



2021

IMPACT REPORT

Photograph by Dr. Heather Patterson



Philanthropy drives health care excellence by improving patient experiences, delivering higher than average outcomes, expanding system capacity and preventing injury and illness.

**SANDY EDMONSTONE,
BOARD CHAIR, CALGARY HEALTH FOUNDATION**

LEADERSHIP MESSAGE

Health is foundational to all else

Long before the unprecedented, global COVID-19 pandemic disrupted our lives, Calgary Health Foundation supporters invested in community wellness and resilience. As a result, the past 25 years of support have resulted in philanthropic investments of \$528 million, making extraordinary impacts on the lives of not only Calgarians but all Albertans.

Sooner or later, and often unexpectedly, we all depend on the health care system. And when we do, only the best possible outcome is acceptable. That's why Calgary Health Foundation and our supporters quickly pivoted during the public health crisis to advance breakthroughs in care, wellness and research. We supported Alberta Health Services (AHS) by nearly doubling COVID-19 lab testing capacity with generous community contributions, providing tablet computers to isolated long-term care residents to ensure they were communicating with loved ones and bolstering our stakeholders' emotional health through the "Text4Hope" initiative.

Together, we recognized thousands of southern Alberta frontline health care workers with gratitude meals and invested in urgent research to improve COVID-19 treatments. Expectant and new moms received critical mental health supports as they confronted fear and an isolating parenting experience. Further, we leveraged previous investments to provide life-saving interventions for critically ill patients.

Last year's unprecedented lottery ticket sales resulted in an unexpected and significant contribution to our operating results. Both hospital lotteries exceeded previous sales records, raising over \$13.8 million for health priorities such as mental health and perinatal research.

We also achieved a significant milestone in our Newborns Need campaign to advance maternal and newborn care, wellness and research by surpassing \$137.5 million of our \$152 million investment commitment



MIKE MELDRUM
PRESIDENT & CEO, CALGARY HEALTH FOUNDATION



SANDY EDMONSTONE
BOARD CHAIR, CALGARY HEALTH FOUNDATION

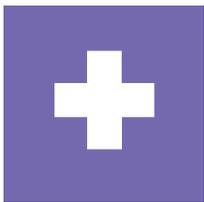
for the campaign, including securing a \$38 million commitment from the Government of Alberta towards the Foothills Medical Centre neonatal intensive care unit development. We are grateful for our many campaign donors, AHS support and the Government of Alberta’s collaboration to ensure every newborn in our community has a fighting chance.

Our organization continues to benefit from the leadership of an extraordinary Calgarian, outgoing board chair, Bill Sembo. Last year, when the global COVID-19 pandemic consumed our health care system, Bill was instrumental in galvanizing philanthropic funding to expand Alberta’s COVID-19 lab testing capacity by 45 percent. Before the pandemic, Bill was the catalyst behind several significant capital investments in health and health research that continue to transform care in our community. While we miss Bill’s expertise on our board, we are grateful for his continued stewardship of our Newborns Need campaign.

“
It’s a privilege for us to amplify the extraordinary work of our local health care heroes, steward your capital and enhance health outcomes for the community. Thank you for entrusting the Calgary Health Foundation.

2021 SUMMARY

Calgary and surrounding area statistics for 2020/2021



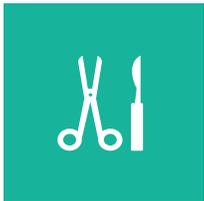
525K

Emergency and urgent care visits



16.9K

Births



97K

Surgical cases



36K

Unique home care



132K

Patients



\$2.4M

Ambulatory Care (outpatient) visits
*as of Q3 (12/31/20)

Alberta's COVID-19 Response*

10,000

Total hospitalizations

>1,900

Total patients requiring intensive care

*credit: statistics reported by alberta.ca



It's been a year...

But because of your generous support for COVID-19 response and recovery we're making it through! Thank you for being an important part of the support needed to keep going through this challenging year.

REVENUE & COSTS

Fundraising costs

Given our strategic aspirations to increase fundraising revenue from approximately \$23.2 million to \$60 million by 2028, we anticipate fundraising costs will remain competitive during this aggressive growth period.

Governance

Over the past year, we added more rigour to our fund disbursement process by mobilizing a funding oversight committee of the board to govern investment decisions. We fund projects that:

- Impact patient experiences
- Enhance capacity
- Advance new technology, ideas or techniques to improve outcomes
- Improve the standard of care
- Address gaps between acute and community care
- Reduce the long-term cost of health care

Financial strength

The Foundation maintains a strong financial position. Over the last several years, in addition to endowed funds, we have accumulated investments that will fund the cost of the expansion and renovation of the Foothills Medical Centre Neonatal Intensive Care Unit (NICU) over the next five years. Our financial strength also provides us with the ability to fund new or unexpected needs such as the urgent expansion of COVID-19 testing.

\$22.5M net fundraising revenue



\$13.8M

Calgary Health Foundation's Home Lottery



\$8.3M

Donations to the foundation



29%

Cost to raise a dollar

\$802K

Net revenue per full time employee

\$31.3M

Held in endowed funds

\$95.4M

Restricted funds committed to capital projects and program advancements

Fundraising revenue

\$13.8M

Lotteries (net)

\$4.2M

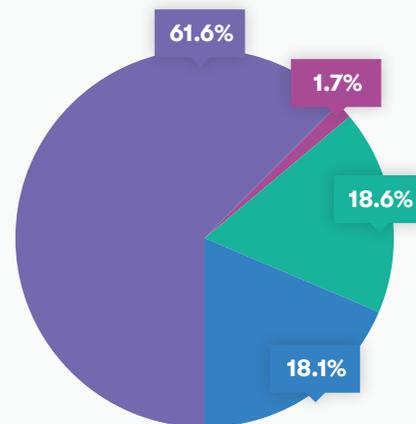
Major gifts & bequests

\$375K

Events (net)

\$4.1M

Annual programs



\$14.1M disbursements

\$8.4M

Capital projects & equipment

\$2.2M

Programs & education

\$3.4M

Research*

\$150K

Other health institutions

* includes disbursements to the University of Calgary

Newborns Need



\$51.5M

Raised to Date
as of March 31, 2021



Help us reach
our goal!

Scan to learn more

Highlight of disbursements



CARE

22,000

Holiday meals for frontline workers

\$200+

Made-in-Alberta ventilators to support ICU shortages

\$420K

In support of care and recreation therapy needs at Carewest



WELLNESS

3,018

Virtual visits via iPads between patients and their loved ones

45%

Increase in testing capacity for COVID-19 to 22,000 per day

\$215K

For therapy resources at the women's mental health clinic



RESEARCH

1,250

COVID-19 patients screened for the CATCO study

50%

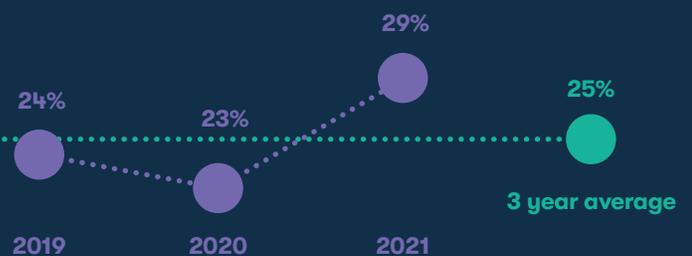
Long-term targeted rate in reduction of neonatal hypoxic-ischemic encephalopathy

40+

Scientists and clinical researchers committed to predict and prevent preterm birth

25%

Our three-year average cost to raise a dollar



2021 AUDITED FINANCIAL STATEMENTS

On May 26 2021, our independent auditors, Ernst & Young LLP, issued an unqualified audit report on the financial statements of the Calgary Health Trust operating as Calgary Health Foundation (as of October 2020) for the year ended March 31, 2021. The 2021 audited financial statements, including the independent auditor's report thereon, are available on the Calgary Health Foundation website (www.calgaryhealthfoundation.ca) or by contacting the Calgary Health Foundation office at (403) 943-0615.

The following information summarizes the financial position and the operations and changes in fund balances for the Calgary Health Foundation for the year ended March 31, 2021.

CALGARY HEALTH FOUNDATION		AS AT MARCH 31	
Summary of Financial Position			
		2021	2020
ASSETS			
Cash		\$78,214,326	\$73,864,791
Amounts receivable		\$581,186	\$741,457
Prepaid expenses		\$1,513,632	\$768,905
Investments - at market		\$91,737,058	\$74,453,110
Other Assets		\$2,353,970	\$1,215,658
		\$174,400,172	\$151,043,921
LIABILITIES			
Accounts payable & accrued liabilities		\$2,352,356	\$2,208,776
Charitable disbursements payable		\$3,089,855	\$8,033,010
Deferred revenue - lotteries & events		\$19,603,646	\$11,010,531
		\$25,045,857	\$21,252,317
FUND BALANCES			
Operating Fund		\$14,851,039	\$12,811,335
Restricted Fund		\$95,447,123	\$91,350,299
Endowment Fund		\$31,289,150	\$32,029,363
		\$141,587,312	\$136,190,997
ACCUMULATED REMEASUREMENT GAINS AND (LOSSES)		\$7,767,003	(\$6,399,393)
		\$174,400,172	\$151,043,921

2021 AUDITED FINANCIAL STATEMENTS

CALGARY HEALTH FOUNDATION		YEAR ENDED MARCH 31	
Summary of Operations & Changes in Fund Balances			
	2021	2020	
REVENUE			
Donations	\$8,241,804	\$12,536,317	
Lotteries (net)	\$13,829,272	\$11,301,726	
Events (net)	\$375,006	\$1,357,818	
	\$22,446,082	\$25,195,861	
Grants - Alberta Health Services	\$420,164	\$2,416,464	
Grants - Other Government	\$11,785	\$15,260	
Investment Income	\$3,549,160	\$4,630,210	
	\$26,427,191	\$32,257,795	
EXPENDITURES			
Operating expenses	\$6,924,102	\$6,128,610	
Excess of Revenue Over Expenditures Before Charitable Disbursements	\$19,503,089	\$26,129,185	
CHARITABLE DISBURSEMENTS			
Alberta Health Services	\$10,606,428	\$18,253,730	
University of Calgary	\$3,350,459	\$3,272,505	
Other Organizations	\$149,887	\$128,325	
	\$14,106,774	\$21,654,560	
Excess of Revenue Over Expenditures And Charitable Disbursements	\$5,396,315	\$4,474,625	
Fund balances, beginning of year	\$136,190,997	\$131,716,372	
Fund balances, end of year	\$141,587,312	\$136,190,997	



COVID-19
CARE

A team of champions: Dean's unexpected battle with COVID-19

“

We could not let the compassion and love of Dean’s care team go unnoticed. If it wasn’t for them, and the support they gave to me and my boys during this grave time, we wouldn’t have Dean with us here today.

JEANINE GORANSON



Dean and his family outside the hospital that saved his life.

Within just 14 days, Dean Goranson went from being healthy with no underlying health concerns to being intubated in the Intensive Care Unit after testing positive for COVID-19 two weeks prior.

Dean monitored his health while in quarantine with his wife and two teenage boys. During quarantine, Dean was experiencing the typical COVID symptoms of a fever, chills, and a headache, but it wasn’t until the fourteenth day of quarantine during breakfast that Dean’s breathing became quite laboured.

Dean’s wife, Jeanine, dropped him off at the Emergency Department expecting to see him in a few short hours after receiving some oxygen support.

She was blindsided when a call from the hospital left her with crippling uncertainty whether she would ever get to hug Dean or hold his hand one more time. It was two weeks before she and her boys got to wrap their arms around him again.

After being told by the ICU team that if he were not put on a ventilator, he would die, Dean said, “Do whatever you have to do; I’m not going to die and I don’t want to die.” These are the last words that Dean remembers saying to his care team prior to being intubated on a ventilator for five days.

Within 18 hours after admittance, Dean’s breathing was so laboured that he was transferred to the critical care of the Intensive Care Unit (ICU) team, and later the COVID unit, where they cared for more than just Dean’s frail condition.

Not being able to be by his side, Jeanine and their boys worried constantly about his condition. Beyond caring for Dean’s physical needs as he fought against the virus’ attack on his body, the care team in the ICU became the family’s champions, supporting Dean and bringing Jeanine along for every step in his recovery. They understood how important Dean’s family was to his wellbeing, and were diligent in ensuring Jeanine and the boys were connected and up to date on his condition, despite being unable to visit him in person.

Two weeks later, Dean walked out the doors of the hospital and into the front door of his home.

“

Do whatever you have to do; I’m not going to die and I don’t want to die.” These are the last words that Dean remembers saying to his care team prior to being intubated on a ventilator for five days.

The increased demand on ICU care

Foothills Medical Centre

1300+ PATIENTS ADMITTED

During 2020, the Foothills hospital ICU admitted to their unit over 1,300 patients and has been instrumental in the care of the most critically-ill.

Peter Lougheed Centre

800 PATIENTS ADMITTED

Through the COVID-19 pandemic, Peter Lougheed Centre's ICU expanded to 27 beds, caring for nearly 800 patients.

Rockyview General Hospital

475 CRITICAL CARE PATIENTS ADMITTED EACH YEAR

Approximately 475 patients who need critical care and life support are admitted to Rockyview General Hospital ICU each year.

South Health Campus

16 DEDICATED SPACES FOR CRITICALLY-ILL SPACES

In support of the pandemic response, South Health Campus shifted to focus on care for COVID positive patients and adapted its ICU from ten beds plus two CCU beds, to 16 dedicated spaces for the most critically-ill.

Source: Department of Critical Care Medicine - Calgary Zone



Scan to Watch:

Calgary physician Dr. Heather Patterson captures pandemic response on camera.

Donor gives a life-saving advantage in preparing for COVID-19 critical care

A gift from Rotary Club of Calgary North just prior to the COVID-19 pandemic had exponential impact in ways that no one could have anticipated. Thanks to their generous support, the Extracorporeal Life Support (ECLS) team at Foothills Medical Centre purchased a Parallel Simulator, a state-of-the-art training system that is customizable and portable so that it can be used in a variety of ways. Able to simulate numerous scenarios, this important piece of technology helped prepare teams for the increasing complexities of patients requiring life support due to COVID-19.

ECLS is a technique that allows clinicians to provide prolonged cardiac and respiratory support. ECLS has become the standard for this type care and can be used on people of all ages ranging from neonates to adults. Patients needing ECLS often experience situations in which their heart and/or lungs are not able to sustain life on their own. Some forms of life support assist heart and lung function so that it can continue for short periods of time to facilitate operations like open heart surgery. ECLS, on the other hand, can last for weeks if necessary.

Often ECLS is used on patients with the following conditions:

- When patients with lung or heart disease become critically ill and are candidates for a transplant;
- In situations where a patient's lungs are not able to provide enough oxygen to the body;
- When a patient's lungs cannot get rid of carbon dioxide even with assistance;
- When the heart is unable to pump enough blood to the body.



Scan to Watch:

Donor support for ECLS simulation means that care teams are prepared to provide urgent life-saving measures, even in the most difficult situations.

How your support advanced COVID-19 care

COVID-19 spotlight: rallying our frontline workers

During the holidays, when hospital rates were surging, donors shared the spirit of giving and appreciation through the Feed the Frontline campaign.

Your generosity resulted in providing 22,000 health care workers with Sunterra-supplied meals. It was a chance for the community to say 'thank you' and for our frontline workers to have some time to rejuvenate and fuel for their next shift.

“

I have worked for over 14 years as an RN and this has been the most heartfelt and rewarding gesture I have ever received as a frontline worker. I cannot underestimate the impact a simple “Thank you” from a family or that a patient brings, however, the kindness and thought that donors have put into this is overwhelming.

CAROLINE LOWTHER RN, BN

Breakthrough investments made in COVID-19

\$4M disbursed to COVID-19 related initiatives



 O₂ monitoring devices

Reducing extended hospitalization through the use of oxygen monitoring devices that allowed for the monitoring of patients with complex diseases after they are released from hospital to the comfort of their own home.

 200 ventilators

Funding for a made-in-Alberta prototype that led to the manufacturing of 200 ventilators when the province was facing challenges in supply chain.



ENHANCING
WELLNESS
IN OUR COMMUNITY

New experiences enhance quality of life:
virtual reality provides both recreation and
cognitive therapy

“

[VR technology] has provided an opportunity for our residents to explore virtual worlds and engage with technology on a level that they previously thought impossible.

KRISTINA MCGOWAN,
RECREATIONAL THERAPIST, CAREWEST

It couldn't have come at a better time as COVID-19 restrictions left many in long-term care facilities facing an isolating reality of limited social interactions and reduced quality of life programs. However, the staff at Carewest remained resourceful and continued to look for opportunities to keep residents socially and cognitively engaged.

The arrival of virtual reality (VR) equipment has given residents more opportunities to engage in a world they love.

With endless opportunities to engage in experiences that otherwise may be impossible, residents can dive into 'larger than life' worlds. The technology offers an immersive experience to explore personally relevant new and old locations or the joys of participating in activities such as rock climbing and swimming. For residents experiencing social isolation or with physical limitations, these experiences can be things they've always dreamed about.

The use of VR technology also has benefits for supporting overall mental health, provides brain stimulation and builds cognitive capacity, which has been proven to be critical factors in an individual's overall quality of health.

Certain uses of the technology can also be used in therapeutic treatments for anxiety, depression, PTSD, pain management and other health concerns. The power of VR is that it creates a safe, controlled



John and Kristina prepare for a fast trip on a roller coaster.

experience and even offers other sensory tools such as smells that promote relaxation or trigger a memory.

In the most isolating and uncertain year, this technology has opened up endless possibilities for residents.



The use of VR technology also has benefits for supporting overall mental health, provides brain stimulation and builds cognitive capacity, which has been proven to be critical factors in an individual's overall quality of health.

Who does Carewest care for?



1,016

Long-term care residents

285

Transitioning rehab and recovery patients from acute care

40

Supportive living residents (level 4)

45

Alternative level of care residents that require less acute support from acute care

8

Community beds for supportive living

180

Active clients in C3 outpatient day support program

49

Clients under 65 who participate in Young Adult Day (YADS) program, who may suffer from chronic illness or physical disabilities

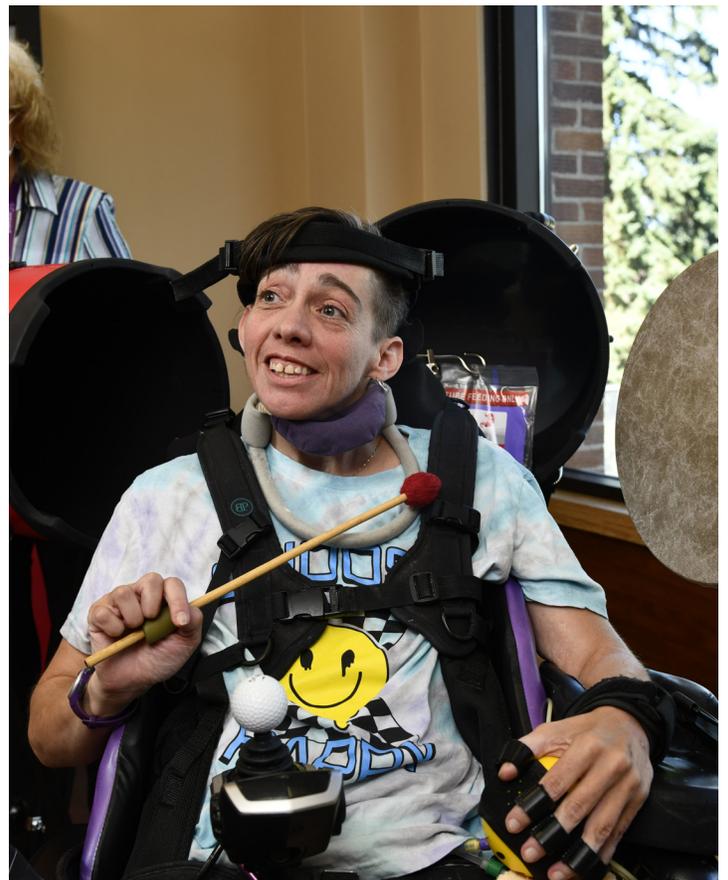
697

People in training in the Supportive Pathways Program, providing knowledge and skills to improve the quality of life for people living with dementia

400+

Veterans and RCMP members supported by the Operational Stress Injury (OSI) clinic

source: Carewest Today 2020 & 2021



How your support advanced COVID-19 wellness

COVID-19 spotlight: an early investment leads to five million* tests complete

Thanks to donors, a \$1.7M investment in testing capacity led to immediately doubling testing early during the pandemic and set the baseline needed to achieve 22,000 tests per day* in October when COVID transmissions began to peak.

Not only was this surge in testing needed for tracing, but testing data was a key source to inform public health decisions to ensure Albertans' safety.

*source: Alberta Public Labs (APL)

Your donations are connecting people to health resources and their loved ones like never before.

Breakthrough investments made in COVID-19

\$4M disbursed to COVID-19 related initiatives



7 Shelters assisted

Giving assistance to seven shelters with emergency preparedness by providing critical supplies to ensure the safety of our vulnerable citizens.

52,000 Text4Hope subscribers

Support for more than 52,000 people who subscribed to Text4Hope, a messaging service that uses cognitive behavior therapy to provide words of hope and inspiration.

The joy of music

Bringing the joy of music to long-term care residents facing visitation restrictions and isolation with curb-side concerts.

177 iPads purchased

Purchase of 177 iPads to connect patients and long-term care residents to loved ones, providing thousands of hours of conversation and laughter.



ADVANCING CRITICAL
RESEARCH

From HELLP to hope: maternal clinical
research that is saving lives

“

I don't have words to describe my gratitude to donors, but it is bigger than the word huge. What I went through was so scary, and it's incredible to know that there are people who are willing to make a positive impact. It changed my life, and I am so grateful to be given another chance. Because I didn't think I would be leaving the hospital that day.

LYNDSEY



Lyndsey and her family are filled with hope thanks to testing now available.

While pregnant with her first child, Lyndsey experienced HELLP syndrome, a life-threatening condition experienced in later stage pregnancy and post-partum that is linked to preeclampsia. Today, she is able to consider having a second child, knowing the screening and prevention program is now available that would help with early detection of preeclampsia risks and prevention of her traumatic experience.

When Lyndsey became pregnant, she was a 35-year-old healthy woman. She enjoyed an uneventful pregnancy until she started feeling severe abdominal pain at 33 weeks. Lyndsey brushed it off as a small stomach bug or pulled muscle; then she started having nosebleeds and was regularly spitting up handfuls of blood.

As a first time mother, Lyndsey wasn't sure what was normal for a third trimester, but her nursing training logic told her that she had increased blood volume due to pregnancy. The pain continued and a rash formed.

“I would get up, sit in the shower and cry -- praying to God that everything was okay. I had no idea what was going on,” describes Lyndsey.

She was admitted to hospital several times, terrified for herself and her baby. Doctors explored everything from preterm labour to Braxton Hicks to irritable uterus.

Then Lyndsey met Dr. Jo-Ann Johnson, who was able to assure her that her baby was healthy but began asking questions about Lyndsey's blood pressure, medications and headaches. With Dr. Johnson's knowledge and experience with HELLP syndrome, Lyndsey was immediately sent for blood work.

“I got to the clinic and had my bloodwork done. I remember sitting there reading a book and thinking I couldn't wait to go home. Then, all of a sudden, this whole team of people came in and told me to call my husband because I was having the baby today, and that I was in critical, life-threatening emergency condition.”

Via C-section, Lyndsey delivered her daughter at 38 weeks after being diagnosed with HELLP syndrome linked to preeclampsia. Her body was already becoming toxic from liver failure, and she was showing preeclampsia related symptoms of hyperreflexia, which eventually turns into uncontrollable seizures.

Extreme measures were required to ensure that Lyndsey didn't experience extensive blood loss that would have put her life at risk in the days following. She then underwent close monitoring for months to ensure she didn't have a heart attack or stroke.

How you are helping preeclampsia testing evolve

90% DETECTION RATE

Recent research has shown that 90 percent of pregnancies that develop preterm preeclampsia can be detected using a first trimester preeclampsia screening.

How baby aspirin is saving lives

82% REDUCED OCCURANCE

Research has also shown that baby aspirin can reduce the occurrence of early (less than 34 weeks gestation) preeclampsia by 82 percent and preterm (less than 37 weeks gestation) preeclampsia by 62 percent.

How preeclampsia screening is leading to early detection

765 WOMEN SCREENED

Of these screenings, eight percent of the women tested have been identified as at risk of developing preeclampsia and have been given baby aspirin for prevention. Thanks to you, these women and their babies are now set on a path to avoid the devastating consequences of preeclampsia.

Thanks to the support of donors, the implementation of preeclampsia screening and prevention study (IMPRESS) is saving lives

Preeclampsia refers to the condition of persistent high blood pressure that develops during pregnancy. Found in two to five percent of women regardless of age, family history or health, this condition is often unexpected. Typically preeclampsia presents after 20 weeks of pregnancy but may also occur postpartum. While the exact cause of this condition is unknown, the impact that it can have on both mother and baby is substantial and can lead to severe outcomes or even death.

Thanks to your generosity, Dr. Jo-Ann Johnson and her team are working to find new and better ways to detect preeclampsia as early as possible - because when it comes to the health of our loved ones, good enough is not enough.

Lyndsey credits divine intervention for leading her to Dr. Johnson that day through the support of her obstetrician and her own medical knowledge as a nurse. She was very aware of the Cara HELLPS story, and had some nursing friends who provided care to Cara in her last days. Lyndsey knows too well how dire her situation was and how different her story could have been.

“

I think [having this screening] would have made all the difference to me personally. It would have given me a different relationship with the health care team, more surveillance, more follow-up and I think my concerns would have been heard more. I would have been cared for more holistically, and that's my wish for every family and every woman.

LYNDSEY

How your support advanced COVID-19 research

COVID-19 spotlight: an investment in knowledge that doesn't stop

Foundation support for the establishment of a biorepository will allow for the long-term preservation of positive COVID-19 samples, giving Alberta's world-class medical-scientific researchers local access to the biological material they need to further study the virus.

There are currently more than 30 (and growing) research projects in Alberta in need of positive samples to support their coronavirus-related research. This is

*source: Alberta Public Labs (APL)

an investment in the future as these samples will be available long-term to benefit collaborative research projects across the province and even the world.

Your donations have made a significant impact on the detection, care and treatment of COVID-19 over the past year.

Breakthrough investments made in COVID-19

\$4M disbursed to COVID-19 related initiatives



Developing further understanding

Advancing our understanding of the virus and others like it through the establishment of a biorepository for human COVID-19 samples across the province to understand transmission and limit spread.

International collaboration through CATCO

Investing in treatments for critically-ill COVID positive patients through the funding of an international CATCO study that has paved the way for future discoveries and made possible advancements within a year that previously took up to five years.

Advancing treatment protocols

Early in the pandemic, Calgary Health Foundation became the primary funder of the Alberta HOPE COVID-19 trial, a collaboration between Researchers and Health Professionals at the University of Calgary, University of Alberta and Alberta Health Services. Your donation meant quick response to the unknown nature of the virus and lack of any proven treatments for this severe condition. It remains imperative that we work together and use the resources we have to try to improve the lives of Albertans during this global pandemic.

A close-up photograph of a pregnant woman's hands resting on her belly. She is wearing a white ribbed top. Her hands are positioned over her midsection, with her fingers gently touching. Her nails are painted a dark red color. The background is a bright, out-of-focus light source, possibly a window, creating a soft, ethereal glow.

MATERNAL & NEWBORN
HEALTH

A commitment to breakthroughs in
newborn and maternal health

Newborns Need is giving every newborn a fighting chance

1 in 8 

Alberta's rate of preterm birth is the highest in Canada. Our rate of admission to a Neonatal Intensive Care Unit (NICU) of 1 in 8 is higher than the national average of 1 in 10.

These babies are born too sick, too early and too small. This leads to the busiest, highest level of intensive care NICU in the country at Foothills Medical Centre.

We are in the final push to build a world-class NICU at the Foothills Medical Centre – because for southern Alberta only the best will do!

Built and equipped nearly 25 years ago with only 39 beds, it is 1/3 smaller than similar NICU's across the country. And while Foothills' care outcomes are among the best in the country, the existing space cannot accommodate the innovations and best practices that have become today's standard of care.

To address this urgent need, Calgary Health Foundation, Alberta Health Services and the Government of Alberta have committed to funding a new NICU at Foothills Medical Centre. Now more than ever we need your support in making this vision a reality!

Healthy moms, healthy babies, healthy families

Newborns Need is a collaborative investment of \$152 million between Calgary Health Foundation, Alberta Health and Alberta Health Services. It is a commitment to maternal and newborn health, investing in programs, research and infrastructure, to ensure the best possible outcomes for the most vulnerable newborns and their families.

This is the biggest investment in maternal and newborn health currently underway.

Newborns Need



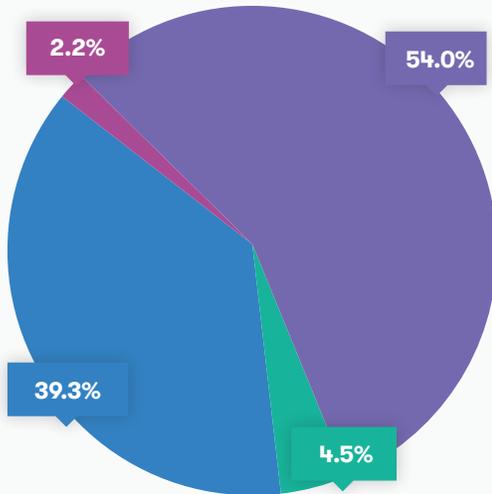
\$51.5M

Raised to Date
as of March 31, 2021



Help us reach our goal!

Scan to learn more



\$18.3M NEWBORNS NEED PROJECTS FUNDED TO DATE

\$9.9M Care initiatives at Calgary hospitals

\$824K Equipment and wellness programs in the community

\$7.2M Research in prediction, prevention and intervention

\$338K Southern Alberta Neonatal Transport to support an integrated network of care

The Foothills Medical Centre NICU is the most significant investment of the Newborns Need campaign with fundraising still underway.

Funded projects already making an impact

Rockyview General Hospital

- Labour and delivery central monitoring for mom & baby

Foothills Medical Center

- Infant stabilization room

Peter Lougheed Centre

- A new maternity and NICU ward

South Health Campus

- An addition of a care by parent room to NICU
- A custom kid-friendly designed pediatric emergency pod

Expansion of the Shaganappi community health complex for prenatal and postpartum health services

MUMs program for mental health support during postpartum

IMPRESS study to advance detection and intervention of preeclampsia

Detection and prevention of pre-term birth

Community-focused science to help families predict and prevent preterm birth

Alberta has reached such a critical point in preterm births that more than 40 scientists and clinical researchers have launched an unprecedented initiative to find tangible solutions for families. Funded by \$5M in community donations through the Alberta Children's Hospital Foundation and Calgary Health Foundation, the team aims to increase global knowledge and provide immediate real-world health benefits to expectant mothers and newborn babies in our community.

“

With experts collaborating from the lab to the clinic and into our community, southern Alberta families will become the first to benefit from breakthroughs in preterm birth interventions.

MIKE MELDRUM
PRESIDENT & CEO, CALGARY HEALTH FOUNDATION

The need for more investment in women

Women make up 51% of the population, and represent only 2% of Canadian research funding is dedicated to women's health.

Sex and gender-related disparities continue to persist in Canada's health system. Women are more likely to die of preventable illnesses and bear a higher burden of chronic illnesses.

source: Canada, budget 2021



Investments to advance understanding of women's health and the impact on family wellness:

Dr. Eliana Castillo & Dr. Verena Kuret

PROJECT: Vaccinations for mother-infant health. The project aims to provide Albertans of reproductive age, pregnant or breastfeeding and their families with effectiveness and safety data to make healthy choices. It will also provide clinicians, public health officials and decision-makers with necessary metrics for program implementation and evaluation of the COVID-19 vaccine.

Dr. Stephen Wood

PROJECT: Hypoxic-Ischemic Encephalopathy (a type of brain dysfunction when not enough oxygen or blood flow is received over a period of time) complications during birth can be devastating for families. An Alberta-wide study is underway to identify early indicators of HIE, with the long-term goal of a 50% reduction in cases. Newborns experiencing HIE may die or face debilitating and life-long conditions, creating a heavy burden on the health system. And ultimately, HIE has a traumatic and heart-breaking experience for families and often care providers.



A COMMITMENT TO
**MENTAL
HEALTH**

Ensuring the right care at the right time as demand for mental health and addiction resources is increasing

The need for an integrated mental health network

All in, the economic burden of mental illness in Canada is an estimated \$51 billion per year including health care costs, lost productivity and reductions in health-related quality of life.



Focus on wellness:

Partnership with community agencies and mental health experts to ensure the **right care** at the **right time** at the **right place**.

Focus on research:

Over \$2.5M in funding committed to research that enhances our understanding of key **challenges in mental wellbeing, reduces stigma in care** and creates **better support systems for vulnerable citizens**.

Focus on care:

Enhancing critical care access with a **trauma informed approach** to space design and care in hospital emergency departments and short-term stay units. Establishing a better model for **transition support from critical care environments to community-based services**, closing the gaps for continuous care.



The human cost

- People with mood disorders are at much higher risk of developing a long-term medical condition.
- People with mental illness are two times more likely to have a substance use problem versus the general population.
- People with mental illness and addiction are more likely to die prematurely versus the general population.

source: camh (The Mental Health Crisis Is Real | CAMH)

The growing need for mental health services

Mental health discharge rates



Research investments enhancing our approach to mental health support

Dr. Monty Gosh

PROJECT: Improving Calgary’s methamphetamine intoxication management in emergency departments. A quality improvement and implementation study.

Dr. Dallas Seitz

PROJECT: PREcision care with information, science and experience: integrating data on homelessness and police service to better inform care.

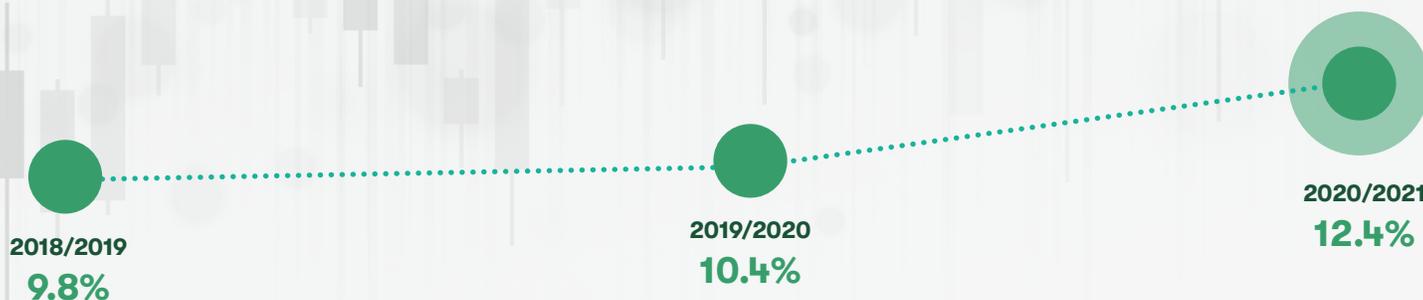
Dr. Jacqueline Smith

PROJECT: A holistic approach to exploring mental health stigma in emergency settings.

Change Can’t Wait

PROJECT: Testing new initiatives in mental health and addiction through a fast pilot process. This is part of the City of Calgary’s Community Investment Table and in partnership with Calgary Health Foundation, Calgary Foundation, Hunter Family Foundation, United Way of Calgary and Area and Viewpoint Foundation.

Mental health readmissions within 30 days



Emergency room visits due to mental health & addiction concerns



HOSPITAL

LOTTERIES

Our hospitals have been the
lifeline for our community

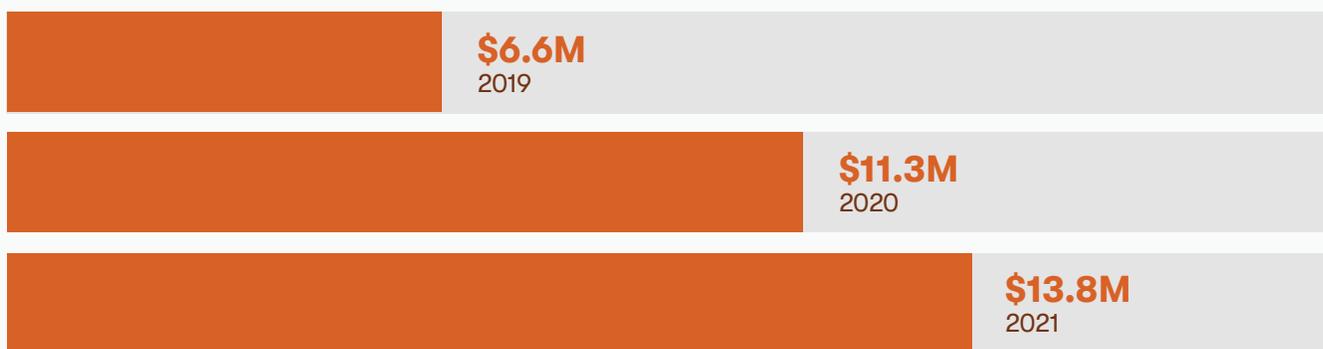
Investing in lotteries to invest in health

Our Foothills Hospital Home Lottery and Hospital Home Lottery are programs that have a great return on investment. They are essential to our overall success and contribute 62%, or a net of \$13.8M, to our total fundraising revenue. We continuously evaluate the return on our investment of both of our lottery programs and consider it an enterprise of our operations.

The expenses of our lottery programs include the purchase of all prizing and investments in marketing. We make every effort to run our lotteries as efficiently and effectively as possible. We are proud to say that we maintain two extremely efficient lottery programs, and benchmark efficiency to like-programs across Canada.

Our lotteries contributed 62% to our total fundraising revenue.

Financial growth for lottery programs (net)



Scan to meet the 2020/2021 home lottery winners

“

The hospitals have always been important to us because we've had their help so we always like to know they are there in case we need them.

JENILEE HEMSING
HOSPITAL HOME LOTTERY EARLY BIRD WINNER

A true win-win with your support of lotteries

\$13.8M*

Net revenue for health care
*including revenue from the WinWin lottery

276,000

 TICKETS PURCHASED

Foothills Hospital Home Lottery and Hospital Home Lottery tickets purchased to support our hospitals

\$5,373,650

 JACKPOT TOTAL

Total of our biggest jackpots ever*
*represents both Foothills Hospital Home Lottery and Hospital Home Lottery



How your 2020 support benefits Albertans

- New CathLab for Foothills Medical Centre
- Quick & agile response to COVID-19
- Early support for rising mental health needs

2021

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*as of March 31, 2021

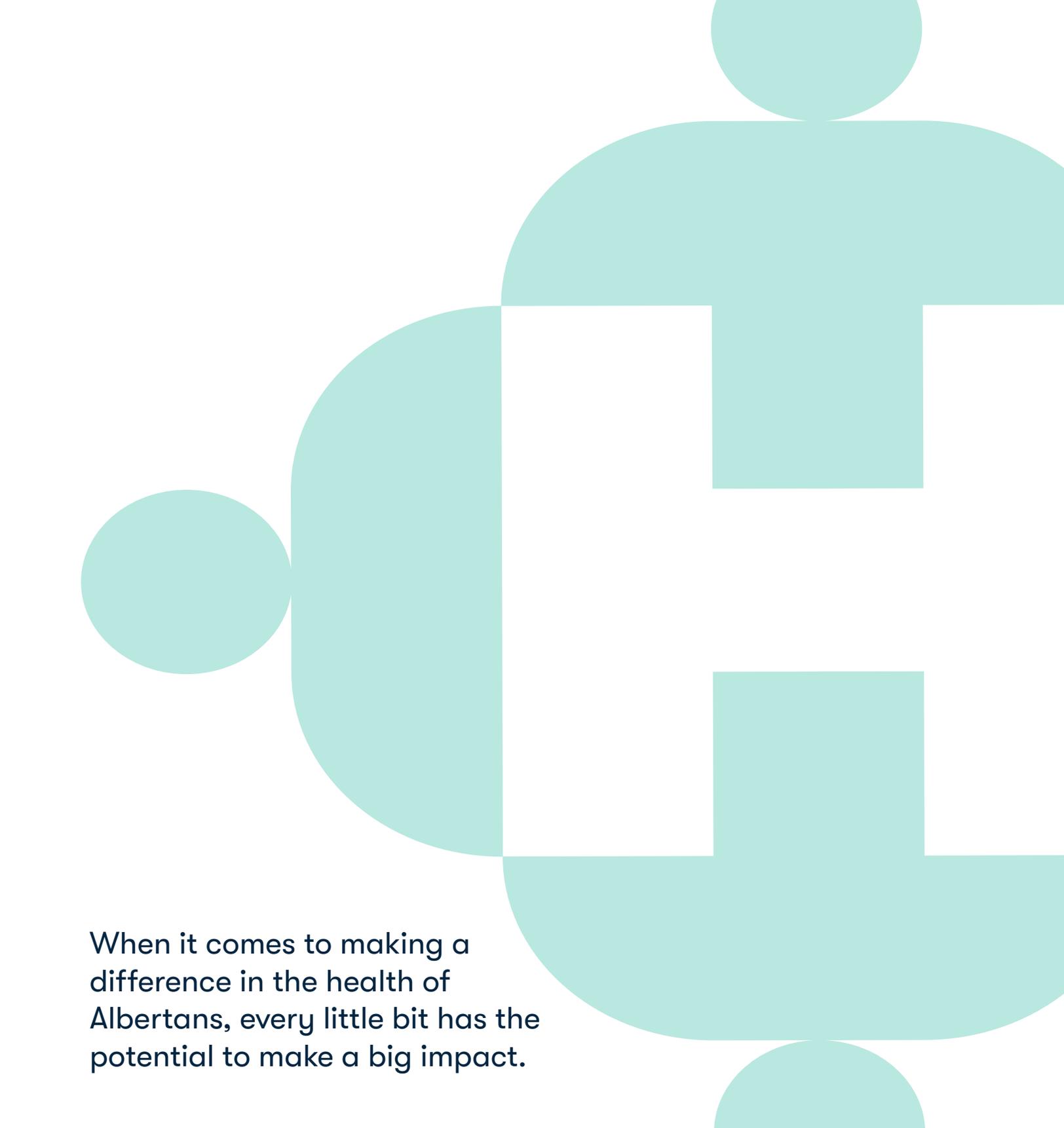


Photograph by Dr. Heather Patterson



TO OUR DONORS, VOLUNTEERS & PARTNERS

THANK YOU



When it comes to making a difference in the health of Albertans, every little bit has the potential to make a big impact.



CALGARY HEALTH FOUNDATION

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