NEXT THINKING
From new ideas to advanced understanding.

From scientific discovery to better patient care.

This is where the next generation of aging begins.

Where frontiers are pushed forward, new discoveries become best practice, and today’s pioneers are helping to develop tomorrow’s leading minds.
Welcome to Baycrest today.

Welcome to Next Thinking.

Baycrest is an academic health sciences centre fully affiliated with the University of Toronto.
Evidence of this forward thinking is in our many accomplishments over the years. This year was no exception.

Accreditation Canada gave Baycrest an A-plus for excellence in senior care, safety and operations management, citing three of our programs as exemplars of leading practice for the country. A ranking of “accredited with exemplary standing” places us in the top five per cent of the more than 1,000 organizations surveyed across the country.

We went to Washington, D.C. to debut the world’s first functioning virtual brain at the annual meeting of the Society for Neuroscience attended by 32,000 scientists and clinicians from around the world.

We received significant support from the Ontario government, underscoring the special role Baycrest plays in the health care system. The Ministry of Economic Development and Innovation has agreed to invest $14.1 million over the next three years to support continued innovations at Baycrest. The Ministry of Health and Long-Term Care chose Baycrest to lead the Toronto portion of a province-wide support strategy for people who exhibit behavioural problems due to dementia and other neurological conditions.

Baycrest was one of three organizations designated by the province as a Centre of Learning, Research and Innovation in Long-Term Care. As part of that designation, we are creating interprofessional teaching units in our nursing home to train frontline staff and other health professionals and students, from Baycrest and other facilities, in best, evidence-based approaches to care.

How many seniors’ health sciences centres can claim to have been cited for the nation’s highest standards of quality care in the same year as being asked to lead two major initiatives for the province’s seniors, and launching a virtual brain?

These successes demonstrate Baycrest’s relentless focus on leading the way, all in the name of delivering the best quality of care at the bedside, in the community and around the globe. These are the kinds of innovations and accomplishments that set us apart and bring us closer to achieving our ultimate ambition of enhancing the experience of what it means to grow old.
Our commitment to innovation is driving our focus on generating transformative “next” practices. This year we opened a new Innovation, Technology and Design Laboratory, where scientists, clinicians, engineers, architects, designers and artists collaborate with seniors, caregivers and care providers to develop new products, technologies and processes that will improve care and quality of life as we age.

We also have great expectations for our new neuroeducational program which is being supported by a combined $5 million Federal Development and Ontario Brain Institute grant. The grant will help fund the development and testing of cognitive games for children to optimize classroom learning and skills acquisition. Based on scientific findings from this process, novel means of strengthening cognitive functions in the human brain throughout the lifespan will be identified and developed.

We continue to make progress in assembling and leading the Seniors Quality Leap Initiative – a collaboration of 13 of the highest-performing organizations in our sector in North America. The aim is to benchmark and redefine optimal performance metrics and improvement activities. The network also provides an opportunity to collaboratively test the next generation of senior care innovations.

We also launched the MDS Scorecard – a first for the long-term care sector anywhere in the world. The scorecard gives real-time feedback to care providers on the health status of our nursing home residents and our hospital patients as well as any potential risks that need addressing. At the same time, the scorecard provides valuable data for system-wide planning, quality monitoring and accountability.

We made considerable headway in our efforts to commercialize our know-how so we can share it on a global scale. For instance, we are building our in-house capacity with new entrepreneurs-in-residence in the Centre for Brain Fitness who work with clinicians and scientists to develop and market our intellectual property. We are also excited to see Cogniciti, our for-profit company with MaRS, launch a new on-line cognitive assessment tool later this year.

Additionally, we signed a letter of interest with Peking Union Medical College to create a partnership that will bring our expertise in geriatric rehabilitation to China.

As you can see, much has been accomplished as we work to implement our vision for the “Next Generation of Baycrest.” Our history as an organization has been to continually evolve, aspire to new heights, and achieve despite the obstacles. We are now about to embark on a refreshing of our strategic plan that will emphasize three critical imperatives: “best in class” quality, significant innovation, and top-notch efficiency. Achieving great outcomes in each of these areas will secure our position as the global leader in aging and brain health.

The direction we are headed has been largely influenced by Dr. Anthony Melman, who recently stepped down as chair of the Baycrest Board of Directors after five years of invaluable leadership to this organization. On behalf of our entire organization, we want to thank Tony for his enormous contributions to Baycrest.

We would also like to extend our deepest gratitude to our hardworking and dedicated staff, our extraordinary volunteers, board and committee members, generous donors and our clients and families, who are responsible for Baycrest’s successes and commitment to excellence. Baycrest is just a name. It is the people who make this organization thrive and strive to be the best.

GARRY FOSTER
Chair, Baycrest Board of Directors

DR. WILLIAM REICHMAN
President and Chief Executive Officer, Baycrest
Given our deep and rich tradition within the Jewish community, it follows that we are one of a handful of entities within the city which has historically been the recipient of its steadfast and unwavering philanthropic support.

Our donor community has been instrumental in making Baycrest what it is today: an academic health sciences centre fully affiliated with the University of Toronto, with a budget of $150 million, 2,000 staff, 2,000 volunteers and 1,000 students per year. Baycrest Health Sciences provides programs and services to approximately 2,500 people a day through a unique continuum of care that includes wellness programs, residential housing, outpatient clinics, a 472-bed nursing home, a 192-suite assisted living facility, a 120-suite independent living facility, and a 300-bed complex continuing care hospital with an acute care unit.

In its entirety, Baycrest provides 273,000 patient days of care during 60,000 patient visits annually to a patient population that represents the diversity of the Greater Toronto Area. In fact, our entities with the largest patient populations – the hospital, outpatient and community programs – draw 70 per cent of their patients from outside the Jewish community. As our patient community grows and broadens to reflect the diversity of our city, so too does our donor community.

Strong donor support has enabled Baycrest to become a leader in advancements in patient care as well as in cognitive neuroscience and memory research, with the goal of transforming the journey of aging. The global reputation of the Rotman Research Institute reflects its ability to raise and answer fundamental questions about memory, aging and the neuroscience of cognition. The affiliated Kunin-Lunenfeld Applied and Evaluative Research Unit leads the way in demonstrating how this research informs applied, translational research around the world.
The continuum of and advancement in patient care and research is driven by innovation, technology and design, a growing cohort of graduate students and ever-increasing possibilities for commercialization and global reach. Our unique and visionary approach appeals to our traditional base of supporters and also to the community at large. As Keith Pelley, one of the dancers in this year’s fabulously successful Dancing With Our Stars gala said, “If you have a brain and you are getting older, then you need to know what is going on at Baycrest!”

This cultural icon has evolved into a distinctive institute of patient care and research with the potential to transform aging as we know it on a global scale. The opportunities are enormous. Baycrest Health Sciences is uniquely positioned to lead in the innovation of aging and to inspire local, national and global initiatives across a range of disciplines from advancement in patient care and research, to innovation, technology and design in science and medicine.

Given its historic significance and its relevance to the innovation economy, Baycrest is positioned to supercharge its capacity both internally and externally through a comprehensive re-engineering of the Foundation. Through adequate investment, proper planning, strict adherence to metrics, efficiencies, focus, discipline and precise execution, the Baycrest Foundation will be able to successfully initiate and execute an unprecedented fund-raising effort.

This transformation was initiated in September 2011 with a complete audit and assessment of the Foundation and its performance, development and approval of a multi-year business plan, a reorganization of the staff, and planning for a three-phase, five-year reinvention of the development function. Work has begun on a brand awareness campaign: a media, marketing and visibility effort to educate and raise Baycrest’s profile in carefully targeted markets. And we are building integration and partnership among the volunteer committees (Foundation and Baycrest Centre Boards and Ad Hoc Committees) which will serve as the backbone for prospect and donor pipeline development focused on the business, linguistic, cultural and geographic areas representing the diversity of our global portfolio.

Our plans are ambitious and the rewards will be profound: patient care, academic and research capacity will be enhanced, bench-to-bedside translational medicine enabled, much needed space created, and a high performance institutional advancement effort, providing sustaining visibility and philanthropic support, will position Baycrest for the next campaign. Above all, we can and will create a better future for seniors, not just at Baycrest or in Toronto, but globally.

Baycrest Health Sciences and its Foundation are ready to soar to levels likely never thought possible by Mrs. Greenberg in 1913. The passion and courage of our donor community remains the same. Thank you and we look forward to your continued support as we honour our roots and spread our wings.

WARREN KIMEL
Chair, Baycrest Foundation Board of Directors

SUSAN SUTTON
President, Baycrest Foundation and Vice-President Global Institutional Advancement
Next Practice

Never satisfied with the status quo, Baycrest is continually focused on developing the next generation of best practices in senior care. That focus is reflected in the “accreditation with exemplary standing” Baycrest received from Accreditation Canada after the independent surveyor completed a top to bottom review of the organization in 2011.

This ranking places Baycrest in the top five per cent of more than 1,000 health-care organizations surveyed across the country. In particular, the accreditors gave us high marks for excellence in patient care and safety, and operations management.

Baycrest fulfilled all of the required organizational practices and met 99.6 per cent of 1,400 designated accreditation standards – a significant achievement, not only in the field of aging, but in the health-care system overall.

“Accreditation Canada applies rigour to its review process to ensure organizations are meeting the standards required by Canadians,” said the surveyor’s president and chief executive officer Wendy Nicklin. “The success with accreditation at Baycrest shows the remarkable commitment of the leadership and staff to ongoing quality improvement on behalf of the people it serves and the lives it touches.”

In addition to this exemplary ranking, three of Baycrest’s innovative programs and services were singled out by Accreditation Canada as “leading” for the country and setting the bar for excellence in a specific health-care field, and contributing to the overall betterment of health care in Canada.

They include:

• Baycrest’s caregiver support services, which include a range of evidence-based programs that educate, counsel and connect family caregivers.

• The innovative Acute Care and Transition Unit, which provides round-the-clock specialized care to seniors with sub-acute or chronic conditions, reducing emergency room and acute care hospital admissions and providing better access to treatment.

• A specific practice on the Acute Care and Transition Unit that reduces the transmission of methicillin-resistant Staphylococcus aureus infection (MRSA), a common and potentially serious infection often acquired in hospitals. Baycrest’s leading infectious disease practices reduced the transmission of MRSA by 89 per cent over the course of a six-month study on the unit.
AWARD-WINNING PROGRAM SERVES SENIORS WELL

A busy emergency department is not an ideal place for frail seniors, yet too often that is where they find themselves.

The Acute Care and Transition (ACT) unit is a short-stay program in Baycrest’s hospital that functions around the clock to provide urgent and emergent care to seniors over age 65. Staff are experts in managing elderly patients with multiple, complex conditions, especially those who have dementia or who require cardiac care.

Identified as a leading practice by Accreditation Canada, the ACT unit was also recognized this past year by the Regional Geriatric Program (RGP) for its contributions to improving the health of seniors.

A leading practice is one that sets the bar for excellence in a specific area of health care. In granting its first-ever Award of Excellence to the ACT unit, the RGP cited the innovative interdisciplinary care delivered to seniors by a skilled team of geriatric specialists.

Partnering with long-term care homes, acute care hospitals, community assessment and outreach teams and family physicians, the ACT unit is improving care, enhancing patient flow in the system and reducing the number of alternative level of care bed days required in Ontario.

Since October 2009, the ACT unit has diverted more than 1,000 visits to the emergency room and helped elderly patients avoid more than 24,000 inpatient days in acute care hospitals.

INNOVATIVE CAREGIVER CENTRE MADE POSSIBLE BY DONORS

A leadership gift from philanthropists Saul and Mira Koschitzky has made it possible for Baycrest to open a special centre to help families cope with the physical and emotional stresses of caring for loved ones who are cognitively or physically frail, or both.

“My late mother-in-law had Alzheimer’s so my wife and I are well aware of the need for such a centre,” says Saul Koschitzky. “Caregivers need support to help keep patients living at home longer.”

“My late mother-in-law had Alzheimer’s so my wife and I are well aware of the need for such a centre,” says Saul Koschitzky. “Caregivers need support to help keep patients living at home longer.” More than 80 per cent of Canadians over age 65 have at least one chronic condition. Most live independently, often with the support of family or friends.

Informal caregiving is a significant economic asset for the health-care system, notes Dr. Nasreen Khatri, clinician associate in the Rotman Research Institute. She points out, however, that the stress and anxiety experienced by about 40 per cent of family caregivers – most of whom are women – is a risk factor for depression, and depression in turn is a risk factor for dementia. “We need to have supports in place for caregivers all the way through their journey,” she says.

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SPOTLIGHTING BEST PRACTICES

Baycrest has been selected as a Best Practice Spotlight Organization (BPSO) candidate by the Registered Nurses’ Association of Ontario (RNAO) for 2012-15. BPSOs are health-care and academic organizations recruited once every three years by the RNAO.

The best practice guidelines Baycrest will be implementing include, among others, the prevention of falls; the assessment and management of pressure ulcers; screening for delirium, dementia and depression; and assessing and managing pain.

“The designation will help us make an even stronger impact on patient care because we will be enhancing our evidence-based practice through the implementation and evaluation of internationally recognized best practice guidelines,” says Karima Velji, Baycrest’s chief operating officer and chief nursing executive.

FAMILY CAREGIVERS
A VITAL RESOURCE

When lawyer Steven Benmor learned that his mother was in the early stages of dementia, he felt “absolutely clueless” about the illness and what it would demand of him as a son. “Nobody is born with innate expertise in caring for a family member who has dementia,” he says.

However, Benmor’s understanding of the illness and his role as a caregiver became much clearer after he joined Caring for Your Loved One, a six-week Baycrest support program for family members. After completing the program, participants can join an alumni group that meets once a month.

For spouses of persons with dementia living in the community, Baycrest offers The Changing Relationship, an eight-week program where participants discuss the emotional impact of caregiving for a husband or wife and share knowledge and information about resources.

Another clinician-facilitated group for spouses is Caring for Others. This innovative Web-based program allows caregivers to meet with each other from the convenience of their homes. The program reaches a unique group of younger adults providing care for husbands or wives who have frontotemporal dementia.

FTD is a rare syndrome that typically strikes people in their 40s and 50s and causes a gradual, progressive decline in behaviour and language, resulting in increasing dependency.

Earlier this year, at the end of a busy day running his Ontario farm, Keith Lamont regularly logged in to the program in the evenings. His wife, Mary, has FTD, and Keith is her main caregiver. Because he lives in a rural community, the Web group has been a godsend, he says.

“You live in an increasingly isolated world as friends and family step back and the caregiver has to address a menu of ever-increasing issues. When you join the group, you realize that there are other people going through the same thing and maybe you can share a coping mechanism you’ve discovered.”

Mary and Keith Lamont in the early days of their move from the city to the farm when Mary was still well.
Frank Liebmann has been treated for dementia at Baycrest for five years now, but he remembers nothing about the experience because the illness has robbed him of his memory. His wife, Harriet, on the other hand, recalls it all in vivid detail. She credits Baycrest with correctly diagnosing the condition and making sure her husband of 50 years continues to receive the care he needs.

As their disease progresses, about 60 per cent of patients who have Alzheimer’s or other neurological conditions will exhibit symptoms such as aggression, delusions and wandering. As the population ages, providing timely and appropriate care for a growing number of patients with these problems is becoming ever more challenging. Families and health-care providers are often not able to cope. Patients end up in acute care hospitals when they could – with the right resources and training – be better managed at home or in long-term care.

Baycrest leads Toronto BSO strategy
A new Ontario-wide program aims to achieve more equitable and coordinated access to expert care for these vulnerable patients, in the right setting and at the right time. The Ministry of Health and Long-Term Care is providing funding to the province’s 14 Local Health Integration Networks (LHINs) to implement its Behavioural Supports Ontario (BSO) strategy.

In January 2012, the Toronto Central LHIN appointed Baycrest to lead the BSO strategy in its catchment area. The appointment comes with $3-million in new annual funding.
The funding will support Baycrest in developing a specialized transitional unit in the nursing home, where the “next” practices in behavioural management will be created and shared throughout the organization and with community partners.

In addition, clinical and educational outreach teams will support other long-term care facilities and Community Care Access Centres in the Toronto Central LHIN. The teams will enable the transition of patients from one place of care to another and will help to prevent unnecessary or prolonged hospitalizations, emergency department visits and inappropriate long-term care admissions.

An education consortium is also being developed with key partners to enhance and integrate behavioural education and training across service providers in the Toronto Central LHIN. The focus will be on education and training for caregivers, primary care professionals, long-term care teams, nurses, and personal support workers in the community.

“Baycrest was chosen to lead this initiative because of our established leadership in caring for aging adults with dementia who exhibit complex behavioural symptoms,” notes Dr. Karima Velji, chief operating officer and chief nursing executive at Baycrest. “We were also chosen because of our designation as a provincial Centre of Learning, Research and Innovation which will allow us to leverage our expertise in teaching and training future health-care providers in behaviour support strategies.”

**GENEROUS GIFT FROM FREEMAN FAMILY ENHANCES SENIORS’ QUALITY OF LIFE**

In 1959, Baycrest opened the first adult day program in Canada. Currently, the Baycrest Community Day Centre for Seniors is one of the largest and most innovative in Canada, offering a variety of programs structured according to the cognitive ability of each individual.

The Day Centre offers excellent care: it is always full and in demand. Now, a $1 million leadership gift from the Freeman family has positioned the program to move beyond local seniors and families. It is poised to share knowledge with the broader health-care community worldwide. Their gift will fund a research assistant to help identify and implement innovations for supporting seniors at home, and will make possible research on the impact of the program on those we serve – and the broader community.

A portion of the gift will be devoted to subsidies for some clients in financial need who could not otherwise participate in these programs.

In recognition of the family’s leadership, the programs for the well elderly and physically frail, and those with mild cognitive impairment have been renamed The Freeman Family Day Centre.

“The Day Centre provides stimulation and a renewed sense of independence for isolated or lonely seniors living in the community,” says Risa Freeman, speaking on behalf of the family.

“We are very proud to be associated with them. It is wonderful to know family members and caregivers can have a sense of comfort and respite, confident their loved ones are cared for in a safe, secure environment.”
The Kunin-Lunenfeld Applied and Evaluative Research Unit (KLAERU) provides resources and expertise to support clinical, evaluative and translational research at Baycrest, enabling and accelerating the development of new programs and treatments for memory and aging well.

The unit supports the development and implementation of innovative wellness, prevention, education and care projects across Baycrest. Examples include:

Creating a common language for evaluating patients
Baycrest’s Geriatric Assessment and Treatment Unit and Palliative Care Unit use different measurement scales to evaluate patients, although a number of the elements being evaluated are the same or similar. With the support of KLAERU, Dr. Daphna Grossman, deputy head of Palliative Care, is leading the development and evaluation of a conversion tool to enable the interpretation of the scales across the two units and to help the health-care team in each unit understand the work of the other. This tool will ease the transition of patients from one unit to the other and facilitate inter-unit patient evaluations, promoting interdisciplinary collaboration and enhancing patient care.
*The conversion chart will allow for cross-talk between the geriatric medical teams and the palliative care teams and allow a common language for evaluating patients. We would like this to be developed at Baycrest, and then shared with medical teams and palliative care teams across the province,* says Dr. Grossman.

Her collaborators on the project are Drs. Jurgis Karuza, Paul Katz, Gary Naglie, Cindy Grief, Thirumagal Yogaparan and Giulia Perri, advanced practice nurse Sue Calabrese, Palliative Care clinical manager Maria Deleon, research assistant Mark Wittenberg, Dr. Shafagh Fallah (KLAERU), and collaborators from the Palliative Care consult team at Sunnybrook Hospital.

**New method for preventing MRSA infection**

Bacteria resistant to antibiotics, such as methicillin resistant Staphylococcus aureus (MRSA), have become a patient safety concern for health-care organizations around the world. MRSA is a common cause of skin and soft tissue infections, and serious ailments such as pneumonia. With support from KLAERU, Baycrest’s Infection Prevention and Control team is evaluating the effectiveness of a new method of preventing and controlling the spread of MRSA in a geriatric setting.

In a pilot study, Baycrest introduced disposable, antiseptic cloths containing two per cent clorhexidine gluconate (CHG) to bathe patients daily as a method of reducing MRSA in the Acute Care and Transition (ACT) unit. This innovative infection control method, recently designated by Accreditation Canada as a leading practice, showed a promising 89 per cent reduction in the incidence of MRSA transmission in six months and an 82 per cent reduction over 33 months. Planning is underway to expand the study to a much larger group of patients in Baycrest’s 92-bed Complex Continuing Care program.

“Having the support of KLAERU is extremely helpful to us in our effort to expand this into a full-fledged clinical trial. We want to rigorously evaluate whether this method is as effective in reducing and reversing MRSA transmission on the Complex Continuing Care floors as on the ACT Unit,” says Chingiz Amirov, director of Infection Prevention and Control at Baycrest. “This may prove to be a simple and effective solution that could have a major impact on the quality of care across hospitals in Canada.”

**Piloting an interprofessional education toolkit**

The Centre for Education and Knowledge Exchange in Aging is developing and implementing an interprofessional education and care (IPE/C) toolkit for health professionals and students. With support from KLAERU, the research team is analyzing and interpreting statistical data and other feedback from pilot workshops conducted with staff and students from five clinical programs.

“KLAERU is helping us measure how effective the toolkit is in supporting interprofessional collaboration. We hope it will be a springboard for integrating IPE/C into practice at Baycrest. The goal is to improve collaboration and the quality of care delivered,” says Faith Boutcher, director of Academic Education.
“IN THE PAST YEAR, WE HAVE MADE GREAT STRIDES TOWARDS A SEAMLESS TRANSITION OF BASIC RESEARCH TO ITS APPLICATION IN CARE”

Dr. Randy McIntosh
Vice-President, Research, Baycrest and Director, Rotman Research Institute
LoW-SALT DIET BENEFITS BRAIN FUNCTION

Older adults who are sedentary and consume too much salt in their diet may be at greater risk of cognitive decline, a study led by the RRI has found.

The study monitored the general cognitive function – including short- and long-term memory, language and attention – of 1,262 older women and men in Quebec over three years.

The results showed that a high-salt diet, combined with little exercise, was especially detrimental to cognitive performance. This is important evidence that sodium intake not only impacts heart health, but brain health as well," says Dr. Alexandra Fiocco, post-doctoral fellow and lead investigator of the study, published in Neurobiology and Aging.

This finding, believed to be the first to extend the benefits of a low sodium diet to brain health in healthy older adults, adds to the scientific evidence that people can help delay or prevent normal, age-related cognitive decline by adopting a healthier diet and more active lifestyle.

“These data are especially relevant since we know that munching on high-salt, processed snacks while watching television or spending time at a computer is a frequent pastime for many adults," says RRI scientist Dr. Carol Greenwood, a senior author on the study and internationally-renowned scientist in the field of nutrition and cognitive function in later life.

RRI scientists conducted the study with colleagues from the Institut Universitaire de Gériatrie de Montréal, McGill University and the University of Sherbrooke.
DISCOVERING WHY SOME PEOPLE HAVE BETTER “RECOLLECTION” MEMORY

Dr. Jordan Poppenk and RRI senior scientist Dr. Morris Moscovitch have uncovered an important clue that may help solve a long-standing mystery about differences in memory ability between people. A bigger hippocampus doesn’t guarantee better recollection memory, but its shape seems to help. Recollection memory is used to relive past events in detail.

The study shows the greater the size imbalance between a larger posterior and smaller anterior hippocampus, the more likely the person will have stronger recollection. This breakthrough finding, published in Neuron, advances our understanding of why some people have better recollection memory than others. The researchers also found evidence that enhanced memory recollection depended on the interactions between the posterior hippocampus and brain regions involved in perception, which occurred between the times that memories were learned and retrieved.

DATA ON THE BRAIN

The Ontario Brain Institute is creating a unique repository for a vast amount of information about people’s brains to help neuroscientists and clinicians develop better treatments for diseases of the brain.

Baycrest is one of four partners contributing to the project, dubbed Brain-CODE. The searchable database will allow scientists to analyze great quantities of information and share related health, genetic and behavioural information. They will be looking for patterns and similarities that link one brain condition to another. This capability will promote a better understanding of brain diseases and how to predict and treat them.

Under the auspices of the Heart and Stroke Foundation Centre for Stroke Recovery (HSFCSR), Baycrest’s part in Brain-CODE is being led by Dr. Stephen Strother, a senior scientist at RRI and professor of Medical Biophysics at the University of Toronto.
VIRTUAl brAin MOVES INTO SECond PHASE

The ongoing Virtual Brain project being led by Baycrest is a step closer to creating a predictive modelling tool that will change how we assess and rehabilitate the brains of people who have suffered damage from stroke, epilepsy or the early stages of Alzheimer’s.

The Virtual Brain – which may be a world first – will be completely customized to an individual patient’s brain. The goal is to safely devise, benchmark and test pharmaceutical and surgical therapies before they are applied. In November 2011, Dr. Randy McIntosh, lead scientist in the international consortium for the project, demonstrated the Virtual Brain to more than 32,000 scientists and physicians at the Society for Neuroscience annual meeting in Washington, D.C. In March this year, the first “teaser” version of the virtual brain software was made available for downloading by clinicians and researchers.

“We are moving into the second phase, which involves collecting data from brains with disease, damage or degeneration in order to build the capacity of the virtual brain to model these states,” explains Dr. McIntosh. By 2013, the project team will be ready to demonstrate the effects of stroke and epilepsy on the brain to neuroscientists and clinicians in Europe.

TRIAL-AND-ERROR LEARNING BEST FOR OLDER BRAINS

A Rotman Research Institute study, published in Psychology and Aging, has found the first evidence that older brains get more benefit than younger brains from learning information the hard way – through trial-and-error learning.

“The scientific literature has traditionally embraced errorless learning for older adults. However, our study has shown that if older adults are learning material that is very conceptual, where they can make a meaningful association between their errors and the correct information they are supposed to remember, in those cases the errors can actually help the learning process,” says lead investigator and doctoral student André-Ann Cyr.

The study showed that the memory benefits for older adults from trial-and-error learning – compared with passive errorless learning – were about 2.5 times greater than for young adults. These findings may have important implications for how information is taught to older adults in the classroom and for rehabilitation methods aimed at delaying cognitive decline, says Cyr.

↑ RRI senior scientist Dr. Nicole Anderson is the study’s senior author and a specialist in cognitive rehabilitation in older adults.
SUPPORT CONTINUES FOR TWO LEADING SCIENCE PROJECTS

Dr. Cheryl Grady, Canada Research Chair in Neurocognitive Aging (Tier 1), received funding for a renewal of her seven-year term to continue her research in the application of brain imaging for the study of aging.

Dr. Jennifer Ryan received funding for her second five-year term as Canada Research Chair in Cognitive Neuroscience of Memory (Tier 2). Dr. Ryan will continue her research using an innovative combination of imaging techniques to study human memory, and will connect her theoretical work with translational research to help develop treatments for memory decline in older adults.

“We’re fortunate to have an environment at Baycrest’s Rotman Research Institute that fosters excellence in scientific research and collaboration opportunities with such eminent scientists,” says Dr. Randy McIntosh, vice-president of Research.

BOOSTING OLDER ADULTS’ ABILITY TO DRIVE SAFELY

Driving is the main mode of transportation for many older adults. So when people lose their driving privileges, they can become socially isolated, depressed and lose their independence. Some people with mild cognitive impairment (MCI) may still be able to drive safely, according to guidelines for medical professionals, but doctors currently have little to offer to help improve their driving performance.

Dr. Gary Naglie, an RRI scientist and Baycrest’s chief of medicine, is the principal investigator for a five-year, half million dollar study funded by the Canadian Institutes of Health Research, to test an innovative training program aimed at improving the driving performance of older adults with MCI. This collaborative project builds on the strengths and previous successes of Baycrest scientists and clinicians from many disciplines, integrating their expertise in cognitive and memory assessment, and the development and testing of new rehabilitation interventions for cognitive deficits. Dr. Naglie’s co-investigators include RRI scientists Drs. Malcolm Binns, Sandra Black, Deirdre Dawson, Morris Freedman and Brian Levine and other national collaborators.

Poor driving performance is associated with a decline in sustained attention and speed of information processing. RRI scientists have shown that goal management training, which was developed at the RRI, can improve people’s ability to sustain attention. This study will evaluate the effectiveness of a combined program of goal management training and speed processing training at improving cognitive functioning and driving performance on a driving simulator in 128 adults with MCI aged 65 and older. “We hope the results will show that we can prolong the time that older adults with mild cognitive impairment can continue to drive safely, as well as allow them more time to prepare for driving retirement,” says Dr. Naglie.

↑ Senior scientists Dr. Jennifer Ryan (left) and Dr. Cheryl Grady have had their research chairs renewed.
It may not have been for country music, but a 27-year-old Baycrest researcher is still very happy with his Grammy.

Dr. Gavin Bidelman, a postdoctoral fellow who studies the impact of musical training on the brain, received a GRAMMY Foundation® grant for helping to advance innovations in aging through the power of music. He shares the recognition with RRI senior scientists Drs. Claude Alain and Sylvain Moreno.

The GRAMMY Foundation works in partnership with The Recording Academy® to bring attention to the value and impact of music and arts education.

The grant will support Dr. Bidelman’s investigation into the potential benefits of music on speech processing in older adults. “We are particularly interested in how musical training might tune the brain and help counteract some of the negative declines in speech perception that commonly emerge later in life.”

Baycrest is at the forefront of an emerging field in music and health research. The Centre is involved in several music research projects and is part of a new Music and Health Research Collaboratory with Ontario universities and Toronto hospitals, to be based at the University of Toronto.

Does singing in a group have a positive impact on health and wellness in older adults? A 16-week study recently conducted at the Baycrest Community Day Centre for Seniors with seniors with normal brain function and mild cognitive impairment found that being in a glee club was a positive and enjoyable experience and helped them make friends.

Primary investigator Dr. Amy Clements-Cortes, senior music therapist/practice advisor, says the study yielded five large themes that emerged from the data including: friendship and companionship; simplicity; happiness, uplifting and positive feelings; relaxing and reduced anxiety; and fun.

The study, and Buddy’s Glee Club itself, were made possible through a generous gift from Baycrest supporter Margie Nightingale, a proponent of the healing benefits of music who wanted to honour her husband’s memory in a meaningful way. “Buddy had a stroke in 2001 and had diminished use of his right side but he could sit at the piano and play and sing,” she explains. She credits his eventual recovery to his love of music.

Phase two of the study is expected to start this summer with residents of the Apotex Centre, Jewish Home for the Aged.
EXPERTS SHARE ADVANCES IN MCI DIAGNOSIS AND TREATMENT

Dementia experts and scientists from across North America, who focus on memory loss, gathered in Toronto in March to discuss the latest clinical and scientific advancements for diagnosing and treating mild cognitive impairment, or MCI, at Baycrest’s Annual Conference on Cognitive Neuroscience.

MCI is considered a transition stage or border zone between mild cognitive changes associated with normal aging and more serious problems caused by an underlying dementia such as Alzheimer’s.

It is estimated that half-a-million Canadians aged 65 and older have MCI, but many don’t know it because only a small percentage have pursued a clinical diagnosis. Not all MCI sufferers will go on to develop Alzheimer’s – some will stabilize and others may even improve in their cognitive powers.

“It’s not easy for even the most experienced clinician to tell with certainty whether the memory changes in a patient are related to very early MCI or simply due to normal aging,” says conference co-chair Dr. Nicole Anderson, a clinical neuropsychologist and senior scientist at Baycrest, and co-author of a new book on MCI, due for release this summer.

People with MCI are typically still able to work and engage in normal social activities. Their memory problems and difficulties with attention and reasoning are much less severe at this stage compared to a more advanced clinical dementia.

As with all dementia screening, doctors have to rule out a myriad of other factors that may be responsible for changes in a patient’s cognition – depression and diabetes are two examples – and be familiar with the latest diagnostic criteria for MCI, in order to reach an accurate diagnosis.

“We are getting better at identifying which people with MCI will convert to Alzheimer’s,” says conference co-chair Dr. Tiffany Chow, a clinician-scientist at Baycrest’s Sam and Ida Ross Memory Clinic.

“We know our best shot at delaying cognitive deterioration is to start treatments at the asymptomatic or mild symptomatic stages. This is why education and awareness are so critical. We strongly encourage people to see their doctor as soon as they start experiencing memory issues that don’t seem normal. We encourage family doctors to become familiar with MCI diagnostic criteria.”

A study by the RRI is investigating the long-term effects of head injury in hockey, particularly when combined with other risk factors players may have, such as lifestyle habits, diabetes and a genetic predisposition to dementia.

NHL alumni will undergo comprehensive cognitive testing to isolate the brain health factors that may be specific to the players, with follow-up cognitive testing and brain scanning (with MRI) that will take place every three years. This study will provide some insight into the aging brain not only in professional athletes but also in the wider population.

A portion of the proceeds from the Scotiabank Pro-Am for Alzheimer’s, Baycrest’s annual hockey fundraiser, is helping fund this study, led by Dr. Brian Levine, an expert in head trauma and dementia.
**ART MEETS SCIENCE IN THE BRAIN LANE**

Baycrest and OCAD University unveiled 60 unique art banners at Baycrest in April that aim to bridge the worlds of art and brain science in a visually engaging way.

Thirty-four second-year students studying fibre arts and textile design in OCAD U’s Material Art & Design program were paired with seven cognitive scientists from the Rotman Research Institute this past winter and challenged to create artistic representations of the scientists’ research in aging and cognition.

“We partnered with OCAD U on this project to raise the profile of Baycrest’s cutting-edge research in memory and aging – and to communicate about it in a unique way that makes it accessible to the public,” says Bianca Stern, director of Culture, Arts and Innovation at Baycrest.

The students used a variety of techniques to create their banners, incorporating photography, computer-generated graphics, textiles, block printing, silk screening, and watercolour painting. The banners may become a travelling exhibit in future.

**EXPLORING THE ROLE OF ARTS IN HEALTH**

The Royal Conservatory is partnering with Baycrest on an innovative research study that is measuring how taking part in arts-based programs affects the health and well-being of older adults.

Study participants are divided into three groups – storytelling, creative writing and creative movement – plus a control group. The hypothesis is that arts-based programs, provided by professionally trained artists, will have a positive impact on the overall well-being of participants.

“As we build credible evidence about the impact of the arts on health, we are also bringing together seniors, artists and health-care providers and creating a broader, more holistic conversation about healthy aging,” says Bianca Stern, director of Culture, Arts and Innovation at Baycrest.

The study is made possible through a grant from the Ontario Trillium Foundation, the study will have final results in 2013.

**PRESIDENT OF ISRAEL ATTENDS BRAIN RESEARCH ROUNDTABLE IN TORONTO**

Panelists explored new technological approaches that could unlock the secrets of the human brain, and proposed increased interdisciplinary research among innovators in Ontario, Canada more broadly, and Israel to capitalize on these opportunities. “Our bilateral dialogue on the translation of research outcomes into commercial applications is truly timely,” said Dr. William Reichman, President and CEO of Baycrest. “Baycrest is quickly becoming a leader in creating technology-based solutions to mitigate the impact of age-related illness and impairment...We look forward to strengthening our partnerships with Israel as we catalyze the transfer of research concepts from the lab and clinic to the market.”
NEW LEARNING CENTRE ADDRESSES THE NEED FOR SPECIALIZED HEALTH-CARE PROFESSIONALS

Today’s seniors are entering long-term care at a more advanced age than in the past and presenting with multiple and increasingly complex health conditions, so the demand for health professionals trained in caring for this vulnerable population continues to grow.

To help address the need, Baycrest is being funded by the Ministry of Health and Long-Term Care to establish a Centre of Learning, Research and Innovation (LRI) in Long-Term Care, serving our region. The centre is one of only three in the province.

As part of the LRI mandate, several areas of Baycrest’s Apotex Centre, Jewish Home for the Aged will become inter-professional learning units. To fulfill our role as a Toronto lead for the Behavioural Supports Ontario (BSO) strategy, these clinical teaching units will initially focus on education and training around behaviour management as a key priority. Baycrest health-care professionals and other long-term care staff in the GTA will acquire expertise in dealing with persons who exhibit challenging behaviours due to dementia and other neurological conditions.

Frontline staff will be trained in best care practices, as will students from a variety of health disciplines. A core course in geriatrics and long-term care will be offered, as well as an annual conference, a summer internship and a mentoring program.

“We have expertise in brain function and dementia, as well as mental health,” says Dr. David Conn, vice-president of Education and academic head of the Centre for Education and Knowledge Exchange in Aging at Baycrest. “Our nursing home is part of a large academic health science centre. We have researchers and educators at Baycrest, fully affiliated with the University of Toronto, so we are leveraging our existing strengths.”

Dr. Conn and Dr. Paul Katz, vice-president of Medical Services and chief of staff, who are co-heads of the new Centre, hope that the increased focus on behaviour management will enhance care for individuals across the system, both in terms of assessment and in finding optimal best practices for treatment.
COLE FAMILY TRAVEL AWARD ENABLES STAFF TO ENGAGE WITH WORLD’S BEST

“Everyone who has had a family member or friend at Baycrest is so appreciative of the clinicians. Their learning and caring makes a big difference to clients and their families. The travel awards are our way of thanking them and enabling them to share their expertise outside Toronto – and bring good energy and new knowledge back to Baycrest.” Stephen Cole

The annual Cole Family International Geriatric Clinical Travel Award enables clinical staff to visit and engage with others in their field and visit innovative facilities in other parts of the world.

In the past three years, awardees have travelled within Canada, to the U.S. and abroad. They have studied best practices for stroke patients, shared expertise in the field of aging Holocaust survivors and studied the cognitive and psychosocial impact of professional arts involvement for older adults.

“Travelling to Korea enabled me to meet colleagues, develop collaborative projects, foster research projects and disseminate learning. It really put Baycrest on the map as a world leader in music therapy,” says senior music therapist Dr. Amy Clements-Cortes, recognized for her innovations in this field.
ENDOWMENT FUND HELPS BAYCREST SHARE KNOWLEDGE WITH THE WORLD

Estelle Klasner-Nimni was once quoted as saying that “teaching is a powerful tool with the capacity to shape and change individuals, policies and society.”

With a Ph.D in speech and hearing sciences, Dr. Klasner-Nimni dedicated her life to neurogenic disorders, research and improvement of caregiver and patient education. Her work with the Huntington Society of Canada as well as Multiple Sclerosis Societies of Canada and the U.S. helped many families and she often worked in consultation with associates at Baycrest. In her memory, her family donated $10,000 to establish the Estelle Klasner-Nimni Endowment Fund in support of speech-language pathology at Baycrest.

On December 14, 2011, the first Estelle Klasner-Nimni Memorial Lecture was held via videoconference to discuss diagnosing primary progressive aphasia and its variants. Those attending the videoconference linked in from 36 different sites across Ontario, and 11 international sites including Russia, Israel and Spain. Participants included speech-language pathologists, neurologists, psychologists and psychiatrists, other allied health professionals and nurses.

Organized by Baycrest staff members Lisa Sokoloff, professional practice chief, Speech-Language Pathology and Tim Patterson, Telehealth coordinator, with the Klasner & Nimni families, the videoconference honoured Klasner-Nimni’s commitment to her profession by providing a cutting-edge and timely forum for interprofessional collaboration around the world.

HONOURING EXCELLENCE

The American Medical Directors Association has selected Dr. Paul Katz as this year’s recipient of the annual James Pattee Excellence in Education Award. Dr. Katz is vice-president of Medical Services and chief of staff at Baycrest. The award recognizes his work in advancing education specific to long-term care physician practice.

Dr. Sid Feldman, executive medical director of the Residential and Aging at Home Program, and chief of Family and Community Medicine at Baycrest, received the 2011-2012 Peters-Boyle Academy Teaching Award for Teaching in Clerkship. Dr. Feldman is an assistant professor in the Department of Family and Community Medicine at the University of Toronto.

LIVING WITH MILD COGNITIVE IMPAIRMENT

One in 10 adults has some form of mild cognitive impairment, or MCI. A new guide due out this summer, titled Living With Mild Cognitive Impairment, gives advice on how to maximize brain health and reduce the risk of developing dementia. The authors are Baycrest neuropsychologists Drs. Nicole Anderson, Kelly Murphy and Angela Troyer.

LATE-STAGE DEMENTIA

Geriatrician Michael Gordon has published the guidebook, Late-Stage Dementia: Promoting Comfort, Compassion and Care, to help families and health-care professionals provide the most comforting care possible to ailing seniors in the late stages of dementia when prognosis for life is limited. Dr. Gordon is a medical professor, ethicist and medical director of Baycrest’s Palliative Care Unit.
It’s a familiar scenario for a growing number of people: you are at work and your 86-year-old father is home alone across the city. His health is good but his memory is declining. He sometimes forgets to turn off the stove or take his medication at 10 a.m.

**What to do?**

The new Innovation, Technology and Design (ITD) Laboratory that opened at Baycrest this year is seeking answers to that particular question, as well as a host of others related to the aging experience.

At an ITD Lab open house in February, a four-foot-tall “telepresence robot” with an iPad for a head, moved niftily in all directions, quickly attracting a crowd of onlookers.

The open house showcased several cutting-edge projects that might potentially help meet the challenges facing the health-care system and an aging population.

Working with industry partner CrossWing Inc., Baycrest is exploring assisted living, telepresence robotic applications for the home and long-term care facilities. The technology would enable a family caregiver to use their home or work computer to communicate with, and monitor from a distance, their frail family member. The robot’s iPad head provides two-way visual communication, so both parties can see and talk to each other. A small mirror-like camera mounted on the robot’s pedestal body captures a 360-degree view of the room it is in.

The ITD Lab is outfitted with white floor-to-ceiling walls that serve as “doodle” pads for brainstorming. The space brings together clinicians, scientists, industry representatives, artists, designers, engineers, architects, students, family caregivers and seniors to explore creative ways of thinking and solving problems. The discussions act as a springboard for developing and evaluating innovative products, technologies and processes, with potential commercial application, that enable successful aging at home and improve the care environment within the institutional setting.

The lab is unique for being on a campus that includes a continuum of care for older adults, a world-renowned cognitive neuroscience centre, and top minds focused on aging.

“We also want to engage people not just in health care, but anyone who can contribute new perspectives and ways of exploring solutions,” says Bianca Stern, director of Culture, Arts and Innovation at Baycrest. “The ITD Lab is the place where people can take their ideas from inception to market-ready launch.”
The ITD Lab is outfitted with white floor-to-ceiling walls that serve as “doodle” pads for brainstorming. The space brings together clinicians, scientists, industry representatives, artists, designers, engineers, architects, students, family caregivers and seniors to explore creative ways of thinking and solving problems.
For many people experiencing cognitive deficits, being able to take part in their own care is very empowering.

To help facilitate this, two “train the trainer” toolkits developed through Baycrest’s Centre for Brain Fitness were piloted at the Rotman Research Institute’s annual conference in March. Workshops offered health-care professionals hands-on experience in teaching their patients how to set and manage goals and improve their memory.

The Goal Management Training toolkit breaks new ground by providing clinicians with a validated, structured program for the rehabilitation of executive function, which is one of the most difficult cognitive deficits to address.

Dr. Brian Levine, a senior scientist in the Rotman Institute, explains that “executive functions are extraordinarily sensitive to compromised brain functioning, no matter what the cause. Examples include increased distraction, difficulty completing tasks and lack of ability in forming strategies.”

Dr. Levine, along with researchers in the United Kingdom, created Goal Management Training (GMT). It has been used in numerous intervention studies in healthy aging, dementia, stroke, traumatic brain injury, multiple sclerosis, post-intensive care unit patients, spina bifida and substance abuse.

The train the trainer workshop provides clinicians with a solid foundation in the theory of GMT and hands-on experience in delivering it.

A second toolkit focuses on memory difficulties. Started at Baycrest in 1997 by Dr. Angela Troyer, professional practice chief of Psychology and program director of Neuropsychology and Cognitive Health, the Memory and Aging program is offered four times a year for healthy older adults interested in improving their memory.

“The program teaches about normal memory changes that occur with age as well as strategies to improve everyday memory performance,” says Dr. Troyer. “We’ve received numerous requests for this training from other health professionals, including occupational therapists, nurses and speech language pathologists, so I was excited to pilot this workshop at the conference.”

Health-care professionals from around the world, including South Korea, Hong Kong and China, are incorporating these programs into their practice.
LIFESPAN LEARNING

Ground-breaking evidence that young children can improve their verbal intelligence in just 20 days using an interactive, music-based cognitive training program has exciting implications for people of all ages.

The study – conducted at York University and led by Dr. Sylvain Moreno, who is now the lead scientist at Baycrest’s Centre for Brain Fitness – involved several Canadian scientists who specialize in learning, memory and language in children and was published in Psychological Science in October 2011.

The cognitive benefit was striking and consistent in 90 per cent of the children who took the four-week learning program and was additionally confirmed by brain imaging data that indicated brain changes had taken place related to the training.

“Our data have confirmed a rapid transfer of cognitive benefits in young children after only 20 days of training. The strength of this effect in almost all of the children was remarkable,” says Dr. Moreno, a world expert on neuroeducation.

“We are now able to understand how we can stimulate brain areas which will result in improving our cognitive abilities,” Dr. Moreno explains. “I think we can eventually deliver the same kind of training and benefits to people throughout the lifespan.”

In June, Dr. Moreno was officially granted $5 million in funding from the government of Canada and the Ontario Brain Institute to develop and test cognitive games for children. The aim is to find novel means of strengthening cognitive functions throughout the lifespan.

FIRST TO USE CLOUD COMPUTING

Baycrest launched the first health-care sector use of cloud services to share many kinds of non-confidential workflow and data forms. Baycrest partnered with global software giant, Microsoft, and its partner company, Orangutech, to develop the cloud that allows health-care organizations to save time and resources.
PARTNERING WITH ZOOMERMEDIA

Baycrest and ZoomerMedia Limited have formed a new strategic co-branding and content partnership to inform and educate the public about the latest science on aging well, including brain health.

Inside the Lab
One of the initiatives resulting from this partnership is “Inside the Lab: The Latest in Aging and Brain Health” – a feature on ZoomerMedia’s largest website, 50Plus.com. By drawing on Baycrest’s robust library of expert articles on brain health, the latest research breakthroughs, and helpful clinical advice, the new section provides readers with all they need to know about the journey of aging and the best ways to ensure long-term wellness.

The opening lineup of articles included: “How to get a whole brain workout,” “Debunking brain myths: Does size matter?” and “Smart strategies to remember passwords and PINs.” New articles are added on a weekly basis.

New on-line tool for memory assessment
At the 2011 ZoomerShow last October – a consumer show and lifestyle expo for people 45 and up – Baycrest and ZoomerMedia unveiled a prototype online self-assessment tool that enables aging adults to assess their thinking skills from the comfort and privacy of their home computer. The aim of the tool is to indicate whether an individual is experiencing normal age-related cognitive problems, or those possibly indicative of a more severe impairment – such as mild cognitive impairment – that requires a visit to their doctor.

BAYCREST IN CHINA

Committed to improvement in health-care delivery, China is actively seeking partners from across the globe to help meet its growing demand for expertise and innovation in the life sciences, a sector where Ontario excels.

Baycrest is proud to have been specifically identified by the Ontario government (as a result of its 2010 Asia mission) to have globally recognized expertise in aging and senior care, that is increasingly of interest to the evolving Chinese and other developing nation health-care sectors.

As a result of Baycrest’s evaluation of the opportunities to bring Ontario “know-how” in aging and senior care to China, strategic partnerships with health-care leaders in that nation were pursued. This past fall, Baycrest signed a letter of interest with Peking Union Medical College (PUMC) and we are creating a partnership to bring geriatrics knowledge to China.

Often referred to as the ‘Harvard’ of China, PUMC is the country’s largest and most respected health sciences centre. It includes seven hospitals, 17 institutes, six schools and five branches of the Chinese Academy of Medical Sciences.
“THANKS TO YOU, TODAY BAYCREST IS POISED TO BECOME AN ICONIC INSTITUTION IN ITS FIELD — AND THE FOUNDATION IS POSITIONED TO SUPERCHARGE ITS CAPACITY TO SUPPORT BAYCREST.”

Susan Sutton
President, Baycrest Foundation and Vice-President Global Institutional Advancement
RioCan’s philanthropic focus is to be supportive in communities where they do business, which includes many worthy organizations across Canada.

President and CEO Edward Sonshine believes in Baycrest for very personal reasons going back over 20 years. “My father, Ben Sonshine, suffered an event similar to a stroke during surgery,” he recalls. “He spent four months at an acute care facility. He was in a terrible state, with no real quality of life and not a very good prognosis. We were not prepared to give up on him. Because of Baycrest’s particular focus on brain health, we came here. My dad arrived at Baycrest on a gurney yet four months later walked out on his own steam giving us another four years together.

The second really important reason is the world renowned work Baycrest does with Holocaust survivors. I was so impressed to learn that when Rwanda experienced its own genocide and authorities sought out experts in how atrocities directly affect survivors as they age, they came to Baycrest.”

RioCan invests over $1.1 million in Baycrest’s global vision

Long-standing corporate partner RioCan Real Estate Investment Trust is celebrating its tenth year as event sponsor of the Baycrest Gala; seventh year as a Scotiabank Pro-Am sponsor; and first year as a supporting sponsor of the Sex, Aging and Memory Conference. Through its support of these events which cross business, cultural and geographic sectors, RioCan is helping Baycrest move beyond our traditional donor base.

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continued on page 34

Scotiabank Pro-Am expands across Canada raising over $20 million to date

With three Scotiabank Pro-Am tournaments running in 2011, it was a record-breaking year in which proceeds topped $5.1 million. As of May 2012, the Pro-Am has raised more than $20 million for care and research in Alzheimer’s and related disorders, supporting Baycrest and the work of the Alzheimer Society of Alberta & Northwest Territories.

← Back row (from left): NHL alumni Lanny McDonald and Wendel Clark and Scotiabank’s John Doig, senior vice-president, Toronto Region. Front row (from left): The Doig Boys – second generation Scotiabank Pro-Am supporters – Cuan, Riley and Owen.
The Baycrest/RioCan partnership is a rewarding one, added Sonshine. "People often see the publicity pieces after the Gala and ask about our participation as event sponsor. It gives me the opportunity to tell people outside the Baycrest community how Baycrest innovations are being shared locally, nationally and internationally – and about Baycrest’s primary research focus on memory and the executive (frontal lobe) functions of the brain, both in normal aging and in the presence of diseases and conditions which affect the brain, such as Alzheimer’s disease and other dementias."

Sonshine says it is a pleasure and a privilege to be associated with Baycrest, both personally and professionally. “I know how hard the gala dancers, the hockey players and Women of Baycrest work to raise much needed funds that benefit not only Baycrest’s clients, but people all over the world. I am proud that RioCan is involved with many different Baycrest initiatives again this year.”

GALA RAISES $1.5 MILLION TO SUPPORT INNOVATIONS IN AGING

The Baycrest Foundation’s signature fundraising gala, Dancing With Our Stars, on March 29, 2012 was a resounding success raising over $1.5 million to support Baycrest innovations in aging and brain health. Four courageous community members stepped up to the challenge of raising money for Baycrest while practising with their professional dance instructors for the competition. Based on money raised, the judges’ scores, and the audience’s votes, the winner was Warren Kimel, chair of the Foundation Board. His talented rivals were: Mark Cohon, Canadian Football League commissioner; Keith Pelley, president of Rogers Media; and, community leader and philanthropist Sarah Perlis. Adding to the evening’s entertainment were host Andrea Martin and celebrity judges Rex Harrington, Dina Pugliese and Jean Marc Genereux.

WHY SCOTIABANK SUPPORTS THE HOCKEY PRO-AM

Scotiabank is known as “Canada’s Hockey Bank,” says John Doig, senior vice-president, Toronto Region. “Becoming the title sponsor of the Pro-Am across Canada was a natural fit. One of the underpinnings of Scotiabank’s uniquely Canadian marketing strategy is community support in health and fitness, sports, arts and culture. We have seven million plus customers in Canada and can take the Baycrest message to them, raising awareness and ensuring funds continue to flow to support research and care in Alzheimer’s and related dementias.”
$500,000 GIFT TO BAYCREST
ONE OF MANY BICK LEGACIES

Walter and Jeanny Bick’s legacies are many: the deep love, respect and mutual consideration they modelled in their 62-year marriage; their hallmark generosity and willingness to help others; the ubiquitous Bick’s Pickles brand that began on the family farm in 1944; and to Baycrest, a legacy of compassion and philanthropy.

“Walter and Jeanny poured so much love and effort into Baycrest because they passionately believed in Baycrest’s vital contribution to the community,” says their son, Robert, referencing his father’s service to Baycrest’s Board of Directors and various committees. “At Walter’s death, they left a significant gift to Baycrest.” The Bicks designated their gift to “most urgent needs” which helps Baycrest respond quickly and effectively to emerging needs and opportunities in care, research and education.

Because Walter’s friend, Sam Ruth, suggested that he set up an insurance policy in the 1980s, Walter made ‘painless’ annual premium payments, while assuring Baycrest of a significant and meaningful planned gift.

Baycrest thanks the Bicks for their foresight and generosity.

To find out more about planning a bequest or gift of life insurance to Baycrest, please contact Florence Weinberger, 416-785-2500, ext. 2055 or fweinberger@baycrest.org.

WOMEN OF BAYCREST STAGE FIRST
SEX, AGING AND MEMORY CONFERENCE

On October 18, 2011, more than 700 women gathered for the first Sex Aging and Memory Conference, organized by Women of Baycrest volunteers. Women of Baycrest is a membership organization within the Baycrest Foundation composed of highly successful, educated, influential and dynamic women who raise funds, raise awareness and effect change.

Dr. Tiffany Chow, a senior scientist with Baycrest’s Rotman Research Institute, called the day-long event, “a rare opportunity for the general public to come together to learn about the impact of nutrition, fitness, menopause and technology on the aging brain.”

Highlights will be featured in an online magazine at www.womenofbaycrest.com.

The success of the Sex Aging and Memory Conference gives us a strong foundation on which to build as we prepare for the second conference scheduled for Fall 2013.

To find out more about Women of Baycrest, please contact Florence Weinberger at 416-785-2500, ext. 2055 or fweinberger@baycrest.org.
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Honey Sherman

Barrie to Baycrest
Stan Feldman

Dancing With Our Stars
David Cynamon
Honey Sherman

Sex, Aging and Memory: Women’s Brain Health Conference
Simonne Antflick
Karen Baruch
Reesa Sud

Scotiabank Pro-Am for Alzheimer’s
Greg Christenson (Edmonton)
Frank King (Calgary)
Jay Waks (Toronto)

Strokes Fore Stroke
Perry Steiner
Ron Steiner
Leonard Waldman

2011/12 Baycrest and Baycrest Foundation Annual Report
2011/12 BAYCREST
FINANCIAL SUMMARY

Year ended March 31, 2012

For a copy of Baycrest’s audited financial statements, call Public Affairs, 416-785-2500, ext. 2645.
RESEARCH DIVISION REVENUES 2011/12

- 5% Miscellaneous Income
- 8% Commercialization & innovation funding
- 18% Foundation restricted grants
- 42% Peer-reviewed grants
- 3% Amortization
- 2% Other funding
- 22% Foundation general grants

GROWTH IN PEER-REVIEWED GRANTS 2002–2012
($ thousands)

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RESEARCH PEER-REVIEWED GRANTS
Growth in external sources of research grant funding from 2002 to 2012.
* Fiscal 2007 includes equivalent of 18 months of funding for multi-institutional project.
2011/12 BAYCREST FOUNDATION
FINANCIAL SUMMARY

Year ended March 31, 2012

For a copy of Baycrest’s audited financial statements, call Public Affairs, 416-785-2500, ext. 2645.

SOURCES OF FUNDRAISING REVENUES

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>21% Donor designated gifts</td>
<td>21%</td>
<td>$24,008</td>
</tr>
<tr>
<td>15% Planned giving</td>
<td>15%</td>
<td>$19,378</td>
</tr>
<tr>
<td>36% Events</td>
<td>36%</td>
<td>$30,842</td>
</tr>
<tr>
<td>16% Endowed funds</td>
<td>16%</td>
<td>$22,378</td>
</tr>
<tr>
<td>12% Annual campaign</td>
<td>12%</td>
<td>$20,452</td>
</tr>
</tbody>
</table>

TOTAL ASSETS 2007–2012
($ thousands)

<table>
<thead>
<tr>
<th>Year</th>
<th>Assets</th>
</tr>
</thead>
<tbody>
<tr>
<td>07</td>
<td>$110,872</td>
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<tr>
<td>08</td>
<td>$112,409</td>
</tr>
<tr>
<td>09</td>
<td>$109,526</td>
</tr>
<tr>
<td>10</td>
<td>$124,889</td>
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<tr>
<td>11</td>
<td>$131,851</td>
</tr>
<tr>
<td>12</td>
<td>$129,216</td>
</tr>
</tbody>
</table>

TOTAL REVENUES 2007–2012
($ thousands – including investment income)

<table>
<thead>
<tr>
<th>Year</th>
<th>Revenues</th>
</tr>
</thead>
<tbody>
<tr>
<td>07</td>
<td>$30,366</td>
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<tr>
<td>08</td>
<td>$24,594</td>
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<td>09</td>
<td>$17,855</td>
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<tr>
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<td>$36,802</td>
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<tr>
<td>11</td>
<td>$31,277</td>
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<tr>
<td>12</td>
<td>$22,808</td>
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</tbody>
</table>

NUMBER OF DONORS 2007–2012

<table>
<thead>
<tr>
<th>Year</th>
<th>Donors</th>
</tr>
</thead>
<tbody>
<tr>
<td>07</td>
<td>19,883</td>
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<tr>
<td>08</td>
<td>24,151</td>
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<tr>
<td>09</td>
<td>27,445</td>
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<tr>
<td>10</td>
<td>28,851</td>
</tr>
<tr>
<td>11</td>
<td>34,132</td>
</tr>
<tr>
<td>12</td>
<td>33,696</td>
</tr>
</tbody>
</table>

FUNDRAISING REVENUES 2007–2012
($ thousands)

<table>
<thead>
<tr>
<th>Year</th>
<th>Revenues</th>
</tr>
</thead>
<tbody>
<tr>
<td>07</td>
<td>$22,378</td>
</tr>
<tr>
<td>08</td>
<td>$24,008</td>
</tr>
<tr>
<td>09</td>
<td>$30,842</td>
</tr>
<tr>
<td>10</td>
<td>$19,378</td>
</tr>
<tr>
<td>11</td>
<td>$20,452</td>
</tr>
<tr>
<td>12</td>
<td>$20,099</td>
</tr>
</tbody>
</table>
to all our Baycrest supporters. We would like to express our sincere appreciation to all those who made donations to Baycrest during the period of April 1, 2011 to March 31, 2012. We are extremely grateful for your commitment and ongoing support.*

*Donations are listed in the fiscal year in which the gift is received.

Donations to support events occurring in Fiscal Year 2011-2012 received after March 31, 2012 will be gratefully recognized in next year’s report.

THANK YOU

*PILLARS
$1 MILLION PLUS
Warren & Debbie Kimel

BUILDERS
$500,000 — $999,999
Savlov Investments Limited
ScotiaBank
Barry & Honey Sherman

FOUNDERS
$250,000 — $499,999
Jeff Ross & Diane Mavinac-Ross
Lewis & Charlotte Steinberg
Family Foundation

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Charitable Foundation
Maxwell & Ruth Leroy Foundation
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Joseph & Sandra Rotman
Rose & Charles Tabachnick
Jack & Anne Weinbaum

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Zoltan and Yetta Freeman
Koschitzky Family
Sheila Loftus
Medical Pharmacies Group Inc.
Anthony & Valerie Melman
& Family
Albert & Egosah Reichmann
Scota Asset Management
Shoppers Drug Mart
Life Foundation
Lawrence & Judith Tanenbaum
Family Foundation

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Vine Glowinsky
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Albi Homes Ltd
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Brettler Mintz
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Brookfield Foundation
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Fabricmaster Inc.
Allan & Susan Fenwick
Max Freedman
GFL Environmental Corporation
George & Kay Goldlist Foundation
Goodmans LLP
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HKMB Hub International Limited
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Shawn Kimmel
Henrietta Kostman
Harry Lebovic
Abner & Josephine Levy
Foundation
Helene & Reuben Lieblein
Macquarie Group Foundation
Joel Masar
Robert & Sheila Masters
McDonald’s Restaurant
of Canada Ltd.
Norman & Marsha Paul
Harry Perlstein
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RioCan Management Inc.
(Calgary)
Robins Appleby
Charitable Foundation
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Sarnia-Lambton
Lewis & Elaine Baker
Bell Media
Brian Beresh
George & Erika Biro
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Blue Chip Leasing Corporation
Gary Bluestein
Charitable Foundation
Michael Bregman
Allan & Lisa Brown
Brownlee LLP
Michael & Rena Buckstein
Canada’s Walk of Fame
Canadian Football League
Brett Chorney
Christenson Developments
Cineplex Entertainment LP
Cliffcrest Plaza Limited
Cly Charitable Foundation
Sidney & Judith Cohen
Trevor & Andrea Cohen
Ben Copelovici
Copperline Excavating Ltd.
Decorum
Dream
Ernst & Young LLP
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Gary & Joanne Foster
Miriam Frankel
Sydney Frankfort
Joe & Budgie Frieberg
Dov & Nancy Friedberg
Naomi Fromstein
Harvey & Leah Fruitman
Barry & Joy Gales
Max & Gianna Glassman
Ira Gluskin & Maxine
Granovsky Gluskin
R J Gould Insurance Agency Inc.
Grad Family Foundation
Joel & Ruth Greisman
Anne Handelman
Haven Management Ltd.
Dale Hooper

CYCLISTS RAISE MONEY FOR SENIORS’ FITNESS

The 155 cyclists in the annual Barrie to Baycrest (B2B) ride in September 2011 celebrated its “Sweet 16” by raising $730,000 for seniors’ fitness programs at Baycrest, bringing the event’s grand total to $9.3 million. Veteran riders encouraged younger friends and relatives to fill the 56 new spots added to help raise more money and keep the event going for 16 more years.

↑ Past Baycrest Board Chair Tony Melman (back, right) was among the top 18 B2B fundraisers and rode with (back, l-r) Barry Cracower, Morris Robinson, Issie Grachnik and Ari Yakobson and (front) Jeffrey Gordon and Justine Melman.
The day began with rain and mist befitting the Scottish theme of the 22nd annual Baycrest Strokes Fore Stroke Golf Classic at Toronto’s St. George’s Golf & Country Club in July 2011. But the skies cleared for the 75 golfers gathered to play on the championship course which was home to the 2010 Canadian Open. Thanks to the hard work of organizers, players and sponsors, including Allan and Susan Fenwick and C.A. Delaney Capital Management Ltd., the event was a resounding success, raising $410,000 for stroke research and care at Baycrest.

↑ Back row (from left) Len Waldman (co-chair), Allan Fenwick, Susan Fenwick (event sponsors), Ron Steiner, Perry Steiner (co-chairs).

Genworth Canada
Frank & Lori May Gerstein
Don Ghermezian
Gordon & Lorraine Gibson
Family Foundation
Faye Gitter
Lorne Gladstone
Sidney Gladstone
David & Marilyn Glick
Eddie Glick & Susan Rapoport Glick
William & Marika Gled
Global Accident Legal Services – Professional Corp.
Gluckstein & Associates
Allan & Linda Gold
Barry & Janice Goldberg
Charles Goldberg & Carole Gruson
Bernet & Jennie Goldberger
Malika Goldenberg
Erika Goldfarb
Goldman Sachs Canada Inc.
Ralph & Pamela Goldsilver
Larry & Anette Goldstein
Robert Goodall
Beverley Gordon
George Gosbee
Bennie & Susan Gosevitz
Irwin & Judith Gould
Great West Chrysler Dodge Jeep
David Green
Mark & Corin Greenberg
Roger Greenberg
Richard Greene & Shelly Haber
Moshe & Ena Greengarten
Brian Greenspan & Marla Berger
Avi & Irina Greenspoon
Lorne & Iris Greenspoon
Mel & Mimi Greenspoon
Bill Gregson
Greg Guatto
Julian Gunderson
Gary & Myrna Gutmann
H & M Hospitaliy O/A
Tim Hortons
H. A. Kidd & Company Limited
Harvey & Shirley Anne Haber
Brian Hallahan
Mark Hanley
Robert Harms
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Jonathan Harris
Peter & Beverly Harris
Elizabeth Harrison
HD Supply Utilities
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Joseph Hefferman
Alexander Heffner
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Aubrey Herman
Peter & Janet Herman
Bruce Heyland
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Norman Hill Realty Inc.
Paul Hill
Hi-Rise Mechanical
Contracting Inc.
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Joseph & Helen Hochberg
Carrie Hoffman
Jo Ann Hoffman
Alan & Jennifer Hoffmann
Aubrey Holgate
Dave Holland
Homes By Sher-Bilt Inc.

John Hooks
Richard Horodyski
Mel & Marilyn Horowitz
Michael Horowitz
Giselle Howard
Wayne Howes
Kelly Hrycun
John Hrynkow
Stephen Hunter
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Innocon Partnership
Invar Building Corporation
Investors Group Financial Services Inc.
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David Issenman & Jacqueline Segall
Irrevi/2000
Jackman Foundation
Peter Jackson
Isaac & Basia Jesin
Jerry & Karen Jesin
Vadim Jivov
Jokabe Oilfield Services Ltd.
Scott & Robynn Jolliffe
Jones DesLauriers
Insurance Management Inc.
Biff Jones
Joseph Haulage Inc.
Jovan Security Distributors
JTR & Associates
JV Driver Projects
Brian & Alison Kashin
Harvey & Helene Katz
Peter & Risa Katz
Nathan & Carol Kaufman
Henry & Berenice
Kaufmann Foundation
Katherine Kay
Mike Keay
Steven Kelmans & Lisa Richman
Mike Kenyon
Ryan Keogh
Norm & Ellin Kert
Theodor Kerzer
Kidco Construction Ltd.
Adam Kilburn
Rachel Kimel
David Kincaid
Richard Kirby
Peter Kirsch
Howard & Paula Klaiman
Fred & Joan Klap
Les Klein & Toby Rose
Shirley Kofman
Tom & Rita Kolins
Ryan Konotopsky
Clifford & Katy Kornman
Jack Koven
Myra Krangle
Jerry & Karen Krieger
Gordon & Deborah Krochick
Kronis Rotstain Margles
Cappel LLP
Kubik
Bill Kucharuik
Alan Kwinter
Bob Kyle
Kymar Foundation
Lagover Mutual Benefit Society
Lancia Tile
Adrian Lang
Chris Lang
Rene Laprade
Dale & Robin Lastman
Laurentian Bank of Canada
Kevin Lauzon

Bill Laverghne
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Kevin Lee
Legacy Oil & Gas Inc.
David Lebrner
Jay Leider
Lenbeth Telbeltes
The Leslie Group Limited
Inna Levitan
Val Levitan
Mary Levitt
Leon Liffmann & Miriam Sheill
Philip Lind
William Linton
Marc Lipton & Carolyn Naiman
Norton Lithwick & Adele Rich
Robbie & Mindy Little
Dr. Sheldon Little Dentistry
Professional Corporation
Liuna Local 625
Loadstar Dispatchers (1963) Ltd.
Loblaws Inc.
Fern Longert
Karen Longert
Norty & Geraldine Longert
Ben & Jill Lustig
Jeff & Sandy Lyons
Mark Lyons
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Philip & Frances Macarz
Bill MacDonald
Danielle Macdonald
Robert Macdonald
Ronald & Diana MacFeeters
Magna IV Engineering
Claudio Marcomus
Min Mandel
Auby & Elaine Mandell
Seth Mandell
Jeff Mandisloan
Ruthe Mann
Manulife Investments
Maple Drywall Inc.
Tony Mandel
Martin & Judith Markus
Marvo Enterprises Ltd.
Torry Mataren
MCAN Mortgage Corporation
Don Mcar & David Mcbride
Dan McGrath
James McIntyre
John McIntyre
Joanne Mcmahon
McMillan Birn Mendelsohn LLP
McMillan Family Foundation
MDC Partners
Alan & Elise Mecklinger
Dave Mecklinger
Medavie Blue Cross
Medipac Travel Insurance
Daniel Melamed
Melcor Developments Ltd.
Metalx Recycling Ltd.
Midfielder Charitable Foundation
Milestone Property
Management Limited
Miltowne Insurance Services Inc.
Max Mintzberg Charitable Foundation
John Paul Mitchell Systems
Manny Mitchell & Merle Friedman
MMM Group
Macoat Fibreglass Products Ltd.
Ken Moen
Molinaro’s Fine Italian Foods Ltd.
David Moore
David Moore Enterprises Inc.
James More & Bonnie Shore
FAMILY OF FUNDHOLDERS
Honouring the Past, Enriching the Present, Securing the Future

ENDOWMENT FUNDS
An Endowment Fund at Baycrest is a meaningful expression of honour and support. The name of the fund endures, providing a lasting tribute to beloved family members or admired individuals. Donations to a fund provide crucial financial stability and ongoing support for Baycrest’s important client services and programs, cutting-edge research and educational initiatives. With a minimum donation of $10,000 you can establish an endowment fund and have the name permanently inscribed in the Gottendenker Hall of Honour. All donations are eligible to receive receipts for income tax purposes.

VISIONARY $5 MILLION PLUS
Ben & Hilda Katz Research, Education and Care
Sam & Ida Ross Fund for Alzheimer’s Research

PILLAR $1 MILLION PLUS
Elkie Adler MS Clinic
Ben Birstein
Marla & Aubrey Dan
Robert & Maxine Fish
Al Hertz Family Advanced Practice Nurse in Pain Management
Ben & Hilda Katz Chair in Gerontological Nursing
Ben & Hilda Katz Centre for Gerontological Social Work

Ben & Hilda Katz Transportation
Kunin-Lunenfeld Applied Research
The Reva James Leeds Chair in Neuroscience & Research Leadership
Sam & Ida Ross International Prize in Alzheimer’s Research
Sandor A. Rotman Chair in Neuropsychiatry
Saul & Rae Saltzman Community Programming

BUILDER $500,000 — $999,999
Toby Battle
Baycrest Women’s Auxiliary
Baycrest Men’s Service Group
Sidney Jessel Cohen & Judy Weissenberg Cohen
Morris Goldenberg
Medical Research
Albert & Sadye Jessel
Community Outreach
Morris & Sally Justusin
Heritage Museum
Ben & Hilda Katz
Postdoctoral Research
Ben & Hilda Katz International Visiting Scientist
Louis & Rose Lasowsky
Savlov Family

PLANNED GIVING
Planned Giving is simply gift planning from an array of assets. Gifts may be made through a bequest in a will, life insurance, RRSP or RRIF, annuities, marketable securities, trusts, or property such as real estate. Gifts may be made today or promised now to be given some time in the future. This type of giving allows a donor to make a gift much larger than they ever thought possible. This source of revenue is critical for Baycrest to meet the changing and growing needs of the elderly we serve.

Planned Gifts received from the estates of:
George Harold Bernstein
Walter B. Bick
Benjamin Birstein
Maurice & Sandra Bronner and Abraham & Felicia Irgang
Gerald Dubinsky
Ruth Gelber
Charles Fejer
Esther Freiman
Mary Gold
Morris G. Goldenberg
Ilona Gondor
Anne Haberman
Harry Hersh
Lillian Leranbaum
Irving & Molly Levins Foundation
Sophie Lewar
Stephan Lewar
Yetta Mednick
David Meltzer Charitable Trust Fund
H. Albert Morton
Rose Piper
Helen Rotberg
Joan Schoenengen
Jack Siegal
Max J. Singlet
Lily Sokolne
Ruth Sperer
Bernard Teichman
Helen Tenenberg
Ilona Wellesz
Toby Wintraub
Anne Wohl

ART DONATIONS
Rachel Benzmergui
Drew Cohen
Hugh Furseaux
Sandra Gerther
Jeffrey B. Gollob
Joseph Gottdenker
Allan Gould
Leo Kamen
Ian Leventhal
Aaron Milrad
W.R. Murray & Joan Murray
David Perelman
Michael Ruscetta
Rabbi Mark Dow Shapiro
Lynn Sigel
Joel Strauss
Jack and Betty Winston

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We gratefully acknowledge the support of the following community organizations who facilitate distribution of donor gifts to the Baycrest Foundation:

The Benjamin Foundation
Jewish Community Foundation of Montreal
Toronto Community Foundation
United Jewish Welfare Fund of Toronto
United Way of Greater Toronto
United Way of Winnipeg
SCOTIABANK PRO-AM RETURNS TO EDMONTON FOR SECOND YEAR

The Scotiabank Pro-Am for Alzheimer’s returned to Edmonton in 2011 for a second year. With the support of local and national corporate sponsors, media and individual donors, the 2011 event raised over $1.2 million.

† Dropping the puck at centre ice are Chris Bruce, vice-president, Edmonton District, Scotiabank (3rd from left) with Lyn Kutzfeld, president, Alzheimer Society of Alberta & Northwest Territories, surrounded by Edmonton’s top fundraisers and NHL alumni.

†††
Frances Soble Harnick
Anne & Albert Harris
Ronald & Aviva Heller
Rickey & Harry Hennick
Lillian & Isadore Hertz
Charles Hilary & Dianne Ingles
David & Rae Hildebrandt
Holland Family
Judith & Philip Hooper
Judith & Philip Hooper
Jean & Ben Isaacs
Robert William & Dorothy Beatrice Jackson & Family
Prof. Andrzej, Karolina, Ludwik, Estelle Jus
Sam & Esther Kaiman
Bernice & Marvin Kalifer Families
Saul & Mildred Kalisman
Joseph & Jean Kitchler
Izzy & Betty Kirshenbaum
Sarah & Paul Kirzner
Sheila & Arthur Klarrman Family
Michael Jay Kleinberg
Belle & Harry Kochen Family
Max & Minnie Koffman
Fred & Aranka Kolin
Leib & Toby Krieger
Ladowsky Family/United Bakers
Milton (Mickey) Lambert
Anna & Leon Lapidus Family
Frances & Al LaPorter Family
Nathan Lastman
Jack & Elise Latner
Allan Lax
Jean & Charles Lea & Gloria Ellen Lea
E. Harry & Hazel Lepofsky
Ruth & Irving Lerman
Polly & Mannie Levi
Abe & Ethylene Levine
Evelyn & Frank Levine Family
Freda & Murray Levine
Norman & Shelley Levine Family
Sydney & May Levitt
Caren & Michael Levy Family
Joel H. Lewis
Ted & Lorraine Lifefield Family
Sally & Louis J. Libman
Nathan & Frances Lieberman
Rose & Manny Lipman & Shari Sugar
Sidney & Natalie Liswood
David & Betty Little
Netty Loftus
Beiss & Hy Lustig
Molka & Joseph J. Lyons
Samuel, Joseph & Lyndsay Lyons
Jack & Pearl Mandel
Julius & Margaret Marcus
Marshall Margolis
Barnet & Gert Markson Family
Dr. Charles Markson
Judith & Martin Markus & Family
Lyia Gutzin Markus
Jack Marmer
Lillian & Elliott Marrus
Lillian & Haskell Masters
Mandelson Holiday & Festival
Dr. Marvin Miller
Harold & Maxine Minder
Riva Mintz
Mitz Family
Helen & Philip Mosoff
Florence & Mervin Naimer
Anne & Albert Nightingale
Emma & Jack Oelbaum
J. Irving Oelbaum
Fay & Norman Oster
Rae & Joseph Louis Pancer
Jack & Susan Pasternak
Jeffry Alan Penner
Petroff Family
Hinda Annie Picoz
Edwin & Charlotte Pivnick Family
Goldie Potashin
Benjamin David & Ethel Rachlin
Ramstein Family
Norman & Rae Rebbick
Rosalie Rich
Jack & Rita-Ritchie
Alexander & Bernice Robbins
Sophie & Max Rochman
Allan & Elizabeth Rodda
Lionel & Martin Roher
Sam & Ethel Roher
Arnold & Lillian Rose
Bea & Carl Rosedroin
Freda & Joe Rosenfeld
Willie & Bertha Rosengarten
George & Ethel Roth
Israel & Ray Rothbart
Molly & Morris Rubenstein
Iz & Sophie Rumack
Samuel J. & Jean Sable Family
New Fraternal Jewish Association’s J.B. Salsberg
Allan & Marian Saltzman
Ruth & Leo Schacter
Esther & Mark Schipper
Laura & Sidney Schipper
Jack Schwartz, Ida Schwartz, Bertha Schwartz Katzman & Murray Schwartz
Ruth & Charles Schwartz
Carrie Schwartz
Fae Stolinsky
Frank J. Seger
Liva & Israel Senderowitz (Senders)
Andrew & Magdi Senyi
Robert & Naomi Shapero Family
Eva & A. Morris Shapira
Morrise & Rose Shear
Edward & Helen Sheffman Family
Samuel & Rose Shendroff
Lou & Esther Sher
Harry & Sarah Sherman
Theodore & Donna Sherman
Sylvia & Murray Shiffman Family
Bernice & Mac Shore
Rebecca & Sam Shore
Becky & Irvin Shulman
Harry & Jean Silver Family
Joseph & Bertha Silverberg Family
Saul Simon
Philip & Esther Skoronek
Adrienne & Joel Sloan
Robert & Rose Sloan
Annya Slocwowski
Freda & Louis Slotnick Family
Ben & Sylvia Smith
Sam & Minka Smith
Anne & Harold Sniderman
Harry & Molly Sniderman
Cantor Max & Mina Snyder
Aaron Sokalsky Family
Harry L. Solomon
Rose & Louis Soucopp
Louis & Ruth Spencer
Donna & Ronald Steinberg Family
Eric Stone
Rose Storfer City
Ruth & Jacob Steiney
Dr. Donald Stoss & Family
David & Fern Sugarman
Louis Swartz
Yhetta Swartz-Lewis & Charles Lewis
Hettie & David Swartzman
Joseph & Sally Switzer
Bella & Jakob Szternlicht
Luigi Tatangelo
Joseph & Dana Tassis Family
Lloyd & Lillian Title Family
Moses & Temara Tobe
Toronto Hebrew Benevolent Society
Izzy & Fanny (Faye) Trefler
Harry & Yetta Ungerman
United Families Organization
Peggy Vogel
Madelin & Harry Waisberg
Alma & Ted Waldman
Max & Sala Walerstein
Judith Walters
Warszawick Mutual Benefit Association
Harry & Ethel Wasserman
Saul & Jean Weisbrod
Max & Ida Rose Weissfeld
Rose & Henry Weisburston
Benjamin & Sarah Weverman Family
Barnard & Ina Gurofsky & Samuel & Minnie Wexler
Louis & Dora White
Molly & Ben Willer
Mary & Percy Wilner
Honey & Julie Wise & Family
Ab & Kate Witkin Family
Beatrice & Max Wolfe
Regina Wolff
Elizabeth & Joseph Yolles
Jack E. Young
Helen & Harold Zamon

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Ruth Adams
Susan & Simon Adams
Sam Adelkind
John Alexander
Alexander & Verk Families
Sheila J. Allen
Faye & Alan Alter
Arthur & Sonia Anisaman
Rose & Israel Appel
Morry & Fanny Applebaum
Nechemiah & Esther Shaimdl
Applebaum Family
Jennine & Moshie Appleby & Family
Rena Lillian & Max Appleby
Ida & Jack Ashrow
Deborah & Nathan Austin Family
Sara & Lionel Axler
Eddie Baker
Mathilda Baid
Larry & Arora Banack & Family
Morris & Frances Basen
Fanny & Nathan Baumstein
Baycrest Department of Psychiatry
Baycrest Research Foundation
Baycrest Tuition Reimbursement
Baycrest Volunteer Services
Baycrest Wagman Centre
Baycrest Wagman Centre Improvement
Baycrest Wagman Centre Program Enrichment
Mary Bealul Wilner
Annette & Sid Bearch Family
Esther & Morris Beare
Jack B. Bedder
Ethel Benoway & Family
Rebecca Berenson
March 31, 2012
between April 1, 2011 and
*Indicates new funds opened

Dinah & David Zweig Family
Betty Zweig
Zucker, Zinman, Gross
John Ziner (Czinner) & Family
Fanny & Thomas Zelin
Leslie & Gertrude Zack
Sam & Norma Yurman
Young Men’s Hebrew Association
Belle & Wilf Yaphe
Bernice & Abe Wygodny

Louis & Helen Marcovitch
Fredda & Irving Margles
Peter Margolis
Mary & Morris Marks
Professor Nathan Markus
Willie Martin
David & Sylvia Matlow
Maven-Thornhill Lodge B’nai Brith
Ann & Manuel Meyers
Jack & Sara Mazin Family
Arnold Medad
Ann & Samuel Meltz
Arthur & Lillian Messinger
Rowena Meyer
Louis Milgram
Arthur & Sylvia Miller
Jack (Whitby) & Gertrude Mills
Lily & Hyman Milstein
Gary & Genia Minz
Dr. Sidney Moll
Joseph & Helen Morgan & Family
Fay & Gerry Morris
Bettee Morton
Fay & Alex Mosoff
Muller & Hirsch Families
Agnes Murphy Family
Minnie Myers
Sally Myers
Miriam Naiman
Esther & Hyman Naistat
Rose Nash & Herschel Friedman
Ida Nefsky
Rose Neptom
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Jessie & Charles Norman
Northwood Country Club
Rita Offman
Lou & Ida Oiffer
Lillian & Louis Okun
Jerry & Shirley Olch
Belle & Lou Oront
Joel A. Organek
Thora & Fred Ornstein
Eva & Henry Ostro
Annie Page
Esther & George Panzer
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Pesce Family
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Arnold & Florence Phillips
Howard Arnold Phillips
Rosa Pinhas
Sylvia & Max Plant & Paul
& Family
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2011/12 Baycrest and Baycrest Foundation Annual Report
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The Foundation is profoundly grateful to Women of Baycrest for their contributions. Women of Baycrest plays a pivotal leadership role demonstrating that women's philanthropy counts. Listed below are the Women of Baycrest members who have invested in the future of Baycrest. For more information, visit womenofbaycrest.com

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SAM CONFERENCE EDUCATES WOMEN ABOUT BRAIN HEALTH

The resounding success of Sex, Aging and Memory (SAM), Canada’s first women’s brain health conference, can be attributed to the presentations made by our Baycrest scientists, researchers and health-care professionals, the incredibly supportive corporate community, our media sponsors and the hardworking, dedicated committee of volunteers led by co-managers Simmie Antflick, Karen Baruch and Reesa Sud.

†Pictured at the SAM Conference after-party hosted by CTV’s eTalk are (from left) Tanya Kim, Karen Baruch, Ben Mulroney, Reesa Sud and Simmie Antflick.
The Baycrest Foundation makes every effort to ensure the accuracy and completeness of our listing of donors. If an error or omission has occurred, please contact Kris Shenvi in the Baycrest Foundation at 416-785-2500 x 2261 or kshenvi@baycrest.org.

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For more information about Baycrest’s programs and services, please visit www.baycrest.org.

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