicians. As a result, the competition between institutions for personnel and doctors is intense. The Montfort, moreover, faces the additional problem of having to recruit bilingual employees.

Experts tell us that, over the challenging years ahead, the organizations that succeed will be those that provide staff with the most gratifying work environment. Indeed, in periods of shortage, the job market offers an embarrassment of choices, both in Canada and abroad. In many cases, people will opt for employers offering a high quality of working life.

KEEPING UP OUR MOMENTUM

As CEO, I'm pleased to say that the Hospital, rather than being satisfied with its legal victory, is working hard to set and accomplish new goals.

Topping the list is our initiative to ensure the best quality of working life possible for our employees, physicians, professionals and volunteers. This is a priority project we must bring to fruition, not only for our staff, but for our patients as well.

This year we inaugurated the University of Ottawa's Centre national de formation en santé (CNFS), or national training centre for health professionals, at the Montfort—the physical and human infrastructure for our Canada-wide academic mission. The related responsibilities and potential are enormous, given that the Centre can help make generations of francophones self-sufficient with respect to their health.

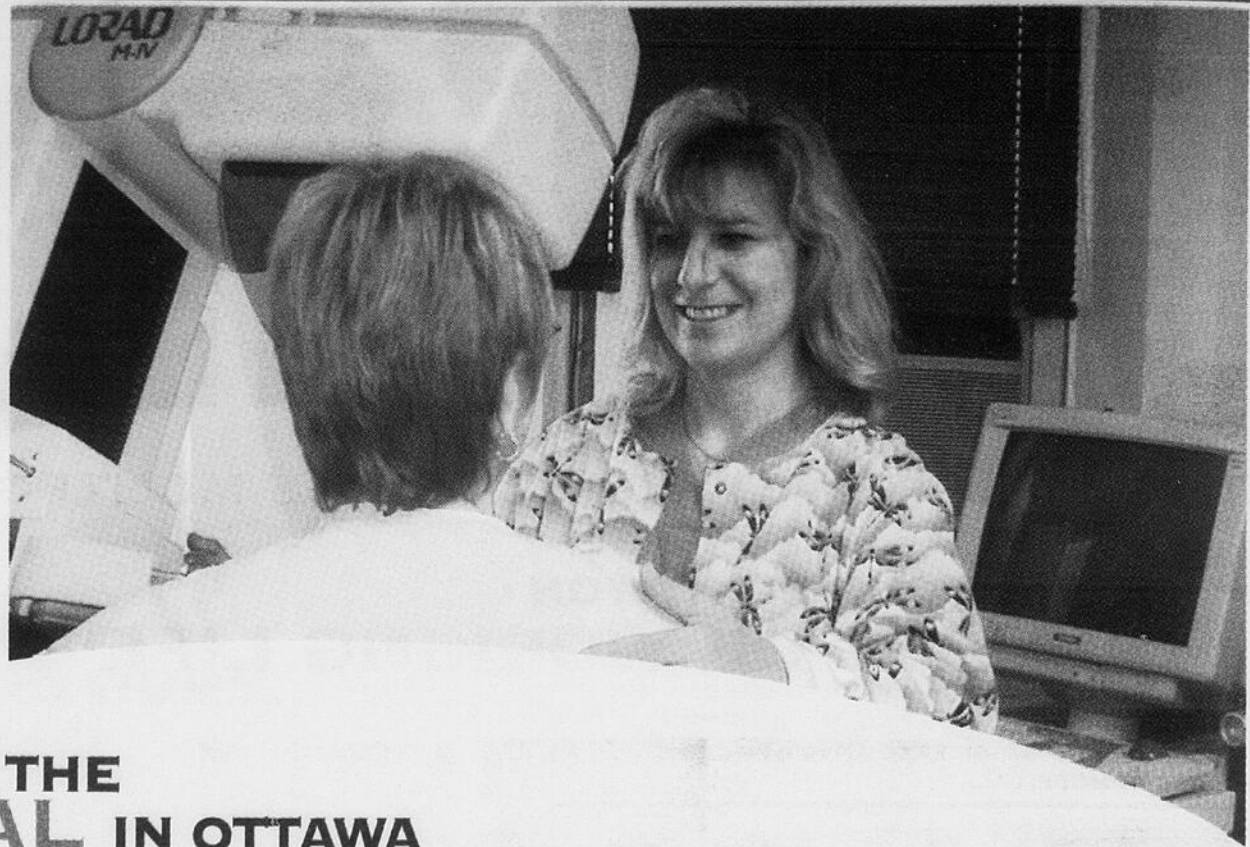
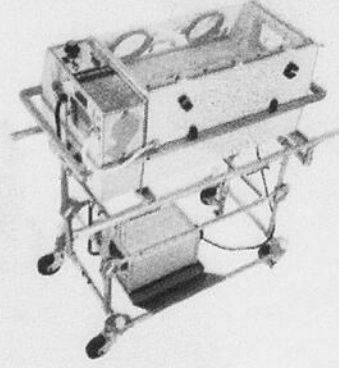
The Hospital is still in the process of completing renovations undertaken as part of a vast occupational health and safety project worth \$26 million, and continues to purchase state-of-the-art equipment such as a new mammography machine that has enabled us to join the Ontario Breast Screening Program. Just as important for families, our Family Birthing Centre has almost completed a qualification process that will make the Hospital the first in Ontario to gain "Baby-Friendly Hospital" status.

In December, the new 128-bed long-term care centre will welcome its first residents. As these various projects are being implemented, the Montfort is conducting an aggressive recruitment drive—a drive that, even amidst the aforementioned shortages, allowed us to hire about 60 new nurses in April and May.

The Hospital intends to meet these challenges with the same enthusiasm and determination we have shown over the past five years. We cannot allow ourselves to fail: excellence is our destiny.

Ténacité et persévérance





MONTFORT BECOMES THE FIRST HOSPITAL IN OTTAWA TO OFFER THE ONTARIO BREAST SCREENING PROGRAM

BY MRS. CÉLINE LACROIX
COORDONATOR, DIAGNOSTIC IMAGING
SERVICES, MONTFORT HOSPITAL

On March 22, 2002, Montfort Hospital opened its Mammography Centre, thus becoming the only area hospital to offer the *Ontario Breast Screening Program* in house.

Since that date, our clients have been welcomed into newly refurbished premises where mammograms are performed on new equipment that produces results of unmatched photographic quality. The Montfort acquired this new equipment at a cost of \$185,000.

Francophone women who, in the past, had to go to a screening centre in west-end Ottawa can now have the procedure in French in a Franco-Ontarian environment.

These tests are available to all our clients, although the Program itself is aimed specifically at women over 50 with no breast cancer in their family's medical history. They can be referred to our Centre by their doctor, or they can simply walk in and arrange an appointment without a doctor's referral.

In other words, the staff who provide this service at the Montfort are among the best-qualified in the

ACCREDITATION UNDER THE PROGRAM DEMANDS VERY STRICT STANDARDS WITH RESPECT BOTH TO THE SKILLS OF THE NURSES, TECHNICIANS AND DOCTORS WHO DO THE TESTS, AND TO THE ACCURACY OF THE EQUIPMENT THEY USE.

province or, for that matter, in Canada. At the Montfort, we take the approach that when we take care of a woman, we are taking care of her whole family.

THE MONTFORT A "BABY-FRIENDLY" HOSPITAL

In an ongoing effort to provide top-quality care, the Montfort Hospital has, over the past year, been involved in a process to gain "Baby-Friendly Hospital" status. This certification is granted when a health-care institution meets the requirements of a program sponsored jointly by the World Health Organization (WHO) and UNICEF.

The main purpose of the Program is to create an optimal environment for the promotion, protection and support of breastfeeding, in which the family is the focus of all clinical and support activities for mother, family and infant.

As part of its community mission, the Family Birthing Centre is devoted exclusively to mother and infant care from a family perspective. The Centre's goal is to ensure that birth is a normal, healthy and unique experience for every woman, and that a range of perinatal services are available before, during and after delivery.

ONCE THE "BABY-FRIENDLY HOSPITAL" PROGRAM HAS BEEN FULLY IMPLEMENTED AT THE MONTFORT, NEWBORNS WILL BE SHARING A PRIVATE ROOM WITH THEIR MOTHERS. FURTHERMORE, SO THAT THEIR STAY AT THE HOSPITAL IS MORE LIKE LIFE AT HOME, MOTHERS WILL DECIDE WHEN TO EAT AND HAVE THEIR ROOMS CLEANED.

A multi-disciplinary team of nurses, general practitioners, gynecologists, pediatricians, midwives, social workers and anesthesiologists established in accordance with the highest standards is already in place to provide care.

All health-care agencies agree that breastfeeding is healthiest for babies, and numerous studies have shown its many advantages for the health of both mother and child.

Health-care professionals are duty-bound to inform future parents accordingly, and to provide services that promote breastfeeding. Once the Hospital meets all the criteria, it will obtain "Baby-Friendly" certification. To date, the Montfort has implemented seven of the ten steps. Efforts to meet two of the remaining three criteria are currently being made, and the last, which involves providing mothers with support after they leave the institution, is still to be developed.

More than 15,000 hospitals around the world have been granted "Baby-Friendly" status, but only one in Canada—the Brome-Missisquoi-Perkins Hospital in Cowansville, Quebec—has earned the designation (1999). The Montfort hopes to be the first in Ontario, and is making every effort to do so by the end of 2003.

Although breastfeeding is strongly recommended and women who choose to nurse are provided with all possible assistance, everyone who has a baby at the Hospital receives the same high-quality care and support, regardless of her choice.





THE COMMUNITY IMPACT OF THE MONTFORT VICTORY : FROM NOW ON, WE DEAL ON EQUAL TERMS

BY MRS. GISÈLE LALONDE AND
MRS. MICHELLE DE COURVILLE NICOL
CO-APPLICANTS IN THE MONTFORT CASE



AFTER THE HEARINGS OF THE ONTARIO COURT OF APPEAL, AT OSGOODE HALL IN TORONTO: MR. GÉRALD R. SAVOIE, PRESIDENT & CEO OF MONTFORT, MRS. MICHELLE DE COURVILLE NICOL, PAST CHAIRPERSON OF THE BOARD OF TRUSTEES OF MONTFORT, MR. MARC COUSINEAU, CONSTITUTIONALIST LAWYER, MR. RONALD CAZA, MAIN LAWYER IN MONTFORT LEGAL TEAM, MRS. PASCALE GIGUÈRE, LAWYER AND MRS. GISÈLE LALONDE, PRESIDENT OF S.O.S. MONTFORT.

The months and years ahead will show to what extent the Montfort's resounding victory truly was the historic turning point that the Franco-Ontarian people were waiting for to mark the end of their journey towards total affirmation.

We have had other great victories over the last century, particularly in education. Remembering the battle that, in almost every case, preceded the establishment of our secondary schools, it is very clear that these battles tore the French-speaking community apart, and the victories they produced were historic, too.

Over the last hundred years, however, beginning of course with the battle against the infamous Regulation 17, our victories have come one step at a time, or one school at a time. We were the last province in Canada to get a system of education under our own control.

There is no question of diminishing the importance of these gains. Those who fought in those battles endured a more demanding and exhausting struggle, in many respects, than the battle for the Montfort, and the unanimous judgments won in two courts by the Montfort campaign were in fact based partly on the principles established in the legal wars over education – the Mahé judgment, in particular.

It was undoubtedly these battles, too, that laid the groundwork for the Montfort struggle. First, they helped keep the sacred flame alive in the hearts and minds of Franco-Ontarians. They taught us that it is worthwhile to make sacrifices in the defence of a just cause. More than that, they gave us generations of high-school graduates brought up in the Franco-Ontarian culture; these young people – many of them now adults – were instrumental in the battle to save the Montfort.

The Montfort case, and its impact on the public, was distinct in three ways. First, it was a truly national issue, mobilizing French-speaking Canadians across this land, with massive support from Quebec of a kind that had not been seen since the struggle over Regulation 17. Note too that we had the support of thousands of anglophones who had grasped the real impact of the Restructuring Commission's ill-considered decision.

Second, in the fight for the Montfort, the Franco-Ontarian community refused to back down or compromise. The slightest concession, the sweetest deal, would sooner or later have meant the end of the Montfort. In no sense could we afford to take a loss, and then rebuild on the ruins of our hospital.

Third, the Montfort cause grew not only into a real trial of strength between the Ontario government and the Franco-Ontarian community, but also into a struggle to defend our equality as francophones everywhere in Canada. It was the legal battle for the Montfort that compelled us to go back to the source, and identify the intent of the Fathers of Confederation with respect to the rights of francophone minorities. Historical research showed beyond all doubt that in this respect, Canada's founders did indeed mean that the two language groups should be equal, regardless of their numbers.



From now on, therefore, we must deal on equal terms with our governments and with the majority.

What we hope for most of all as a result of the struggle for the Montfort is that Franco-Ontarians will no longer see themselves as members of a minority, and act accordingly, but will rather see themselves as a founding people of this province and of this country.

If you behave, act and think as a member of a minority, you inevitably become an outsider.

It is time we put an end to the disinformation, the distortion of history and the tactics of intimidation that were used against francophones throughout the 20th century.

The Montfort campaign gave us the tools to defend ourselves and progress as never before. All we need now is the courage and commitment to use these tools, and change for ever our attitude towards our real place in Ontario and in Canada.



LISE MILOTTE

BY MR. MARC P. DESJARDINS
ASSISTANT TO THE PRESIDENT AND CHIEF EXECUTIVE
OFFICER AND VOLUNTEER DIRECTOR

On May 16, 2002, Lise Milotte chaired her last meeting of the Auxiliary Volunteers Association of Montfort Hospital.

The first thing I have to tell you is that Mrs Milotte does not countenance half-measures! She is always on top of things, ready to respond to the demands she places on herself.

SHE IS VERY DEMANDING OF HERSELF AND OF OTHERS, AND SHE EXPENDS WHATEVER ENERGIES ARE NEEDED TO ACHIEVE HER GOALS. GIVE HER SOMETHING TO AIM FOR, AND IF SHE DECIDES TO GO FOR IT, NOTHING WILL STOP HER. THE RESULT IS THAT THOSE AROUND HER HAVE TO MEET THE SAME CRITERIA.

You cannot imagine the intensity with which she has always defended the interests of the Association in its relations with the other bodies that deal with the auxiliaries and volunteers (the Board of Trustees, the Foundation and so on). She has made our cause her own and defended our interests right down to the smallest detail.

Thanks to her, we have done great things with ordinary resources and quite extraordinary people.

Thanks to her, we have doubled our revenues and met all our targets!

Thanks to her, the Association has met the Hospital's expectations.

- all of it, thanks to her.

In acknowledgment of Mrs Milotte's unfailing commitment, the Hospital Auxiliaries Association of Ontario plans to designate her a provincial Life Member on November 19, 2002 in Toronto.

The history of the Montfort Hospital Auxiliary Volunteers Association will remember you, and one of its biggest chapters will be devoted to an account of your accomplishments.

Congratulations and thank you, Mrs. Milotte!

AUXILIARIES / VOLUNTEERS: A RECORD YEAR

FISCAL 2001-2002 IS NOW OVER, LEAVING A MIXED BAG OF EMOTIONS, FRENZIED ACTIVITY AND NOSTALGIA IN ITS WAKE.

First, on the "emotional" front, I can't help but continue to celebrate our historic legal battle against the Ontario government—a battle that had its victims, but also its heroes. As a member of the Montfort Hospital's board of directors, I must acknowledge the incredible energy of the two applicants in the Hospital's case: Gisèle Lalonde and Michelle de Courville Nicol. Because of Ms. Lalonde's efforts, politicians and the media did not lose sight of our cause; Mrs. de Courville Nicol, outgoing Chair of the Board of Trustees, worked tirelessly to ensure that services continued to be

Again, many thanks to all Auxiliaries/Volunteers for their support.

Lastly, as outgoing Chair, "nostalgic" is how I feel when I look over the past nine years of loyal and sincere service to the board, knowing that I did everything in my power to enhance the image and vitality of our group.

I leave the association in an excellent position, and am convinced that our achievements will continue to make their mark over the years to come.



developed at the Montfort, as well as being responsible for the financial and clinical aspects of our institution's day-to-day activities. At the same time, Mrs. de Courville Nicol capitalized on the energy of all our staff in making the Montfort a "five star" hospital.

While I am leaving the position of Chair, I will be staying on as a member, and will continue to participate actively in all Hospital activities and planning, because the Montfort is my second home.

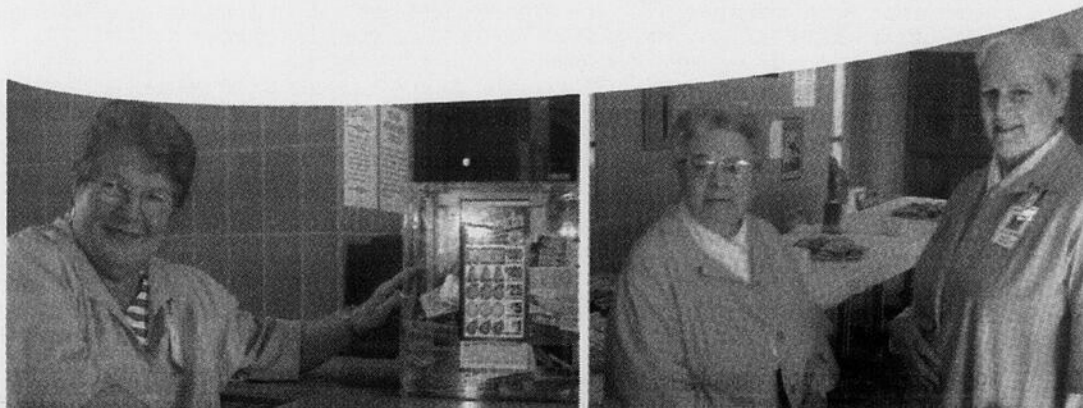
The Montfort is our home!

Congratulations and many thanks to you both!

Nor can we forget the important role played by our Auxiliaries/Volunteers in this dramatic episode of the Montfort saga. This group not only participated actively in all public activities, but made a financial contribution to the "S.O.S. Montfort" campaign. Here, too, we truly distinguished ourselves, with a record year in terms of volunteer time invested: almost 82,000 hours. Congratulations and thanks to all our Auxiliaries/Volunteers.

Lise Milotte
Chair

SECOND, WHEN I TALK ABOUT "ACTIVITY", I'M REFERRING TO THE RESOUNDING SUCCESS OF OUR MONEY-MAKING ENDEAVOURS! THE BOUTIQUE IS GOING GREAT GUNS, WHILE THE SALE OF NEVADA TICKETS, SPECIAL ACTIVITIES SUCH AS THE BAZAAR, BAKE SALES, CRAFT SALES, AND SO ON WERE ALL VERY PROFITABLE. WE EVEN MANAGED TO CHANGE THE LOOK AND ORIENTATION OF THE CAFÉ RAPIDO, WHICH, I HOPE, WILL PUT US IN THE BLACK.





THE FOUNDATION'S MAJOR FUNDRAISING CAMPAIGN : INVESTING IN THE FUTURE OF OUR COMMUNITY, OUR CHILDREN AND OUR GRANDCHILDREN

BY PAUL CARRIÈRE
CHAIRPERSON OF THE MONTFORT
HOSPITAL FOUNDATION

The success of the major fundraising campaign the Montfort Hospital Foundation has been feverishly preparing for two years, is vitally important to the future and growth of Montfort and the Franco-Ontarian community.

The unique community-based university hospital complex taking shape at Montfort Hospital will leave an incalculable legacy for future generations of Franco-Ontarians. Building on yesterday's promises, proud of today's achievements, and confident in the face of tomorrow's challenges, our community is working to build a Health Training and Research Centre of which its forebears would never have dared dream.

Montfort's new teaching and research initiatives are supported by three faculties of the University of Ottawa. These programs will enable the Franco-Ontarian community to achieve something all societies in the world strive for, namely, self-sufficiency. Ontario's francophone minority population, the largest in Canada, will finally have a health-care institution capable of providing its future physicians and health-care professionals training, in French, on a par with that available to the majority population.

Much work remains to be done to complete this wonderful project. We will always face some new challenge and whatever happens, we will always accept the heavy responsibility with the same enthusiasm as Montfort's early pioneers. What is at stake is much more than any obstacle that might stand before us. What is at stake is nothing less than the health and future of our community, our children and our children's children.

The goal of the major fundraising campaign of the Montfort Hospital Foundation is to give the Hospital the additional resources it needs not only to maintain its well-deserved gains, but to ensure their essential, ongoing development.

In order for Montfort Hospital to be able to continue to be a leader in Canada's francophone community, it must remain at the forefront of research, training and health and the delivery of medical and health care and services; it must rest on strong linguistic and community bases, and it must continue to rest on a firm financial foundation.

Our francophone population will need more, and better, health-care services in the future. The aging of our population will demand that Montfort extend its services well beyond what exists today.

It is this new vision of Montfort—built on research, teaching, clinical training and practice in health fields, in French—that the financial resources and volunteer efforts of the Foundation must support, through the four main thrusts of the current fundraising campaign.

Regional, provincial and national canvassing efforts will target businesses and financial institutions, professional associations, co-operative movements, foundations and philanthropic institutions, religious communities, volunteer and community

organizations, social clubs, political circles, academic institutions, the media, and the members of the vast Montfort Hospital family (i.e., administrators, managers, employees, former patients and friends).

The Hospital's priorities include four main projects:

1. THE NATIONAL TRAINING AND RESEARCH INSTITUTE

In view of the accelerated development and the expansion of the training programs offered in French by the University of Ottawa at Montfort Hospital, there is an essential and pressing need to plan a more suitable and better funded academic and research infrastructure.

The students, professors and researchers who use the clinical setting at Montfort must have the best possible tools for carrying out their unique mandate in Canada's francophone community.

The aim of the major fundraising campaign is therefore to allow for additional investments to be made in:

2. THE PURCHASE AND UPGRADING OF SPECIALIZED EQUIPMENT, THE ADDITION OF NEW SERVICES AND MODERNIZATION OF THE HOSPITAL

Owing to the development and expansion of the medical and health-care programs offered by Montfort Hospital, there is an urgent need to purchase several types of equipment to support the delivery of the most advanced medical and health-care services and the Hospital's new mission of training and research in French.

The aim of the major fundraising campaign is to enable Montfort to make the following investments:

Purchase of a magnetic resonance imager (MRI)

Montfort must purchase and instal a magnetic resonance imager (MRI). This equipment is essential for delivering complete health care to the region's francophone community.

At present, Ontario francophones do not have access to a French-language MRI service. This service is all the more important in view of the fact that the Ottawa region is one of the least well served for MRI in the province. At present, the waiting time for an MRI scan is six months or more. With no French-language MRI service at Montfort, francophones are doubly disadvantaged, since it is already very difficult to arrange for an MRI scan with an English service.

PURCHASE OF NEW SPECIALIZED EQUIPMENT

To be able to hire a specialist in a discipline such as cardiology or orthopaedics requires, on average, the purchase of more than \$400,000 in new equipment.

Montfort must be able to attract the best medical personnel available. To this end, and to ensure that these limited resources can provide Hospital clientele with the best professional treatment possible, Montfort must be able to equip them with the most

modern, sophisticated and effective tools, and with increasingly specialized, top-quality clinical equipment.

MODERNIZATION OF THE HOSPITAL

The survival and growth of Montfort will be achieved only through objectives of health-care excellence and the maintenance and addition of top-quality health-care services and facilities. This calls for major financial investments to support the technical and physical resource requirements.

For example, modernization of the Hospital is inevitable in order to accommodate more outpatient clinics; expand the intensive care facility; refit the emergency department; expand and add new clinics in haematology, diabetes, urology, cardiology and orthopaedics; add diagnostic services to accommodate CT-Scan, ultrasound and mammography; and refit spaces needed to accommodate the additional beds in surgery, medicine, psychiatry, obstetrics, geriatric medicine and rehabilitation.

effectively without the financial support of a solid, dynamic Foundation. In order to strengthen its underpinnings, the Montfort Hospital Foundation undertook, four years ago, to set up an endowment fund.

The purpose of this fund is to enable the Foundation:

- to purchase on occasion a variety of small, low-cost items for patients;
- to be able to offer research grants, fellowships and merit scholarships;
- to be able to support, promote and defend the best interests of Montfort within its community.

There you have the main thrusts of the major fundraising campaign around the theme: An investment for life!. This campaign will extend over five (5) years.

May I take this opportunity to thank all the members of our Board of Directors for their involvement and considerable devotion, and their dedication to this major campaign. I also wish to sincerely thank Mrs. Lise Millotte, Past Chairperson of the Auxiliary/Volunteer Association, for her years on our Board of Directors and her



S & S BOLTON ELECTRIC GOLF TOURNAMENT FOR THE MONTFORT HOSPITAL FOUNDATION
FIRST ROW, FROM LEFT TO RIGHT : MR. GRAHAM CLARKE, MRS. CHANTAL DESCHÈNES, MRS. ROXANNE LEMAY, MRS. MIREILLE LEDUC, MRS. LORRAINE GAUTHIER, MR. JACQUES BLOUIN, DR. ANDRÉ GAUTHIER

TOP ROW FROM LEFT TO RIGHT : MR. ROBERT LEFEBVRE, MR. LIONEL BEAUCHAMP, MR. ROBERT SANS CARTIER, MR. MARCEL CHARRON, MR. PAUL CARRIÈRE, MR. GÉRALD SAVOIE

3. THE CENTRE OF EXCELLENCE FOR WOMEN

The establishment of a Women's Health Centre is a top priority for the Hospital. The Centre will have various components according to the various basic elements of its Program of Care and Services, including, initially: the Women's Health Centre, the Family Birth Clinic and the Mammography Clinic.

The Women's Health Centre will provide, as a priority, a whole range of basic health care and services in areas directly concerning women, including: family medicine, breast cancer, gynaecology and obstetrics, menopause, aging and geriatrics. The Centre will also provide all care and services related to sexuality, family planning, and perinatal, natal and neonatal care.

4. THE ENDOWMENT FUND

In the hospital community in the year 2000, it became unthinkable to operate a hospital

always significant contribution.

The permanent staff of the Foundation, with Mr. Jacques Blouin as Executive Director, Mireille, Chantal and Roxanne, have continued their excellent work. Without their support and that of numerous volunteers, our fundraising activities would certainly be less successful. Over the past year, golf, bingo, concerts and various other activities have been organized. In particular, the S & S Bolton Electric, golf tournament generated a profit of nearly \$50,000 thanks to our generous sponsors, including Mr. Robert Sanscartier. This tournament, held in Rockland, has become one of the biggest in the region.

Thank you to all our sponsors, and to all our donors; with your help, the Foundation is able to fulfil its mission of helping our Hospital.

ANNUAL REPORT
2001-2002
MONTFORT
HOSPITAL

**SUMMARY OF 2001-2002 AND
WHAT LIES IN STORE AT MONTFORT**

THE YEAR 2001-2002 AT THE MONTFORT WAS NATURALLY DOMINATED BY THE HISTORIC JUDGMENT OF THE COURT OF APPEAL OF ONTARIO, AND THE SUBSEQUENT DECISION BY THE GOVERNMENT OF ONTARIO NOT TO APPEAL TO THE SUPREME COURT OF CANADA. THESE TWO EVENTS MARKED THE END OF THE GREATEST CRISIS THE HOSPITAL HAD EXPERIENCED SINCE IT WAS FOUNDED IN 1953.

HOWEVER, JUST AS THE MONTFORT'S PEOPLE DID THROUGHOUT THE FIVE-YEAR STRUGGLE FOR SURVIVAL, THE HOSPITAL HAS CONTINUED RESOLUTELY TO STRIVE FOR CONSTANT IMPROVEMENT OF THE CARE AND SERVICES IT PROVIDES.

THERE FOLLOWS A SUMMARY OF THE SALIENT EVENTS OF THE YEAR AT THE MONTFORT AND THE PROJECTS THAT HAVE BEEN COMPLETED, ARE IN PROGRESS, OR ARE PLANNED FOR THE NEAR FUTURE.



**TWO VISITS BY THE MINISTER
OF HEALTH AND LONG-TERM CARE**

The Minister of Health and Long-Term Care of Ontario, the Honourable Tony Clement, visited the Montfort twice in 2001-2002, indicating a changed attitude towards us on the part of the provincial government. People will certainly recall his memorable visit in February 2002, when he called upon us to "turn the page" and announced that the government did not intend to appeal the Montfort judgment to the Supreme Court of Canada. Mr Clement was accompanied on that occasion by two Cabinet colleagues: the Minister of Francophone Affairs, the Honourable John Baird, and the Minister of Agriculture, the Honourable Brian Coburn. Mr Clement had already provided evidence of his new approach to the Montfort when he came in November 2001 to announce the official start of construction on our long-term care centre.



**RENOVATIONS
AND MODERNIZATION**

Renovation and modernization work continues, concentrating on the part of the Hospital dating from 1953. At a total cost of \$26 million, these renovations under the "Health and Safety" project will provide a higher level of comfort and safety to clients throughout the Hospital. The results of our modernization are already apparent on the third and fourth floors, and part of the ground floor, where diagnostic imaging services are located.

OUR "FIVE STARS"

The Montfort's people are intensely proud of their Hospital's "five star" rating, and rightly so, since it is due entirely to their performance. Ours is one of the few hospitals in Ontario that can make this claim.

How did it come by this above-average rating? Over the last two years, the Ontario Hospital Association has sponsored a survey by experts from the University of Toronto, covering every hospital in the province. They consulted the clientele of each institution, and stars were awarded according to the level of satisfaction expressed by clients in specific areas, to a maximum of five stars.

In the five main categories, the Montfort was judged outstanding.

4,000 PEOPLE CELEBRATE VICTORY

More than 4,000 Franco-Ontarians attended the S.O.S. Montfort Victory Rally on March 22, 2002, at La Cité collégiale. In addition to marking the end of the struggle, it also saluted the fifth anniversary of the Grand Rally of March 22, 1997, when more than 10,000 francophones packed the Civic Centre in Ottawa to come to the defence of their Hospital. From 4:30 in the afternoon until 10:00 pm, an enthusiastic crowd enjoyed entertainment by Franco-Ontarian performers including the "Deux saisons" group, violonist Daniel Pepin, author-composer-performer Lise Paiement, accompanied by Donal Poliquin, singer Manon Séguin, the duo of Martine Lafontaine and Brian St-Pierre, accompanied by the choir of Casselman High School, the Ouimets and the young ravers of FESFO. A surprise guest was the federal Minister of Intergovernmental Affairs, the Honourable Stéphane Dion, who addressed the crowd, as did Gisèle Lalonde, Michelle de Courville Nicol, Pierre Lefebvre, Gérald Savoie, Dr Gérard Colin, Past Chairman of the Medical Staff, and Marcel Pilon, representative of the Montfort's employees.

NEW CARE MODEL

In order to offer our clientele safe, quality care, the Montfort recently implemented a new care delivery model that allows each member of the care team to play their part fully and autonomously, in their area of responsibility or expertise. In hospital care, our new modus operandi is called "modular care delivery". What it means is that new human resources are now assigned to functions that stress an individualized approach designed to increase the time each staff member spends at the patient's bedside.

A study at Harvard University in the United States concluded that this model resulted in a larger proportion of staff time specifically devoted to care delivery, to the great benefit of the patient.

10TH ANNIVERSARY OF THE SOUTH WING

This was a birthday, of course, that could easily have escaped public notice, but it is worth pointing out that ten years ago, the Montfort completed a 240,000 square foot expansion that cost \$37 million - what we now refer to as the South Wing.

The South Wing is a prominent feature of the complex, constituting as it does the Hospital's façade, the architecture of which never fails to impress our visitors. The important thing to remember is that the construction of the South Wing was a key event in its impact on the future of the Montfort. Without it, the Franco-Ontarian community's own Hospital was fated to disappear or, at best, be converted into a chronic-care facility. This was a big project, and was masterminded by the man who was to become the new CEO in 1986: Gérald Savoie. It is fair to say, therefore, that Mr Savoie has helped save the Montfort time and again.

MAJOR CURRENT ISSUES

FUNDING

During his last visit, the Minister, Tony Clement, promised that Montfort Hospital would have all the resources needed to fulfil its unique mandate to serve the Franco-Ontarian community. We took him at his word, and Hospital management has accordingly begun discussions at the highest level with the Ministry of Health and Long-Term Care with a view to moving forward on the funding issue at long last. For a number of years, the Montfort has had the lowest level of government funding of any hospital in Ontario. Only 66% of our revenue comes from the Ministry, while the average government subsidy to all hospitals in Ontario is 92%. We are stressing the fact that the Montfort can no longer afford to wait and that what is really only catch-up funding will be in place by this summer. The Montfort is also asking for full acknowledgment by the Ministry of its broad academic mission, with funding to match.

DND

Negotiations are continuing with the Department of National Defence, which has chosen the Montfort as a partner and provider of health care services to Canada's military. This is a complex issue involving a number of questions, ranging from service requirements to the cost of new construction. The Montfort expects the issue to be resolved by this summer.

MRI PURCHASE

For a number of years, Montfort Hospital has been seeking Ministry approval for the acquisition of magnetic resonance imaging (MRI) equipment so as to provide service in French to Franco-Ontarian patients and better access to this diagnostic tool, for which there is currently a six-month wait in the Ottawa area. On our side, everything is ready. The Montfort is waiting only for the Ministry's signal to go ahead. The equipment we are planning to acquire is of the latest "open air" design, which will be good news for difficult-to-image patients, particularly the claustrophobic and the obese, for whom the traditional MRI tube creates serious problems. The equipment is also essential to our academic mission.

MENTAL HEALTH

The mental health sector, which celebrated its 25th anniversary last year, is one of the most progressive and efficient at the Montfort. Our mental health professionals are involved in a number of leading-edge projects, particularly in community care, whereby clients do not have to be institutionalized. The Montfort is also working on an expansion plan to enable it to fully meet its commitment to the francophone community. This involves new construction, and a substantial increase in the number of mental health beds.

RECRUITING DRIVES

Our aggressive efforts to recruit qualified staff have been more successful than ever this year. Last May, a cohort of almost 60 new graduate nurses from Ontario, New Brunswick and Quebec joined the Montfort team. The success of our recruitment campaigns reflects much credit on our human resources people, who have to cope with an acute and nationwide shortage of health professionals in Canada.

A number of new doctors have also chosen to practise at the Montfort, both in family medicine and in various specialties.

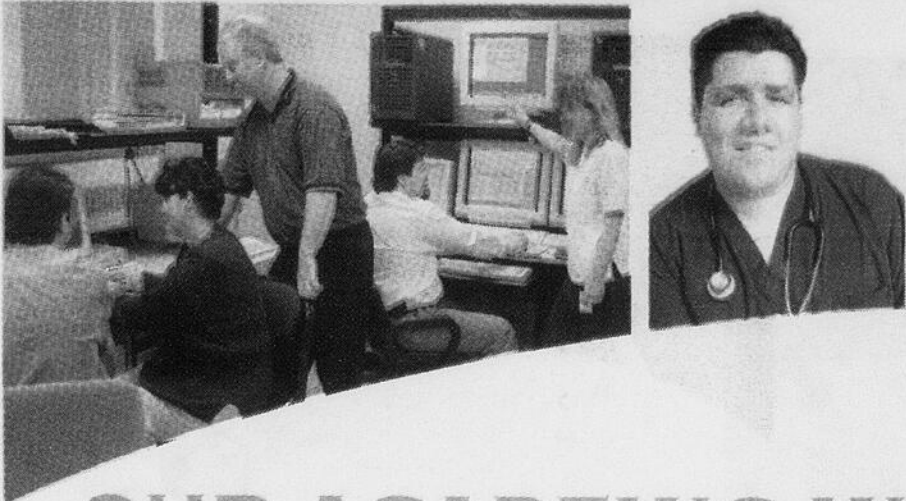
NUCLEAR MEDECINE

Over the last few years, the Montfort has been working on a project that will make nuclear medicine available to our clients. In their constant effort to offer the best possible service, members of the diagnostic imaging department are working hard to make this medically and clinically advanced service a reality.

50TH ANNIVERSARY

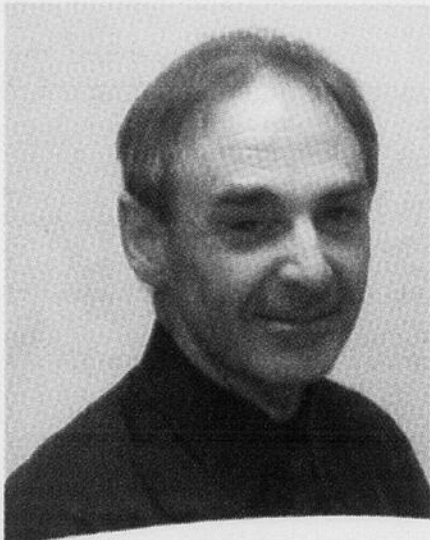
The year 2003 will mark the 50th Anniversary of Saint-Louis-Marie de Montfort Hospital. A series of activities to commemorate the founding of the Montfort by the Filles de la Sagesse and the Franco-Ontarian community will culminate in a Grand Festival on October 11, the official opening date of the Hospital.

The events of the last few years will make the anniversary even more poignant, bearing in mind that it came all too close to never happening. The Hospital will keep you informed of upcoming events, so that once again, we can have the pleasure of celebrating together.



OUR ACADEMIC MISSION : RESEARCH AND TRAINING THAT HELP PEOPLE

BY DR JOHN A. JOANISSE
VICE-PRESIDENT
ACADEMIC AFFAIRS MONTFORT HOSPITAL



The official opening on March 22, 2002 of the University of Ottawa's Centre national de formation en santé (CNFS), or national training centre for health professionals, at Montfort Hospital marked the dawn of a new era of limitless prospects for our institution and for the Franco-Ontarian community.

An academic mission on the scale of the Montfort's generates a dynamic in which all participants – doctors, patients, students, instructors, practitioners, researchers – work, learn and benefit simultaneously. The Hospital thus becomes more than a supplier of services: it is a place where services and care are improved daily through the application of research and new ways of doing things.

The real impact of the expansion and national scope of the Montfort's academic mission will be felt in the way the research and teaching done here contribute to the expansion, diversification and improvement of the care and services our clients receive.

Thus, it is not just a question of establishing a school of medicine, social sciences or health sciences within these walls, with no benefit to the Hospital or the community. On the contrary: the many students coming here from the University of Ottawa will make it necessary for Montfort to continue to develop and grow more than ever.

In medicine alone, the number of students getting their clinical training at the Montfort will rise to 40 a year. Since internships at Montfort cover the third and fourth years of medical school, there will actually be 80 students from the Faculty attending the Montfort at any one time, to say nothing of up to 12 doctors doing their residency in our family medicine residency program.

There is also to be a major expansion in our health sciences programs: nursing, physiotherapy, ergotherapy, speech-language pathology and audiology.

This phenomenal growth in the academic sector of the University of Ottawa at Montfort naturally demands a parallel increase in the number of teachers: more doctors, more nurses and more health professionals.

To recruit these teaching clinicians and give them a favourable environment to work in, the Hospital has to create services that will bring in a sufficient clientele. We must therefore

expand our existing services, and add the ones we are eager to offer in response to the needs of the community we serve.

A LARGER CLIENTELE MEANS BETTER TRAINING AND BETTER RESEARCH

Similarly, the larger clientele generated by the greater abundance of services will further enhance the quality of our training programs, exposing our students to a greater number and variety of cases.

The minority population health research we do at Montfort will be able to draw on a critical mass of more than 200,000 francophones in the area served by our Hospital, and a half-million in Ontario. Furthermore, our links with other French-speaking minorities, and the hospitals and researchers that serve them across this country, will facilitate research based on the million francophones that live in minority situations in Canada.

This is applied research, the results of which will serve to improve services and care delivery so that they respond specifically to the real needs of the Franco-Ontarian community and other French-speaking communities in Canada.

Research tailor-made for our own people, our clientele.

Nevertheless, it will be just as valuable to our teachers, students and doctors, who will be able to apply the fruits of this research so as to improve, respectively, their teaching, their studies, and their practice of medicine.

THE IMPACT OF THE VICTORY IN THE COURTS

The day after the Ontario Minister of Health and Long-Term Care announced that the provincial government would not be appealing the Montfort case to the Supreme Court of Canada, it was possible to feel a change in attitude towards the Montfort and its academic sector.

Our regional health-care partners are more inclined to cooperate with an establishment whose future is now assured. Although the Montfort succeeded in setting up the CNFS in the midst of the crisis, the fact remains that the uncertainty overshadowing our institution made long-term commitments difficult.

We still have to obtain adequate funding from the province to support our academic mission.

At the official inauguration of the CNFS, the Rector of the University of Ottawa, Gilles Patry, announced that the University would support the Montfort's efforts to establish the National French-language Health Research and Training Institute of the University of Ottawa at Montfort Hospital.

Like Montfort, the CNFS will continue to grow and to provide care and services of the highest quality, as it trains the francophone doctors and health professionals of tomorrow.

A PROMISING YEAR FOR THE CNFS

BY RACHEL OUELLETTE
DIRECTOR OF OPERATIONS
CENTRE NATIONAL DE FORMATION EN SANTÉ
UNIVERSITY OF OTTAWA

The last year has been rich in accomplishment for the team at the Centre national de formation en santé (CNFS), or national training centre for health professionals, of the University of Ottawa at Montfort Hospital.

The CNFS is an initiative funded by the Department of Canadian Heritage and designed to improve training in French in the various health disciplines in order to increase the number of professionals able to serve members of francophone minorities in Canada. The Centre is now a Canada-wide consortium of six university teaching institutions and health care partners, chief among which at the moment is Montfort Hospital.

Given its key historical role in the French-speaking community of Ontario and of Canada, Montfort is especially well placed to provide clinical training in health disciplines in French.

PROGRAMS

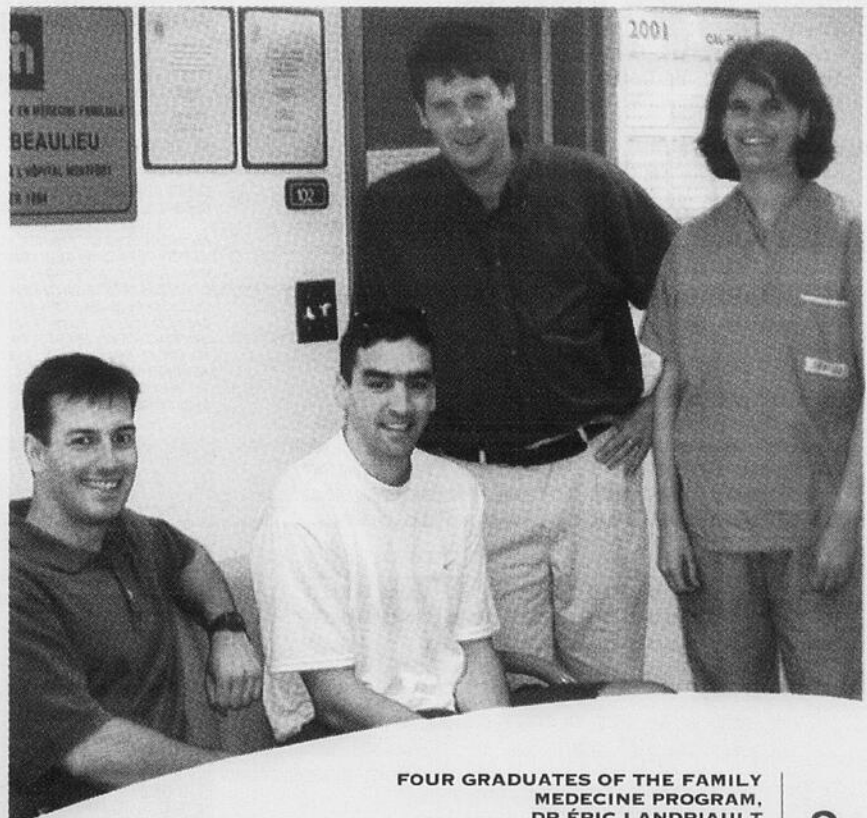
In the Centre's Phase I, all the programs offered in French by the faculties of Health Sciences and Medicine, and some programs in the Faculty of Social Sciences at the University of Ottawa have been regarded as components of the CNFS.

This includes 13 programs in all:

- Audiology (master's)
- Ergotherapy (baccalaureate)
- Gerontology (2nd concentration or certificate)
- Medicine
- Speech-Language Pathology (master's)
- Physiotherapy (baccalaureate)
- Clinical Psychology (doctorate)
- Human Kinetics (baccalaureate and master's)
- Nursing (baccalaureate, master's, nurse practitioner certificate)
- Social Work (master's)

STUDENTS

Between 1999 and 2001, a total of 75 students were admitted to the above programs. Results to date allow us to predict that with the 2002-2003 cohort, the objective of registering 90 new students will likely be exceeded, in just four academic years. Most of these students are enrolled in medicine or rehabilitation sciences (physiotherapy, ergotherapy, speech-language pathology and audiology), programs which are not available in French outside Quebec.



FOUR GRADUATES OF THE FAMILY
MEDECINE PROGRAM,
DR ÉRIC LANDRIault
DR ROBERT S. JOHNSTON
DR JEAN SÉGUIN
DRE LESLIE A. BAILLIU



ADMINISTRATIVE STRUCTURES
OF THE MONTFORT PARTNERS

2001
2002

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ANESTHESIA : Dr. Jean Blier, LABORATORY MEDICINE : Dr. Maureen T. Carlier, Dr. Richard A. Bonin par intérim, SURGERY : Dr. Benoît St-Jean, MEDECINE : Dr. Brendan P. Quinn, FAMILY MEDICINE : Dr. Julie I. Lockman, OBSTETRICS AND GYNAECOLOGY : Dr. Gilles V. Bourdeau par intérim, OPHTHALMOLOGY : Dr. Peter W. Harding, ORTHOPAEDIC : Dr. Ramesh C. Chauhan, DIRECTOR OF RESIDENCY PROGRAM - DEPARTMENT OF FAMILY MEDICINE : Dr. Lyne M.A.I. Pitre, MENTAL HEALTH PROGRAM : Dr. Marc L. Mauguin, DIAGNOSTIC IMAGING : Dr. Gérard Collin, EMERGENTOLOGY : Dr. Louise McNaughton-Filion, COORDINATOR - FAMILY MEDICINE UNIT : Dr. Jean A. Roy*, Dr. Lyne M.A.I. Pitre

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ADMINISTRATORS

Mr. Jacques Blouin, Mr. Bernard Boulerice, Mr. Albert Bourdeau, Mr. Daniel Cadieux, Mr. Lucien Côté, Ms. Diane Desautels, Ms. Diane Doré, Me Raymond Gouin, Mr. Montcalm Houle, Ms. Gisèle Lalonde, Ms. Marie Lapointe, Mgr. Gilles Lavergne, Mr. Jacques Legendre*, Mr. Aimé A. Lepage, Mr. Guy Levert, Ms. Micheline Marquis, Mr. Dominique Martel, Mme Lise Milotte, Mme Georgette Patenaude, Mr. Gérard R. Savoie, Mr. Matthew Semple, Mr. Pierre Xatruch

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CHAIRPERSON : Ms. Lise Milotte, VICE-CHAIRPERSONS : Ms. Estelle Daigle and Ms. Denyse Brisson TREASURER : Mr. Gilles Denis, SECRETARY: vacant position, DEPARTMENT HEAD AND ASSISTANT TO THE PRESIDENT AND CHIEF EXECUTIVE OFFICIER : Mr. Marc P. Desjardins

ADMINISTRATORS

Ms. Angeline Fortier, Ms. Pauline Montpetit, Ms. Hélène Rochon, Ms. Jeanne D'Arc Legault, Sister Gisèle Lambert, Sister Marguerite Pipemo, Ms. Claire Johnston, Ms. Huguette Gatién

* Left during current mandate

STATEMENT
FOR THE YEAR ENDED
MARCH 31, 2002

	2002	2001
CURRENT ASSETS		
ACCOUNTS RECEIVABLE FROM SERVICES TO PATIENTS	2 598 779	\$ 4 292 620
OTHER ACCOUNTS RECEIVABLE	1 272 017	3 177 287
INVENTORIES	667 958	731 505
PREPAID EXPENSES	306 147	285 866
	<u>4 844 901</u>	<u>8 487 278</u>
CAPITAL ASSETS	<u>32 524 820</u>	<u>24 839 707</u>
TOTAL ASSETS	<u>37 369 721</u>	<u>\$ 33 326 985</u>
CURRENT LIABILITIES		
BANK INDEBTEDNESS	4 107 776	\$ 4 141 671
ACCOUNTS PAYABLE AND ACCRUED CHARGES	10 146 971	6 655 598
CURRENT PORTION OF LONG-TERM DEBT DUE WITHIN ONE YEAR	313 999	305 725
	<u>14 568 746</u>	<u>11 102 994</u>
ACCRUED BENEFIT OBLIGATION	83 300	130 900
LONG-TERM DEBT	762 500	1 063 999
DEFERRED CONTRIBUTIONS RELATED TO CAPITAL ASSETS	<u>23 086 934</u>	<u>19 232 234</u>
	<u>38 501 480</u>	<u>31 530 127</u>
NET ASSETS		
NET ASSETS INVESTED IN CAPITAL ASSETS	8 361 387	4 237 749
ACCUMULATED DEFICIT	(9 493 146)	(2 440 891)
	<u>(1 131 759)</u>	<u>1 796 858</u>
TOTAL LIABILITIES AND NET ASSETS	<u>37 369 721</u>	<u>\$ 33 326 985</u>

COMPLETE FINANCIAL STATEMENTS, VERIFIED ON MAY 15, 2002 BY MARCIL LAVALLÉE, LOYER, AND PARTNERS CHARTERED ACCOUNTANTS, ARE AVAILABLE UPON REQUEST AT THE FOLLOWING PHONE NUMBER : (613) 746-4621 EXT.: 2300 OR AT THE FOLLOWING ADDRESS : GENERAL ADMINISTRATION, MONTFORT HOSPITAL, 713 MONTREAL ROAD, OTTAWA, ONTARIO, K1K 0T2

ONTARIO PUBLIC SECTOR SALARY DISCLOSURE ACT, 1996

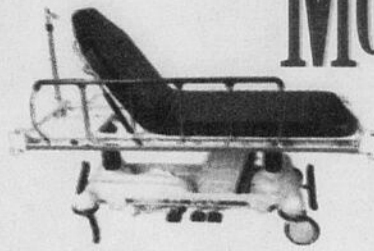
AS REQUESTED BY THE ACT, PUBLIC ORGANISATIONS MUST DISCLOSE ANNUALLY BEFORE MARCH 31, INFORMATION PERTAINING TO MEMBERS OF THE HOSPITAL'S PERSONNEL WHO HAVE EARNED MORE THAN \$100,000 IN THE YEAR. FOR THE HOSPITAL, THIS APPLIES TO MR. GÉRARD R. SAVOIE, PRESIDENT AND CHIEF EXECUTIVE OFFICER WHO HAS EARNED \$229 283 PLUS TAXABLE BENEFITS OF \$ 1 908, TO DR. MAUREEN CARLIER, PATHOLOGIST, WHO HAS EARNED \$136 227 PLUS TAXABLE BENEFITS OF \$819, TO DR. JOHN JOANISSE, VICE-PRESIDENT, ACADEMIC AFFAIRS, WHO HAS EARNED \$131 890 PLUS TAXABLE BENEFITS OF \$ 1543, TO MR. P. MARC JOYAL, EXECUTIVE VICE-PRESIDENT AND VICE-PRESIDENT, BUSINESS ADMINISTRATION AND FINANCE, WHO HAS EARNED \$125 873 PLUS TAXABLE BENEFITS OF \$4 384 AND TO MS. DIANE PLANTE, VICE-PRESIDENT, CLINICAL SERVICES WHO HAS EARNED \$110 729 PLUS TAXABLE BENEFITS OF \$ 1 296.

STATISTICS
ACTIVITIES PROFILE

	MARCH 31 2002	MARCH 31 2001
AVERAGE BED IN OPERATION	145	162
ADMISSIONS	6 848	7 249
BIRTHS	1 184	1 118
PATIENT DAYS	52 163	58 596
SURGICAL PROCEDURES AND INTERVENTIONS	11 855	10 684
VISITS - EMERGENCY CARE	32 097	30 563
VISITS - DAY CARE	15 530	14 432
VISITS - OUTPATIENT CLINICS	46 038	46 225
VISITS - DIAGNOSTICS AND THERAPEUTICS SERVICES AND OTHER	94 479	85 302
NUMBER OF EMPLOYEES FULL TIME EQUIVALENT	556	535

STATEMENT OF OPERATIONS
FOR THE YEAR ENDED MARCH 31, 2002

	2002 BUDGET (UNAUDITED)	2002 ACTUAL	2001 ACTUAL
REVENUE			
ONTARIO MINISTRY OF HEALTH AND LONG-TERM CARE CONTRIBUTIONS	36 477 795	37 404 790	\$ 37 099 311
ONTARIO HEALTH INSURANCE PLAN	2 573 914	2 646 161	2 446 609
OTHER PROVINCES HEALTH INSURANCE PLANS	2 745 836	3 026 584	3 031 063
OTHER PLANS	851 917	1 261 007	926 523
ROOM DIFFERENTIAL	1 970 001	2 076 486	2 118 699
PATIENT'S CO-PAYMENT	109 483	131 246	145 856
AMBULANCE	137 171	145 416	138 279
GOODS AND SERVICES	646 370	899 031	577 305
OTHER REVENUE	742 605	1 086 016	1 253 192
OTHER VOTES	<u>3 209 053</u>	<u>2 480 018</u>	<u>1 794 145</u>
TOTAL REVENUE	<u>49 464 145</u>	<u>51 156 755</u>	<u>49 530 982</u>
EXPENSES			
SALARIES AND WAGES	27 443 473	27 221 006	25 456 862
EMPLOYEE BENEFITS	6 031 427	6 253 194	5 838 490
MEDICAL STAFF REMUNERATION	2 468 456	2 814 995	2 328 370
SUPPLIES AND OTHER EXPENSES	8 438 284	8 528 892	8 236 937
RENTAL OF EQUIPMENT AND SPACE	932 114	789 693	893 692
MEDICAL AND SURGICAL SUPPLIES	2 509 791	2 767 274	2 439 943
DRUGS	1 265 446	1 386 875	1 339 755
INTEREST	879 380	176 390	120 239
BAD DEBTS	120 000	91 275	131 289
AMORTIZATION — EQUIPMENT AND ASSETS UNDER CAPITAL LEASE	1 515 327	988 770	716 575
OTHER VOTES — RELATED EXPENSES	<u>3 209 053</u>	<u>2 480 018</u>	<u>1 794 145</u>
TOTAL EXPENSES	<u>54 812 751</u>	<u>53 507 276</u>	<u>49 296 297</u>
EXCESS OF (EXPENSES OVER REVENUE) REVENUE OVER EXPENSES BEFORE THE FOLLOWING :	(5 348 606)	(2 350 521)	234 685
AMORTIZATION OF SUBSIDIZED BUILDINGS AND EQUIPMENT - NET	(331 026)	(578 096)	(308 527)
EXCESS OF EXPENSES OVER REVENUE	<u>(5 679 632)</u>	<u>(2 928 617)</u>	<u>\$ (73 842)</u>



GÉRALD SAVOIE BEFORE THE ROMANOW COMMISSION: THE CONSTITUTIONAL IMPACT OF THE MONTFORT JUDGMENT

ON MAY 28 OF THIS YEAR, MONTFORT HOSPITAL CEO, MR. GÉRALD SAVOIE, APPEARED BEFORE THE FEDERAL COMMISSION ON THE FUTURE OF HEALTH CARE IN CANADA, CHAIRED BY FORMER SASKATCHEWAN PREMIER ROY ROMANOW.

THE POWERFUL MESSAGE DELIVERED BY MR. SAVOIE WHICH DEALT WITH THE IMPACT OF THE MONTFORT JUDGMENT ON THE CONSTITUTIONAL RESPONSIBILITIES OF ALL GOVERNMENTS AND OF ALL THEIR AUTHORITIES IMPRESSED THE COMMISSION. MONTFORT'S CEO CONCLUDED HIS ADDRESS BY ASKING THE COMMISSION TO CONSIDER THE ADDITION OF A SIXTH PRINCIPLE TO THE CANADA HEALTH ACT, ENSURING ACCESS TO HEALTH SERVICES IN THEIR LANGUAGE TO THE LINGUISTIC MINORITIES.

CHAIRMAN ROMANOW TOLD REPORTERS LATER THAT LINGUISTIC MINORITIES WOULD ASSURELY BE DEALT WITH IN HIS COMMISSION'S FINAL REPORT.

HERE ARE SOME KEY EXCERPTS OF MR. GÉRALD SAVOIE'S PRESENTATION:

"...The powerful symbol Montfort has become for all Francophones in this country during this five-year struggle to survive, exceeds the health care field. In fact, it goes to the very heart of our vision of Canada, of our history, our national values and, without a doubt, of our Constitution."

Once again, the minority Francophones, in Ontario and in all of Canada found themselves at decisive crossroads in their history, face to face with their own extinction.

"...The stakes were much higher than the simple survival of Montfort, Mr. Chairman. We could not afford to lose this fight. Our own survival as Francophones, as a founding people of this country, was at stake."

"...Faced with the intransigence of the Restructuring Commission, we had no other choice but to put our fate in the hands of the Courts... In two successive judgments, from the Divisional Court and the Court of Appeal of Ontario, six judges unanimously ruled that the Constitution of 1867 that gave birth to Canada prevented a provincial government from sidestepping one of our fundamental values, the respect and the protection of minority rights."

"The historic Montfort judgment now hovers over all policies, all initiatives, all decisions taken by governments in this country, as much as over their ministries and Commissions."

"...Mr. Chairman, let me quote an excerpt from the speech you delivered in Oxford, England, in November 2001:"

" IN MY VIEW, VISION AND VALUES GO TOGETHER. IT IS CLEAR THAT, AS A COUNTRY, CANADA WILL NOT MAKE ANY PROGRESS IN THE REFORM OF ITS HEALTH CARE SYSTEM UNLESS THE NEW DIRECTIONS THAT ARE PROPOSED REFLECT THE VALUES SHARED BY ALL CANADIANS (OUR TRANSLATION FROM FRENCH TEXT)"

"...If Montfort managed to resist and to obtain justice in the end, it is undoubtedly because all our actions, all our words, all our determination to accept nothing less than the vital minimum, were based on a value that is fundamental to all Canadians: the respect and the protection of minority rights."

And what two Courts of justice concluded is that, not only did the Constitution of 1867 uphold this principle, but that it carried powerful constitutional responsibilities toward the minority for all governments in the country.

It is important to stress the fact that this linguistic duality was not conceived yesterday. This duality was one of the major concerns of the founders of Canada.

The Ontario Court of Appeal states in the Montfort judgment:

"THE PROTECTIONS ACCORDED LINGUISTIC AND RELIGIOUS MINORITIES ARE AN ESSENTIAL FEATURE OF THE ORIGINAL 1867 CONSTITUTION WITHOUT WHICH CONFEDERATION WOULD NOT HAVE OCCURRED. (OUR UNDERLINE)"

The Court also quotes a 1932 Reference by Lord Sankey, L.C.:

"...IT IS IMPORTANT TO KEEP IN MIND THAT THE PRESERVATION OF THE RIGHTS OF MINORITIES WAS A CONDITION ON WHICH SUCH MINORITIES ENTERED INTO THE FEDERATION, AND THE FOUNDATION UPON WHICH THE WHOLE STRUCTURE WAS SUBSEQUENTLY ERECTED. (OUR UNDERLINE)"

And the Court of Appeal adds categorically:

"THE PROTECTION OF LINGUISTIC MINORITIES IS ESSENTIAL TO OUR COUNTRY."

...Sadly, of course, we only have to glance at the history of Canada to realize that far from being faithful to the promise of the Fathers of Confederation, our governments have had no qualms about stamping on our rights and wreaking havoc within our institutions.

However it is the Montfort case that sets the precedent to the effect that this constitutional principle applied concretely and legally to all government decisions impacting on the survival and the well-being of the francophone minority.

In its judgment the Court of Appeal states:

"FUNDAMENTAL CONSTITUTIONAL VALUES HAVE NORMATIVE LEGAL FORCE. EVEN IF THE TEXT OF THE CONSTITUTION FALLS SHORT OF CREATING A SPECIFIC CONSTITUTIONALLY ENFORCEABLE RIGHT, THE VALUES OF THE CONSTITUTION MUST BE CONSIDERED IN ASSESSING THE VALIDITY OR LEGALITY OF ACTIONS TAKEN BY GOVERNMENT. (OUR UNDERLINE)"

One of the main reasons explaining this harmful pattern of behaviour on the part of our governments, is that for decades provincial governments -including Ontario- have handed us the supreme insult of identifying Francophones callously, not to say with contempt, as an interest group. Let it be known once and for all, for all levels of governments in this country: Canadian Francophones are not, never have been and, as long as Canada exists, never will be an interest group. To say they are, means that Canadian Anglophones are also an interest group. We are Canadians born of one of the founding peoples, we are proud to be Canadians.

Take the example of the Chair of the Ontario Health Services Restructuring Commission, Dr. Duncan Sinclair, who in a letter to Montfort stated officially that his Commission had not considered the larger role played by Montfort as key institution for the preservation of the language and the culture of Franco Ontarians, nor that a francophone milieu was essential to achieve this. Dr. Sinclair wrote:

"Debate of this belief is not within the purview of the Health Services Restructuring Commission."

The Court of Appeal of Ontario quoted this letter three times in the Montfort judgment. And the three judges concluded.

"THE COMMISSION WAS REQUIRED BY STATUTE TO EXERCISE ITS POWERS WITH RESPECT TO MONTFORT IN ACCORDANCE WITH THE PUBLIC INTEREST. IN DETERMINING THE PUBLIC INTEREST, THE COMMISSION WAS REQUIRED TO HAVE REGARD TO THE FUNDAMENTAL CONSTITUTIONAL PRINCIPLE RESPECT FOR AND PROTECTION OF MINORITIES. (OUR UNDERLINE IN ITALICS BY THE COURT)"

What I am trying to convey to you, Mr. Chairman, on the strength of the Montfort judgment, is that the respect of minority rights is really up to you. That it is not a mere question of translation, or of offering services in French once the majority's case has been settled. Like the Restructuring Commission that wanted to send us to a bilingual hospital.

In fact, it is not only a matter of language. It says that you, as all leaders of all our governments, always have to consider the needs and the rights of the minority, because these constitutional rights permeate the entire text of the Constitution that created our country.

...We are talking about the life of an entire culture, of a people. To reduce it to a mere question of language, is to deny the existence of this culture and of the rights of one of Canada's founding peoples.

...In the wake of the Montfort case, that confirmed the francophone minorities right to equality, le Commission on the future of health care in Canada must accept this responsibility and send a clear message to all Canadians who share the values of linguistic duality.

Montfort hopes that the Commission will not only include Francophone issues in its deliberations and conclusions, but that it will recommend specific measures aimed at francophone minorities' needs and rights. To forget them would perpetuate the mistakes of history.

...I also urge the Commission to seriously consider adding a sixth principle to the Canada Health Act, ensuring access to health care in their language for francophone minorities. In our view, that principle is constitutionally required.

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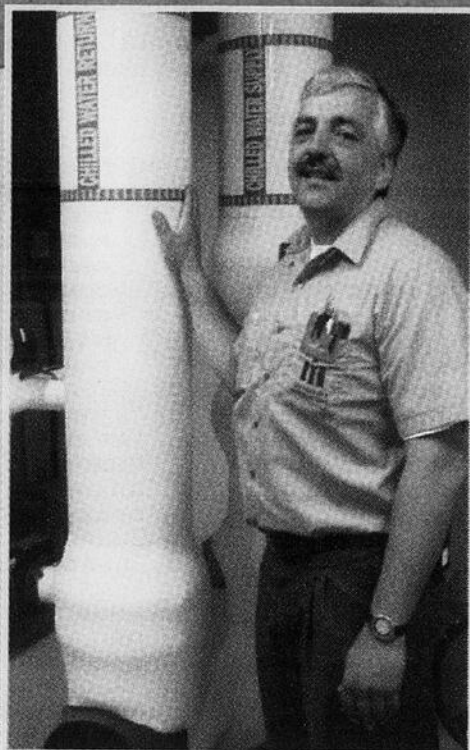
LE NOM MONTFORT ÉVOQUE TOUJOURS DES IMAGES DE NOS MÉDECINS ET DE NOS INFIRMIÈRES HORS PAIR. ON OUBLIE TROP FACILEMENT QUE PLUS DE 50% DES EMPLOYÉS DE MONTFORT ACCOMPLISSENT D'AUTRES TÂCHES AUSSI ESSENTIELLES AU SUCCÈS DE L'ÉTABLISSEMENT ET À LA QUALITÉ DES SERVICES À LA CLIENTÈLE. DE LA PLOMBERIE À LA PHYSIOTHÉRAPIE, DE LA SANTÉ MENTALE À LA COMPTABILITÉ, MONTFORT NE POURRAIT FONCTIONNER COMME HÔPITAL SANS L'APPORT DE TOUT SON MONDE.

NOUS AVONS RECUEILLI LES COMMENTAIRES DE CES PROFESSIONNELS ET DE CES GENS DE MÉTIER SUR L'ANNÉE QUI VIENT DE S'ÉCOULER À MONTFORT.

M. DENIS MELANÇON
Services techniques/Technical Services

"Cette année, le nouveau système de climatisation de l'Hôpital a réduit certaines de nos tâches. On n'a plus besoin d'installer ou d'enlever des petits climatiseurs des fenêtres. Ça nous libère pour faire d'autres tâches plus importantes d'entretien physique pour les chambres des patients, par exemple. J'ai hâte qu'on complète le système sur les autres étages..."

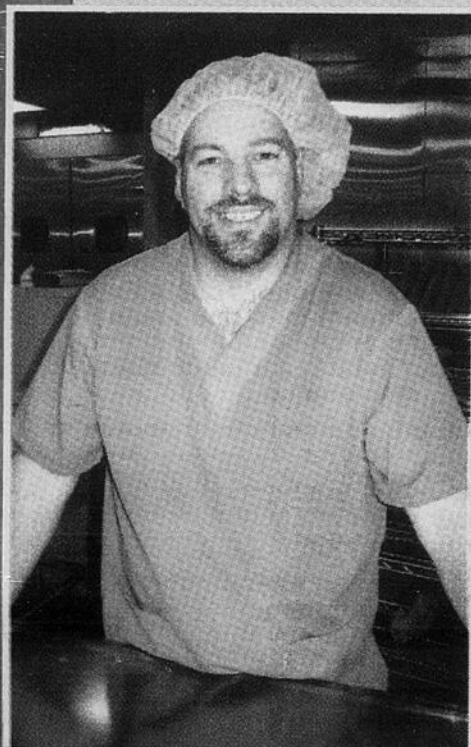
"This year, the Hospital's new air conditioning system has reduced some of our chores. We don't have to install or take out small window air conditioners anymore. That frees us up to give better care to other responsibilities, such as the maintenance of patients' rooms. I can't wait to see the system finished."



**MME
MARIE-CLAUDE POIRIER**
Physiothérapeute/Physiotherapist

"En physio, nos volumes de patients ont beaucoup augmenté cette année avec l'augmentation -des cas au bloc opératoire. Il y a plus de cas en chirurgie d'un jour, plus de cas d'orthopédie en particulier, plus de remplacement de genoux et de hanches, donc plus de cas de réadaptation pour nous après l'opération, mais aussi en pré-admission."

"In physio, our patient ratios really grew this year with the increase in operating bloc cases. We have more day surgeries, more orthopaedic cases especially, more knee and hip replacements, which means more readaptation cases for us post-op, but also in pre-admission."



M. ANDRÉ DEMOORS
Service de stérilisation et de décontamination/
Sterilization and decontamination services

"L'augmentation des cas en chirurgie a amplifié notre charge de travail cette année. Nous devons stériliser et décontaminer un plus grand nombre d'instruments du bloc opératoire. Notre travail consiste à laver chaque instrument, les décontaminer, les vérifier, les mettre dans un plateau de stérilisation et les entreposer en sécurité à la salle d'opération."

"The increase in surgery cases this year has added to our workload. We must sterilize and decontaminate a greater number of instruments. Our work consists in washing, decontaminating, verifying, sterilizing and securing each instrument in the operating room."



MME LIETTE MERCIER
Analyste financière/Financial analyst

"Les services financiers sont la fin de la boucle de l'Hôpital. Tous les patients finissent ici. Les réclamations d'assurance-maladie, d'assurance privée, etc. D'ici un mois, le nouveau système informatique Meditech entre en service et ce sera très important pour nous."

"The buck stops at the financial services. All patients end up here. The OHIP and private insurance claims, etc. In about a month, our new computer system Meditech will come into operation and that will be very important to us."

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ALL PROFESSIONS, OF ALL TRADES...

THE NAME MONTFORT NATURALLY EVOKES IMAGES OF OUR EXCELLENT DOCTORS AND NURSES. WE TOO EASILY FORGET THAT MORE THAN 50% OF MONTFORT'S EMPLOYEES CONTRIBUTE IN OTHER ESSENTIAL WAYS TO THE SUCCESS OF THE ESTABLISHMENT AND TO THE QUALITY OF THE SERVICES WE PROVIDE FOR OUR CLIENTELE. FROM PLUMBING TO PHYSIOTHERAPY, FROM MENTAL HEALTH TO ACCOUNTING, MONTFORT COULD NOT FUNCTION AS A HOSPITAL WITHOUT THE SUPPORT OF EACH AND EVERY MEMBER OF ITS STAFF.

HERE ARE SOME OF THE COMMENTS WE GATHERED FROM THESE OTHER PROFESSIONALS AND TRADE EMPLOYEES ON THE YEAR THAT JUST ENDED AT MONTFORT.

MME SABELLE DUFOUR Déposée aux archives/Archives clerk

"Je roule tout le temps aux archives! Nous avons ici tous les dossiers des patients et nous devons répondre tous les jours aux demandes de l'urgence et des autres services cliniques pour nos dossiers."

"I'm busy all the time in the archives! We hold here all the patients' files and we must answer on a daily basis all the requests from the ER or other clinical services."



MME DAO LE Pharmacienne/Pharmacist

"Le nouveau système Meditech qui entre en opération bientôt sera beaucoup plus efficace pour notre service, puisqu'il enregistrera toutes les doses de médicaments données au patient par chaque infirmière. Ce sera un meilleur outil pour les services cliniques."

"The new Meditech computer system that will come on stream soon will be much more efficient for our service, since it will register all the medication doses given to the patient by each nurse."



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MME RENÉE J. BARBEAU Travailleuse sociale/Social worker

"L'événement de l'année pour moi, c'est notre victoire légale. Depuis que je suis à Montfort, la francophonie est beaucoup plus importante pour moi. La travailleuse sociale dans un hôpital traite la totalité du patient, pas seulement son côté médical. Nous tenons compte de ses circonstances de vie, de son environnement, de son histoire personnelle, pour que nous soyons en mesure de répondre à tous ses besoins."

"For me, the event of the year was our legal victory. Ever since I've been at Montfort, francophone issues have become much more important in my life. The social worker, in a hospital, treats the totality of the patient, not only the medical aspect. We take into account the patient's life circumstances, his environment, his personal history, so that we may better address his needs."



M. GERMAIN LABELLE Assistant en psychiatrie/Psychiatric assistant

"L'une de nos grandes réalisations cette année en santé mentale, a été la mise en commun, l'intégration, des services communautaires disponibles pour nous aider à faire un suivi auprès des clients qui ont été hospitalisés. Nos patients auront maintenant directement accès aux services d'institutions comme : Le Patro, L'Élan, Horizons Renaissance. C'est très avantageux pour eux. Il s'agit surtout d'activités récréatives pour aider les clients à reprendre la vie en communauté, à se faire des amis."

"One of our major accomplishments this year in Mental Health was our integration with services available in the community to help us provide continued support to clients who have been hospitalized. Our patients now have direct access to services offered by institutions like: Le Patro, L'Élan, Horizons Renaissance. It is very advantageous to them. Mainly for recreational activities that help the patient find a new life in the community, make new friends."