

REACHING NEW HEIGHTS



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ON THE COVER

*Photo courtesy of Aaron McCourtie from Original Trails
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Original Trails is a travel provider for MS Climb. This image features a team of MS Climbers and was taken during their Everest Base Camp climb in October 2010. For more information visit msclimb.ca

EXECUTIVE SUMMARY

STRATEGIC DIRECTIONS

STAKEHOLDER PERSPECTIVE

How do we create value for our stakeholders?

1. Find the cause, prevention, and cure for multiple sclerosis in the shortest possible time.
2. Enhance the quality of life for people affected by MS (i.e. children, teens and adults in Canada who are confirmed as having MS, waiting for a diagnosis with respect to MS, close to a person with MS or caregivers of a person with MS).
3. Increase general awareness of MS issues and the MS Society of Canada.
4. Increase responsiveness to MS issues among governments, local authorities, corporations and other relevant organizations.

INTERNAL PROCESSES PERSPECTIVE

To deliver on our mission, at what processes must we excel?

5. Foster internal and external collaboration and information exchange.
6. Foster a streamlined and accountable organization.
7. Cultivate innovation.
8. Embrace technology.

FINANCIAL PERSPECTIVE

Financially, what is most critical to us?

9. Grow revenue.
10. Ensure fundraising remains non-profit sector leader.
11. Build a donor-centred fundraising culture.
12. Improve fundraising efficiency.

LEARNING AND GROWTH PERSPECTIVE

How do we enable ourselves to grow and change?

13. Strengthen the organizational culture.
14. Intensify volunteer engagement.
15. Become employer of choice.
16. Promote diversity across the MS Society.

EXECUTIVE SUMMARY

This report is a companion piece to the Multiple Sclerosis Society of Canada's 2010 National Impact Report. Our objective in writing this report is to provide a more in-depth discussion and analysis of key initiatives undertaken at the MS Society in 2010. The MS Society values its relationship with stakeholders: whether you are a person living with MS, member, donor, staff, volunteer, partner agency or funder, we hope this report will assist you in understanding the complexities of our work in the non-profit sector and within Canadian communities.

Momentum 2015 – our strategic plan for 2015 contains 16 strategic directions (SD) that reflect our priorities. This report and our National Impact Report provide insights into progress made on those directions in 2010 and how we and those we serve have reached new heights.

This was an extraordinary year for the MS community. It was characterized by hope, optimism and engagement as everyone followed the developments related to chronic cerebrospinal venous insufficiency (CCSVI). The developments brought the MS community and the MS Society unprecedented levels of awareness (SD3). CCSVI-related matters touched most areas of our work including communications, research, information technology, resource development, client services, government relations and advocacy.

During this unprecedented year, those impacted by MS and the general public mobilized around CCSVI. Online and offline discussions raised the profile of the MS Society and allowed us insight into the needs of the MS community. In accordance with our commitment to improve the quality of life for people affected by MS, and help people find the answers they need, we

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developed a new resource to provide up-to-date information (SD5) on CCSVI and MS. This interactive microsite, CCSVI.ca (SD8), went live in 2011.

We are greatly appreciative of our stakeholders continued support of our work. Despite a somewhat sluggish economic recovery, the MS Society produced strong fundraising results in 2010. We continued our efforts to reduce expenditures, improve fundraising efficiency (SD12) and introduced new processes to strengthen our financial oversight and reporting. We also continued our efforts to become a more streamlined, accountable (SD6) and transparent organization through significant modifications to the format of our audited financial statements.

This report provides highlights of the MS Society's 2010 performance in the areas of: financial oversight and reporting; resource development; operations (including client services, communications, research, government relations, human resources and information technology); and governance and policy.

FINANCIAL OVERSIGHT AND REPORTING

The MS Society's long-term sustainability depends, in part, on our ability to be fiscally responsible: to oversee and manage the funds we receive; to seek efficiencies and reduce expenditures; and prudently manage our risk and investments. This section addresses how we oversee and report on our finances.

FINANCIAL OVERSIGHT

In response to the economic downturn we initiated a process to review and reduce organizational expenditures to ensure our resources were focused on the areas of greatest priority. Part of this work involved taking a more comprehensive, organization-wide approach to budgeting, and identifying areas with the potential for cost reductions. All departments and locations were encouraged to find ways to reduce their expenditures in 2010, and reductions were achieved in the areas of travel and workshops. Another key focus was to reduce the cost of fundraising, which we were able to lower by almost 8 per cent in 2010. Reducing fundraising costs was a major focus for the MS Society's senior management and the board in 2010.

Streamlining our approach to administrative costs represented a key expenditure reduction strategy. Building on work over the past few years (e.g. the centralization of financial processing), more of the MS Society's financial activities in locations across Canada were centrally processed in 2010. This not only delivers cost savings in the form of efficiencies, but facilitates our ability to understand the MS Society's overall financial position at any given point in time. Other efficiencies were achieved through the growing use of the MS Society's intranet: as more documents are transferred electronically between MS Society offices, delivery costs, paper consumption and our environmental footprint have all been reduced. We are pleased to report that our administrative expenditures are only 6.4 per cent of total revenue in 2010.

Electronic Funds Transfers (EFTs) and other paperless initiatives moved from pilot projects in 2009 to wide-spread implementation in 2010. Today the majority of our payments are made and delivered electronically instead of through the postal system. EFTs are not only more cost-effective, efficient to administer and deliver payments to recipients, but they have also proven to be more secure than payments sent through the mail.

Risk management was another key initiative for the MS Society in 2010. The national board's audit committee assumed the responsibility for risk management. The committee devotes a portion of its meetings to risk management and provides the board with regular updates on risk management activities. An organization-wide risk management task force was established to identify priorities and address the greatest risks facing the organization. Risk-mitigating strategies were reviewed or implemented to ensure the MS Society's greatest assets are safeguarded. The task force identified the MS Society's most valuable assets as: our financial assets, reputation, charitable status, and people (i.e. our staff and volunteers). A number of key financial/budget ratios have been developed and are regularly reported to the board to support their financial oversight and decision-making.

Our investment income is a key component of our financial revenues, and we saw a significant increase in this income in 2010. The MS Society weathered the market correction and navigated the recovery more successfully than many other charities. This is thanks in no small part to our investment committee that continues to meet quarterly to ensure the funds we raise are effectively stewarded and safely invested while delivering the best possible returns.

FINANCIAL OVERSIGHT AND REPORTING

FINANCIAL REPORTING

As noted in the 2009 Stakeholders' Report, the MS Society changed its financial year-end from August to December (this resulted in FY2009a, a 4-month "transition" fiscal year for September 1-December 30) to better align with our business and activity cycles. Given that many of our core fundraising events take place early in the spring/summer, if revenues vary significantly from projections, we have more time to adjust expenditures to offset revenue shortfalls.

Integration of T3010's: Until 2010, despite the fact that the MS Society of Canada is one legal entity (with the exception of Québec Division), our divisions submitted individual charitable returns to the Canada Revenue Agency (CRA) because they were separately registered charities with CRA. These returns reflected each division's unique operating activities and fundraising events; however the multiple returns caused some confusion for prospective donors and other stakeholders trying to assess costs and revenues that are shared across the MS Society's multiple jurisdictions. With the intent of reducing donor confusion and increasing overall transparency on the entire work of

the MS Society, we voluntarily submitted a request to CRA to amalgamate all the separate registration numbers with our national registration number. This request was accepted and will result in one charity return being filed annually for the combined operations of all MS Society locations (apart from Québec).^{*} This unified return provides details of the consolidated work of the MS Society and enables us to more clearly communicate the variety of mechanisms we use to raise funds and their related costs.

Sector Leadership: The Accounting Standards Board formed the Accounting Standards Board Task Force, to determine how to blend together the two different accounting methods used by organizations in Canada's non-profit and public sectors. The task force is comprised of representatives from the Accounting Standards Board, the Canadian Institute of Chartered Accountants, the government, public accounting firms, non-profit organizations and universities. The MS Society's chief financial officer, Jamie Hall, was invited to participate as a representative for Canada's charitable sector.

**If you search the CRA's website today, you will now find the T-3010 for the MS Society of Canada, Québec Division, a number of separately incorporated chapters in Quebec, and the MS Scientific Research Foundation.*

RESOURCE DEVELOPMENT AND FUNDRAISING

The MS Society of Canada is 96 per cent self-funded, meaning that the vast majority of our funding comes from our donors – the more than one million individuals in communities across Canada who support our work. The remainder comes from government grants (2 per cent) and pharmaceutical companies (<1 per cent). Without this critical support from donors, who are engaged through a variety of fundraising programs, we would be unable to fund MS research and our capacity to provide important services to those touched by MS would be gravely compromised.

Given our reliance on donated funds, creating an effective resource development strategy is a critical component of our work. Key elements of this strategy include diversifying the way we raise funds; continuing to seek fundraising efficiencies; strengthening relationships with volunteers and donors to deepen their understanding and commitment to our work; and being transparent and accountable to donors and the public.

The MS Society's funding model differs significantly from other health charities, many of which receive up to 70 per cent of their funding from government sources. Although the MS Society continues to apply for and has been successful in some applications for government grants, to date government financial support of MS Society programs has been minimal. As a result, raising funds from individual donors through participatory events remains the single largest revenue source. These events, by nature, are complex and costly and MS Society staff and volunteers work daily to bring costs down (e.g. by implementing online donation options through technology and re-thinking the structure of prizes associated with events), while being mindful of the need to raise sufficient funds to deliver client services and sustain our commitment to MS

research. To confirm our commitment to improve our fundraising efficiencies even further and in alignment with the MS Society's strategic plan (SD12), the national board passed a motion in 2010 to reduce fundraising costs to 42 per cent within three years.

The MS Society's participatory events, and appeals for support sent via direct mail, still deliver the majority of our fundraising revenues. Our signature participatory events – MS Walk, MS Read-A-Thon, RONA MS Bike Tours – continue to attract many repeat participants who collect many small gifts on our behalf. In 2010 our community-based fundraising event revenues increased by 4.3 per cent and participation numbers were similar to 2009 (RONA MS Bike Tour was up 2 per cent and MS Walk was down 3 per cent). In addition to the funds events raise, these well-promoted and attended activities help put a visible face to people touched by MS and increase public awareness about multiple sclerosis. Our direct mail program complements our events and has proven an effective way to grow our revenues by attracting new donors to the organization. Some of these new donors later provide major gifts or estate gifts, which have a comparatively low cost structure. In an effort to reduce direct mail program costs the national office began implementing changes and reduced the scope of the program in late 2010.

We continue to be mindful that to grow revenues (SD9) we must innovate and diversify our revenue sources. Our corporate relationship with A&W evolved this year – prompting us to introduce a social media component to the 2nd annual Cruisin' for a Cause campaign (>700 Canadian A&W restaurants participated). Using Twitter to promote the event, the public engagement level in the program spiked and revenues increased 80 per cent to total over \$720,000.

RESOURCE DEVELOPMENT AND FUNDRAISING

Participation in our Women Against Multiple Sclerosis (WAMS) fundraising event was also strong in 2010 thanks to highly engaged local volunteers. In 2010 WAMS was held in Toronto, Montreal, and Vancouver. We also reinforced our appeals for bequests with the introduction of MS Legacy, a website that encourages donors who have chosen to make bequests to share their story via a video testimonial. Finally, third-party fundraising events such as MS Climb (a team-based endurance activity held in different locations) and the Quebec MS Kilimanjaro Challenge literally took participants and the MS Society to new heights in 2010 bringing in \$254,000.

In an attempt to strengthen donor connectedness and commitment to the cause the MS Society has been striving to expand awareness of all the different ways that people can help us end MS by raising funds. Through this donor integration strategy we cross-promote our events: e.g. if a donor has been involved in the MS Read-A-Thon, we might encourage them to take part in MS Walk. We are hoping our donor integration strategy will help us achieve further fundraising efficiencies.

As part of our goal to build a donor-centric fundraising culture (SD11), the MS Society honours donors' preferences with respect to donations. Should a donor wish to donate specifically to services directly impacting a person with MS, research in general or CCSVI-specific research, donors are encouraged to indicate this when they make a contribution.

Our endMS campaign also continued to make great strides toward our \$60 million goal: by December 2010 we had raised over \$51 million. Much of the campaign's success can be attributed to the work of our endMS campaign cabinet members. These dedicated volun-

teers from Atlantic Canada to British Columbia have been instrumental in helping the MS Society attract larger gifts and confirm multi-year pledges (reliable, consistent sources of funding). This low-cost, innovative, volunteer-driven approach to appealing for such gifts is unusual in the health charity sector and has enabled us to expand our fundraising capacity (SD10).

As noted above, the MS Society receives less than one per cent of total revenue from pharmaceutical companies. Funding received from these companies is in alignment with Canada's Research-Based Pharmaceutical Companies Code of Conduct and strictly adheres to the MS Society's own policy that prevents any control or influence by the donor on our decision-making. These pharmaceutical contributions enable the delivery of client services and support such as national educational events and publications such as *A Guide to Employment and Income Supports* and *Mighty Special Kids: A workbook for kids living with MS*. Their contributions also help advance the research side of our mission through the designation of awards to talented Canadian researchers.

Sector Leadership: As chair of the national government relations committee, the MS Society's chief development officer, Ken Mayhew, has been participating in the development of an ethical code of conduct for fundraising collaboration with the Association of Fundraising Professionals. The group is working with the government and others to help promote charitable accountability, while enhancing public understanding that fundraising costs are a legitimate business expense for charitable organizations that require donor funds to achieve their mission.

OPERATIONS: CLIENT SERVICES, COMMUNICATIONS, RESEARCH, GOVERNMENT RELATIONS, HUMAN RESOURCES AND INFORMATION TECHNOLOGY

The MS Society of Canada's mandate is to be a leader in finding a cure for multiple sclerosis and to enable people affected by MS to enhance their quality of life. People living with MS are at the centre of our work and remain the driving force behind all we do as we move toward our goal of ending MS. Key operational activities include client services, public education and awareness, government relations, human resources and information technology. Our dedicated staff teams deliver client supports and services¹; advocate for policy changes that positively impact our constituents; and develop tools and resources which enable us to work efficiently and effectively internally and with our many volunteers and other stakeholders.

COMMUNICATING WITH AND SERVING CANADIANS AFFECTED BY MS

Over the years, one of the most valued services the MS Society has provided to people affected by MS is evidence-based information related to the diagnosis and treatment of the disease. In response to a growing demand for current, quality information, this information is delivered increasingly via interactive websites and social media (e.g. Twitter and Facebook). These platforms facilitate information exchange and two-way conversations.

In 2010 developments related to CCSVI were brought to the public's attention on the front pages of Canadian newspapers. This heightened awareness of MS drew many new voices to the table. Questions related to the potential treatment dominated many online and offline

conversations. Some of the media stories pitted people living with MS against neurologists and the MS Society of Canada. A deliberate communication strategy clarified some of the miscommunications and framed our role more accurately than portrayed in the media, resulting in a more balanced perspective today. In late 2010, online conversations were focused more broadly on a variety of MS issues, including but not limited to CCSVI.

Engaging in these conversations helped the MS Society listen and better understand what really matters to people living with MS, their caregivers and families who were understandably excited, and at times overwhelmed by, the volume of information related to CCSVI. Education continues to be a priority for the organization and relaying timely, credible and relevant information on CCSVI and other research advances was a critical focus for the MS Society in 2010. The way we communicated with our stakeholders changed significantly in 2010 – our communications team provided frequent updates via Twitter, Facebook and the MS Society's website; these communications were complemented by the National Education Series (NES), which was delivered in a variety of communities and featured webcast technology that allowed us to stream expert panel presentations live across the country.

¹ Supports and services include: financial support for daily living or equipment needs, the funding and running of direct-to-client education programs, self-help groups, recreational and social programs, information and referral to local community resources. The MS Society also funds MS clinics that provide medical support, diagnosis and information.

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As the volume of information and conversations related to CCSVI swelled over the course of the year it became apparent that creating a separate space for CCSVI content would make it easier for individuals to find the answers they were seeking. The MS Society created a new website focused on CCSVI-related topics (CCSVI.ca). The goals of the site included providing an online space that would engage those interested in CCSVI in dialogue and providing a safe place for people to ask questions and share their personal stories. With this site the MS Society aims to provide the MS community with timely, credible and relevant information on CCSVI so that those living with MS can make informed decisions about their personal health care.

In 2010, the MS Society developed a three-year youth strategy which reflects best practices in youth engagement. The strategy includes three key deliverables: to identify a national MS youth ambassador for Canada (Erin Solowoniuk, the drummer from Billy Talent, is a dedicated volunteer who has been involved in fundraising and youth engagement); to recruit and convene a MS youth advisory group (comprised of youth diagnosed with MS, youth living with or close to someone diagnosed with MS, and young researchers); and to build an online space for youth. The goal of the advisory group is to bring the voice and choice of youth to the organization and to help them get involved in the cause (e.g. our summer camps, scholarship programs and other youth services). One of the group's first tasks was to provide input on the design of a new information portal for youth and young adults with a diagnosis of MS or who are otherwise affected by MS. Much of this work, which included national focus groups with youth, was done in the summer and fall of 2010 (note: the French and English websites went live in spring 2011: someonelikeme.ca and commemmoi.ca).

RESEARCH

Interest in MS research in Canada has never been greater: more people are looking at more questions in the MS field than ever before. Over the last three years applications to the MS Society's research operating grants and personnel awards (for Masters, PhD and post-doctoral students) has increased 20 to 30 per cent annually. Today, there are an unprecedented number of clinical trials taking place and a number of potential therapies are coming into the final phases of clinical trials. Because MS is a complex disease, the MS Society funds a broad range of research that evidence suggests represents the areas of greatest potential such as remyelination, immunology, genetics, Epstein Barr Virus, vitamin D, CCSVI, MRI, and paediatric MS.

It was evident from discussions in 2010 that many in the MS community urgently wanted to find answers about the potential risks and benefits of CCSVI treatment. In addition to relaying information about new developments, the MS Society of Canada responded by jointly funding seven studies totaling \$2.4 million with the National MS Society (USA); in partnership with the MS Scientific Research Foundation, we have also committed \$1 million for a possible eventual clinical trial if and when such a trial is warranted.

One of the targeted activities for our endMS capital campaign was to attract, train and retain the best and the brightest of the researchers to MS research. The endMS Research and Training Network was launched in 2006 as a nationwide initiative to fuel interest and accelerate discovery in the field of MS research in Canada. The Network's innovative education and funding programs have since attracted over 770 experienced researchers and trainees from more than 50 academic and health institutions across Canada. In late 2010 the Network successfully facilitated learning,

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collaboration and knowledge exchange for a multi-disciplinary group of over 200 MS-focused researchers and trainees at our endMS Conference in British Columbia.

The MS Society would like to take this opportunity to recognize and thank the many highly skilled volunteers – researchers and clinicians from around the world – who participate on committees (e.g. the medical advisory committee, MS biomedical grant review sub-committee and the clinical and population health research grants review sub-committee), charged with the administration and adjudication of our grants. Together these individuals have devoted countless hours to help us further our goal of ending MS.

GOVERNMENT RELATIONS

The MS Society of Canada strives to influence government policies, private industry practices and public attitudes in ways that will benefit people affected by MS. The major focus of our 2010 government relations work related to CCSVI. Our board members strongly recognize that Canadians with MS who undergo treatment for CCSVI abroad need and deserve follow-up medical care and monitoring to help mitigate potential complications from surgery. In 2010, the MS Society called on governments across Canada to take the action. Here is an overview of our 2010 government asks and the related impacts these requests helped bring into fruition:

1. We asked all provincial and federal government to earmark funds for a pan-Canadian therapeutic trial on CCSVI, so that an immediate infusion of funding will be available if and when such a trial is warranted. In May 2010, the MS Society asked the federal government to earmark \$10 million for clinical trials.
 - In October 2010 Saskatchewan committed \$5 million to a clinical trial of the CCSVI procedure. In April 2011 Manitoba also committed \$5 million for a clinical trial of the CCSVI procedure, with plans to follow the research protocol developed by the government of Saskatchewan.
2. Create registries or observational studies of people who have obtained the CCSVI procedure outside Canada, or more broadly, for MS and work together to share the design and results of the registries or studies.
 - In March 2011 the federal government, in partnership with all provinces and territories, announced the creation of a national monitoring system that will capture information to help identify disease patterns and track long-term treatment outcomes. People living with MS will be the beneficiaries of this monitoring system as it will shed light on important topics like CCSVI, the long-term benefits of current therapies and also serve as an invaluable tool in assisting researchers, health professionals and policy makers in their work. (see; Monitoring System announcement) The provinces of Newfoundland and Labrador (September 2010), Alberta (December 2010), and British Columbia (April 2011) have also made commitments to fund observational studies.
3. Provincial and territorial governments should ensure that no Canadian who undergoes treatment for CCSVI outside of Canada is denied necessary post-treatment and follow-up medical care when they return home.

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- A number of provinces have made commitments to provide appropriate follow-up care including the government of Ontario, which has established an expert advisory group to provide advice on follow-up care (March 2011).

For more information about how governments are responding to the call to action from the MS Society of Canada and from people with MS from coast to coast, please visit ccsvi.ca/mission/relations

We work with others to amplify our voices and advance the interests of people with MS. As a member of Health Charities Coalition of Canada (HCCC) and of Neurological Health Charities of Canada, the MS Society participated in a series of meetings with the Liberal Party leader. Consistent with our non-partisan role, we also requested meetings with other party leaders.

We have been providing electronic tools for individuals who are interested in taking action or advocating for themselves on specific issues. In 2010, through online advocacy campaigns we encouraged MPs to increase funding for health research; to make changes to EI sickness benefits; to make the disability tax credit refundable; and to allow spouses to claim the caregiver tax credit. With the help of many individuals we reached over 97 per cent of MPs and/or MP candidates. We believe these coordinated efforts contributed to the federal government's decision to introduce a new Family Caregiver Tax Credit as part of the 2011 federal budget.

HUMAN RESOURCES

Our Human Resources (HR) team has been striving to create a more consistent employee experience coast-to-coast. A number of initiatives which began in 2008-2009 were implemented in 2010 to support this goal: implementation of more comprehensive job descriptions; the introduction of new orientation and 'on boarding' (an employee's first 90 days) programs; and the design and implementation of a new performance management and pay-for-performance system (this includes a merit matrix pay structure which can be tailored to regional conditions). Training on the new performance management system was delivered on a 'just-in-time' basis. Training included workshops on objective-setting, coaching and feedback, assessing work, etc.

Most staff (85 per cent) participated in our employee survey that occurs every second year and, although this year's results were still under review at press time, early results indicate that the level of diversity and collaboration across the organization increased from 68 per cent (2008 Nationwide Employee Survey) to 73 per cent (2010 Nationwide Employee Survey). This five per cent increase strongly reflects improvements made to HR processes including recruitment and performance management as well as the creation and launch of an online collaborative platform.

Strategic investments in technologies such as Mercury, the MS Society's intranet or internal collaboration platform, have helped to better connect staff and volunteers to each other and to internal resources while reducing hardware costs. Although implementation will continue through 2012, the structure is in place

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and staff members have been trained and are becoming more familiar with the sharing platform. Many teams are starting to recognize the benefits of the secure online system, which facilitates collaboration and the sharing of best practices. The HR team's resource centre is available via Mercury: as new HR policies and tools are released/updated they are immediately accessible to the rest of the organization. The HR team also introduced other electronic/paperless initiatives which deliver efficiencies and cost less than traditional processes: employees can now monitor the status of their performance reviews using Mercury and sign off on code of conduct and privacy agreements; and since the integration of our payroll and HRIS platforms our pay stubs are also paperless.

INFORMATION TECHNOLOGY

In late 2009 the MS Society's national board approved a new five-year IT strategy aligned with SD8. The direction is focused on wisely adopting, investing in and implementing proven, reliable and cost-effective technologies. Key strategic initiatives include: development of an integrated and secure fundraising platform that integrates databases; introduction of new technologies for client services and leadership giving; an updated easy grants application for the research program (version 2.0 streamlines our research grant application process); implementation of new HR information systems; and an updated IT infrastructure.

In 2010, as part of the development of an integrated fundraising platform, the MS Society upgraded Opal (our current online database system) and introduced a business intelligence and reporting system that enhances our reporting capabilities. Late in 2010, we also launched a formal RFP process to solicit proposals from specialized vendors who could replace and improve our online giving program.

The national client services team in collaboration with a cross-section of staff from other functional areas conducted a client services consensus initiative in 2010 to identify the MS Society's essential client services; this group provided input on priority IT investments to ensure the MS Society's ability to deliver and support these services. In terms of infrastructure platform, all computers were upgraded to Office 2007 and moved to a hosted email infrastructure that was designed to eliminate challenges with mailbox sizes and limited instant messaging capabilities. This will facilitate our move to less expensive netbooks and wireless networking.

This IT strategy and related strategic investments made in this area position us as leaders in the charitable sector. We are already beginning to see the return on investment in terms of productivity and cost reductions.

GOVERNANCE AND POLICY

The MS Society's vision for 2015 articulates our desire to be a transparent and accountable organization. Governance practices and policies support our ability to achieve this. In 2010 the MS Society's governance work continued to focus on implementing recommendations from the national governance review task force (2008) to move the MS Society's governance 'from good to great' and advancing SD6: fostering a streamlined and accountable organization.

Taking it online: as noted in last year's report, one of the key recommendations that came out of the governance review involved developing an online governance resource centre (GRC). The GRC is now available on Mercury and provides 24-7 access to comprehensive bilingual governance tools and resources. The GRC facilitates the sharing of governance materials and practices as they are developed at the national, division and chapter levels. Many of the tools in the GRC are sourced internally from various offices of the MS Society.

The GRC has been organized into key governance areas such as board accountability, board member recruitment and orientation and board effectiveness and strategic planning. The resources and tools will be continually improved and updated, and governance best practices will be solicited periodically from all levels of the MS Society. The tools in the GRC are intended to be customized to reflect local realities and have been formatted so that they can be easily downloaded. At this time, the majority of MS Society board volunteers do not have access to Mercury. Until Mercury is launched broadly to volunteers, staff can provide the sample tools to board volunteers by email or by sending paper copies.

Strengthening governance: The national board's governance committee is charged with ensuring the effectiveness of the board and promoting continuous improvement. A board evaluation process helps identify areas requiring adjustment. In 2010 board education sessions were introduced as a regular component of board meetings; succession planning has also become more intentional. Succession planning and recruitment are supported by surveys which help us identify gaps in skills and diversity. In the interest of transparency, bios of national board members have been made available online. One of the board's key roles, evaluation of the CEO, has become a sophisticated annual process that is overseen by a committee. Another key governance role involves monitoring the MS Society's strategic performance; this role is a key part of the work done by the national executive committee. In addition to the updates provided in this report, the MS Society's National Impact Report highlights key impacts from 2010.

The MS Society's 2009 annual general meeting (AGM) was attended by a record number of members, many of whom were energized by the developments related to CCSVI. Throughout the meeting a dynamic discussion on the topic of CCSVI ensued, showcasing a variety of differing perspectives. The AGM is a forum for members to make key decisions, including electing members of the board of directors. This year, the board of directors created the CCSVI working group, which is chaired by the chair of the national board and includes people with MS who have advocated for better access to treatment and diagnosis of CCSVI, and members of the research and clinical community. This group will help keep the national board informed of CCSVI developments.

GOVERNANCE AND POLICY

Policy development: The MS Society's national governance policies promote effective governance by providing a framework for accountability, decision-making authority, and leadership of the MS Society in alignment with its by-laws. Another decision made at the AGM involved enhancing transparency by posting the MS Society's conflict of interest policy online; this policy now applies to all decision makers at the board and senior management levels. Policy development became a more proactive focus for the board in 2010 and new policies were introduced. The social responsibility policy imposes a high standard of care and judgment on employees, volunteers and third-party providers representing the MS Society in events, such as golf tournaments, where alcohol is involved. The policy outlines the MS Society's obligations to protect individuals involved in such events. The cost of fundraising policy reinforces SD10 and reinforces the MS Society's goal to reduce costs of fundraising. Both these policies reflect issues that Canadians view as important. As noted in the section on resource development, the MS Society has long had a policy on receiving funds from pharmaceutical companies that ensures these companies have no influence on the MS Society's governance or policy directions.

Sector leadership: The MS Society's chief executive officer, Yves Savoie, was elected vice-chair of the Provisional Standards Council, which will oversee the launch of Imagine Canada's Standards Program. These standards define effective operational practices for charitable and non-profit organizations in a variety of areas. The invitation to participate in this committee reflects well on the MS Society's role in the sector and reinforces the MS Society's commitment to effectiveness, accountability and transparency.

CONCLUSION AND OUTLOOK FOR 2011

The MS Society was inspired by all those who reached new heights in 2010. The momentum that has been building around MS research and the continued vitality and success of the endMS Research & Training Network suggest the MS community can continue to be optimistic about the future. As noted earlier, an unprecedented number of clinical trials are underway and new therapeutic advances are on the horizon. The new national monitoring system for MS (announced by the government in March 2011) will be an invaluable resource to the MS community including those living with MS and those whose life work involves ending MS or enabling those affected by it.

With the best and brightest researchers focusing on ending MS we'll continue to expand our understanding of this complex disease and hope for a cure. The more evidence researchers generate, the more information we will be able share to support people's decision-making about therapeutic remedies such as CCSVI and oral therapies.

It is clear from the progress made in 2010 that we need to continue to make the government aware of the challenges faced by individuals with MS and their caregivers. While the federal government recognized caregivers need better support in the proposed March 2011 budget, we all need to hold them accountable and help them stay abreast of MS developments. The MS Society is confident that with your continued commitment and support we will all reach new heights again in 2011 on our journey to end MS.