Celebrating 25 years of impact
25 years of impact

A message from our leadership

Over the last quarter-century, philanthropy has transformed thousands of lives in our community by accelerating health care innovation and improving access to life-changing procedures.

Over the last decade, our donors have helped open a new NICU and Maternal Care Unit at Peter Lougheed Centre, a Pediatric Emergency Pad at South Health Campus and invested in pediatric simulation training in the City of Calgary and rural communities. We have invested your generous contributions in responding to the COVID-19 pandemic; advancing specialized services like Safeworks, Grief Support and the Calgary Sexual Assault Response Team; and creating a more home-like environment for Carewest residents.

These accomplishments demonstrate the breadth and reach of the Calgary Health Foundation’s unique model, which touches all aspects of health care to support the growing needs of people in Calgary and Southern Alberta. This year, we’re motivated to progress care for mental health and substance use patients, expand women’s health offerings, improve outcomes for critically injured neurology patients and offer genomic screening to more Albertans.

Our founders considered philanthropy a civic duty and an expectation of their roles as community leaders. Their vision and passion inspire us to continue to invest boldly, challenging the status quo.

Together, we will continue to attract leading health care expertise to our community and leverage opportunities in precision and emerging medicine. Thank you for contributing to 25 years of community impact by investing in the Calgary Health Foundation.

SANDY EDMONSTONE
Board Chair, Calgary Health Foundation

Since the amalgamation of health care foundations in Calgary in 1996, over $550 million has been raised in health care, wellness and research. The impact of your generous contributions is profound.
Spotlight on how donors are advancing care for Southern Alberta

Care

1000+
MORE SURGERIES PER YEAR
are now possible with the opening of an additional operating room at Peter Lougheed Centre.

11,000+
PATIENTS
undergo minimally invasive diagnostic and interventional cardiac procedures in the cardiac cath-lab at Foothills Medical Centre.

1.7X
INCREASE IN DEMAND
for Cardiopulmonary Stress Tests (CPET) due to the rise of Long COVID supported by donors with a new piece of equipment at Rockyview General Hospital.

Wellness

256
REFERRALS
to community agencies representing health, housing, substance use treatment and various other resources via the Recovery Coaches four month trial.

3,700
WOMEN
tuned into Calgary Health Foundation’s virtual conversations, which took on the uncomfortable topics in women’s health.

1.5X
HIGHER RATE OF OVERDOSE
reported in 2020 than in previous years making additions to triage for the 40 bed Renfrew Recovery Centre critical.

Research

>1.8M
UNDER INVESTIGATION
completed to six projects advancing care for high-risk pregnancies and complications at birth.

Nine areas

UNDER INVESTIGATION
via the P4 co-hort study for the prediction, prevention and intervention of preterm birth.*

*with a total investment of $9M with the Alberta Children’s Hospital Foundation

800,000
INDIVIDUALS
age 18 to 65 identified as having substance use and/or a mental health issue in Alberta as part of the PRECISE-MH research data collection*.

*as of April, 2018

Foothills Medical Centre

Almost $600K (during fiscal year 2021)
Funded the Blood Coagulopathy Monitoring Project with the support of a generous donor, led by Dr. Prism Schneider, to better predict the risk of blood clotting related complications.

Peter Lougheed Centre

$1.37M total investment by Calgary Health Foundation donors
Completed funding to open the expansion of eight care spaces within the Hemodialysis Unit to provide care for an additional 48 patients.

Rockyview General Hospital

Almost $25,000 to advance care
Provided state-of-the-art equipment and training in the area of CPR intervention for cardiac arrest patients to provide the best in life-saving technology.

South Health Campus

$144K in funding to ensure critical equipment is available
Provided two new Manoscan towers and scopes for the Gut Motility Clinic to optimize high-resolution diagnostics for patients experiencing digestive issues due to nerves and muscles of the gut not working in coordination.

Carewest continuing care

Close to $17K in donor funding to enhance quality of life programming.
Fundded enhancements to quality of life programming such as tablets for residents, flowers for the horticulture program and bringing spaces to life through art murals.

Community care

$30K to ensure the best support during the more difficult times.
Supported advancements made to the Grief Support Program providing specialized individual and group therapy for those needing care in grief and bereavement.
Your support provides funds that enhance care, wellness and research to transform lives of patients in Southern Alberta and around the world.

$27M

Lotteries (net)
Events (net)
Major gifts & bequests
Annual programs

61.9%
25.1%
11.3%
1.7%

NET FUNDRAISING REVENUE

Lotteries (net)
Events (net)
Major gifts & bequests
Annual programs

$16.9M
Lottery
(up from $13.8M in
2021)

$9.9M
Donation revenues
(up from $8.3M in
2021)

$456K
Event revenues
(up from $375K in
2021)

23%
Cost to raise a dollar
(three year average
of 25%)

TOTAL DISBURSEMENTS

$10.5M

Capital projects & equipment
Programs & education
Research*
Annual programs

*Includes disbursements to the University of Calgary

Disbursements by location

$10.5M

FOOTHILLS MEDICAL CENTRE
PETER LOUGHEED CENTRE
ROCKYVIEW GENERAL HOSPITAL
SOUTH HEALTH CAMPUS
COMMUNITY HEALTH & CALGARY ZONE
CAREWEST CONTINUING CARE
RESEARCH
OTHER ORGANIZATIONS

$65M
Committed to future projects

Note: Calgary Health Foundation disburses money to Alberta Health Services (AHS) and University of Calgary Cumming School of Medicine at agreed increments or at project and purchase completion as a reimbursement. Total disbursements represents project dollars that have been reimbursed, however is not inclusive of all the project commitments Calgary Health Foundation has made.
### 2022 audited financial statements

On May 25, 2022, our independent auditors, Ernst & Young LLP, issued an unqualified audit report on the financial statements of the Calgary Health Foundation for the year ended March 31, 2022. The 2021/22 audited financial statements, including the independent auditors’ report thereon, are available on the Calgary Health Foundation website (https://www.calgaryhealthfoundation.ca/impact-reporting/) 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, 2022.

**CALGARY HEALTH FOUNDATION**

#### Summary of Financial Position

<table>
<thead>
<tr>
<th></th>
<th>AS AT MARCH 31</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2022</td>
</tr>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$84,015,092</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>467,273</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>2,563,357</td>
</tr>
<tr>
<td>Investments – at market value</td>
<td>96,502,220</td>
</tr>
<tr>
<td>Other assets</td>
<td>2,441,450</td>
</tr>
<tr>
<td><strong>LIABILITIES</strong></td>
<td></td>
</tr>
<tr>
<td>Accounts payable &amp; accrued liabilities</td>
<td>2,414,150</td>
</tr>
<tr>
<td>Charitable disbursements payable</td>
<td>2,617,627</td>
</tr>
<tr>
<td>Deferred revenue – lotteries and events</td>
<td>17,304,362</td>
</tr>
<tr>
<td><strong>FUND BALANCES</strong></td>
<td></td>
</tr>
<tr>
<td>Operating fund</td>
<td>18,801,008</td>
</tr>
<tr>
<td>Restricted fund</td>
<td>106,883,577</td>
</tr>
<tr>
<td>Endowment fund</td>
<td>33,335,927</td>
</tr>
<tr>
<td>Accrued remeasurement gains</td>
<td>5,945,439</td>
</tr>
<tr>
<td><strong>Summary</strong></td>
<td>$185,989,392</td>
</tr>
</tbody>
</table>

### Summary of Operations & Changes in Fund Balances

**REVENUE**

<table>
<thead>
<tr>
<th></th>
<th>2022</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donations</td>
<td>$9,940,349</td>
<td>$8,214,804</td>
</tr>
<tr>
<td>Lotteries (net)</td>
<td>14,910,919</td>
<td>13,829,272</td>
</tr>
<tr>
<td>Events (net)</td>
<td>455,770</td>
<td>375,004</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td>$27,307,038</td>
<td>$22,446,082</td>
</tr>
<tr>
<td>Grants – Alberta Health Services</td>
<td>$434,471</td>
<td>$420,164</td>
</tr>
<tr>
<td>Grants – Other Government</td>
<td>6,376</td>
<td>11,785</td>
</tr>
<tr>
<td>Investment income</td>
<td>6,949,014</td>
<td>3,549,256</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$34,696,899</td>
<td>$26,427,191</td>
</tr>
</tbody>
</table>

**EXPENSES**

<table>
<thead>
<tr>
<th></th>
<th>2022</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating expenses</td>
<td>6,719,280</td>
<td>6,924,102</td>
</tr>
<tr>
<td><strong>Excess of Revenue</strong></td>
<td>$27,977,619</td>
<td>$19,503,089</td>
</tr>
<tr>
<td><strong>Excess of Revenue over</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Expenditures before</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Charitable Disbursements</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Alberta Health Services</strong></td>
<td>$6,724,557</td>
<td>$10,606,428</td>
</tr>
<tr>
<td><strong>University of Calgary</strong></td>
<td>3,559,850</td>
<td>3,350,459</td>
</tr>
<tr>
<td><strong>Other organizations</strong></td>
<td>2,603,132</td>
<td>1,989,877</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>$10,544,539</td>
<td>$14,105,777</td>
</tr>
<tr>
<td><strong>Excess of Revenue over</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Expenditures and Charity</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Disbursements**</td>
<td>$17,433,080</td>
<td>$5,396,315</td>
</tr>
<tr>
<td><strong>Fund Balances, beginning of year</strong></td>
<td>$141,587,312</td>
<td>$136,190,997</td>
</tr>
<tr>
<td><strong>Fund Balances, end of year</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Summary</strong></td>
<td>$185,989,392</td>
<td>$174,400,172</td>
</tr>
</tbody>
</table>
Looking at pictures, both old and new, reminds us of how the characteristics, vision and values of our ancestors weave through the decades, providing a foundation to successive generations. The Calgary Regional Health Authority, our founding board members, and the volunteer members of our development councils have spent countless hours making sure that the Calgary Health Trust family is ready to face the future. The result is exciting.

CALGARY HEALTH FOUNDATION ANNUAL REPORT, 1996-1997
Making better possible together

Health care impacts all of us at some point in our lives. Thanks to the generosity of donors, Calgary Health Foundation’s investments help to ensure we face the best possible outcomes during all life stages, from an infant’s first critical moments of life to the most comfortable end of life care.

Working with Calgary’s hospitals, Carewest continuing care and community health programs, community philanthropy laid the groundwork for the care, research and advancements that are possible today.

Since 1996, Calgary Health Foundation’s unique ability to connect donor interests to areas of health that really matter has resulted in significant breakthroughs. We tackle complex community health challenges such as mental illness and harm reduction; we work with hospital leaders to advance exceptional services; and we partner with Carewest to enhance continuing care for those who have an extended transition back home or require specialized supports in their last home.

Prior to 1996, Calgary hospitals, continuing care and other community health programs were supported by individual health foundations. Their work was incredible, but only reached as far as their walls allowed. As chair of the Calgary Regional Health Authority, tasked with restructuring the health care system, Mr. Bud McCaig saw an opportunity for greater impact and more efficiency if the foundations amalgamated.

With a bold vision and strong leadership, Mr. McCaig and fellow philanthropic business leaders reshaped health care’s charitable sector in Calgary. Foothills Hospital Foundation, Carewest Foundation, Mountainview Community Health Foundation, Rockyview Hospital Foundation, the Calgary General Hospital Foundation and, later, the Grace Hospital Foundation for Women amalgamated and brought loyal donors together for a greater mission under what is now Calgary Health Foundation.

Our collective efforts have raised over $550M for health care to revolutionize health outcomes. These accomplishments are outstanding and demonstrate the breadth and reach of the Foundation’s unique model to touch all aspects of health care delivery and to work in collaboration with Alberta Health Services to meet the diverse needs of people across the city and throughout Southern Alberta.

An inspirational & empowering foundation

It took a bold vision that inspired many others to pave a new way of thinking about health care and philanthropy. Many leaders of that time considered philanthropy as a civic duty and an expectation of their roles. Because of their vision and passion, a quarter of a century later, we are still making bold investments that are challenging the status quo, investing in innovators with incredible vision, and striving for world-class care.
25 investments changing health care

1. Invested in an Echocardiography Unit at the Rockyview General Hospital.
2. A campaign for Colonel Belcher that resulted in $2 million to support Veteran care at Carewest.
3. Funded NeuroArm, a PET and CT Scanner at Foothills Medical Centre.
4. Opened Stephenson Cardiovascular MR Centre with our partners at the Labin Institute and spearheaded by its namesake, the late Ken Stephenson.
5. Established the Move & Mingle program to assist vulnerable seniors in the community build core stability to prevent falls and build mental wellness through connection.
6. Supported iSuite, which was six state-of-the-art and linked surgical suites located at Foothills Medical Centre, Peter Lougheed Centre and Rockyview General Hospital.
7. Opened a Bone Marrow Transplant Unit.
8. Funded a world-class Interventional Radiology Suite at Peter Lougheed Centre.
9. Funded art, music and horticultural programs at Carewest to enhance wellness and therapy programs for residents.
10. Purchased the da Vinci Robot at Rockyview General Hospital, enabling surgeons to perform delicate and complex operations with the use of robotic technology.
11. Through the Calgary Firefighters Burn Treatment Society funded transformational care at the Firefighters Burn Unit.
12. Opened the Southern Alberta Institute of Urology.
13. Established the Bob Glasgow Grief Support Centre at Richmond Road Diagnostic Treatment Centre.
14. Foothills Medical Centre opened the Interventional Trauma Operating Room, only the second of its kind in the world. This novel model was a catalyst for advancing how we can integrate technology to all for faster diagnosis and more comprehensive treatments than ever before.
15. Advanced cardiac care with the opening of the Cardiac Hybrid Operating Room.
17. Purchased new virtual reality equipment to support treatment for Post-Traumatic Stress Disorder (PTSD) at the Operational Stress Injury (OSI) Clinic.
18. Redeveloped a new, private space for the Pregnancy and Infant Loss program as families go through some of their toughest moments.
19. Redeveloped a new Neonatal Intensive Care Unit (NICU) and Maternal Care Unit at Peter Lougheed Centre.
20. Funded a Pediatric Emergency Pod at South Health Campus for the growing pediatric population in Calgary’s south.
21. Expanded simulation training across the city and mobilized the program to serve rural communities.
22. Advanced programs like Safeworks with a mobile custom van to support community outreach, and the Calgary Sexual Assault Response Team (CSART) with the Third Option program, giving victims more choice to pursue legal action.
23. Raised over $1 million for Carewest through the Close to Home campaign to create a more home-like environment for residents in Carewest’s diverse facilities.
24. Funded new surgical hip tables across Calgary for the establishment of anterior hip replacement surgery, resulting in shorter hospital recovery time for patients.
25. Opened an expansion to the hemodialysis unit at Peter Lougheed Centre to support patients in severe kidney failure.

And more...
- Funded hundreds of education and scholarship opportunities for care providers.
- Purchased thousands of pieces of equipment to further advance care and outcomes.
- Invested in clinical research that has translated to moving care practices forward in wellness, recovery and hospital programs.
- Partnered on revolutionary campaigns such as Reach! and Partners in Health to establish world-class health institutes and programs.

Looking Forward

These are only a few of the many visionaries within our health system that Calgary Health Foundation is partnering with to improve people’s lives, and now is our time to lay the foundation for the next 25 years.
Major investments & campaigns

Empowering breakthroughs today, tomorrow and beyond

With donor support, Calgary Health Foundation has several larger, multi-year commitments to advance care in a number of areas of health. While donors have brought our fundraising efforts closer to the finish line, some projects are still in development.

A note on financial reserves:

Calgary Health Foundation’s investments range in size and financial commitment. Revolutionizing health outcomes involves a multilayer approach of smaller incremental investments and larger commitments to establish world-class centres.

Working in partnership with Alberta Health Services on larger capital projects means that Calgary Health Foundation holds restricted dollars in reserve until the project is ready to go forward. The Foundation reimburses expenses on the basis of an established timeline agreement with the final money being transferred at the completion of the project.

Newborns Need

Giving our tiniest patients a fighting chance

For many families, the birth of a new child is a joyful, exciting release after nine months of wait and worry. But for others, it’s the beginning of a stressful and uncertain struggle.

Nationally, 1 in 10 infants are born prematurely, but in Calgary that number rises to 1 in 8 – meaning that on average over 10% of births require the lifesaving support of the city’s Neonatal Intensive Care Units.

Of the total $66M philanthropic commitment, Calgary Health Foundation has pledged $48M to the redevelopment of a new Neonatal Intensive Care Unit (NICU) at Foothills Medical Centre. This investment is matched by the Government of Alberta and will be operationalized by Alberta Health Services for a total investment of $152M.

The new NICU will advance family-centred care offered to families throughout Southern Alberta and increase the unit’s capacity from 36 beds to 58, including 40 private rooms with 18 beds in three spacious care pods with retractable walls, to accommodate a wide range of care needs for babies and families.

The new unit is under design and expected to break ground in Fall 2022.
New Gastrointestinal (GI) Endoscopy Clinic
Supporting growing demand

$12M TOTAL COMMITMENT

Project status: In design
Project completion estimate: 2024

Digestive health is a key indicator of our overall health, providing us with energy for daily life, but according to the Canadian Digestive Health Foundation more than 20 million Canadians suffer from digestive disorders every year. Gastrointestinal (GI) disorders affect the digestive system, namely the esophagus, stomach, small intestine, large intestine, rectum, and accessory digestive organs such as the liver, gallbladder and pancreas. They do not discriminate by age, ethnicity or gender.

The investment in the Rockyview GI Endoscopy Clinic will almost double the clinic’s footprint and increase the number of procedure rooms from four to five. The clinic will be able to diagnose and treat some of the most complex cases, as well as see some of the sickest patients, such as acute IBD, those who don’t qualify for the Colon Cancer Screening Centre, patients on anticoagulation medications or those with multiple medical issues.

Immediate impact to patient access and wait time:

<table>
<thead>
<tr>
<th>Current</th>
<th>Future</th>
</tr>
</thead>
<tbody>
<tr>
<td>10,579 patients/year</td>
<td>14,665 patients/year</td>
</tr>
</tbody>
</table>

A centre of excellence for neurocritical care
Ensuring life-saving intervention

$2.5M TOTAL COMMITMENT

Project status: In progress
Project completion estimate: 2024

Neurocritical care is a novel field of medicine that has recently emerged out of worldwide research, including studies from Southern Alberta, showing that neurocritical care saves lives and is an essential link to the chain of survival and recovery after facing neurological injuries.

Approximately 900 patients per year are admitted to Intensive Care Units (ICUs) with life-threatening nervous system disorders in southern Alberta. These disorders represent between 15 to 20 per cent of the patients being cared for in ICU environments. This includes patients with acute brain, spinal cord, nerve and muscle injuries from trauma, strokes, cardiac arrests, seizures, infections, and other conditions.

A $2.5M funding opportunity through Calgary Health Foundation will focus on expanding neurocritical care specialty services and will result in a 10 to 15 per cent increase in the odds of survival among patients and a 15 to 20 per cent increase in the chance of patients returning home with minimal disability over the next five years.

The four most common conditions neurocritical care patients suffer are:
- cardiac arrest
- neurological trauma
- strokes and brain bleeds
- severe seizures

The rate of devastating outcomes for patients can vary widely, between 20-70%.

75% of patients with a life-threatening nervous system disorder are under 65.

This program investment is in progress and growing.
COVID-19: A long road to recovery

Continuing the fight

As we move into the third year of the COVID-19 pandemic, a great deal has changed – but our commitment to supporting patient outcomes and the heroic efforts of our health care workers has not. Thanks to the development of lifesaving vaccines, the nature of our battle against the virus has evolved, and as a society, system and foundation, we are moving from crisis response to recovery.

While we hope the darkest days of the pandemic are behind us, we still have a great deal of work ahead. Our hospitals are at capacity meeting the needs of patients who have waited for surgeries, diagnostics and mental health care. Health care workers have stepped up in ways beyond expectation and the last two years have taken their toll on the wellbeing of our devoted caregivers. Finally, the emergence of “Long COVID” and other post-infection complications are going to require significant research, innovation and treatment plans to respond to this new, chronic disease.

The road to recovery

While we hope the darkest days of the pandemic are behind us, we still have a great deal of work ahead. Our hospitals are at capacity meeting the needs of patients who have waited for surgeries, diagnostics and mental health care. Health care workers have stepped up in ways beyond expectation and the last two years have taken their toll on the wellbeing of our devoted caregivers. Finally, the emergence of “Long COVID” and other post-infection complications are going to require significant research, innovation and treatment plans to respond to this new, chronic disease.

Long COVID

Beyond the acute crisis phase of the pandemic, a new challenge has been revealed for COVID-19 patients: Long COVID.

From the earliest days of COVID-19, there was anecdotal evidence of post-viral symptoms and abnormalities that hung around long after the initial infection in some people. That evidence has been increasingly studied and a condition known as Long COVID has been identified.

Long COVID manifests itself in many ways and researchers are still working to understand them all. We do know that Long COVID affects a variety of different body systems – sometimes concurrently – in ways that can be tremendously debilitating for patients.

Systems under strain

Early research has discovered a handful of systems hit hard by Long COVID. Any challenge to an individual system is hard enough, but with many Long COVID cases, patients have a combination of challenges that can severely affect their standard of living.

10-30% of people infected with COVID-19 will have Long COVID.
Investing in Long COVID clinics and diagnostics equipment

To begin providing Long COVID care, AHS has developed two multidisciplinary clinics in Calgary and enhanced Long COVID care through the specialized respiratory clinics at Peter Lougheed Centre and Rockyview General Hospital. At the care of respiratory health diagnostics, research and treatment plans are the important pieces of cutting-edge technology that empower cardiopulmonary stress tests (CPETs). This equipment allows health care teams to identify Long COVID respiratory symptoms and also helps diagnose multiple cardiac and pulmonary diseases.

To help meet the increase in demand from the ongoing pandemic, we are able to help acquire the necessary equipment to provide patients with respiratory tests and information that can help them work towards better outcomes.

Annual Cardiopulmonary Stress Tests:

![Chart showing CPETs](chart.png)

Caring for health care workers

Countless lives have been saved and made better over the course of the COVID-19 pandemic by brave and dedicated health care workers. But this sustained, challenging work has impacted the mental health of the people we entrust to care for our entire community. Caring for caregivers and rebuilding their resilience is a top priority.

Calgary and surrounding communities care providers:

<table>
<thead>
<tr>
<th>Staff</th>
<th>AHS Physicians</th>
<th>Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td>38,126</td>
<td>3,181</td>
<td>4,918</td>
</tr>
</tbody>
</table>

A moment of gratitude

It’s impossible to convey the depth of our collective gratitude to everyone in health care, but working with our generous donors we wanted to remind care providers just how much they mean to us. We delivered massages of appreciation and snacks to health care campuses around the city to provide a moment of rest and care.

Art as therapy

Art doesn’t just have the power to heal – it has the power to reveal truths that bring us together. Musician and songwriter, Dr. Grant Kennedy, and photographer, Dr. Heather Patterson, collaborated to create a song and video that brought the mental health challenges of the pandemic to the forefront. What makes this even more special is both artists are also Emergency Room physicians. We were excited to collaborate on this production and help empower healing through song, community and open honesty.

Spaces to rest, relax and regroup

For patients and staff alike, hospitals and care centres are places of great stress. For countless staff members in Calgary’s hospitals, the demands of these spaces have become more obvious.

Working with AHS, we’ve identified spaces at Foothills Medical Centre, Peter Lougheed Centre, Rockyview General Hospital and South Health Campus to be transformed into tranquil and private areas for health care staff to use to rest and recharge. By renovating existing and underutilized spaces into specially designed areas for health care staff to enjoy on a break, we can not only show our gratitude, but also provide a much-needed boost to their mental health and well-being.

Art as therapy

Art doesn’t just have the power to heal – it has the power to reveal truths that bring us together. Musician and songwriter, Dr. Grant Kennedy, and photographer, Dr. Heather Patterson, collaborated to create a song and video that brought the mental health challenges of the pandemic to the forefront. What makes this even more special is both artists are also Emergency Room physicians. We were excited to collaborate on this production and help empower healing through song, community and open honesty.

Scan to watch the official music video

Spaces to rest, relax and regroup

For patients and staff alike, hospitals and care centres are places of great stress. For countless staff members in Calgary’s hospitals, the demands of these spaces have become more obvious.

Working with AHS, we’ve identified spaces at Foothills Medical Centre, Peter Lougheed Centre, Rockyview General Hospital and South Health Campus to be transformed into tranquil and private areas for health care staff to use to rest and recharge. By renovating existing and underutilized spaces into specially designed areas for health care staff to enjoy on a break, we can not only show our gratitude, but also provide a much-needed boost to their mental health and well-being.

Art as therapy

Art doesn’t just have the power to heal – it has the power to reveal truths that bring us together. Musician and songwriter, Dr. Grant Kennedy, and photographer, Dr. Heather Patterson, collaborated to create a song and video that brought the mental health challenges of the pandemic to the forefront. What makes this even more special is both artists are also Emergency Room physicians. We were excited to collaborate on this production and help empower healing through song, community and open honesty.

Scan to watch the official music video

Spaces to rest, relax and regroup

For patients and staff alike, hospitals and care centres are places of great stress. For countless staff members in Calgary’s hospitals, the demands of these spaces have become more obvious.

Working with AHS, we’ve identified spaces at Foothills Medical Centre, Peter Lougheed Centre, Rockyview General Hospital and South Health Campus to be transformed into tranquil and private areas for health care staff to use to rest and recharge. By renovating existing and underutilized spaces into specially designed areas for health care staff to enjoy on a break, we can not only show our gratitude, but also provide a much-needed boost to their mental health and well-being.
Care: Bridging the gap

Rising to the challenge of surgical demands

While the demand of COVID-19 on our health care system decreases, regular services are returning to full capacity and stretching to meet growing demands. Alberta’s Surgical Initiative has made investments to accelerate surgical procedures by 150 percent to address the backlog resulting from the pandemic.

Meeting Albertan’s surgical needs requires the mobilization of operating rooms that can support a variety of complex procedures and advancing minimally invasive approaches that decrease patient risk and recovery time.

Equipping the operating room with the right tools for the job

The increase in surgical activity and growing demand for minimally invasive surgeries has increased the demand for C-Arm technology to provide fluoroscopic imaging in many of the 29 operating rooms running daily at the Foothills Medical Centre. This equipment provides high-resolution images that are critical and unique to the hospital. C-Arm technology informs some of the most complex and advanced surgeries, such as thoracic, spine, neuro, cardiac, level 1 trauma, and head/neck oncology surgery.

A C-Arm is a mobile piece of equipment that provides real-time imaging to guide diagnosis and the placement of devices, including cardiac device implants/extractions, neurosurgery spinal surgery, orthopedic trauma, orthopedic spinal surgery, thoracic surgery and cancer surgery.

These surgeries only occur at Foothills Medical Centre due to the highly specialized teams and care required.

Mobilizing a new operating room

The mobilization of an additional operating room allows Peter Lougheed Centre to perform an additional 1,000 surgeries per year for the next 10 years.

To support additional surgeries, the Peter Lougheed Centre was in a unique situation to mobilize a dormant operating room space. A variety of equipment was needed to support several surgical programs.

Thanks to donors, Calgary Health Foundation was able to invest $1 million to equip and operationalize a sixteenth operating room. Because donors provided equipment funding, it sped up the process for Alberta Health Services to support operational costs. Without donor support, this operating room would not have been leveraged.

$180K TOTAL INVESTMENT

$1M TOTAL INVESTMENT
Supporting minimally invasive cardiac procedures

Donors are advancing care for more than 11,000 patients each year who require procedures in the cath labs. This is the first of three cath labs that will be redeveloped with donor support.

Cardiac catheterization labs (or cath labs) are essential spaces for advancing cardiac care for patients of all ages. The cath lab houses special imaging equipment that is used to see arteries and determine how well blood is flowing to and from the heart. This information is critical in diagnosing and treating blockages and other problems in the arteries.

The redeveloped cath lab at the Foothills Medical Centre will include advanced diagnostic equipment that will also integrate with Alberta Health Services’ single medical record system.

By the numbers: cardiac cath lab procedures

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Annual Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percutaneous Coronary Intervention (PCI)</td>
<td>2,200+</td>
</tr>
<tr>
<td>PCI is a non-surgical method used to open narrowed arteries that supply the heart muscle (coronary arteries) with blood using small balloons and stents.</td>
<td></td>
</tr>
<tr>
<td>Diagnostic angiography</td>
<td>6,400+</td>
</tr>
<tr>
<td>Angiography is a procedure used to identify a narrowing or blockage in the arteries in the heart.</td>
<td></td>
</tr>
<tr>
<td>Cardiac ablations</td>
<td>680</td>
</tr>
<tr>
<td>This procedure is used to support patients experiencing life-altering arrhythmias by scarring the electrical conduction pathways using cryo or radiofrequency ablation techniques.</td>
<td></td>
</tr>
<tr>
<td>CIED implantation</td>
<td>1,100+</td>
</tr>
<tr>
<td>Implantation of cardiac implantable electrical devices (pacemakers and defibrillators) are performed both in the cardiac cath lab and the operating room.</td>
<td></td>
</tr>
<tr>
<td>STEMI patients</td>
<td>920</td>
</tr>
<tr>
<td>Southern Alberta STEMI program</td>
<td></td>
</tr>
<tr>
<td>Supporting Southern and Central Alberta, the cath lab provides care to patients experiencing acute myocardial infarction. In collaboration with EMS, Rural and Urban Emergency Departments and Urgent Care Centres, patients are cared for in the cardiac cath lab to unblock culprit lesions causing Myocardial Infarction.</td>
<td></td>
</tr>
</tbody>
</table>

$1.9M TOTAL INVESTMENT

*data for 2021/2022
Wellness: Care in the community

Health care beyond the hospital

Focusing on building care and education in the community reduces the health system burden and provides more support for vulnerable populations. Wellness initiatives supported by Calgary Health Foundation help to prevent illness and focus on preventing admission and readmission to acute care by mobilizing community-based resources before needs escalate.

Understanding barriers faced by diverse populations in accessing care and ensuring that health education is readily available to empower individuals to make informed decisions about their health needs will result in a healthier population.

Normalizing conversations in women’s health

Free webinar series offered through Calgary Health Foundation

Many health topics impact a large number of women yet still remain taboo to speak about publicly. As a result, the lack of access to accurate information and education is a burden to women and often leads to debilitating health outcomes.

Calgary Health Foundation implemented a pilot project to understand what mattered to women and if access to critical information (that goes largely undiscussed) would get women’s attention. Recordings are available on Calgary Health Foundation’s YouTube channel from the four open dialogues with care providers in the virtual women’s health series.

3,700 women
and their families attended the series to understand more and get comfortable talking about complex issues.
Community care in mental health

$275K TOTAL INVESTMENT

via granting from the City of Calgary’s Change Can’t Wait initiative and Community Safety Investment Framework

Recovery Coaches in the community

Recovery Coaches are individuals with lived experience of substance use and/or mental health issues who provide two fundamental benefits:

- Help guide clients with substance use or mental health issues on their path to recovery using their lived experience and techniques such as motivational interviewing; and
- Provide navigation to recovery-based resources in the community.

Recovery Coaches provide support for clients through their recovery journey using shared personal experiences, motivation enhancement, and solution-focused problem solving. The goal is to provide wraparound services that support each individual’s unique journey with stronger support from hospital care to community and social services. Coaches also build trust with individuals by sharing lived experiences along their journey to better health.

In a four month trial period, Recovery Coaches made 256 referrals to community agencies representing health, housing, substance use treatment and various other community resources.

Mobile Street Health Team and EMS Mobile Integrated Care

The goal of the Mobile Street Health Team and EMS Mobile Integrated Care Team is to provide more wraparound supports for vulnerable Calgarians to ensure their health needs, defined in the broadest sense, are met when, where and how they are needed. These initiatives work in partnership with community services and are able to decrease reliance on emergency rooms and first responders.

This approach led to a breakthrough in the way the team approached care and wellness, ensuring clients have the best possible access to community and health care services through collaboration and persistence.

The role of the Community Paramedics is to offer a generalist approach to on-demand and needs-based care while focusing on prevention. The illness, disease and disorders a Community Paramedic encounters have psychosocial components greatly impacted by the social determinants of health and influenced by a person’s environment. Uniting diverse perspectives of a social worker with the clinical understanding of a paramedic ensures a continuum of care beyond the physical or mental needs of complex clients.

Timely response in ensuring that clients needs are met results in better outcomes. The Mobile Integrated Health team provides holistic and client-centred care, while opening the door to rebuilding health equity, health literacy and confidence in community services to encourage the most appropriate utilization of health resources.

Sheldon M. Chumir Health Centre Urgent Care

Social workers are at the core of holistic care support. They respond to people in crisis and ensure they have access to support services that will help to improve their quality of life, and also ensure these supports are sustained once clients leave urgent care.

The investment of additional social worker support for the Sheldon Chumir Urgent Care Centre has enabled more collaboration between care providers and community resources. Our shared goal is to address the systemic barriers in accessing services that many of the most vulnerable people in our community experience.
Research: Saving and improving lives

Today’s research empowers tomorrow’s breakthroughs

Research improves the quality of health care, treatments, interactions and experiences for patients and their families. Research projects funded by Calgary Health Foundation have bold visions to reshape care and address gaps in the health care system.

While these research projects are in the early stages and focused on Calgary, each one has already garnered broader interest due to their progressive and innovative topics.

Cohort study for preterm birth

$5M TOTAL INVESTMENT IN PARTNERSHIP WITH ALBERTA CHILDREN’S HOSPITAL FOUNDATION

Types of research:
- Investigating the mechanisms of health and disease
- Applied research to advance care

Estimated completion: 2024 (five years)

Of the more than 17,250 babies born in Calgary each year, about 1,550 are born preterm. Over 1,200 of those preterm infants require specialized care within a neonatal intensive care unit (NICU). In addition to the strain on families, the estimated annual health care costs associated with caring for preterm infants in Canada is $587 million.

This research focuses on the prediction, prevention and intervention of preterm birth. A team of scientists and care providers based out of the University of Calgary is inviting 4,000 expectant mothers from Calgary and southern Alberta to participate in research that will take place throughout their pregnancy and up to one year after they have delivered their babies. Fathers and partners are also encouraged to take part.

In the first phase of the initiative, which is now underway, scientists are working in the lab to develop a blood test for rapid diagnosis. This research asks questions about if, and gestationally when, maternal biomarkers can predict preterm birth.

The teams will also use the power of advanced machine learning to generate personalized risk scores for pregnant women, enabling health care professionals to anticipate preterm births and provide care strategies tailored for individual families.

Projects supported through this investment

Prediction
Integrating maternal biomarkers for predicting preterm birth. Early discoveries from this research:
- Repeated sampling (i.e. change in biomarker expression) during the second and third trimester is a promising avenue for biomarker discovery.
- Preliminary analysis using machine learning has identified novel biomarkers and highlighted potential new pathways involved in the mechanism of preterm birth.

Using machine learning to predict spontaneous preterm birth

Biomarkers of imminent preterm birth in high-risk women (P3 High Risk Cohort)

Prevention
Income assistance for low-income women (currently under ethics review for approval)
Remote peer-counsellor-delivered behavioral activation and peer-support for antenatal depression on gestational age at delivery: a single-blind, randomized control trial.

Intervention
The role of inflammation in brain injury and development of preterm infants
Optimizing family health following preterm birth
Digital parenting interventions for fathers
Do children born preterm play ‘catch-up’?
Neonatal asphyxia is one of the most devastating potential outcomes of pregnancy; with long-term impacts on the infants, families, and health care systems. A single HIE case can cost in excess of $1.5 million over a lifetime of care. This research project has established the largest database of its kind globally, using data from across the province to understand current HIE diagnosis, monitoring, management, and follow up with the goal of establishing best-in-class standardized care protocols.

Through education and standardization, early identification of HIE and deployment of time-sensitive cooling protocols can prevent detrimental effects for many newborns.

Hypoxic-ischemic encephalopathy (HIE) can result from limitation of oxygen and blood flow to the brain around the time of birth. HIE can cause brain injury and result in cerebral palsy and other cognitive and developmental impairments.

Annually, one in five Canadians face challenges pertaining to their mental health, making it the leading cause of disability in Canada. The prejudice and discrimination that can exist around mental illnesses is a barrier for many in receiving vital support at critical times. The access point for critical, and sometimes life-saving, support of urgent mental health concerns often originates in the hospital’s emergency room. This very first interaction can drastically influence a patient’s journey and outcomes.

The Exploring Mental Health Barriers in the Emergency Room (EMBER) research aims to explore mental illness-related stigma experienced by patients and families in hospital emergency departments. This study will also examine staff members’ experience of mental illness stigma and the impact this can have on their ability to provide care, as well as their own willingness to seek care for themselves when needed. In partnership with Alberta Health Services, the research team will also work collaboratively with the policy services team to examine and improve policies related to access and the provision of mental health services.

Early findings from stakeholder consultation in this research:

• Identified several manifestations of stigma that cause harm to patients, and confirmed need to advocate for structural changes.
• Emphasized need for more education and training for providers in mental health and substance use to build confidence and improve care.
• Highlighted interconnection between mental health and occupational stress of frontline health teams and quality of patient care, in what can be very challenging and demanding environments.
• Reiterated importance of physical space redesign to improve care for mental health patients and families.
• Acknowledged value of specialized peer support for mental health and substance use that can be integrated into healthcare teams, to provide advocacy and support to patients and families and better connection to community services.
Improving methamphetamine toxicity treatment

$159K TOTAL INVESTMENT

Types of research:
• Applied research to advance care
• Advancing health services and policy

Estimated completion: 2023 (two years)

This research focuses on the intersection of healthy behaviour, access to health care and the right to live at-risk while using substances, with the vision to inform and improve the care of a historically marginalized and vulnerable population.

The goal is to create standard treatment protocols for patients who present with methamphetamine intoxication. These individuals may enter their care journey at a hospital or via a community organization. Standardizing treatment protocols will result in a focus on wellness for care providers and better outcomes for patients.

Early on, this research garnered national attention as many hospitals face similar circumstances and need to provide better support for both the patient and care provider in cases involving methamphetamine toxicity.

Precise-MH: Mental health & addictions data

$892K TOTAL INVESTMENT

Types of research:
• Advancing health services and policy
• Population and public health research

Estimated completion: 2025 (four years)

There are many unique and complex factors contributing to the relationship between AHS addictions and mental health team, homeless shelters and police services. The goal of the PRECISE-MH study is to improve understanding of the relationships between these three entities in Calgary and create stronger links in sharing data and analytics that will ultimately result in a more integrated approach to support services for vulnerable individuals.

Preliminary data indicates that there are approximately 800,000 individuals age 18 to 65 who are identified as having a substance use and/or mental health issue in the province of Alberta as of the study entry date of April 1, 2018. 

Quick Facts

Serious mental illness is 10x more common in individuals experiencing homelessness.

Substance use and mental health are over-represented among people in contact with police.

Access to mental health services is limited among people experiencing homelessness due to stigma and poor integration of services.
Looking forward: Cardiac Care

Empowering advancements in cardiac care with dedication, generosity and heart

Every 20 minutes a cardiac issue kills a Canadian.

Cardiac issues are one of the biggest threats to the health and well-being of people all over the country and we’re lucky in Alberta to have access to world class care right here in Calgary in partnership with the Libin Cardiovascular Institute. But with an opportunity to advance specific heart programs to be leaders, a need for critical updates and the opportunity to develop breakthrough innovations, even the best must constantly get better.

More women die every year from cardiovascular disease than all cancers combined.

A disproportionate challenge for women

Not only do women suffer from cardiovascular disease more than men – they also experience the disease, treatment and care path in unique ways that can stand in between them and the breakthroughs they need and deserve. Like far too many issues in health care, women’s health has been underfunded and by extension, not fully understood.

Making cardiovascular health and care a priority

A challenge of this scale requires an incredible demonstration of dedication, innovation and hard work. Partnering closely with AHS, primary care providers and the Libin Cardiovascular Institute, we have made cardiovascular health a top priority and are already seeing breakthroughs that are transforming the lives Albertans requiring cardiac care today.

Enhanced diagnostics and intervention

An opportunity to lead the country in structural heart conditions

Cardiac catheterization labs – or cath labs, for short – are critical in testing, diagnosing and treating cardiovascular diseases. Calgary’s Foothills Medical Centre has six labs that serve Southern Alberta and parts of Saskatchewan and British Columbia, but they have long waiting lists of patients seeking a breakthrough in early diagnostics and intervention for heart disease.

With an infusion of funding, we’ll be able to help enhance and evolve the cath labs to ensure that more Southern Albertans have access to a critical intervention against the progression of heart disease. Additionally, new technology will allow information from the cath labs to easily follow patients through their health care journey and empower breakthroughs every step of the way.
Empowering tomorrow’s big breakthrough today

Treatment and care are paramount to patients today – but better understanding cardiovascular disease and how to better treat it will transform the future.

Working with the Libin Cardiovascular Institute, Calgary Health Foundation is working with donors to fund initiatives that will bridge research and care, address the individual needs of cardiac patients and improve patient outcomes by reducing post-surgical healing times, finding new ways to treat advanced heart failure, and working to address the psychological and social impact of a cardiac event.

Paving the way for care of common conditions

Not only is cardiovascular disease extremely common – it also results in high rates of hospital readmissions if patients aren’t empowered with a care path to managing their health upon going home.

An example of this is happening in aortic valve failure. Located at South Health Campus, the Calgary Aortic Program aims to provide a space for the management and surveillance of patients requiring long-term follow-up for aortic disease. The program has brought together a multidisciplinary team of specialists across the city and the globe to empower patients to break through the long term challenges of managing a complex disease.

How your support can advance cardiovascular health initiatives

- **$3M** MINIMALLY INVASIVE SURGERY AND DIAGNOSTICS
- **$1M** CLINICAL INNOVATION
Looking forward: Women’s Health

Caring more about women’s health care

Women make up 51% of the population, yet issues unique to women or that have a disproportionate impact to women are largely misunderstood.

For too long women’s health issues have neither been understood nor funded effectively. From research into diseases that are more prominent in women, to empowering health care workers, to a lack of training in the unique ways some illnesses present in women, there are many barriers to achieving the breakthroughs in care women need.

Putting a focus on women’s health research

By creating a focus solely on women’s health, diseases that disproportionally impact women, and the high cost of chronic conditions among women, we can finally achieve breakthroughs in research and innovation that can quickly translate into better outcomes for women.

Advance gynecological ambulatory care and minimally invasive procedures

Invest in understanding, developing and implementing new ways of treatment for women’s health issues that will provide enhanced outcomes with less disruption to women’s already busy lives.

Increase access to care for all women at all stages of life

Too many women face barriers in receiving the care they need – so, we’ll work to understand the challenges some of our most vulnerable populations have to identify, understand and dismantle the challenges that get in the way of providing equitable and effective care.

Create a knowledge network for women

The first step towards equitable care is equal access to understanding for both patients and providers alike. Our goal is to ensure critical information on key issues impacting women is more readily available and based on medical science by creating a virtual knowledge network to better support and collaborate with patients and primary care providers.

Our Vision: Making the future of women’s health a priority in Southern Alberta

Working with stakeholders representing a variety of women’s health experiences and across the entire health care journey, we’re developing a vision for more equitable and effective women’s health care. This vision is built upon key themes:

- Putting a focus on women’s health research
- Advance gynecological ambulatory care and minimally invasive procedures
- Increase access to care for all women at all stages of life
- Create a knowledge network for women

Dr. Erin Brennand is part of the team leading research and understanding in women’s health that will make Calgary a national leader.
Reducing postpartum hemorrhage risk

Postpartum hemorrhage is an obstetric emergency that is often identified too late – making it the leading cause of maternal deaths worldwide. While the majority of deaths occur within four hours after delivery, underestimations of blood loss in delivery and the bias created by most women being able to compensate for blood loss consistently result in tragic outcomes. This project aims to empower frontline staff with the understanding they need to reach a timely diagnosis and the resources to provide appropriate management for patients.

Advancing pelvic floor care

Cystoscopy is an important imaging diagnostic tool for women experiencing pelvic floor and bladder function issues – but one that is only available at the Women’s Health Centre at Foothills Medical Centre.

However, without the advancement of new technology, diagnoses can be unreliable, resulting in frustration for patients and a delay to diagnoses and breakthroughs. Thanks to your generosity, we were able to invest in procuring new state-of-the-art tools to help advance cystoscopy diagnostics and better inform a patient’s unique treatment for incontinence and dysfunction – ultimately improving the quality of life for countless women in Calgary.

Increasing access for vulnerable women

For mothers-to-be, ultrasounds are one of the single most important tools to provide the information they need to make decisions with their doctors. But, for mothers and their partners from the Indigenous community of Eden Valley outside Calgary, access to these procedures requires travel into the city – a barrier that often results in these appointments going unattended. Thanks to donor support, we were able to fund an ultrasound machine to support an outreach program that is removing these barriers to care by bringing critical care to the community.

Our vision will empower our future - but advancements in care and outcomes can’t wait.

Over the last year, your generosity enabled us to invest in a handful of key initiatives that are already providing breakthroughs in women’s health.
Looking forward: Mental Health

Supporting the urgent need for mental health and addictions treatment breakthroughs

150,000 Calgarians require addictions and mental health support

Mental health and addiction challenges may be largely invisible illnesses – but their impact on individuals, families and the health care system are significant and critically need our support. In partnership with a wide range of organizations, we are dedicated to working towards breakthroughs in care, wellness and research that will transform the lives of countless Albertans.

There’s no single solution – but a continuum of care and inclusive consensus of all stakeholders are paramount.

A continuum of care

Both in society and the health care system, mental health and substance use issues only become visible at crisis points. Whether it’s how they manifest themselves disproportionately among people experiencing homelessness, the justice system or the emergency room, hospital intervention in these times of crisis have traditionally been the primary focus.

A focus on the full continuum of care is necessary to empower breakthroughs in the lives of people affected most strongly by these illnesses. While crisis care intervention is paramount, an enhanced focus on prevention support and short- and long-term support for patients returning to their communities after treatment will transform lives. While our hospitals must be equipped and prepared to care for patients in their darkest and most vulnerable moments, we must also ensure that our health care system is empowered to provide patients and their families with a pathway and necessary support to help individuals manage their illnesses at home and in the community.

Dr. Monty Ghosh is rethinking mental health and addictions care delivery by bringing care to people where they are at.

Valuing Voices

True progress with substance use disorders and mental health care is only possible by listening deeply to the lived experiences of those with experiences suffering first and second hand and the health care staff on the front line.

We’ve worked hard with the City of Calgary, AHS and the University of Calgary to create open dialogue between researchers, practitioners, survivors, people experiencing mental health and addiction illnesses and their families and communities to discover the true barriers and challenges – and develop the short- and long-term strategies that will break through barriers in receiving the right care at the right time.

It’s like being in a jail cell. You know, I’m getting worse, I feel worse, I feel more depressed I feel...”

CALGARY EMERGENCY ROOM PATIENT
Five areas of focus

Through an integrated process of research and stakeholder consultations, a handful of primary themes of need have become extremely clear:

1. Trauma informed space design in hospitals needs to be an investment
2. Mental health peer support and patient advocacy in hospitals is critical
3. Stronger support networks are needed for patients transitioning to community care
4. Investment in research and innovation will continue to evolve care
5. More supports are critical for frontline staff to treat mental health and addictions issues in tandem with other urgent issues

Disproportional representation

The majority of individuals with mental health issues and substance use disorders will not be in contact with the judicial system. However, there is a disproportionate number of individuals in contact with the criminal justice system experiencing serious mental health and addictions concerns.

- 30% of Canadians will experience mental illness or a substance misuse disorder
- 50-90% of people with police contact have addictions and mental health challenges
- 4x more likely to be arrested
- $500M costs to Calgary’s health care system.

Transforming spaces with trauma informed treatment environments

When seeking acute care for substance use and mental health issues, patients too often find themselves in spaces that unintentionally make things worse for them.

Much of our hospital infrastructure was designed with pure utilitarianism in mind – but when working with patients with complex mental health challenges, a different approach is required: trauma informed design.

Trauma informed design is a unique approach to the creation of spaces patients spend time in, specifically known for reducing and removing known adverse stimuli and environmental stresses, actively engaging individuals in a dynamic, multisensory environment, supporting self-reliance, providing and promoting connection to the natural world, separating individuals from others who may be in distress, reinforcing a sense of personal identity and promoting the opportunity for choice while balancing program needs and the safety and comfort of the majority.

Working with the Peter Lougheed Centre, we supported the renovation of the emergency room mental health space, short-term mental health unit and psychiatric ICU into spaces through trauma informed design.

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.

Renfrew recovery centre triage vestibule

As Calgary’s only medical detox centre, the Renfrew Recovery Centre provides an invaluable breakthrough moment for up to 40 patients at any given time taking their first steps towards recovery.

Before COVID, the centre’s triage vestibule could hold up to 15 people waiting for treatment – but with pandemic safety measures in place the space could only accommodate eight at a time. With less space, patients seeking help were forced to wait in the parking lot or community – where they were forced to endure the cold weather and often reverted to harmful activities.

Through the generosity of our donors, we were able to support the Renfrew Recovery Centre with an extension that serves as an addition to their triage room which increases the access and enhances the safety for people seeking treatment.

Every breakthrough has a beginning

After extensive engagement research and collaboration, the generosity of our donors is already making an impact through a selection of important investments.

Wellness:

Integrated community partnerships to support various levels of need

Research:

Enhance understanding, access and overall wellness

Care:

Best-in-class approach to critical care and supportive transition
Primary research with a primary goal: tangibly improve outcomes

Behind every substance use and mental health crisis there are people: the patient, their family and community and the frontline staff providing treatment.

To better facilitate the breakthroughs each and every one of them so badly desires, a research project called EMBER (Exploring Mental health Barriers in Emergency Rooms) was mobilized.

The project conducted many interviews with everyone from patients to doctors and nurses to discover gaps in knowledge, training, care and understanding to make urgent changes in how treatment is provided and received and to address the damaging stigma that continues to surround it all.

Enhanced community supports where patients are at

For many patients, recovery from substance use disorders and mental health illnesses isn’t a one step process. Instead, it’s a breakthrough that comes with sustained effort and support. To help empower care beyond the moments of hospital crisis care, two new pilot programs were created (and subsequently permanently funded): Recovery Coaches and Mobile Street Teams.

Recovery Coaches are people with personal lived experience with mental health issues and substance use disorders who are trained to help support and guide patients on their path towards recovery.

These coaches provide support in numerous ways, ranging from motivational interviewing to presenting patients with resources and the help they may need to navigate the process and system.

Mobile Street Teams bring together Mobile Integrated Health Outreach Workers, Mobile Integrated Health City Center Team and Community Paramedics to help provide deeper care and access to resources for people facing challenges ranging from loss of housing to addictions and mental health. Once a patient is referred to the mobile street team, the team works collaboratively to build a plan for the patient and provide the support necessary to navigate the steps to execute it. By intervening early and before a person is in crisis and in need of hospital care, the mobile street teams aim to prevent severe outcomes and help provide breakthroughs earlier than ever.

Practical research in treating patients presenting with methamphetamine toxicity

Crisis calls for research with practical and punctual implementation required to impact patient outcomes. With that in mind, we were excited to support a research project aiming to create a standardized program for treating patients with methamphetamine agitation in emergency rooms.

Providing urgent care to a patient who is also experiencing methamphetamine-induced psychiatric concerns is an extremely challenging task – and one that has not been fully researched or formalized. While this effort only began in September of 2021, it’s already earned the attention of researchers and care providers across Canada and has the potential to create a path to important breakthroughs for countless patients.
Looking forward: Genomics

Stopping disease before it even starts

What if we could identify a predisposition to a disease and begin treatment before the patient saw symptoms? How many lives would be changed by never receiving a diagnosis of cancer, heart disease or many other diseases? The future of health care is already taking shape in Calgary within the field of genomics where a team of researchers, scientists, health economists and doctors are working building the technology to identify genetic disease before it even exists.

It’s smart health economics

Hospital care is expensive and it currently demands constant increases in investment to meet the demands of caring for complex disease. While health emergencies will always exist – some may not have to. By identifying genetic illnesses early – sometimes even just the predispositions – we can transform our health care system. Instead of depending on hospital infrastructure to meet the growing rate of disease, we have the opportunity to view hospital care as a last resort, releasing pressure off the system and better funding all areas of health care.

This approach is known as Prevention Genomics Medicine and is designed to create breakthroughs in care for the individual patient and the entire system.

The power of genetic screening

Many diseases and illnesses like cancer, heart disease, some mental health conditions and more are associated with certain genes that are inherited at birth. By identifying them early, we can monitor, treat and avoid acute care and severe illness in all new ways.

This approach is known as Prevention Genomics Medicine and is designed to create breakthroughs in care for the individual patient and the entire system.

INHERITED CANCER GENES:
Present in 10-15% of all cancer diagnoses
Over 50% higher risk of cancer

Screening saves lives

Access to genetic screening saves lives but is often hard to access and accessed too late. Our pilot program in Calgary, which will be located at Richmond Road Diagnostic Treatment Centre, aims to fundamentally change that and extend screening to as many people as possible.

With an initial focus on women’s cancer, the program has the potential to change the lives of hundreds of families. Based on a population testing approach, screening could potentially prevent an additional 2,319 to 2,666 breast cancer and 327 to 449 ovarian cancer cases per million women.

For women in Alberta making up approximately one million people, this means potentially over 3,000 fewer cases of cancer.

More than cancer

While cancer is a major priority, the project is also applying its focus to cardiovascular disease, mental health and a handful of other diseases that can be identified through genomic testing.

With the right combination of funding, determination and executional breakthroughs, Prevention Genomics Health has the potential to fundamentally change the way we live with, identify, and treat illnesses.
Governance & Volunteers

To our donors, volunteers & partners...

SANDY EDMONSTONE  Board Chair
LESLEY HUTCHESON  Vice-Chair
SARAH KENNEDY  Vice-Chair
DAVID ROUTLEDGE  Vice-Chair

Board of Directors
Lori Anderson
Dr. Mark Anselmo
Kirk Bailey - Chair, Foothills Medical Centre, Fund Development Council
Nancy Calvin - Chair, Rockyview General Hospital, Fund Development Council
Roger Chaffin - Chair, Governance Committee
Dr. Chris Eagle
Bruce Edgelow - Chair, Peter Lougheed Centre, Fund Development Council
Dr. Sarah Hall

Bonnie Healy - Chair, Government Relations Committee
Kathy Hnatuk
Dr. Richard Hu
Robert King
Amanda Kousinioria
Alice Lam
Eda Libin
Allison Maher
Mark Owerko
Peggy Perry
Dan Silvester - Chair, Finance & Audit Committee

Executive Leadership
MIKE MELDRUM  President & Chief Executive Officer
RAYMOND CROSSLIEY  Vice President & Chief Financial Officer
BELINDA FOX  Vice President, Engagement & Advocacy

*as of March 31, 2022

To our donors, volunteers & partners...

THANK YOU
Together, we can continue to attract leading health care expertise to our community and leverage opportunities in precision and emerging medicine.

Thank you for being part of our 25 years of impact!

MIKE MELDRUM
President & CEO, Calgary Health Foundation