

## **Chairman's Opening Remarks, Annual Public Meeting of the MUHC, December 2, 2014**

On behalf of the Board of Directors of the McGill University Health Centre, the Director General and Chief Executive Officer and his Co-Management Committee, it is my privilege to welcome you to Glen Hall.

This evening, you will hear a summary of our performance results for the fiscal 2013-2014 period, including reports from the Office of the Complaints Commissioner, Finance, Clinical Operations, the Research Institute of the MUHC, and the Director General and CEO. You'll also have the pleasure of hearing from Ms. Cathy-Ann Barr, our guest speaker, who will talk about the new Cedars Cancer Centre before we open up the floor to your questions.

Before moving on to the official reports, I'd like to comment on some of the priorities we set for ourselves this past year. I'll then invite you to take a look forward with me as I share a few insights on why the MUHC must be part of a strong health network.

Let's begin with governance. When the Board took office in February 2012, it made a firm commitment to strengthen the MUHC's structure, policies, processes and practices. The goal wasn't to throw everything out the door. Rather, it was to solidify the foundation of excellence upon which the MUHC was created so that it could continue to be a leader in its own right and as the academic health centre of the RUIS McGill. Inherent in this foundation was a return to fiscal equilibrium. While we'll hear more about our financial results shortly, let me state here for the record that the Board is extremely satisfied with the fact that the MUHC is now on track for a zero deficit.

Saying it was tough would be overstating the obvious. However, it bears mentioning that it would have been impossible without MUHC-wide collaboration. Clinical missions and departments steered cost-savings initiatives, often at a warped speed and necessitating a leap of faith. Our Director General and CEO, Normand Rinfret, and the members of his Co-Management Committee were vigilant about the work at hand, while the Board, through their engagement during monthly meetings and regular committee work, also provided oversight.

I am grateful, as Board Chairman, to be able to work alongside such esteemed colleagues, notably during a year that has been shaped by upcoming moves to the Glen site and ongoing modernization activities at the Montreal General and Lachine hospitals. At the end of this week, we'll open the doors to the Glen to our community. People will be able to see areas of our new facilities reserved for staff or patients. It's a fantastic opportunity to see the positive impact of healthcare investments and the huge potential for improved health outcomes.

Of course, with the 2015 moves to the Glen, we'll also be saying farewell to some of our legacy hospitals. We've already hosted some public events, such as the November 11 Heritage Day, and our Legacy Committee will be organizing more in the coming year. I would like to take a moment to recognize this committee's efforts and the more than 300 volunteers involved in organizing many activities to honour our past and celebrate our future. After all, with the handing over of the keys to the Glen site, this is an auspicious, celebratory time for health care and for the population we continue to serve with immense pride.

I also wish to underscore the engagement of our community towards our success. Thanks to our volunteers, our foundations and their donors, and other active members of our academic health network, the MUHC is able to encourage continuous improvements in the quality and safety of

patient care. I therefore extend my deepest appreciation to our community for sharing ideas and/or concerns.

The Board of Directors of the MUHC is your voice within the MUHC and within the Quebec health network. Rest assured that we are working very hard to support the management team and the organization's vision, mission and values.

Allow me to remind you that our vision is to assure exceptional and integrated patient-centric care, research, teaching and technology assessment. The transformation of our institution that is well under way is helping us achieve this vision.

Our mission is to offer our pediatric and adult patients, as well as their families, compassionate exemplary care, with a special commitment to complex cases. We aim to extend the limits of health knowledge through research and integrate this new knowledge into our clinical and teaching practices. We work to provide outstanding health science education to healthcare providers, administrators and the community, and we assess the introduction, acquisition and use of health technologies as well as the methods of organizing and providing services.

Our clinical plan, approved by the government in 2007, was created to support our mission. However, we have expressed concerns on various fronts, including the total number of beds and structures to assure the continuity of care. We also deposited last month a brief to the Commission on Health and Social Services during the hearings on the proposed Bill 10, which you may find on our Web site.

In a nutshell, we applauded the government's desire to refocus the healthcare system on patient needs and to reduce the burden of bureaucratic structures. However, we explained that some of

the proposed governance-related changes troubled us deeply because they could short-change the invaluable contributions and loyalty of our community. For example, we recommended to the government that the Board of Directors be able to name, as a full voting member, a person chosen from a list of names provided by the foundation or foundations of the institution, subject to veto by the Minister – something that the proposed bill excluded.

Since there was a lack of clarity over roles and responsibilities in the proposed bill, we also seized the opportunity to define what a supraregional academic health centre could accomplish moving forward. As such, we recommended various ways where we could contribute to the network's success.

This brings me to our values and the cross-boundary leadership I mentioned earlier. The MUHC embraces service, innovation, leadership and partnership as its values. Now, more than ever before, healthcare institutions need to work in a clear direction towards common goals that are aligned with their own vision but also the strategic orientations of government. We know this to be true because it's the only way to be fiscally responsible and assure quality services.

Learning comes in all shapes and forms, including the very important voices of our patients and their families. I would like to now call upon Lynne Casgrain to present the Ombudsman's Report.