ASSEMBLÉE PUBLIQUE ANNUELLE ANNUAL PUBLIC MEETING 2022-2023

23 OCT. 2023

TRAVAILONS A LUNSSON WORKAS ONE



MOT DE BIENVENUE WELCOME REMARKS

PETER KRUYT Président du conseil d'administration Chairman of the Board of Directors

BIENVENUE À L'ASSEMBLÉE PUBLIQUE ANNUELLE DU CUSM WELCOME TO THE ANNUAL PUBLIC MEETING OF THE MUHC

⊿ 7 reports about 2022-2023

- ▲ Executive Office
- Office of the complaints and quality commissioner
- Quality, Evaluation, Performance and Ethics
- ▲ Finance
- ▲ Clinical
- ▲ Research
- Education
- Question period
- Closing remarks

COMPASSION ENVIRONMENTAL STEWARDSHIP SOINS CULTURE	
MENT SÉCURITAIRES WELCOMING RESPECT EQUITY DIVERSITY	
SION SOUTIEN COLLECTIVE INTELLIGENCE INTÉGRITÉ INTERDIS	
RY TRANSPARENCE INNOVATION CURIOSITÉ COLLABORATION E	
LENCE CONTINUOUS IMPROVEMENT AMÉLIORATION CONTINUE	
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DISCIPLINAIRE TRAVAILLONS À L'UNISSON EMPOWERING INTEL	
Collective Supportive Work as one equité diversité rea	S
NCLUSION CULTURALLY SAFE CARE OUVERTURE D'ESPRIT CON	V
SION GÉRANCE ENVIRONEMENTALE EXCELLENCE COMPASSION	
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WELCOMING RESPECT EQUITY DIVERSITY INCLUSION SOUTIEN	C
FIVE INTELLIGENCE INTÉGRITÉ INTERDISCIPLINARY TRANSPAR	
NNOVATION CURIOSITÉ COLLABORATION TRANSFORMATION	



UNE ANNÉE MOUVEMENTÉE AN EVENTFUL YEAR

- ▲ Change at the top of the organization
 - ▲ Dr. Pierre Gfeller, end of December 2022
 - ▲ Dr. Lucie Opatrny, January 31, 2023
 - ▲ Transition period Ms. Martine Alfonso
- Report from the Committee for Action on Inclusion, Diversity and Equity
 - ▲ Deposit and adoption by the Board of Directions September 20, 2022
- ▲ Strategic Plan, *Travaillons à l'unisson /* Work as one
 - ▲ Deposit and adoption by the Board of Directions- December 12, 2022
- ▲ New Users' Committee and new Residents' Committee
 - ▲ Members elected on November 22, 2022 and March 21, 2023
- Contributions of the Board of Directors and its committees
 - Governance and ethics, audit, finance, real estate, risk management, human resources management, approval of consent items, strategic and operational matters, draft bill 15...







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APPROBATION DE l'ORDRE DU JOUR APPROVAL OF THE AGENDA AND THE MINUTES APPROBATION DU PROCÈS-VERBAL (24 octobre 2022) APPROVAL OF THE MINUTES (October 24, 2022) RAPPORT DE LA DIRECTION GÉNÉRALE EXECUTIVE REPORT

LUCIE OPATRNY Présidente-directrice générale President and Executive Director



LE CUSM COMPTE PLUS DE 17 000 PERSONNES,

SOIT :



The MUHC is a community of over 17,000 people

Employés paratechniques, de services auxiliaires et des métiers Paratechnical, ancillary services and trades employees

 253°

Employés en soins infirmiers

et cardio-respiratoires

Nursing and cardio-respiratory

staff

414

Médecins Physicians

Pharmaciens, biochimistes

cliniques, physiciens médicaux,

sages-femmes et étudiants

Pharmacists, clinical biochemists,

medical physicists, midwives

and students

Cadres

Managers

Employés de bureau, techniciens et professionnels en administration Office workers, technicians and administrative professionals

2098

Techniciens et professionnels de la santé autres que médecins et infirmières Technicians and health professionals other than doctors and nurses

863

Bénévoles à même nos hôpitaux plus les membres de CA de l'établissement et de nos fondations, ainsi que leurs cabinets de campagnes de financement Volunteers in our hospitals plus Board members of the institution and those of our foundations as well as their campaign cabinets

IR-CUSM / RI-MUHC

Chercheurs en science fondamentale, clinique et de l'évaluation, dont 491 détiennent des fonds Fundamental, clinical and evaluative researchers, of whom 491 funded researchers

1472

Étudiants, dont 514 à la maîtrise, 681au doctorat et 251au postdoctorat, et environ 200 stagiaires en recherche clinique Research trainees, including 514 M.Sc. and 681 PhD candidates, 251 postdoctoral fellows and 200 clinical research fellows

1333

Membres du personnel et de l'administration Staff in research and administration

IMPORTANTES NOMINATIONS SIGNIFICANT APPPOINTMENTS

- ▲ Assistant Complaints and Quality Commissioner: Ms. Marjolaine Frenette
- ▲ Assistant Complaints and Quality Commissioner: Ms. Stéphanie Urbain
- ▲ Director of Nursing: Mr. Alain Biron
- ▲ Associate Director of Nursing, Cancer Care: Ms. Christine Bouchard
- Associate Director of Nursing, Professional Practice and Research: Ms. Nancy Turner
- ▲ Director of Professional Services: Dr. Claudine Lamarre
- ▲ Associate Director of Professional Services: Dr. Jean Deschênes

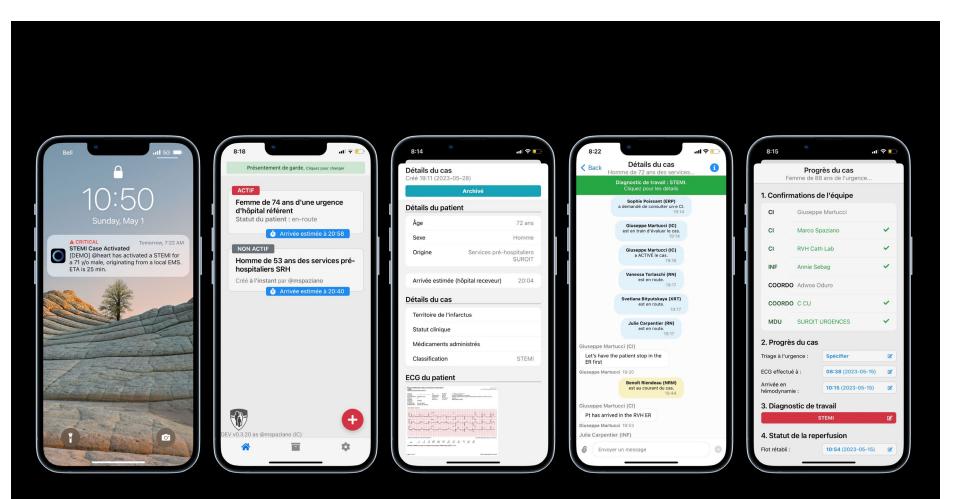


IMPORTANTES NOMINATIONS SIGNIFICANT APPPOINTMENTS

- ▲ Associate Director of Professional Services, Hospital Flow: Dr. Marc Beique
- Associate Director, Emergency and Mental Health (Adults):
 Ms. Maryse Godin
- Associate Director of Perioperative and Imaging Services: Mr. Michel Picard
- ▲ Internal Auditor: Ms. Fatima Azzahra El Mansour
- ▲ Commissioner for a respectful workplace free from violence and harassment: Ms. Catherine Brisson
- Associate Director, Infrastructure, Architecture and Services:
 Mr. Perez Bayard
- ▲ Associate Director, Procurement: Me Hamadi Bahri



PLEIN FEUX SUR L'INNOVATION : STENOA SPOTLIGHT ON INNOVATION: STENOA

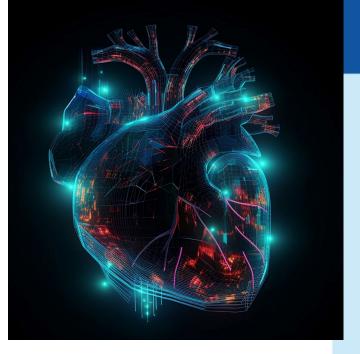


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STENOA STENOA

- Reduce negative impact of acute infarction
 - ▲ Faster, more accurate care
- Coordinate communication between different caregivers with a single platform and handheld device



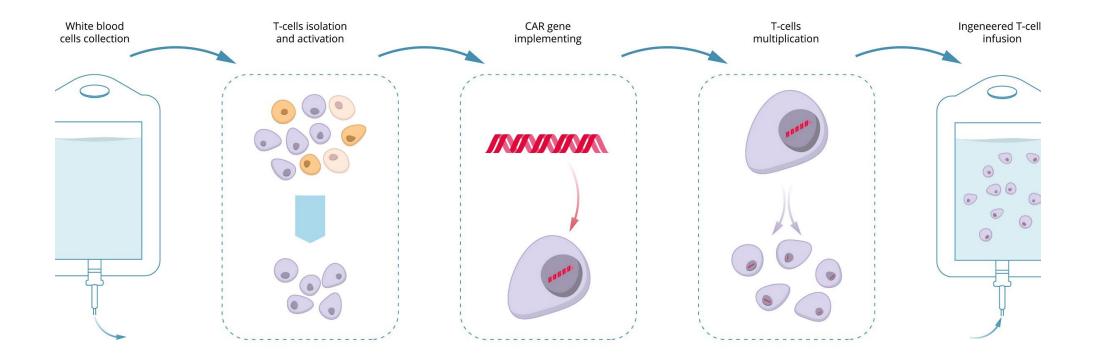
- ▲ No more faxes, pagers and telephone operators
 - ECG : paramedic ER physician cardiologist on call
 - → on-call team

Prehospital, inter-hospital and intra-hospital synergy

- 20% delay in treatment « *door to balloon* »
- Mortality and morbidity



PLEIN FEUX SUR L'EXCELLENCE SPOTLIGHT ON EXCELLENCE



CAR-T cell therapy

Centre universitaire de santé McGill

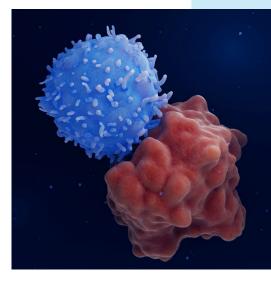
THÉRAPIE IMMUNOCELLULAIRE «CAR-T» - ADULTES IMMUNE EFFECTOR CAR-T CELL THERAPY - ADULTS

Innovative treatment for cancer patients

- Tailor-made treatment using T lymphocytes, a type of white blood cell taken from the patient's own blood.
- Modified in the laboratory to host a new gene that targets cancer cells
- Modified lymphocytes then infused into the patient

▲ At the MUHC, the following patients benefit from this treatment :

- Patients over 18 with diffuse large B-cell lymphoma Patients aged 18 to 25 with B-cell acute lymphoblastic leukemia
- Exceptional teamwork
- ▲ Centre designated by the MSSS





PRIX ET RECONNAISSANCE – QUELQUES EXEMPLES AWARDS AND RECOGNITION – SOME EXAMPLES

- Organization
 - ▲ MUHC / RI MUHC: Top 3 of Canada's Top 40 Research Hospitals
 - ▲ MUHC: Citation Award from the Canadian Association of Music Therapists
- ▲ Teams
 - ▲ Birth and Maternity Centre: Salus Global Recognition Award
 - CONCI Service: Honourable Mention, RSSS Award of Excellence
 - Montreal Children's Hospital Trauma Centre : Silver Award
 - Idéa Competition
 - ▲ Thoracic Surgery Team: 2022 Oncology Award





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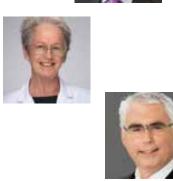
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PRIX ET RECONNAISSANCE – QUELQUES EXEMPLES AWARDS AND RECOGNITION – SOME EXAMPLES

⊿ Individuals

▲ Dr. Pierre Gfeller: Co-winner, 2022 Hommage award, IAPQ

- ▲ Dr. Carolyn Freeman: Member, Order of Canada
- ▲ Dr. John Bergeron: Member, Order of Canada
- ▲ Mr. André Bonnici: Merit Award, Conseil interprofessionnel du Québec
- ▲ Dr. Togas Tulandi: Career Accomplishment Award, CanSAGE
- In Sam Daniel: President's distinction award 2022, Collège des médecins du Québec









DEUX GRANDS EXERCICES COMPLETES L'ANNÉE PASSÉE TWO MAJOR EXERCISES OF THE PAST YEAR

▲ The exercise by the Committee for Action on Inclusion, Diversity and Equity



- Exercise led by Dr. Anita Brown-Johnson and Ms. Seeta Ramdass of the MUHC Board of Directors, and the committee they formed
- Report with 10 recommendations to make the MUHC a more inclusive, safe and welcoming environment for our community and our teams
- ▲ Strategic Plan
 - Exercise carried out by Dr. Gfeller and the Comité de régie





PLAN STRATÉGIQUE STRATEGIC PLAN

TO STIMULATE ORGANIZATION-WIDE INNOVATION AND CLINICALLY RELEVANT RESEARCH

that unleashes our full potential.



TO IMPROVE PATIENTS' CARE JOURNEYS

within and beyond our walls.

TO CREATE AN MUHC DATA ECOSYSTEM

as a pathway to excellence, learning and discovery. *TO FOSTER STRONG, HAPPY AND HEALTHY TEAMS*

now and for the future.



VISION VISION

Work together on a single green campus at the Glen to provide world-class care for people of all ages with complex healthcare needs, where research transforms lives and the next generation trains for worldwide impact







As a leading, bilingual academic health centre for people of all ages, we work in collaboration with our diverse patients, families, and local and global partners to continually challenge the status quo through the integration of world-class care, cutting-edge research, exceptional learning opportunities, and rigorous evaluation.

CARE

We provide exemplary and culturally safe care with compassion for our pediatric and adult patients, with a specific commitment to specialized and ultraspecialized care and service in one's native tongue.

RESEARCH

We expand health knowledge through fundamental, clinical and outcomes research, to transform our clinical, teaching and administrative policies and practices within and beyond our walls.

EDUCATION

We provide outstanding cross-disciplinary learning within the MUHC and the broader community, to train new leaders in the rapidly evolving healthcare and societal landscapes.

EVALUATION

We develop and assess technologies, processes and practices across our organization and with our partners to facilitate personalized health care, and to promote fair, transparent and pertinent decisions regarding resource allocation.

> Centre universitaire de santé McGill McGill University Health Centre

VALEURS VALUES

Compassion

- Compassionate care and services developed with and for patients and their families is our calling. It is at the heart of all that we do.
- Our team members are our single most important asset. Together, we create the conditions in which compassionate care can flourish. We are committed to respecting, supporting, empowering and celebrating each other.

Respect

- We work, make decisions and communicate with respect always top of mind. Integrity and transparency are integral to our approach to good governance, to doing what is right.
- We continually seek to generate practicechanging knowledge, in order to transform our care, transfer it to our emerging professionals and leaders, and share it with the global research community.

Excellence

- We have a boundless commitment to quality and to continuous improvement; the status quo is never enough.
- We aim to be local, national and global leaders in care, research and teaching.

Collaboration

- Interdisciplinary collaboration and support amongst team members helps build collective intelligence that leads to more innovation and excellence.
- Partnerships with McGill University, the McGill Academic Health Network, our foundations, and external colleagues across sectors and industries enhance our potential to do better.

Equity, Diversity & Inclusion

- We are all human beings first. Opening our minds increases knowledge, understanding and trust, which in turn creates the welcoming, culturally-safe environment that will enrich our experiences, our impact, and our world.
- We are proud to be a diverse workforce and to serve a diverse population.

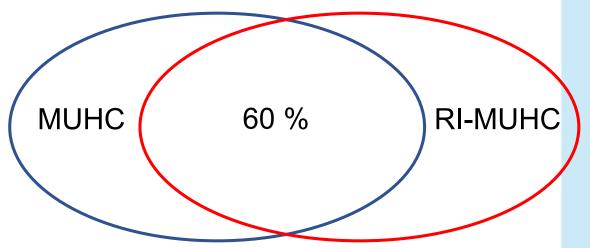
Environmental Stewardship

We work tirelessly to reduce our footprint to protect the planet and reduce our role in environmental factors that can affect negatively people's health.



HARMONISER NOS STRATÉGIES ALIGN OUR STRATEGIES

- Establish specific links
- Promote and accelerate innovation
 - Locally, provincially, nationally and internationally
- Maximize our impact
 - Continuous improvement in the quality and safety of patient care and patient outcomes







04

RAPPORT DU BUREAU DU COMMISSAIRE AUX PLAINTES ET À LA QUALITÉ REPORT FROM THE OFFICE OF THE OMBUDSMAN

MICHAEL BURY

Commissaire aux plaintes et à la qualité Complaints and Quality Commissionner

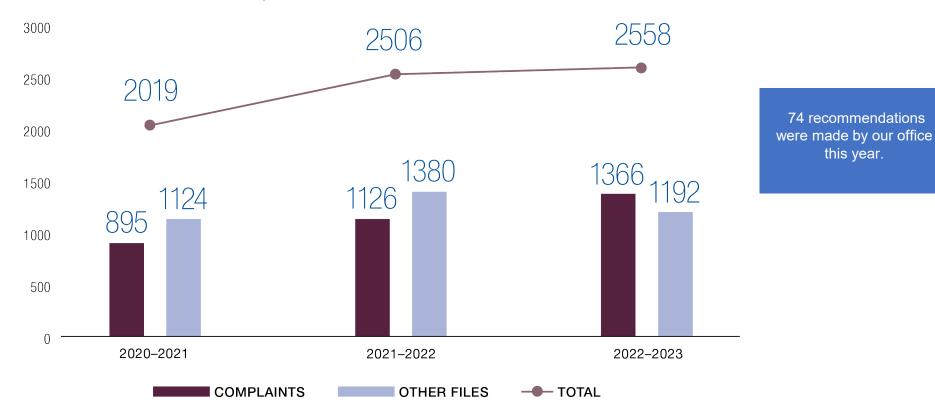
BUREAU DU COMMISSAIRE AUX PLAINTES ET À LA QUALITÉ OFFICE OF THE COMPLAINTS AND QUALITY COMMISSIONER

- Receive and investigate all complaints in accordance with the law.
- Refer medical complaints to medical examiners.
- Receive and handle all reports of abuse with diligence.
- Investigate, review and resolve complaints or related issues in a fair, impartial and humane manner.
- Promote patient rights and the application of the MUHC complaint handling system.
- Propose individual and systemic measures and means that could improve access to high quality care and services.



NOMBRE TOTAL DE FICHIERS ET DE PLAINTES **TOTAL NUMBER OF FILES AND COMPLAINTS**

Total number of files and complaints received from 2020-2023

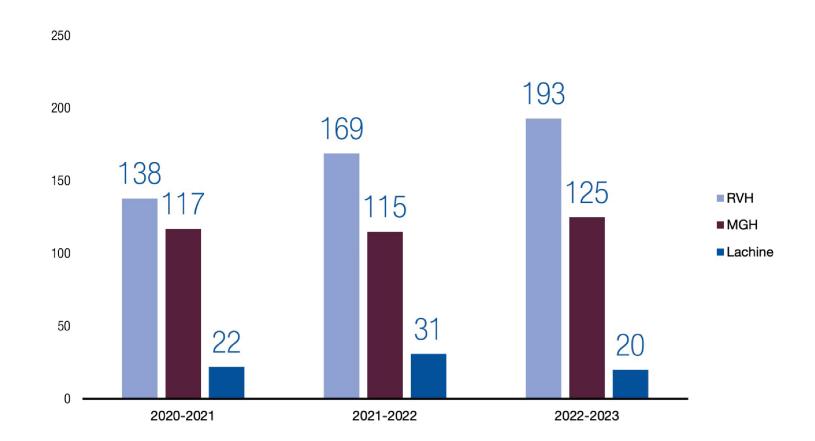


this year.



PLAINTES LIÉES À L'ACCÈS AUX SERVICES D'URGENCES COMPLAINTS TIED TO ACCESS TO EMERGENCY SERVICES

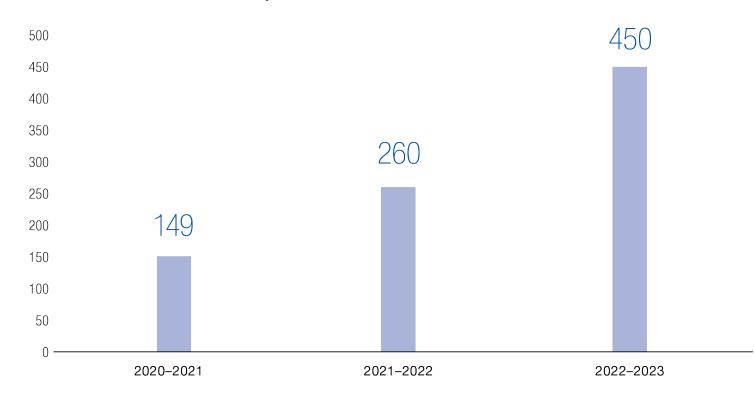
MUHC global adult emergency department complaints





PLAINTES LIÉES À L'ACCÈS TÉLÉPHONIQUE COMPLAINTS RELATED TO TELEPHONE ACCESS

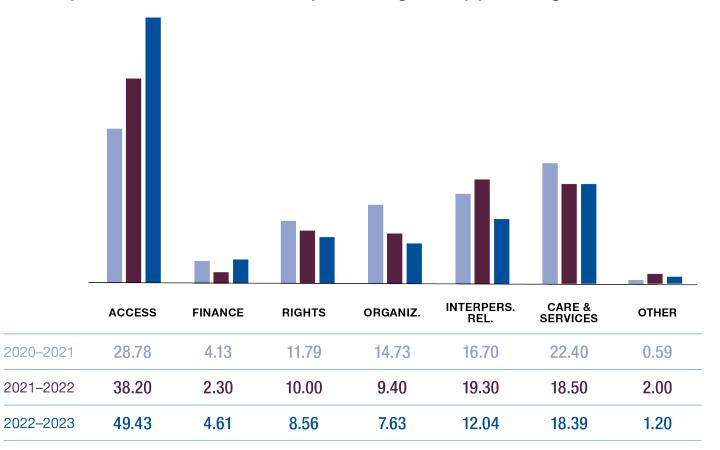
Communication Access Complaints 2020-2023





COMPARAISON DE TYPES DE PLAINTES PAR POURCENTAGE COMPARISON OF CATEGORIES OF COMPLAINTS BY PERCENTAGE

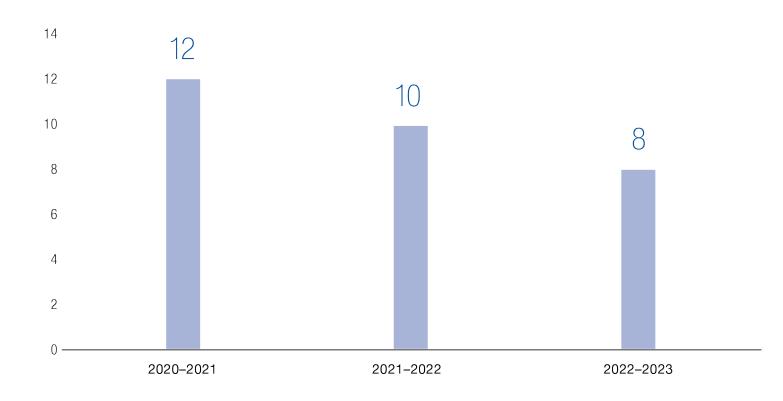
A three-year trend in each of the complaint categories by percentage %





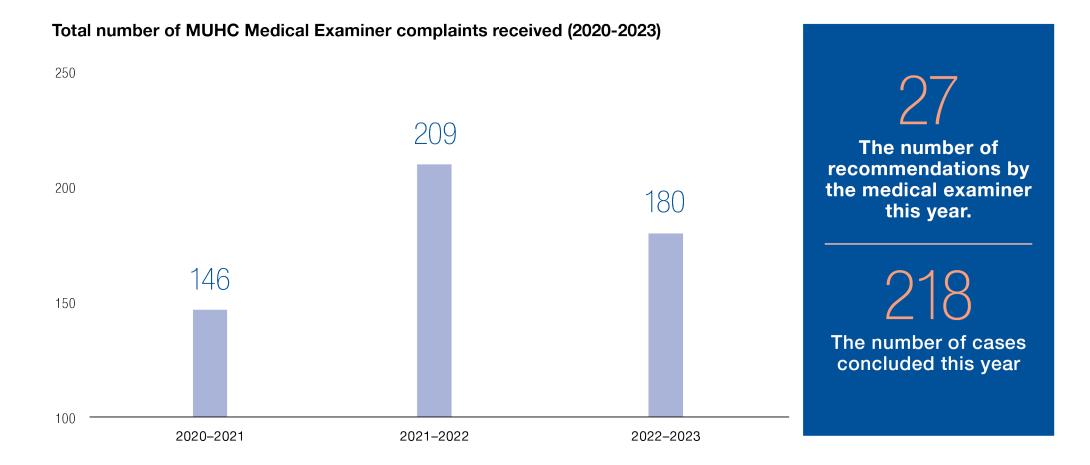
DEMANDES ADRESSÉES AU PROTECTEUR DU CITOYEN REVIEWS REQUESTED BY THE PROTECTEUR DU CITOYEN

Total number of cases directed to the Protecteur du citoyen 2020-2023





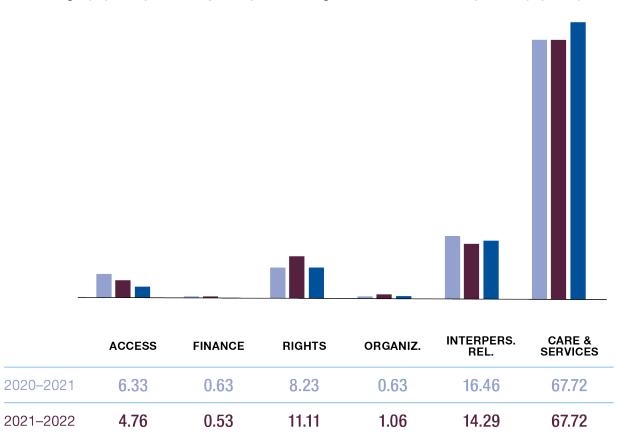
PLAINTES SOUMISES AUX MÉDECINS-EXAMINATEURS COMPLAINTS SUBMITTED TO MEDICAL EXAMINERS



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COMPARAISON DES PLAINTES REÇUES : % PAR CATÉGORIE COMPARISON OF COMPLAINTS RECEIVED : % BY CATEGORY

Percentage (%) comparison by complaint categories of medical complaints (3 years)



8.16

0.41

15.10

72.24

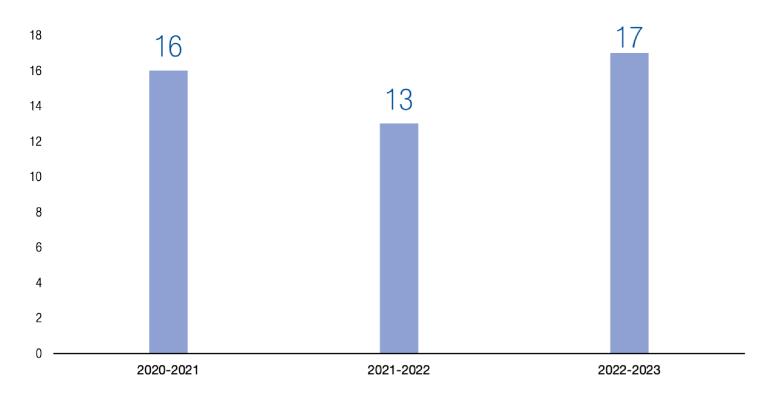
3.27

2022-2023

0.00

DEMANDES FAITES PAR LES PATIENTS AU COMITÉ DE RÉVISION CASES SENT BY PATIENTS TO THE REVIEW COMMITTEE

Total number of MUHC Review Committee Cases 2020-2023





CONCLUSION ET RECOMMANDATIONS CONCLUSION AND RECOMMENDATIONS

▲ The healthcare sector faces major challenges:

- Increased demand for access to services, limited funds, limited number of people to keep it running, etc.
- **▲** Recommendations for the MUHC in 2023-2024:
 - Insure that the communication improvements recommended by our office are implemented in a meaningful way to improve patient access to their clinics.
 - Ensure the implementation of modern technological solutions as a priority need to reduce the impact of resource shortages.



RAPPORT DE LA QUALITÉ, DE L'ÉVALUATION, DE LA PERFORMANCE ET DE L'ÉTHIQUE QUALITY, EVALUATION, PERFORMANCE AND ETHICS REPORT

ANNIE DUGUAY

Directrice par intérim, Qualité, évaluation, performance et éthique Interim Director, Quality, Evaluation, Performance and Ethics

AGRÉMENT ACCREDITATION



▲ 2nd and final visit of the 1st cycle 2018-2023 took place in January 2023

- Nearly 60 teams and departments were visited for physical health services, independent living support for the elderly and the telehealth standard.
- ▲ The visitors emphasized, among other things:
 - The creativity, agility, commitment, skills, professionalism and humanism of our medico-administrative teams
 - ▲ Co-management model
 - ▲ Rigorous and innovative deployment of telehealth services
 - Prioritization of ethical issues
 - Outstanding quality of care
- ▲ Out of 2058 criteria, 121 were deemed non-compliant.
 - ▲ Action plans will be submitted in February 2024 for required organizational practices and high-priority criteria (79)
- ▲ The MUHC scored 94.6% for this visit and is accredited



SÉCURITÉ ET QUALITÉ DES SOINS ET DES SERVICES SAFETY AND THE QUALITY OF CARE AND SERVICES

- Actions taken to promote incident/accident reporting and disclosure on an ongoing basis
 - Sustained communications to managers on incident and accident (I/A) reporting: types, procedures, departmental deadlines
 - Quarterly reports of reported I/A forwarded to those responsible (care units, mission co-managers, directors, Clinical Coordination Table and Board of Directors) and posted on care units via visual stations
 - Training workshops on A/I reporting, disclosure, communication and patient safety for MUHC staff and professionals, totaling 32 training sessions and over 676 participants from various sectors



ATELIERS DE FORMATION TRAINING WORKSHOPS

ATELIERS DE FORMATION 2022-2023

	NOMBRE DE SÉANCES	NOMBRE DE PARTICIPANTS
Déclaration des incidents et accidents (AH-223), divulgation, analyses approfondies, analyses des risques	16	353
Sécurité des patients & AH223 — Déclaration — Analyse sommaire — divulgation — Investigation — analyses des risques (gestionnaire)	5	5
Orientation des infirmières/infirmières auxiliaires: sécurité des patients et communication, déclaration des incidents et accidents (AH-223), divulgation	10	308
Processus de réclamations	1	10



TAUX DES CHUTES FALLS RATE

Taux des chutes au CUSM					
X DES CHUTES (A-I) M NOMBRE DE CHUTES / A PRÉSENCES x 1000 TAUX DES CHUTES (C-I) AU CUSM NOMBRE DE CHUTES / JOUR PRÉSENCES x 1000					
3,9 3,7					
3,3 3					
3,5 3,2					
3,7 3,6					
3,8 3,6					
3,5 3,3					
3,6 3,5					

MESURES POUR PRÉVENIR LES ACCIDENTS ET INCIDENTS MEASURES TO PREVENT ACCIDENTS AND INCIDENTS

Promoting a safety culture

- ▲ Analyses to identify contributing factors
- ▲ In 2022-2023, 109 in-depth analyses were carried out
- Proposal of recommendations and continuous improvement plans
 - Clinical or administrative processes, such as continuous improvement in falls prevention and application of post-fall protocol
 - Improved turnaround times for imaging tests
 - ▲ Improved documentation of levels of care established with the patient
 - ▲ Continuous improvement in suicide prevention and risk assessment, etc.
- Patient Safety and Risk Management Committee
 - Resumption of functions
 - ▲ Major care safety issues reviewed
- Training workshops



PRATIQUES COLLABORATIVES IMPLIQUANT LES USAGERS COLLABORATIVE PRACTICES INVOLVING PATIENTS

A Patient Partnership Office renamed Patient Engagement Office

- A flexible, inclusive approach to supporting patient involvement in service improvement
- Community of around 60 patients, involved in different projects and at different levels of the organization

Patient Experience Measurement

- MSSS patient experience survey responded to by over 2,100 patients, with an overall satisfaction rate of 70%.
- Canadian patient experience survey sent to over 900 hospitalized patients at all periods, with an overall satisfaction rate of 67%.



PRATIQUES COLLABORATIVES IMPLIQUANT LES USAGERS COLLABORATIVE PRACTICES INVOLVING PATIENTS

▲ Cultural Safety

- Funding of \$150,000 from the MSSS for a project to set up a mechanism for receiving the experience of aboriginal users.
- Based on an approach that aims to work together to develop lasting, trustbased relationships, as well as to listen to these users.
- ▲ Several methods explored: story collection, interviews, surveys, etc.

People-Centred Approach

- ▲ Using the patient's perspective as a lever for a people-centred culture of care
- In 2022-2023, the Bureau participated in the development of information material for intensive care patients and families.

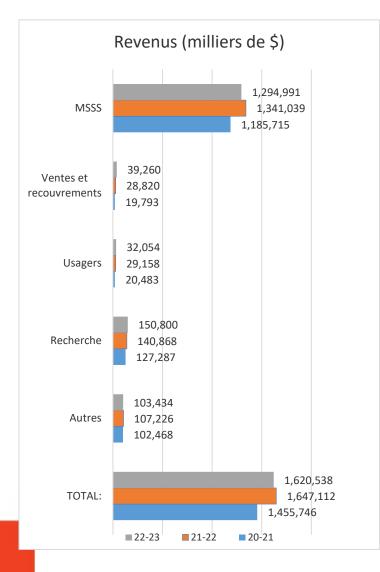


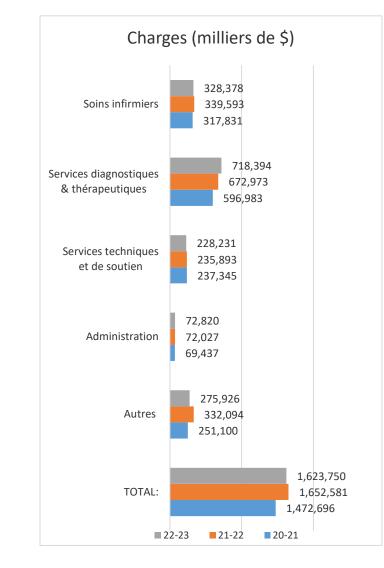
RAPPORT FINANCIER FINANCE REPORT

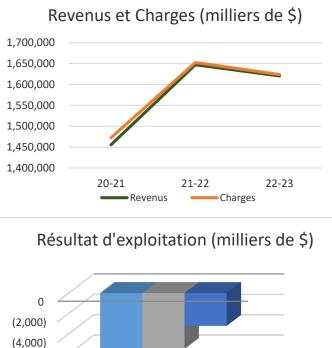
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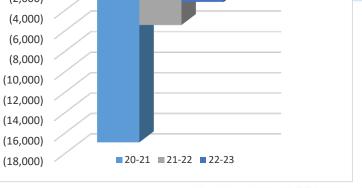
NICOLAS ROBERT Directeur, Ressources financières Director, Financial Resources

RÉSULTATS FINANCIERS - FONDS D'EXPLOITATION 2022-2023 FINANCIAL RESULTS - OPERATING BUDGET 2022-2023









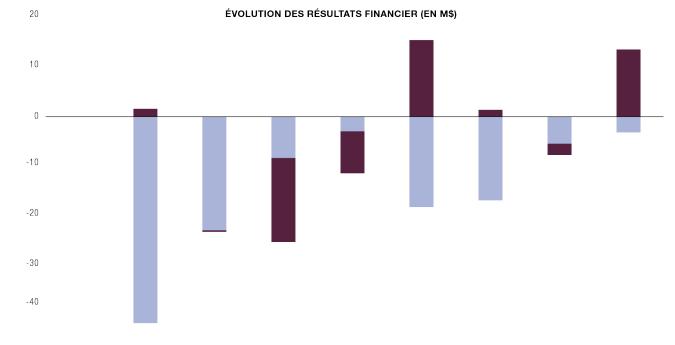
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ÉVOLUTION DES RÉSULTATS FINANCIERS EVOLUTION OF FINANCIAL RESULTS



Réel	15-16	16-17	17-18	18-19	19-20	20-21	21-22	22-23
Total	(40.4)	(23.4)	(25.5)	(11.5)	(2.8)	(15.6)	(7.8)	10.5
lmmo.	1.6	(0.3)	(17.1)	(8.5)	15.6	1.4	(2.3)	13.7
Oper. incl. RI	(42.0)	(23.1)	(8.4)	(3.0)	(18.4)	(17.0)	(5.5)	(3.2)

RAPPORT CLINIQUE RAPPORT CLINIQUE

MARTINE ALFONSO Présidente-directrice générale adjointe Associate President and Executive Director

QUELQUES CHIFFRES CLINIQUES SOME CLINICAL DATA





Admissions par jour: 04



Visites à l'urgence par an: 162759





Visites ambulatoires par an 539891







PROCÉDURES ET TESTS DIAGNOSTIQUES ET THÉRAPEUTIQUES TESTS AND PROCEDURES



Clinical Laboratory Tests 32,232,756



Medical Imaging Tests 489,105







Nuclear Medicine and PET Exams 28,566 **C**

Cardiac Catheterization Lab and Interventional Electrophysiology Tests and Procedures





Radiation Oncology Treatments 23,697 Total Diagnostic and Therapeutic Tests and Procedures 33,007,804

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ORGANISATION DES SOINS ET DES SERVICES ORGANIZATION OF CARE AND SERVICES

- Clinical sectors co-managed by a medical leader and a clinical-administrative manager
 - Montreal Children's Hospital and Women's Health
 - Emergency
 - Mental Health
 - Neurosciences
 - ▲ Surgery
 - Medicine
 - Cancer Care
 - Perioperative services
 - Diagnostic and interventional imaging
 - OPTILAB-MUHC cluster
 - Pharmacy
 - Lachine Hospital
 - ▲ Camille-Lefebvre long-term-care centre



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ORGANISATION DES SOINS ET DES SERVICES ORGANIZATION OF CARE AND SERVICES



- ▲ Region 6 Montréal
- Region 7 Outaouais
- Region 8 Abitibi-Témiscamingue
- ▲ Region 10 Nord-du-Québec
- Region 16 Montérégie
- Region 17 Nunavik
- Region 18 James Bay-Cree Territories





PROGRAMMES AVEC DÉSIGNATION DU MSSS MUHC PROGRAMMES WITH MSSS DESIGNATION

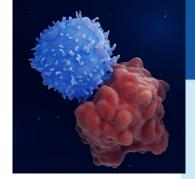


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- Centre responsible for the lung cancer network
- Centre responsible for the musculoskeletal sarcoma cancer network (with CIUSSS de l'Est-de-l'Île-de-Montréal)
- Tertiary trauma centres (adult and pediatric)
- Development centre for new molecular diagnostic analyses (OPTILAB-MUHC cluster)
- Institution responsible for managing the National Home Ventilatory Assistance Programme
- Centre responsible for the Western Hub of the Cochlear Implant Programme

PROGRAMMES AVEC DÉSIGNATION DU MSSS MUHC PROGRAMMES WITH MSSS DESIGNATION

- Provincial Telehealth Support Centre
- Secondary and tertiary stroke centre
- Designated Institution: Islet Transplantation for Patients with Type 1 Diabetes Designated facility: Stem cell transplantation and CAR-T cell therapy program
- Site responsible for an operations centre for a digital learning environment





PRIORITÉS ET ENJEUX PRIORITIES AND ISSUES

- A difficult year for the emergency department
- Royal Victoria Hospital: 46,846 visits
 - ▲ Average stretcher occupancy rate of 173 %
- Montreal General Hospital: 31,426 visits
 - ▲ Average stretcher occupancy rate of 149%
- ▲ Lachine Hospital: 19,510 visits
 - Despite closure to ambulances in January 2022 and at night as of February 2023
 - Montreal Children's Hospital
 - Itigh occupancy rates and volumes of influenza, COVID-19 and syncytial infections caused demand for intensive care to exceed supply, creating a direct impact on the emergency department.
 - Quebec overcapacity plan and exceptional measures
 - Hospital fluidity projects with the MSSS



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PRIORITÉS ET ENJEUX PRIORITIES AND ISSUES

- Staff shortages in several sectors
 - Technologists
 - Respiratory therapists
 - Nurses
- Maintaining and optimizing access to services is a major challenge
 - Local action plans to promote retention by strengthening proximity management of employees
 - Active involvement in provincial work to decompartmentalize professions
 - Strengthened structure for hospital fluidity management
 - Sustained work with our network partners







PRIORITÉS ET ENJEUX PRIORITIES AND ISSUES

Deployment of innovative services

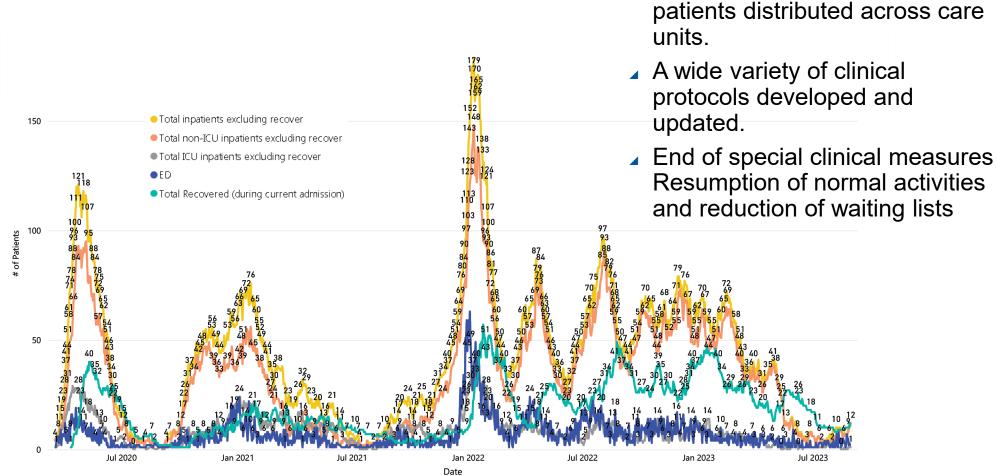


- Centre responsible for the Western Hub of co
 - ▲ First patients in October 2022
 - Before, cochlear implants in Quebec were only available in Quebec City
- ▲ Allez Hop! Step Up!
 - Functional decline of certain at-risk elderly people during their hospital stay is a well-known issue
 - Multidisciplinary Services and Nursing Departments redoubled their efforts to prevent deconditioning
 - Relies on inter-professional collaboration: volunteers, recreation therapists and physiotherapists integrated into care teams



Centre universitaire de santé McGill

IMPACT DE LA PANDÉMIE COVID-19 IMPACT OF THE COVID-19 PANDEMIC



Exclusion of Camille Lefebvre

Source: ADT, Medurge, Siurge and Cerner

One of the most important waves of the pandemic: Dedicated unit

model abandoned; COVID+



MISES SOUS GARDE CONFINEMENTS

MISES SOUS GARDE	MISSION CH	MISSION CHSLD	TOTAL ÉTABLISSEMENT
Nombre de mises sous garde préventives appliquées	724	S/0	724
Nombre de demandes (requêtes de mises sous garde provisoire présentées au tribunal par l'établissement au nom d'un médecin ou d'un autre professionnel qui exerce dans l'établissement	341	S/0	341
Nombre de mises sous garde provisoire ordonnées par le tribunal et exécutées	325	S/0	325
Nombre de demandes (requêtes de mises sous garde en vertu de l'article 30 du Code civil présentées au tribunal par l'établissement	214	S/0	214
Nombre de mises sous garde autorisées par le tribunal en vertu de l'article 30 du Code civil et exécutées (incluant le renouvellement d'une garde autorisée)	208	S/0	208





Application de la politique portant sur les soins de fin de vie (1er avril 2022 au 31 mars 2023)

CTIVITÉ	INFORMATION DEMANDÉE	NOMBRE	
Soins palliatifs et le fin de vie	Nombre de personnes en fin de vie ayant reçu des soins palliatifs	728*	
édation palliative continue	Nombre de sédations palliatives continues adminis- trées	10	
le médicale à mourir	Nombre de demandes d'aide médicale à mourir formu- lées**	146***	
	Nombre d'aides médicales à mourir administrées	60 (41 %)	
	Nombre d'aides médicales à mourir non administrées et les motifs	86 (59%)	

MOTIFS NON ADMINISTRÉS	
22 % transféré à une autre institution (19)	19
22 % patient a changé d'avis (19)	19
21 % en cours (18)	18
13% ne répondait pas aux critères d'éligibilité (11)	11
9% éligible (approuvé) mais décédé avant l'administration (8)	8
7 % éligible (approuvé) mais devenu inéligible (6)	6
6 % décédé avant la fin du processus d'évaluation (5)	5
En attente d'évaluation	4

* Chiffre est de P1 à P10 (1^{er} avril 2022 au 31 décembre 2022)

** Phrase originale: «Nombre de demandes d'aide médicale à mourir administrées».

*** Augmentation de 50 % versus l'année passée

SOINS DE FIN DE VIE

END-OF-LIFE CARE



RAPPORT SUR LA RECHERCHE – IR-CUSM RESEARCH REPORT – RI-MUHC

LOUISE PILOTE Directrice associée Deputy Director

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L'IR-CUSM : L'UN DES MEILLEURS INSTITUTS DE RECHERCHE HOSPITALIERS DU CANADA THE RI-MUHC: ONE OF CANADA'S LEADING HOSPITAL-BASED RESEARCH INSTITUTES

- ▲ We are dedicated to improving knowledge and understanding in health care
- ▲ All types of research
- Basic biomedical research
- Patient-oriented
- Applied clinical research
- Health services and systems-oriented research
- Population and health promotion-oriented research, including the societal and cultural impacts on health.



L' IR-CUSM EN QUELQUES CHIFFRES THE RI-MUHC IN NUMBERS

The RI-MUHC in numbers: 2022-2023



fundamental, clinical and evaluative researchers, including **491** funded researchers



research trainees, including **514** M.Sc. and **681** PhD candidates, **251** postdocs and **200** clinical research fellows



staff in research and administration



Over **2,600** peer-reviewed scientific publications



Over **2,500** scientific talks given by our researchers worldwide



341 research contracts and





Ongoing research collaborations with he **70** countries



30,676

square metres of research space



One of the top **three** hospital-based research centres in Canada; ranked **first** in Quebec



RÉSUMÉ DU FINANCEMENT FUNDING SUMMARY

We are proud of our researchers' success in funding competitions and grateful to the wide range of organizations, including many not named here, whose support totalled over \$258 million this year.

2022-2023 \$

		Ministère de l'Économie et de l'Innovation (Québec)	3,568,095	Terry Fox Foundation and Research Institute	896,863
Canadian Institutes of Health Research	49,512,724			F. Hoffmann–La Roche & Co.	849,665
Foundations of the McGill University Health Centre	32,753,329	McGill University	3,542,792	Cancer Research Society	715,611
(MUHC)*		Michael J. Fox Foundation for Parkinson's Research	2,540,599	Costello Bequest Foundation	652,944
Fonds de recherche du Québec—Santé	14,544,496	Public Health Agency of Canada	2,190,832	Organix Foundations Inc	647,641
Canada Foundation for Innovation	13,923,547	Government of Canada	2,051,572	Cancer Research UK	556,986
Canada Research Chairs (Government of Canada)	7,975,000	COVID-19 Immunity Task Force (Government of Canada)	2,051,253	Fonds de recherche du Québec—Nature et technologies	441,500
Natural Sciences and Engineering Research Council	6,916,191	CODM	1,697,206	Social Sciences and Humanities Research Council	409,154
of Canada		MITACS	1,657,141	Sepsis Canada	344,149
National Institutes of Health	6,117,469			Heart & Stroke	338,579
Génome Québec and Genome Canada	5,885,772	Gouvernement du Québec—Other departments	1,541,276	MS Society of Canada	332,431
Brain Canada	5.699.738	MEDTEQ	1,085,112	Other granting agencies	29,694,409
	5,055,750	Canadian Cancer Society (CCS) and CCS Research	1,011,743	Other Industries	29,416,838
Ministère de l'Éducation et de l'Enseignement	5,371,240	Institute		Investment income	3,869,121
supérieur (Québec)		Bill & Melinda Gates Foundation	981,008	Consulting and other income	3,751,127
Research Support Fund (Government of Canada)	5,341,129	Biogen Inc.	910,839	Other donations	2,633,765
		-			



PRIX ET RECONNAISSANCE AWARDS AND RECOGNITION

- Andrey Cybulsky: Medal for Research Excellence, The Kidney Foundation of Canada
- Gabriella Gobbi: Sumitomo/Sunovion Brain Health Basic Research Award, International College of Neuropsychopharmacology
- ▲ Phil Gold: Medal for Exceptional Academic Achievement, McGill University
- Tania Janaudis-Ferreira: Two Inclusive Research Excellence Prizes, Patient Engagement Competition stream, Institute of Musculoskeletal Health and Arthritis, Canadian Institutes of Health Research
- ▲ Loydie Jerome-Majewska: Anne McLaren Award for Outstanding Women in Developmental Biology, International Society for Differentiation
- Bertrand Lebouché: Excellence in HIV Research Award, Clinical Sciences track, Canadian Association for HIV Research—Canadian Foundation for AIDS Research
- ▲ Heidi McBride: Fellow, Royal Society of Canada
- Martin Olivier: With Université de Montréal and McGill University collaborators – One of the Top Ten discoveries of 2022, Québec Science magazine



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NOS PROGRAMMES DE RECHERCHE OUR RESEARCH PROGRAMS

Selected highlights from our research programs:



BRAIN REPAIR AND INTEGRATIVE NEUROSCIENCE PROGRAM

CANCER RESEARCH PROGRAM

CARDIOVASCULAR HEALTH ACROSS THE LIFESPAN PROGRAM

CHILD HEALTH AND HUMAN DEVELOPMENT PROGRAM

METABOLIC DISORDERS AND COMPLICATIONS PROGRAM

INFECTIOUS DISEASES AND IMMUNITY IN GLOBAL HEALTH PROGRAM

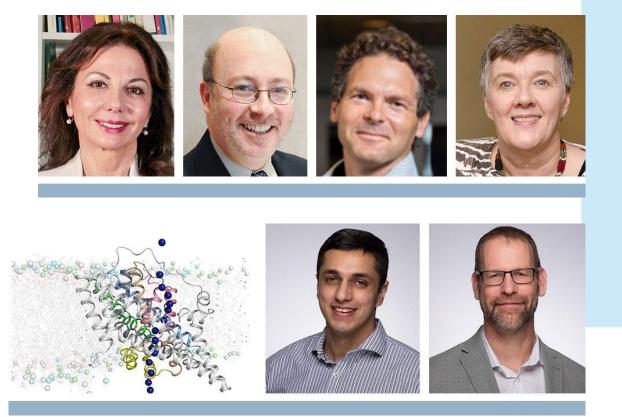
INJURY REPAIR RECOVERY PROGRAM

TRANSLATIONAL RESEARCH IN RESPIRATORY DISEASES PROGRAM



BRAIN REPAIR AND INTEGRATIVE NEUROSCIENCE PROGRAM (BRaIN)

- Gabriella Gobbi: Identified mechanisms to treat neuropathic pain, a chronic condition
- Leonard Levin: The Mildred Weisenfeld Award for Excellence in Ophthalmology, for his work with diseases of the optic nerve and retina
- Ronald Postuma: New study of self-reported sleep disorder symptoms that predate the diagnosis of Parkinsonism
- Don van Meyel: Study increases understanding of the rare disease known as episodic ataxia type 6





CANCER RESEARCH PROGRAM (CRP)

- Julia Burnier: Developed a new reference tool for extracellular vesicles liquid biopsy research
- Lorenzo Ferri, Swneke Bailey: Team grant of \$7.5M from the Canadian Cancer Society to understand treatment resistance in esophageal cancer
- George Zogopoulos and colleagues: Clinical impact of germline genetic testing for pancreatic cancer patients

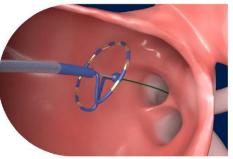




CARDIOVASCULAR HEALTH ACROSS THE LIFESPAN (CHAL) PROGRAM

- Thao Hunyh: Study exploring the racial and ethnic disparities for atherosclerotic cardiovascular disease (ASCVD)
- Patrick Lawler, James Engert, George Thanassoulis, Allan Sniderman: Study confirming that apolipoprotein B is a strong risk factor for coronary heart disease
- Verma Essebag: Investigated catheter ablation as initial therapy for atrial fibrillation.

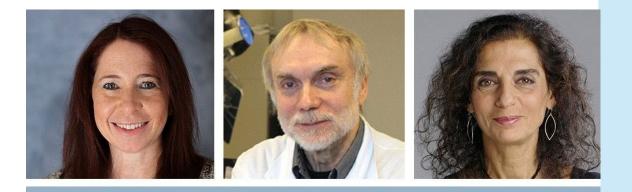






CHILD HEALTH AND HUMAN DEVELOPMENT (CHHD) PROGRAM

- Annette Majnemer: The CHILD-BRIGHT Network moving forward with \$9M in funding
- Januz Rak: \$6M funding for team studying liquid biopsy for pediatric cancer screening, diagnosis and treatment
- Nada Jabado and Livia Garzia: unravelled a genetic mechanism that leads to severe neurodevelopmental syndromes





METABOLIC DISORDERS AND COMPLICATIONS (MeDiC) PROGRAM

- Ruth Sapir-Pichhadze, David Buckeridge: Extending kidney graft survival, thanks to precision medicine tools (German-Canadian consortium NephroCAGE)
- Kaberi Dasgupta: "RESET for remission" study, joint Canada-UK project to help reverse Type II diabetes
- Jose Morais: Health Impacts of Inactivity Study, inactivity and the effectiveness of exercise as a countermeasure (with Canadian Space Agency







INFECTIOUS DISEASES AND IMMUNITY IN GLOBAL HEALTH (IDIGH) PROGRAM

- Sapha Barkati worked with national and provincial public health laboratories to manage the simian pox (mpox) outbreak.
- Madhukar Pai : A study of investigating the diagnostic accuracy and feasibility of integrated molecular COVID-19 and TB testing on the GeneXpert platform
- Martin Olivier: Uncovered a mechanism for the transmission of drug resistance between Leishmania parasites





INJURY REPAIR RECOVERY (IRR) PROGRAM

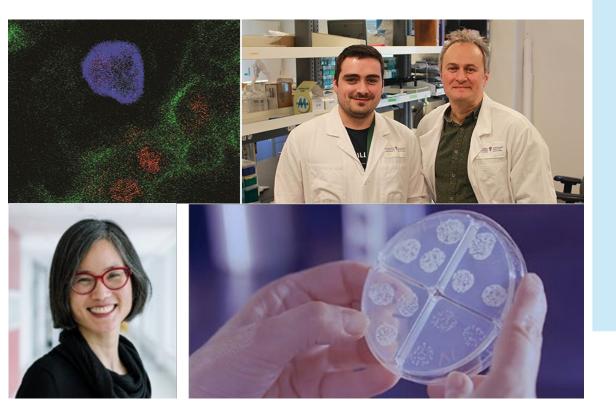
- ▲ Julio Fiore Jr. and Liane Feldman: Impact of opioid analgesics on postoperative pain and adverse events risk
- Heather Gill: International clinical trial, prehabilitation for patients awaiting open abdominal aortic aneurysm repair
- Anie Philip and Dieter Reinhardt: Funding for study of scleroderma, a chronic connective tissue disease





TRANSLATIONAL RESEARCH IN RESPIRATORY DISEASES PROGRAM (RESP)

- Maziar Divangahi: Publication in Nature, examining how the lung copes with invading microbes
- Ben Smith, Jun Ding, Larry Lands: Trottier Webster Innovation Award, landmark research toward a cure for COPD
- Dao Nguyen: Leading the McGill Antimicrobial Resistance Centre





09

RAPPORT SUR L'ENSEIGNEMENT

EDUCATION REPORT

MARIE-EVE SIMONCELLI Directrice de l'enseignement et de la simulation Director of Education and Simulation

APPRENANTES ET APPRENANTS LEARNERS

- ▲ Medicine:
 - ▲ 1063 residents and 729 students
- ▲ Dentistry:
 - ▲ 13 residents
- ▲ Pharmacy:
 - ▲ 69 residents and 53 students
- ▲ Nursing:
 - ▲ 2449 internships
- ▲ Observerships:
 - ▲ 149 interns





APPRENANTS - SERVICES MULTIDISCIPLINAIRES (soins aux adultes) LEARNERS - ALLIED HEALTH SERVICES (adult care)

DEPARTMENT	NUMBER OF LEARNERS
Physiotherapy	43
Occupational Therapy	23
Dietetics	52
Food services	17
Speech Therapy	1
Audiology	8
Social Services	7
Psychology	31
Respirology	63
Perfusion	8
Spiritual Care	2
Lachine Hospital (all allied health services)	8
TOTAL	263

SERVICES DE FORMATION CONTINUE CONTINUATION EDUCATION SERVICES

▲ 4 virtual courses for family physicians, general practitioners and emergency physicians

- Canadian Interventional Pain Course
- Annual pharmacotherapy course
- ▲ Interactive workshop on surgical pre-habilitation
- Practical emergency medicine course
- **₄ 402 participants**

11 Advanced Cardiac Life Support courses and 15 Basic Life Support courses

- Residents, general and family practitioners, nurses, allied health professionals
- **⊿** 718 participants





CUSM-SIM-i MUHC-i-SIM

⊿ 3349 participants

▲ Increase of 172.3% (2021-2022) and 341.8% (2020-2021)

▲ 12 inter-professional crisis resource management simulations

- Code Orange simulation involving a hundred residents
- ▲ Recipient of the Faculty of Medicine Teaching Award

▲ \$2M over 8 years from the Royal Bank of Canada

Supports the integration, retention and well-being of our professionals des

▲ MUHC i-SIM Green

- Collection of obsolete and out-of-date products
- ▲ Recovery of \$434,465, re-invested in training





SERVICES DE BIBILIOTHÈQUE LIBRARY SERVICES

- Support for researchers, clinicians, educators and learners:
 - ▲ 1,701 literature searches
 - ▲ 170 scientific literature searches
 - Increased availability of digital documents for MNH users

▲ Social commitment:

Participation in Textbooks for Change, 1st Quebec establishment to collect hundreds of university textbooks for redistribution around the world





RESSOURCES POUR LES PATIENTS PATIENT EDUCATION

- **399 visits** (reopened in Nov. 2022)
- **⊿** 316 information and reference requests
- Documentation
 - Editing of 21 educational documents into clear language (French and English)
 - ▲ Addition of 453 audio and digital books





SERVICES MULTIMÉDIAS MULTIMEDIA SERVICES

▲ Integration of audiovisual services to support telehealth

One-stop shop for user support

- Planning of a new reservation system for conference rooms
- ▲ Integration of audiovisual equipment in Osler auditorium
- Production of 50 videos in collaboration with content experts and the MUHC-i-SIM

▲ Creation of material by medical illustrators, photographers and other staff:

- ▲ Virtual tools for courses offered at the simulation center
- ▲ A series of presentations for services to Indigenous communities

Centre universitaire

- Promotion of recognition events
- Brochures and patient guides

PÉRIODE DE QUESTIONS – concernant l'année 2022-2023 QUESTION PERIOD – regarding the 2022-2023 year

QUESTIONS DE LARA BAILEY – Analyste informatique en recherche, IR-CUSM QUESTIONS FROM LARA BAILEY – Research Information Analyst, RI-MUHC

▲ What exactly is the relationship between the RI and the MUHC?

- I've heard that we're legally not the same, but yet we share the same board of directors, the same building, infrastructure.
- If we are separate, but meant to work together as if we're all on the same team, how can we:
 - ▲ Feel more like we're one team?
 - Ensure we're working together efficiently and accountable to each other?
- Could we create a unified hierarchy?
 - So that we see we're one team and know what teams exist and so there's less duplication, and each side knows who to ask or to escalate to, if needed.
- Could our common board (if it exists) lay out priorities so both sides know what is to be prioritized?

QUESTION DE PIERRE HURTEAU – Vice-président du conseil d'administration, conseil pour la protection des malades

QUESTION FROM PIERRE HURTEAU — vice-chair of the board of directors, CONSEIL POUR LA PROTECTION DES MALADES

- Le dernier rapport d'Agrément Canada a souligné plusieurs lacunes ou déficiences observées aux urgences du CUSM, notamment à l'Hôpital Royal Victoria. Certaines d'entre elles constituaient une violation des droits des usagers, notamment en ce qui concerne le consentement à subir certaines procédures, ainsi que le droit à la confidentialité et à la vie privée.
- Quelles mesures correctives ont été mises en place depuis pour y remédier ?



QUESTIONS DE DIANE STATES- MEMBRE DE LA COMMUNAUTÉ QUESTIONS FROM DIANE STATES- COMMUNITY MEMBER

- Regarding the Concordia student with a ruptured appendix who waited 15 hours in MUHC Glen ER and ended up going to an Ontario ICU for care, what is the MUHC doing to make sure that this situation does not happen to other patients?
 - ▲ Have there been other incidents like this in the last fiscal year?
- What is being done about masking for deaf/hard of hearing people (HoH) who need to lip-read?
 - ▲ Do all departments have clear masks?
 - If this isn't the case, are staff willing to lower their mask? In the past, this did not happen. It was near impossible to have them do this, so what has changed now with the masking for people who are deaf/HoH like me?



QUESTION DE SEETA RAMDASS- Directrice adjointe, Bureau de la responsabilité sociale et de l'engagement communautaire, Faculté de médecine et sciences de la santé, Université McGill QUESTION FROM SEETA RAMDASS- Associate Director, Office of Social Accountability and Community Engagement, Faculty of Medicine and Health Sciences, McGill University

Precision medicine for detection of invasive bacterial infections among febrile infants

≤60 days old: This study involves drawing blood for research purposes, from the specified target population of newborns. However, blood is drawn without obtaining full informed consent from parents in advance. In addition to not adhering to the principles of EDI and sociocultural sensitivity, this approach violates the Quebec civil code and is not in line with the TCPS2. The same study is being done at CHU St. Justine, but they are taking extra steps to obtain full informed consent from parents prior to drawing blood from these babies.

Why has the study been allowed to proceed without obtaining full informed parental consent prior to the blood draw, especially given that the last accreditation report red-flagged the MUHC's consent processes (or lack thereof)?

While the MUHC has made valuable contributions to pediatric research, it is important to balance this with patients'/parents' rights to make informed decisions. The study is important to be done, but the MCH's approach of not obtaining full informed consent is setting an alarming precedent which may compromise the integrity and reputations of McGill and the MUHC, especially in their collective commitment to sociocultural safety, respect for the diversity of the communities we serve.

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de santé McGill

MOT DE CLÔTURE ET LEVÉE DE SÉANCE CLOSING REMARKS AND ADJOURNMENT

PETER KRUYT Président du conseil d'administration Chairman of the Board of Directors

UNE COMMUNAUTÉ TISSÉE SERRÉE A CLOSE-KNIT COMMUNITY

▲ The MUHC gratefully acknowledges the contributions of :

A Our volunteers for their resounding impact

- More than 68,000 hours of time and energy, as well as the sharing of skills and perspectives
- ▲ Our partners for their collaborative and innovative spirit
 - Programs and services that support our mission
- Our Foundations and donors for their leadership and generosity
 - Exceptional funding that enables us to innovate for our patients and their families
- Our teams for their dedication, expertise and empathy
 - ▲ You are a great source of pride

Merci ! Thank you!



PROCHAINE ASSEMBLÉE PUBLIQUE ANNUELLE NEXT ANNUAL PUBLIC MEETING 2023-2024: 21 OCTOBRE 2024 OCTOBER 21, 2024

CONCEPTION GRAPHIQUE / DESIGN : MCGILL GRAPHIC DESIGN STUDIO



McGill University Health Centre









Strain McGill

