



MOUNT SINAI HOSPITAL MONTREAL - *A TRIBUTE TO JOSEPH ROTHBART*

TRIBUTE TO JOSEPH ROTHBART



There are few individuals who profoundly touch those around them;
There are few individuals who truly demonstrate constant concern for others;
There are few individuals who accomplish daily the work of a life time;
There are few individuals whose stature commends the respect of all;

They are a few, we call Great Men, the Real Mensche;
This is how we will remember Joseph Rothbart.

The Mount Sinai family has been marked by the values that he instilled
as we were privileged to be a witness to his determination,
perseverance and loyalty to the institution.

A Great Man passed away;
Leaving to each one of us a precious legacy:
A source of inspiration

Devoted advocate,
He always gave priority to patient rights, their comfort
and dignity above anything else.

Highly-respected leader,
His work ethic prompted those around him to raise
their standards accordingly
and to persevere against daunting obstacles.

Visionary strategist,
He worked tirelessly to sustain vibrant perspectives and
to ensure future opportunities by entwining traditions with innovation.

Thoughtful gentleman,
His genuine ability to relate to people made them feel special
no matter their diversity and uniqueness.

Committed mentor,
He patiently guided us through the growing pains
and learning curves that change brings;
always encouraging and fostering team effort.

Talented mediator,
He listened attentively and considered everyone's position
in searching for the third side of the story.

A Great Man has left.
His strength and source of inspiration will always remain with us.

The Mount Sinai Hospital Family



MOUNT SINAI HOSPITAL MONTREAL | 2007-2008 ANNUAL REPORT

MISSION STATEMENT

The following mission statement spells out the credo by which we, at Mount Sinai, govern our actions in the care of those who need our services.

It's not just a hospital,
it's what a

It's not just about care,
it's about caring.

- We will abide by the tradition developed since the turn of the century when the leaders of the Jewish community sought to establish the first respiratory care institution to serve its population.
- In caring for all in a non-sectarian manner, we will seek to provide the best possible care in our area of specialty, respiratory medicine, as well as in palliative care medicine and specialized long-term care medicine.
- We will diligently take part in research projects with the aim to identify medical and technological advances and seek to develop cost-effective and comprehensive healthcare approaches with particular emphasis on our areas of expertise.
- Through dynamic and focused outreach programs, we will promote health awareness and education as well as disease prevention among our patients, their families and the general community.

It's not just about patients,
it's about people.

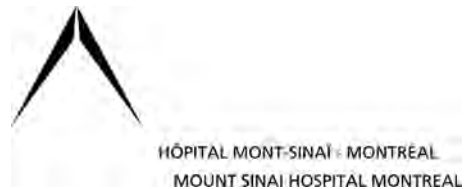
- Each patient will be recognized as an individual with personal attention to all needs, including those of family members.
- We will recruit the best available staff members and ensure their on-going training. We will work to foster within Mount Sinai Hospital Center a climate of personal growth and integrity, equity and fairness. We will also provide a healthy and efficient working environment for our entire medical team, staff and volunteers.
- Mount-Sinai will assure the safety of all staff, volunteers, and patients/residents by aiming towards best practices and by developing a culture of safety throughout the establishment.

It's not just about human beings,
it's about being human.

- Our staff will dedicate itself to excellence by delivering humane and effective care in a warm and home-like atmosphere.
- At all times we will focus our care to maximize our patients' quality of life. Whenever possible, we will endeavor to ensure their early return to the community and to an active life with their families.
- In our desire to continuously improve our services and enhance our patients' care, we will be respectful of human needs and suffering and remain centered on the values we share among ourselves.

It's not just about meeting standards,
it's about raising standards.

- Our leaders and staff will endeavour to constantly offer state-of-the-art treatment, medical equipment and rehabilitation facilities to all those seeking care.
- We will strive to maintain and widen our status as a recognized teaching Hospital affiliated with McGill University. We will continue to work with other institutions in the continuing education of healthcare professionals.
- We will constantly strive to meet the standards of the Canadian Council on Health Services Accreditation, which accredits Canadian healthcare institutions.



hospital is meant to be.

With each passing year, Mount Sinai Montreal's commitment to providing excellent patient care grows stronger and stronger.

In 1909, members of the Jewish community established Mount Sinai Montreal as a tuberculosis sanatorium. The Hospital started humbly as a 12-bed facility in Prefontaine near Sainte-Agathe-des-Monts, Quebec. Today, Mount Sinai Hospital Center is a modern non-sectarian 107-bed institution located in the heart of the Montreal island.

Since its founding, Mount Sinai Hospital Center has been dedicated to caring for patients with respiratory diseases. Initially, Mount Sinai was a forerunner in the treatment of tuberculosis. The Hospital gained a reputation for excellence in this field. It is known not only for its advanced treatment techniques and innovative research, but also for its dedication and comprehensive approach to total patient care. This is provided through prevention, education, early detection, diagnosis, treatment, follow-up care and research. The Hospital's highly skilled and caring professionals and support staff make sure that patients receive care that is state-of-the-art.

As the threat of tuberculosis began to diminish in the 1950's, Mount Sinai shifted its focus from a tuberculosis sanatorium to an intermediate care facility specializing in respiratory diseases such as emphysema, bronchitis, asthma and other chronic obstructive pulmonary diseases (COPD). The Hospital recognized that these diseases were particularly insidious because they commonly struck people in the prime of their lives. Statistics reveal that the incidence of respiratory disease is on the rise as the population gets older. COPD is currently among the most common causes of death in North America and the only one that persists in growing. This means that COPD not only affects the lives of patients and their families, but also has a significant economic impact on healthcare services.

In order to be closer to the community it serves, Mount Sinai moved to Montreal in 1990. Services have been constantly adapted to meet the changing needs of the community it serves. The Hospital is also continually upgrading its facilities and equipment to guarantee the highest level of patient care.

Today, Mount Sinai Hospital Center has three areas of specialization: respiratory care, palliative care and long term care. Furthermore, the Hospital continues to offer more and more services on an outpatient basis. The goal of Mount Sinai's Respiratory Care Services is to diagnose, treat, stabilize and follow up patients and to teach them how to cope with their disease once they return home.

The Hospital's Palliative Care Services include pre-admission, in-Hospital services, homecare and bereavement support. The multidisciplinary staff provides a calm and caring environment to help terminally ill patients and their families. The Hospital's Long Term Care Services benefit from the Hospital's expertise in respiratory disorders and in other medically unstable conditions.

The Hospital's outpatient diagnostic and treatment facilities provide ambulatory care to the community and support to discharged patients. The outpatient services include an Asthma Management Center, Sleep Disorder Center, ENT Clinic, Pulmonary Clinic, Outpatient Pulmonary Rehabilitation Program, Allergy and Immunology Clinic.

The aim of Mount Sinai's outreach programs is to educate the public about various respiratory diseases in an effort to prevent future medical problems. These programs are an example of preventive medicine and are another avenue used by Mount Sinai Montreal to help keep people healthy. Constant attention to the needs of the community is one of Mount Sinai Hospital Center's hallmarks.

Mount Sinai Hospital Center is proud to have a devoted and active Foundation and Auxiliary. These organizations have always been staffed by a dedicated team of volunteers who are committed to enhancing the lives of the patients Mount Sinai serves. Mount Sinai is proud to be recognized as a McGill University affiliated teaching Hospital and is fully accredited by the Canadian Council on Health Services Accreditation.

From the Hospital's inception at the start of the 20th century, the founders of Mount Sinai Montreal were committed to providing exceptional care to its patients. It's this commitment to excellence that the staff and volunteers proudly continue today, which makes Mount Sinai not just a hospital but what a hospital is meant to be.

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 A MCGILL UNIVERSITY
AFFILIATED TEACHING HOSPITAL



Elliot L. Bier
President
Mount Sinai Hospital Center



Joseph Rothbart
Executive Director
Mount Sinai Hospital Center

Report of the President of the Board and the Executive Director

On the eve of its centennial, Mount-Sinai Hospital Center has once again risen to the numerous challenges to adequately meet the health needs of the population.

We pursued our activities in the planning of the expansion and renovation of our physical installations. For this purpose, the entire staff was consulted. They were invited to share their observations on the plans and sketches during the second round of consultations. This phase will allow us to reflect further on the architectural design which we have adopted for the future. Fundamentally centered on the development of private and public spaces which will stimulate rehabilitation, autonomy and which will be user friendly, our concept integrates the most recent developments with regards to the reduction of nosocomial infections.

Innovative, the initial architectural concept developed by Mount-Sinai could become a source of inspiration for other hospitals who wish achieve the prospect of quality, a balance between the mission of diagnosis-care and hotel-lodging functions.

On the subject of nursing care, the Hospital Center has proceeded to revise in depth its approach and its policy on restraint measures. In accordance with the orientations of the Ministry of Health and social services, a multidisciplinary committee has reviewed possible alternatives to physical and chemical restraints. The recommendations submitted favoured a more systematic recourse for solutions which will maximize the autonomy of the users while ensuring their safety. The recommendations will also allow to document more precisely the follow-ups made.

We pursued our projects regarding the improvement of the quality of life our long term care residents. With the support of the Association paritaire pour la santé

et la sécurité du travail du secteur affaires sociales (ASSTAS), we conducted a detailed analysis of the distribution and sequence of tasks performed by the staff. This exercise establishes an information base for developing pilot projects aimed at moulding and rendering more flexible the organization of work while respecting the choices and habits of the residents.

We have also put at the disposal of palliative care patients and families a free service for audio / video conference by internet which allows them to communicate with their loved ones all over the world.

During the fiscal year of 2007-2008, 7 complaints were lodged by 7 different people. Following an investigation, these were resolved to the satisfaction of all concerned parties.

We have pursued with the planning of our emergency measures in the event of a pandemic outbreak by identifying the essential services according to the possible scenarios of manpower availability and have defined the subsequent roles and responsibilities.

Our medical diagnostic equipment is the subject of scrutiny. Approaching the deadline of their life expectancy, we have begun taking steps to update and modernize the medical imaging equipment. The replacement will coincide with the computerization of the filing and transmission of images (PACS) and adherence to the system of pooling of archives connecting the health establishments. During the last year, we finalized the implementation of management of the material resources software in Stores, as well as in the Central Distribution Center (CSR) in conjunction with financial management software.

Sensitive to the environment, we have launched several "green" initiatives to help reduce the impact of our activities on the global warming and the climate changes. Therefore, we replaced the air

conditioning and heating units and windows. We have also replaced part of our roof. All this contributed significantly to a bigger energy efficiency of the building. We continued to enrich our recycling program by including new materials to reduce the quantity of waste produced, particularly in the kitchen.

During the year 2007-2008, human resources were repeatedly the focus of our attention. According to the dispositions in the Law 30, we negotiated with the unions representing four groups of unionized employees, twenty six (26) local dispositions of the collective agreements in force at Mount Sinai Hospital. The negotiations went well and the results were fruitful.

At a time when there were debates at the Commission sur les pratiques d'accommodements reliées aux différences culturelles, the Hospital Center also took this opportunity to review its practices. While respecting the fundamental principles of the Jewish tradition and the rules of the kashrut, the hospital was able to develop an open approach and respect of the cultures, religions and languages which allows for the sensitivity and serenity of the French, English and allophone communities all over Quebec. This diversity in the population is represented by our staff representing 26 nationalities of the world.

We also followed very closely the new steps in the application of Law 90 and quite particularly those relating to the introduction of the therapeutic nursing plan. Formulated to optimize the nursing practice, the implementation of this new tool will be done gradually under the guide of the Mount Sinai Hospital Council of Nurses in collaboration with the Quebec Order of Nurses by March 31st, 2009.

Within the framework of our membership with the University of McGill, we received for the next five

The ethical guidelines for the members of the Board of Directors of Mount Sinai Hospital Center specify their duties and obligations in fulfilling of their responsibilities. These principles state that Board members are expected to:

- Show constant concern for the respect of human life and for the right to health and social services
- Actively participate with a team spirit in the development and realization of the general goals of the establishment
- Attend the Board's meetings and vote when required
- Conduct oneself in a manner which promotes the good faith, confidence as well as consideration required by the position
- Carry oneself with integrity and fairness
- Be honest, loyal and not breach trust
- Respect the confidentiality with respect to debates, exchanges and discussions

During the 2007-2008 year, no transgression of the present principles of ethics was registered.

years the confirmation of our status as a teaching hospital for the students to the postdoctoral program in domestic medicine. The presence of these young medical graduates in our midst allows Mount Sinai Hospital Center to be an important partner in the training of qualified manpower in the country as it is for students in pharmacy, nursing, inhalation therapy, physical rehabilitation, clinical nutrition, social work, archival work, health administration and computers. The welcome of foreign students is a unique opportunity to put Mount Sinai in the international spotlight.

We are continuously preparing for the celebrations of the 100th anniversary of our institution which will take place in 2009. Consisting of the representatives of four organizations who are pillars and who are part of the Mount-Sinai family, the Centennial Committee has set up a program of events and activities and various communications aimed at times at the medical community, other times at the general public and as well at the staff and volunteers. For the occasion, a competition was launched with the staff and the volunteers to help choose a theme or distinct people associated with the hospital's 100 years.

In conclusion, we wish to thank all the members of the board, the staff, the volunteers, the members of the various committees as well as our colleagues in the councils of the Corporation, the Foundation and the Auxiliary for their indestructible support. We send a particular thank you to the Auxiliary of Mount Sinai Hospital on the occasion of their 75th year of exemplary commitment to the service of the community.

United in the work and in the effort, we look forward to celebrate as of next year, the 100 anniversary of Mount-Sinai Hospital-Montreal.

Elliot L. Bier
President

Joseph Rothbart
Executive Director

MEMBERS OF THE BOARD AND ADMINISTRATIVE STAFF (as of March 31, 2008)

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Howard Blatt
Peter Erenyi
Miguel Escobar
Marlene Goldberg
Michael Goldwax
Philip Greenberg, *Treasurer*
Sandor Klein
Ruth Kovac, *Secretary*
Eric Maldoff
Elizabeth Markakis
Lionel Mincoff
Jeffrey Orenstein
Line Ouellet
Joseph Rothbart, *Executive Director*
Norman Wolkove

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Elliot L. Bier
Howard Blatt, *Chairman*
Ruth Kovac
Philip Greenberg
Joseph Rothbart, *Executive Director*

AUDITOR

Bessner Gallay Kreisman

ADMINISTRATIVE STAFF

Vivianne Amos
Head Nurse, Palliative Care & Long Term Care
Manny Batshaw
*Senior Consultant to the Development and
Communications Department*
Rubin Becker, M.D.
Director of Professional Services

Desrene Brown
Head Nurse, Long Term Care
Mario Cellitti *
Financial Counsellor
John David Couturier*
Director of Hospital Services
Donald Dussault
Head of Technical Services
Beverley-Tracey John
*Head Nurse, Short Term Care & Coordinator of
Physical Rehabilitation Department*
Denis Legault
Financial Counsellor
Ronald Marcotte
Head of Dietary Services
Elizabeth Markakis
Coordinator, Health, Safety & Ambulatory Care
Elaine McAlister
Complaint Commissioner
Adam Mongodin
Assistant Executive Director
Vicky Ouimette*
Director of Nursing
Carol Steadman
*Coordinator of Community Relations and Volunteer
Services*
Joseph Rothbart
Executive Director
Maryse Tomaras
Head of Medical Records
Golda Tradounsky, M.D.
Head of Palliative Care Services
Jean Villeneuve
Director of Finance
Norman Wolkove, M.D.
Head of Pneumology Services

* Resigned or left service



Rubin Becker, M.D.
Director of
Professional Services

Report of the Director of Professional Services

Mount Sinai Hospital Center has experienced another successful year in providing outstanding clinical services, pursuing high quality research and providing an important milieu for clinical teaching to emerging professional in a variety of health disciplines.

Our clinical programs provide unique services that form an integral part of the health care continuum. Our pulmonary program offers:

- Special expertise in pulmonary rehabilitation for inpatients and outpatients;
- A fully equipped sleep laboratory that conducts over 1,000 evaluations each year;
- Outpatient follow-up for a variety of lung conditions.

The pulmonary outpatient benefits from the input of an immunologist, an Ear-Nose-Throat (ENT) specialist, an Internist and Geriatrician.

The Palliative Care program provides a multidisciplinary approach to the care of terminally ill patients in our 15-bed unit as well as dedicated homecare services to keep patients in the comfort of their own home as long as possible.

Our Long Term Care program has 57 dedicated beds to individuals with major disabilities due to a variety of chronic illnesses. The welcoming home-like setting allows a better quality of life which is particularly attractive to younger patients requiring long term care.

Mount Sinai Hospital has a longstanding tradition and commitment to excellence in care. This philosophy,

vision and management is primarily due to a leader, Joseph Rothbart. I have worked with him for the past 24 years and my admiration, respect and love for him has continued to grow with each year. We all owe Joseph Rothbart a tremendous debt of gratitude for creating such a unique and wonderful environment.

Joseph, we all salute you!

Dr. Rubin Becker
Director of Professional Services

COUNCIL OF PHYSICIANS, DENTISTS AND PHARMACISTS

ACTIVE MEMBERS

- Dr. Frederica Abcarius, *Family Medicine*
- Dr. Marcel Baltzan, *Pneumology*
- Dr. Rubin Becker, *Geriatrics/Int. Med.*
- Dr. Manny Borod, *General Practice*
- Dr. Kateri Champagne, *Pneumology*
- Dr. Richard Dabrusin, *Pneumology*
- Dr. Martin Eiding, *Dentist*
- Dr. Harold Frank, *Pneumology*
- Dr. Joel Fox, *Pneumology*
- Dr. Jack Glay, *Radiology*
- Dr. Andrew Gonda, *Int.Med./Nephrology*
- Dr. Andrew Hirsch, *Pneumology*
- Dr. Adalbert Jegyud, *General Practice*
- Dr. Linda Klein, *Family Medicine*
- Dr. Suzanne Levitz, *General Practice*
- Dr. Max Myara, *General Practice*
- Dr. Marvin Nathens, *Radiology*
- Dr. Mark Palayew, *Pneumology*
- Dr. David Prupas, *Family Medicine*
- Dr. Marilisa Romano, *Family Medicine*
- Dr. Michael Rotaple, *Pneumology*
- Dr. Sydney Segall, *Cardiology*
- Dr. David Small, *Pneumology*
- Dr. Golda Tradounsky, *Family Medicine*
- Dr. Michael Wiseman, *Dentist*
- Dr. Norman Wolkove, *Pneumology*
- Dr. Edouard Yeghiayan, *Radiology*

CONSULTANT MEMBERS

- Dr. Seymour Blum, *Gastro-Enterology*
- Dr. Joseph Carlton, *Neurology*
- Dr. Jaime Caro, *Pneumology*
- Dr. Roger Fenster, *Surgery*
- Dr. Allan Finesilver, *Oto-Rhino-Laryngology*
- Dr. Saul Frenkiel, *Oto-Rhino-Laryngology*
- Dr. Isaac Fried, *Oto-Rhino-Laryngology*
- Dr. Abraham Fuks, *Immunology/Allergy*
- Dr. Phil Gold, *Immunology*
- Dr. Stephen Jacobson, *Urology*
- Dr. Pamela Jones, *Orthopedics*
- Dr. Morton Kapusta, *Rheumatology*
- Dr. Thomas Kohn, *Dermatology*
- Dr. Donald Laporta, *Pneumology*
- Dr. Karl Looper, *Psychiatry*
- Dr. Balfour Mount, *Palliative Care*
- Dr. Joseph Portnoy, *Microbiology*
- Dr. Arthur Rosenberg, *Haematology*
- Dr. Morris Schweitzer, *Endocrinology*
- Dr. Marilyn Segal, *Psychiatry*
- Dr. Nathan M. Sheiner, *Cardio-Thor. Surgery*
- Dr. Joseph Shuster, *Immunology*
- Dr. Peter Small, *Immunology/Allergy*
- Dr. Emile Svarc, *Ophthalmology*

ASSOCIATE MEMBERS

- Dr. Daniel Benaim, *Family Medicine*
- Dr. Linda Boretsky, *Family Medicine*
- Dr. Balint Budai, *General Medicine*
- Dr. Manon Côté, *Family Medicine*
- Dr. Benoit Deschamps, *Family Medicine*
- Dr. Michael Dworkind, *Family Medicine*
- Dr. Jeannette Janzen, *Family Medicine*
- Dr. Jacqueline Klvana, *Family Medicine*
- Dr. Virginia Myles, *Family Medicine*
- Dr. H.T. Nguyen, *General Practice*
- Dr. Norman Sabin, *Family Medicine*
- Dr. Eli Segal, *Family Medicine*
- Dr. Lorne Wiesenfeld, *Family Medicine*

HONORARY MEMBERS

- Dr. David Halperin, *Oto-Rhino-Laryngology*
- Dr. Stanley Eiding, *Int. Med./Chest Diseases*

PHARMACISTS

- Mrs. Joelle Amselem, *Pharmacist*
- Mr. Claude Bouhadana, *Pharmacist*
- Mrs. Iris Dayan, *Pharmacist*

2007-2008 COUNCIL OF NURSES

- Elizabeth Markakis, Coordinator Health - Safety and Ambulatory Care
- Linda Paquin, Nursing Assistant
- Judy MacDonald, Nurse
- Belle Maclan, Nurse, Pre-Admission
- Kristine McNally, Nurse Educator
- Vicky Ouimette, Director of Nursing
- Joseph Rothbart, Executive Director

2007-2008

EXECUTIVE COMMITTEE OF THE MULTIDISCIPLINARY COUNCIL

- Line Ouellet, Assistant Head Radiology Technology
- Risa Segal, Dietician
- Maria Statathos, Physiotherapist
- Adam Mongodion, Assistant Executive Director
- Joseph Rothbart, Executive Director



Howard Blatt
President of the Mount Sinai
Hospital Corporation

Report of the

President of the Corporation

Over the year 2007-2008, the Corporation oversaw the implementation and completion of many projects throughout the hospital:

- Replacement of the individual heating and air conditioning units;
- Replacement of two medical air compressors;
- Replacement and renovation of twenty-one windows;
- Renovation of the medication rooms on all three care units;
- Installation of the two therapeutic bathrooms on the 3rd and 4th floors;
- Creation of an office space for professionals on both same floors;
- Replacement of the main floor linoleum;
- Repair of the 4th floor roof;
- Renovation of the cafeteria wall;
- Insulation of the glycol conduit pipes on the roof;
- Replacement of an elevator cylinder;
- Replacement of the electric hot water heater.

Over this past year, the Corporation continued to review the impact of the implementation of our strategic plan with respect to the proposed expansion and conversion of our long term beds into a sub-acute chest and long term palliative beds.

We also continued to monitor the present situation with respect to Bill 83 and its effect on our hospital which remains status quo at this time.

The Corporation congratulates the Auxiliary on the success of its gala and its continued effort in raising funds to refurbish the 4th floor. We thank also to the Auxiliary for the purchase of much needed equipment for the hospital over the past year.

Congratulations once again this year to the Foundation for their annual Golf Tournament and another successful Sinai Car Rally. We also support and wish the Foundation much success in its upcoming Capital Campaign to support the hospital's expansion and renovation projects.

The healing garden continues to grow in both beauty and stature once again receiving an award for outstanding beauty from the City of Cote St. Luc in the public category for the 4th year in a row.

At this time, we wish to thank all the members of the Corporation Board of Trustees, the Hospital Center Board, the Foundation and the Auxiliary along with the staff and volunteers who do their best every day to uphold the mission statement of our hospital.

As we move towards our Centennial the Corporation looks forward to a year of Celebration and continued success as an outstanding healthcare facility.

Howard Blatt
President of the Mount Sinai Hospital Corporation

BOARD OF TRUSTEES MOUNT SINAI HOSPITAL CORPORATION

Rubin Becker, M.D.
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Eric Maldoff
President of the Mount
Sinai Hospital Foundation

Report of the President of the Foundation

The Foundation is proud to continue to assist Mount Sinai Hospital Center in achieving its objectives through continued financial support. In 2007-2008, the Foundation set out to enhance its administrative and governance structure in order to best support the hospital in meeting its growing short and long terms financials needs. I am proud to report we have succeeded in putting the Foundation on solid footing to move forward with a major Capital Campaign as well as an ongoing and sustainable annual giving program in support of the hospital. In March we said good-bye to Belinda Pyle, acting CEO, who successfully led the Foundation through its transformation and we recruited Wendy Corn, our new CEO, a fundraising professional with fifteen years of non-profit development experience.

This year, we were able to provide over \$700,000 in support of the hospital and the following programs:

- Palliative Long Term Program
- Palliative Home Care Program
- International Palliative Care Symposium

- Art Therapy
- Asthma Management Centre
- Nicotine Addiction Centre
- Out Patient Pulmonary Rehabilitation
- Healing Garden
- Social Services
- Make A Wish

We pay tribute to our generous and loyal donors who responded to our request for support for the following events:

- The 19th Mount Sinai Hospital and National Bank Financial Golf Tournament took place on July 5th at Le Fontainebleau Golf Course. Twenty-eight foursomes participated in the exciting day.
- The 3rd Annual Sinai Rally took place on August 19th, Forty-two teams participated. The day proved to be a great success.

• Our annual direct mail program and Make a Wish Program continue to grow allowing us to fund the hospital's immediate needs.

• We continue to raise funds for the Capital Campaign in support of a significant hospital expansion project. Plans are underway to launch the public portion of the campaign in the near future.

The Foundation is deeply appreciative of all of its supporters: The Hospital's patients, residents and their families who continue to be the Foundation's source of inspiration; the Hospital Administration and its staff in providing exceptional care; and our Board, the Centre Board, Corporation, Auxiliary, and all the volunteers whose single minded determination and expertise make it all come together. Finally, our profoundest gratitude goes to our donors whose unwavering support ensures that the Hospital can continue to provide such high quality care.

Eric Maldoff
President of the Foundation

FOUNDATION BOARD OF DIRECTORS AND ADMINISTRATIVE STAFF

HONORARY CAMPAIGN CHAIRS

Stephen Bronfman
Milly Lande, C.M.
Ben Weider

HONORARY DIRECTORS

Marjorie Bronfman, C.M.
Reford MacDougall, C.M.
Herbert Siblin, C.M.
Warren Simpson
Sheila Zitterer

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Mitchell Litwin
Monette Malewski
Avrum Morrow
Joseph Rothbart
Herschel Segal
Monica Shapiro
Harvey Wolfe
Rhonda Wolfe
Cynthia Zarr
Robert Zitterer

HEAD OF FOUNDATION

Wendy Corn
Belinda Pyle (Interim)*

* Left service



Cynthia Zarr
Marlene Goldberg
Co-Presidents

Report of the Co-Presidents of the Auxiliary

The Auxiliary is a dedicated team of volunteers who last year donated over 14,000 hours of service to Mount Sinai Hospital.

Once again this year we celebrated a great many successes starting off in June with our 74th Annual meeting and closing luncheon attended by many current and new members alike. All in attendance enjoyed the tales of Author, Joe King.

This was followed on June 14th by our major fundraising event of 2007 a Gala Tribute Dinner Dance honoring community leaders Sheila and Victor Goldbloom. This was an extremely successful evening attended by over 300 guests. All the funds raised will be allocated to the refurbishment of the fourth floor.

In September we held our Open Board and Breakfast with guest speaker Dr. Joe Schwarcz, Director of McGill University Office for Science and Society.

Our 22nd Annual Bridge Tournament took place in October at the Hillsdale Golf and Country Club. Over 400 participants took part in this highly successful fundraising event.

We continue to solicit and offer new membership opportunities including Life Membership through our annual campaign which is an important source of revenue for the Auxiliary and a rewarding way of becoming involved.

This past year we held our 3rd annual Literary Club, now known as the Mount Sinai Literary Breakfast Club, held for the first time at the Beth-El Synagogue. This sold out event was not only a wonderful social activity but a successful fundraiser for the Auxiliary.

Proceeds from our Annual Raffle raised enough money to complete the funding of two very much needed Electro Cardiogram Machines for the hospital. The Auxiliary through the generosity of its donors also purchased two Geriatric Chairs and two special lightweight shower chairs both providing better mobility and comfort for our patients and residents. We were also able to purchase two hi-lo beds as they are essential for the safety of our patients in Palliative Care and Long Term residents.

In addition to our plans for the refurbishment of the 4th floor we received a generous donation of framed photographs which now adorn the main cafeteria wall as well as other public space in the hospital providing a much warmer atmosphere. We continue to assist with the funding of the Healing Garden maintenance program a place of peace and solace for all.

Our fundraising efforts also include such projects as our can tab program which recoups thousands of tabs from people across North America which are then turned into revenues. We also receive donations through our common cents boxes and from our annual Agenda Book.

Once again this year we achieved great financial success through our Gift Shop, a fully volunteer-based run initiative. The Auxiliary continues to offer other services including the Sinai Coffee Shop, the welcome packages to all new admissions as well as a podiatry service for our Long Term residents.

In closing we would like to thank Mr. Elliot Bier, President of the Hospital Center, Mr. Howard Blatt, President of the Hospital Corporation and Mr. Eric Maldoff, President of the Foundation ,Mr. Joseph Rothbart, Executive Director and Mr. Adam Mongodin, Assistant Executive Director, for their tremendous support and encouragement.

We will continue to strive to live up to our motto "GIVE SO THAT OTHERS MAY LIVE"

Marlene Goldberg
Cynthia Zarr
Co-Presidents

THE EXECUTIVE AND BOARD MEMBERS OF THE AUXILIARY 2007-2008

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Lorraine Caplan
Marlene Dick
Karen Fried
Judy Garber
Marcia Guralnick
Sarah Guttman
Nettye Heft
Sarah Kauffman
Frances Kessner
Ruth Kovac
Vivian Kujavsky
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Henia Lifshitz
Lillian Linder
Zelda Morantz
Joan Morris
Rita Posel
Frema Routtenberg
Patsy Rudner
Carol Seltzer
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Bunny Russman*

TREASURER

Celia Myerson

MEMBERSHIP

Helen Diamond
Bea Schachter
Naomi Sharpe

LIFE MEMBERSHIP

Marlene King
Vivian Kujavsky

*Deceased



Statistics

	2007-2008		2006-2007	
Diagnosis on Discharge				
Obstructive Chest Diseases		52%		53%
Other Respiratory Diseases		12%		10%
Malignant Tumors of Respiratory System		9%		10%
Malignant Tumors other than Respiratory System		23%		23%
Others		4%		4%
Number of Admissions	599	100%	578	100%
Respiratory Short Term Service	371	62%	371	64%
Palliative Service	201	33,5%	183	32%
Long Term Service	27	4,5%	24	4%
Outpatient Clinics				
Emergency (visits)		-		-
Specialty Clinics (visits)		1,173		1,447
Chest (visits)		9,194		10,157
Physical Medicine				
Physiotherapy (visits)		7,058		7,540
Occupational, Recreology, Music and Art Therapy (visits)		14,788		14,857
Diagnostic Services				
Cardiology (units)		17,992		17,810
Radiology (units)		75,210		87,765
Laboratories (units)		162,467		174,021
Procedure Room				
Minor Surgical and Special Diagnostic Procedures		1,555		1,348
Respiratory Therapy				
(treatments)		35,522		33,181
Pharmacy				
Medications prepared per year		33,342		32,145
Medications prepared per day		128		124
Social Services				
Inpatient Cases		581		558
Outpatient Cases		29		27
Medical Records *				
(Admission units)		32,620		30,559
Dietary				
(number of meals)		152,421		148,243
Laundry				
(number of kilos)		122,019		126,685
Volunteer				
(number of hours)		43,718		45,564

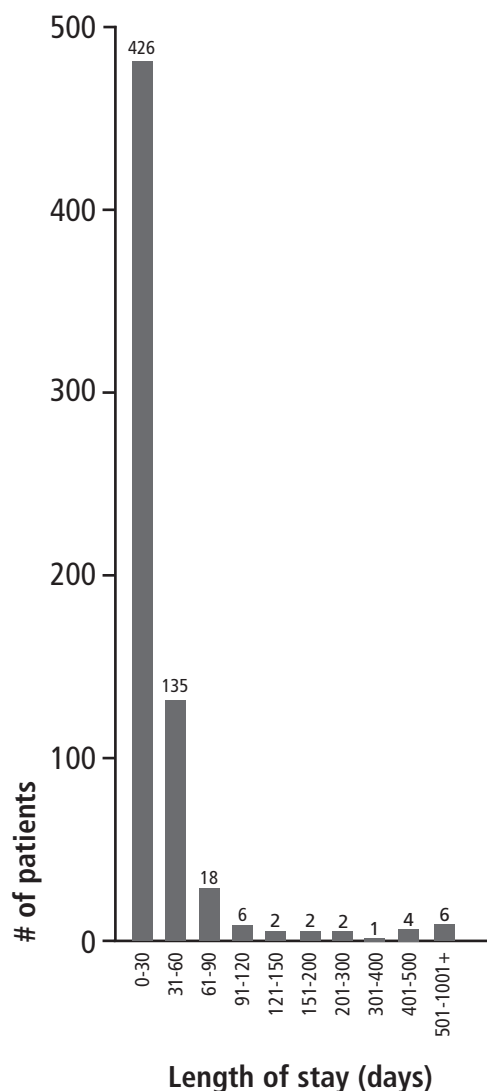
* The 2006-2007 statistics have been restated in accordance with the standards of the Ministry of Health and Social Services.



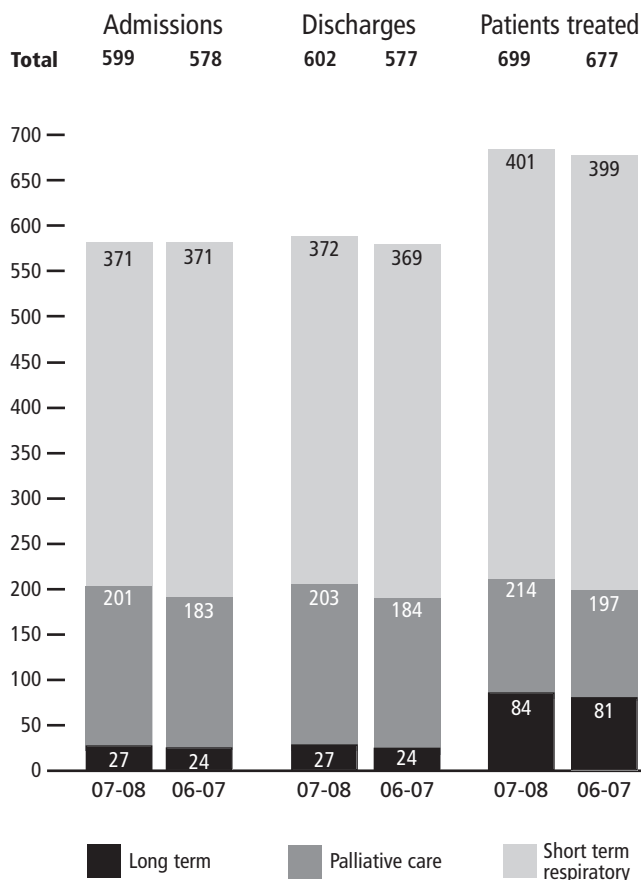
	2007-2008	2006-2007
Admissions	599	578
Discharges		
Regular	393	387
Against Medical Advice	1	0
Palliative Care Services	183	165
Others	25	25
Total Discharges	602	577
Autopsies	1	0
Patient Days	36 001	35 613
Average Length of Stay (days)	57,03	56,15
Patients Treated	699	677

REGIONS AND AREAS SERVED

- 04 Mauricie - Bois-Francs
- 06 Montréal
- 08 Abitibi-Témiscamingue
- 13 Laval
- 14 Lanaudière
- 15 Laurentides
- 16 Montérégie



Statistics of admissions, discharges and patients treated



Centre hospitalier Mont-Sinaï - Fonds d'exploitation

État des revenus et dépenses pour l'exercice terminé le 31 mars 2008

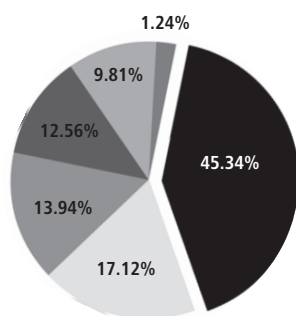
Mount Sinai Hospital Center - General Fund

Statement of revenues and expenditures for the year ended March 31, 2008

Répartition des dépenses selon les différents services

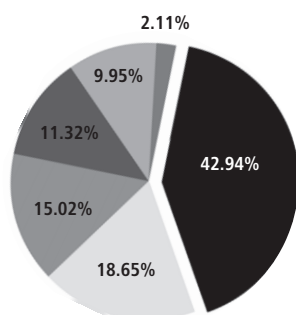
Breakdown of expenses among the various departments

2007-2008



Soins infirmiers / Nursing Care	45.34%
Serv. Diagnos./Thérap. - Diagnos./Therap. Serv.	17.12%
Services techniques / Technical Services	13.94%
Service alimentaire / Dietary	9.81%
Administration	12.56%
Recherche-formation / Research-Education	1.24%

2006-2007



Soins infirmiers / Nursing Care	42.94%
Serv. Diagnos./Thérap. - Diagnos./Therap. Serv.	18.65%
Services techniques / Technical Services	15.02%
Service alimentaire / Dietary	9.95%
Administration	11.32%
Recherche-formation / Research-Education	2.11%

	2007-2008 \$	2006-2007 \$
Revenus / Revenues		
Ministère de la Santé et des Services Sociaux	9,721,534	9,511,132
Équité salariale rétroactive / Retroactive Pay Equity	-	825,834
Autre / Other	2,304,457	2,343,535
	12,025,991	12,680,501
Dépenses / Expenses		
Salaires et avantages sociaux / Salaries and Social Benefits	9,490,113	9,258,469
Équité salariale rétroactive / Retroactive Pay Equity	-	825,834
Autres fournitures et dépenses / Other supplies and expenses	2,535,878	2,596,198
	12,025,991	12,680,501
Excédent des dépenses de l'exercice		
Excess of expenditures for the year	-	-
Excédents des revenus – au début de l'exercice		
Surplus – beginning of year	37,841	35,621
	37,841	35,621
Redressements affectés aux exercices antérieures / Prior period adjustments	-	2,220
Excédents des revenus – à la fin de l'exercice		
Surplus – end of year	37,841	37,841

Les rapports financiers sont des extraits des états financiers, vérifiés pour l'exercice terminé le 31 mars 2008 et sont sujets à modification par le M.S.S.S.

The financial reports are extracted from the audited financial statements for the fiscal year ended March 31, 2008 and are subject to adjustments by M.S.S.S.

NOTE : En date du 1er janvier 1972 toutes les immobilisations du Centre hospitalier appartenait à la Corporation de l'Hôpital Mont-Sinaï. A partir du 1^{er} janvier 1972, en accord avec la loi sur les services de santé et les services sociaux du Québec (R.S.Q. 1971, Chapitre 48), le Centre hospitalier avait le pouvoir d'utiliser ces actifs pour mettre en fonction un centre hospitalier.

NOTE: As of January 1, 1972, the Corporation of Mount Sinai Hospital owned all fixed assets of the Hospital Center. Effective January 1, 1972 in accordance with the Act respecting Health Services and Social Services in the Province of Quebec (R.S.Q. 1971, Chapter 48), the Hospital Center was empowered to use these assets for operating a hospital facility.

Bien que les actifs ainsi que les additions et améliorations qui s'y rapportent ont été continuellement insérés dans le bilan du Centre hospitalier, la Corporation de l'Hôpital Mont-Sinaï se considère comme étant le propriétaire de toutes les immobilisations indiquées dans le bilan du Centre hospitalier.

While the assets, together with additions and improvements thereto, have continually been shown on the balance sheet of the Hospital Center, the Corporation of Mount Sinai Hospital considers itself to be the owner of all fixed assets reflected on the balance sheet of the Hospital Center.

Centre hospitalier Mont-Sinai

Bilan au 31 mars 2008

Mount Sinai Hospital Center

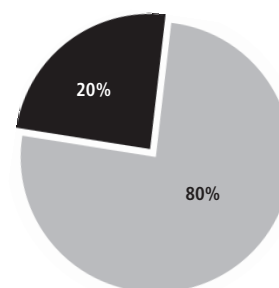
Balance sheet as of March 31, 2008

	2007-2008 \$	2006-2007 \$
ACTIFS / ASSETS		
Fonds d'exploitation - Court terme / General Fund - Current		
COURT TERME / CURRENT		
Encaisse et dépôts à terme / Cash and term deposits	1,653,142	826,461
Inventaires / Stocks	121,292	113,759
Comptes à recevoir / Accounts Receivable	727,301	622,538
Frais payées d'avance / Prepaid expenses	70,463	76,126
Dû par le fond d'immobilisation / Due from Plant Fund	198,617	-
Dû par les fonds spécifiques / Due from restricted funds	-	93 919
	2,770,815	1,732,803
Biens afférents à des fonds spécifiques / Restricted Funds Assets		
	1,069,084	1,209,249
Fond d'immobilisation / Plant Fund		
COURT TERME / CURRENT		
Encaisse et dépôts à terme / Cash and term deposits	284,189	314,240
Comptes à recevoir – M.S.S.S./R.R.S.S.S. / Accounts Receivable M.S.S.S./R.R.S.S.S.	468,549	370,073
Dû par fonds d'exploitation / Due from general fund	-	101,240
Dû par la Corporation de l'Hôpital Mont-Sinai / Due from Corporation of Mount Sinai Hospital	270,303	270,303
	1,023,071	1,055,856
Comptes à recevoir – M.S.S.S. / Accounts receivable - M.S.S.S. Dû par la Corporation de l'Hôpital Mont-Sinai / Due from Corporation of Mount Sinai Hospital	6,631,532	7,001,606
Terrain, immeubles et outillage / Land, Buildings and equipment (Valeurs obtenues par expertise) (note) / (At appraised values) (note)	833,463	1,086,632
	21,998,720	19,808,057
	30,486,786	28,952,151
Actif total / Total Assets	34,326,685	31,894,203
PASSIFS / LIABILITIES		
Fonds d'exploitation / General Fund		
COURT TERME / CURRENT		
Comptes à payer / Accounts payable	2,732,974	1,593,722
Dû au fonds d'immobilisation / Due to Plant Fund	-	101,240
	2,732,974	1,694,962
EXCÉDENTS DES REVENUS / SURPLUS	37,841	37,841
	2,770,815	1,732,803
Fonds spécifiques / Restricted Funds		
Passif / Liabilities	38,592	140,978
Avoir / Capital	1,030,492	1,068,271
	1,069,084	1,209,249
Fonds d'immobilisation / Plant Fund		
COURT TERME / CURRENT		
Partie à court terme – emprunt bancaire / Current portion of bank loan	270,303	270,303
Partie à court terme des obligations payables / Current portion of bonds payable	370,073	370,073
Dû au fonds d'exploitation – Due to general fund	198,617	-
Financement temporaire - Temporary financing	2,386,168	513,535
	3,225,161	1,153,911
EMPRUNT BANCAIRE / BANK LOAN	833,463	1,086,632
OBLIGATIONS PAYABLES / BONDS PAYABLE	6,631,532	7,001,606
	10,690,156	9,242,149
Avoir / Capital	19,663,180	19,576,552
Plus-valeur d'expertise / Appraisal increment	133,450	133,450
	19,796,630	19,710,002
	30,486,786	28,952,151
Passif Total / Total Liabilities	34,326,685	31,894,203

Division des dépenses
pour chaque dollar de l'hôpital

Cost breakdown
per hospital dollar

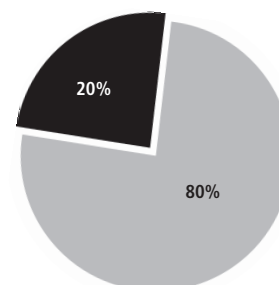
2007-2008



Salaires incluant avantages sociaux
Salaries including social benefits 80%

Autres fournitures et dépenses
Other supplies and expenses 20%

2006-2007



Salaires incluant avantages sociaux
Salaries including social benefits 80%

Autres fournitures et dépenses
Other supplies and expenses 20%