Public meeting
McGill University Health Centre
Board of Directors

January 17, 2017
6:00 p.m. – 7:30 p.m.

Chairman’s Report

Claudio Bussandri
Chairman
Agenda

1. Call to Order
2. Quorum
3. Approval of the Agenda
4. Chairman’s Report
5. Report of the Interim President and Executive Director – M. Alfonso
   5.1 Update by the Interim President and Executive Director on current matters
   5.2 Presentation by the Interim Executive Director and CSO of the RI-MUHC – B. Mazer
6. Report of Committees of the MUHC Board
   6.1 User’s Committee – P. Nadeau
   6.2 Strategic Initiatives Committee (Consultation Process) – M. Sonberg
   6.3 Human Resources and Organizational Culture – M. Giguère
7. Consent items resolutions
   7.1 Report from the MUHC CPDP
   7.2 Report from the MUHC Professional Services
8. Question Period
9. Adjournment

Interim PDG’s Report

Martine Alfonso
Interim President and Executive Director
Report of the Interim President and Executive Director

Plan to return to budget equilibrium

- Context - Two (2) imperatives:
  1) Year 1 Budget implemented in 2015-2016 requires the reorganization of many of our services to offer level of efficiency comparable to other academic health care partners
  2) MUHC has to position itself as a key partner of the Quebec Health Care Network, as well as a world class academic health centre

Rapport de la Présidente-directrice générale par intérim

Plan de retour à l’équilibre

- L’année fiscale 2016-2017 a débuté avec un manque à gagner de 28,1M$ 
  - Déficit non résolu de 2015-16 16,4M$
  - Mesures d’optimisation demandées par le MSSS 11,7M$

- Responsabilité d’élaborer un plan d’équilibre budgétaire réparti sur deux ans
Plan to return to budget equilibrium

- We needed to reach a balanced budget while:
  1) Maintaining access to care to our patients
  2) Improving efficiency of our activities
     • Conducted a benchmarking exercise to look at costs of similar activities in other academic hospitals;
     • In areas where the MUHC was less performant than our peers, a plan to optimize these activities had to be implemented.
  3) Always respecting patient safety
     • Strict monitoring of the impact of the measures has been put in place

To date, a plan has been submitted for $21M annualized
$28.1 M - $21 M = 7 M
Still need to identify saving for the remaining 7M$.
The full amount will not be saved in 2016-2017; delays are due to:
- Time to prepare the plan;
- Some measures require:
  • Proper notices under our collective agreements;
  • Hiring and training (e.g. main d’oeuvre indépendante)
  • Negotiation of contracts with suppliers;
  • Consolidation on one site and or construction

Optimization Projects are being started
Report of the Interim President and Executive Director

Results 2016-2017
Volume related – Forecast deficit

Cardiology 5.90
Angiography (including stroke) 1.20
Pharmacy – Oncology 2.90
Emergency rooms 2.20

Total 12.20

Rapport de la Présidente-directrice générale par intérieur

APPLICATION DE LA POLITIQUE CONCERNANT LES SOINS DE FIN DE VIE
Rapport du directeur général au Conseil d'administration, à la Commission sur les soins de fin de vie (Loi 2, Chapitre III, art. 8)

<table>
<thead>
<tr>
<th>Activité</th>
<th>Information demandée</th>
<th>Centre hospitalier</th>
<th>CHSLD</th>
<th>Domicile</th>
<th>Maison de soins palliatifs</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soins palliatifs et de fin de vie</td>
<td>Nombre de personnes en soins palliatifs et de fin de vie en centre hospitalier de courte durée1 pour la période du 10 juin 2016 au 1er septembre 2016. Informations complémentaires: Toutes les données disponibles à ce jour dans MED-ECHO</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA.</td>
</tr>
<tr>
<td></td>
<td>Nombre de personnes en soins palliatifs et de fin de vie en centre d'hébergement et de soins de longue durée2 pour la période du _____ au _____. Informations complémentaires:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA.</td>
</tr>
<tr>
<td></td>
<td>Nombre de personnes en soins palliatifs et de fin de vie à domicile3 pour la période du _____ au _____. Informations complémentaires:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>NA.</td>
</tr>
<tr>
<td>Sédation palliative continue</td>
<td>Nombre de sédations palliatives continues administrées</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>A 3</td>
</tr>
<tr>
<td>Aide médicale à mourir</td>
<td>Nombre de demandes d’aide médicale à recueillir formulées</td>
<td>B</td>
<td></td>
<td></td>
<td></td>
<td>11</td>
</tr>
<tr>
<td></td>
<td>Nombre d’aides médicales à recueillir administrées</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>C 6</td>
</tr>
<tr>
<td></td>
<td>Nombre d’aides médicales à recueillir non administrées et les motifs3 informations complémentaires:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>2 patients morts avant, 1 en attente du choix d’une date par le patient, 1 en cours d’évaluation: 5</td>
</tr>
</tbody>
</table>
Report of the Interim President and Executive Director

- OPTILAB
  - Nomination of Medical Director – Dr. André Dascal
  - Nomination of Clinical Administrative Director – Enzo Caprio

- Cardiac Surgery Recall
  - **No patients are suspected to be infected:**
    - 1,317 letters sent / 67 microbiology/infection control consultations / 9 adults and 2 children were tested: **all hemocultures negative**.
  - **Measures taken:**
    - Mobilized a crisis team
    - New measures for disinfecting equipment & changing reservoir water.
    - Conducted microbiology cultures of equipment reservoirs; results were **negative**.
    - Increased vigilance monitoring
    - New procedure for all alerts concerning cleaning and disinfecting of equipment
    - New tracking system and preventive maintenance on each thermal generator
    - Equipment repositioned in ORs, water reservoirs changed daily

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Rapport de la Présidente-directrice générale par intérim

Le CUSM travaille en partenariat avec son réseau

- Depuis plusieurs mois nous travaillons avec le CIUSSS de l’Ouest-de-l’île-de-Montréal (ODIM)
  - Continuum de soins pour les nouveau-nés
  - Continuum de soins pour les AVC

- Le mandat du groupe sera de développer des continuum de soins de façon systématique afin de favoriser des services fluide à la population.
Report of the Interim President and Executive Director

- Parking Rates

  - Ministère de la santé et des service sociaux (MSSS)
    Circulaire – 2016-023 - Politique concernant l’exploitation des activités accessoires de type commercial

  - Establishments must have completed the implementation of the provisions of Circulaire 2016-023 with respect to the operation of parking facilities by April 1, 2017

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Report of the Interim President and Executive Director

- Proposed New Parking Rates

<table>
<thead>
<tr>
<th>CURRENT DAILY RATES</th>
<th>RECOMMENDED NEW DAILY RATES (Starting April 1, 2017)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intervals</td>
<td>Rates</td>
</tr>
<tr>
<td>0 - 30 min</td>
<td>$10.00</td>
</tr>
<tr>
<td>31 - 60 min</td>
<td>$15.00</td>
</tr>
<tr>
<td>61 - 90 min</td>
<td>$20.00</td>
</tr>
<tr>
<td>91 - 1440 min</td>
<td>$25.00</td>
</tr>
<tr>
<td></td>
<td>$25.00</td>
</tr>
</tbody>
</table>

- Other Parking Packages for Visitors (Package already available – same rates)

<table>
<thead>
<tr>
<th>OTHER PARKING PACKAGES - VISITORS</th>
<th>RATES</th>
<th>COST BY TICKET/DAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flexi Pass – Prepaid booklet Visitors – 7 tickets</td>
<td>$100</td>
<td>$14.29</td>
</tr>
<tr>
<td>Pass – Visitor – 7 days</td>
<td>$60</td>
<td>$8.57</td>
</tr>
<tr>
<td>Pass – Visitor – 14 days</td>
<td>$85</td>
<td>$6.07</td>
</tr>
<tr>
<td>Pass – Visitor – 30 days (available after 14 days hospitalized)</td>
<td>$70</td>
<td>$2.33</td>
</tr>
</tbody>
</table>
Awards / Recognition

- **Dr. Donatella Tampieri** - 2016 Prix d’excellence en innovation des soins de santé from the direction du Développement professionnel continu (DDPC) de la Fédération des médecins spécialistes du Québec (FMSQ)

- **John Rae** - Outstanding Volunteer of the Year from the Association of Fundraising Professionals as part of National Philanthropy Day

- **Joan Ivory** - Jury’s Coup de coeur en philanthropie from the Association of Fundraising Professionals as part of National Philanthropy Day

Dr. Bruce Mazer
Interim Executive Director and Chief Scientific Officer
Research Institute of the MUHC
Research Institute of the MUHC - Basic Structure

- Housed on the Glen Campus and the Montreal General Hospital Campus
- 550 FT and PT researchers in all areas of science
  - Basic Science Labs
    - Center for Translational Biology
  - Epidemiology and Health Outcomes
    - Center for Outcomes Research and Evaluation
  - Hands-on patient oriented research
    - Center for Innovative Medicine

Research Institute of the MUHC

- Ranked 3\textsuperscript{rd} most active Research Hospital in Canada (1\textsuperscript{st} in Quebec)
- Over $175M annual grant and contract budget
- 550 researchers (300 FTEs)
- 220 labs devoted to fundamental and clinical research
- 1,100 students (MSc, PhD, Post-Doc, Clinical Fellows)
- 1,700 peer-reviewed publications per year
- 1,500 ongoing clinical trials (400 new per year)
Research Institute Programs

- Child Health and Human Development
- Infectious Diseases and Immunity in Global Health
- Translational Research in Respiratory Diseases
- Cancer Research Program
- Metabolic Disorders and Complications

- Cardiovascular Health Across the Lifespan
- Brain Repair and Integrative Neurosciences
- Trauma, Repair and Regeneration

2016 Major Successes at the Research Institute

- Cancer Research: Stop the spread of Metastasis (P Metrakos)
- Allergy Research: A novel vaccine to prevent allergies (McCusker)
- Brain research on the Control of thirst centers (Bourque)
- WHO center for Parasite Control (Gyorkos)
- Discovery Club with Marc Garneau
- And much more….
Recent Investigators in the News

- A race against time to diagnose deadly weight loss in cancer patients (Dr Antonio Vigano)
- (Prolactin receptor and) A key to unlocking the mystery of triple negative breast cancer (Dr. Suhad Ali)
- New marker identified for pancreatic cancer (Dr. Zu-Hua Gao)
- A Surprise advance in the treatment of (head and neck) cancers in adults (Dr Nada Jabado & Dr. Jacek Majewski)

New Investments and Projects

- 5252 de Maisonneuve Center for Outcomes Research and Evaluation
- Ministry of Economic Development, Science and Innovation: New Project of early phase clinical Research
- New labs and clinical research space at MGH: Canada, Quebec and MGHF
- New Programs: Stem Cell Lab, Specialized TB and Influenza Labs
- FRQ-S Accreditation Site Visit
  - (every 4 years)
  - Feb 3, 2017

THANK YOU
Paul Nadeau
*User’s Committee*

**Comité des usagers**

**Contexte**
- Raison d’être
- Qualité des soins et droits des patients

**Retour sur le passé**
- Qui sommes-nous
- Mission et objectifs
- Leçons apprises

**La courbe d’apprentissage**
- Elections 2016
- Intégration des résultats

**Les défis**
- Période d’ajustements
- Nouveaux enjeux
Melissa Sonberg
Strategic Initiatives Committee
(Consultation Process)
MUHC - CONVERSATIONS 2017

VOICES OF CONSENSUS
CREATING A SHARED VISION

Presented by
Melissa Sonberg, Board Member
Chair, Strategic Initiative Committee
January 17, 2017

CONSULTATION PROCESS

Phase I: November 7th to December 16th 2016
Phase II: January 2017
GROUPS INVITED

- Haute direction
  - Comité de l'interim
  - Comité de gouverne - clinique
  - Comité de gouverne - administration et soutien
- Council of Nurses (CII)
- Multidisciplinary Council (MDC) and Allied Health Directorate
- Council of non clinical personnel (CNCP)
- Unions
- Volunteers
- Friends of the MUHC
- Corporations
- Faculty of Medicine - McGill University
- Users’ Committee
- Foundations
- Nursing Executive Committee
- Office of the Ombudsman
- Medico-Administrative Leadership Table (MALT)
- Medical Advisory Committee (MAC)
- Council of Physicians, Dentists and Pharmacists (CPDP)
- Research Institute Executive (expanded)
- Council of Child and Adolescents Services of the MCH (CSCA)

CONSULTATION PROCESS

- 16 consultations between November 27, 2016 and January 13, 2017
- 250 individuals invited to participate
- 153 participants, representing 29 different groups, contributed to our conversation
THE VOICES WE HEARD

VOICES OF CONSENSUS

The Voice of Patients: The MUHC is *essential*

For patients, the MUHC is first and foremost:

- An **Academic** Health Centre (AHC)
  - An institution that combines research, innovation and teaching, while providing excellence in clinical care and innovative treatments
- The way to access the **best care**
- The best **hope for a cure** and a better **quality of life**
Patients …

- define themselves as partners in their own care
- want access to their information (portal, own DSQ)
- need to be reassured in quality of care across network
- desire relationships of trust between stakeholders of entire network
- find that navigation within the system is the biggest challenge

The Voice of Philanthropy

The uniqueness of the McGill brand, the MUHC-AHC, specialization and renowned academic researchers …

- are decisive elements for all philanthropic activities

- greatly facilitate fundraising for our foundations whose fundraising activities are so vital to innovation
The MUHC is unique

- Strength of an identity
- Value of the McGill model
- Importance of the academic mission
- Strengthening links with McGill University
- Leveraging our research

The Voice of Staff, Physicians, Researchers

- Embracing a network approach
- Setting quality standards across the network
- Partnering with patients
- Leveraging state-of-the-art infrastructure and technical platform
- Leveraging the power of technology
- Recognizing the reality of AHCs when defining funding methods
Comité des RH du CA – Rapport

- Nomination des directeurs OPTILAB en décembre
- Rencontre formelle le 12 janvier.

Agenda de discussion:
- Tableau de bord - Ressources humaines
- Plan de travail RH OPTILAB
- Sondage sur le climat de travail
Consent Items Resolutions

7.1 Report from the MUHC Council of Physicians, Dentists & Pharmacists

- Qualifications Committee Reports
- Leaves of Absence and Resignation Reports
- MCH Infection Control CPDP Annual Report 2015-2016

7.2 Report from the MUHC Professional Services

- Addition of Dr. Jean-François Yale (80156), Division Director (by interim) of Endocrinology to the designated signatories list of the RAMQ for the MGH as of February 1, 2017 and the Glen (Royal Victoria Hospital) as of February 1, 2017;
- Addition of Dr. Nader Sadeghi (96386), Chief of the Department of Otolaryngology Head and Neck Surgery to the designated signatories list of the RAMQ for the Glen (Royal Victoria Hospital) retroactive to January 9, 2017;
- Removal of the following Montreal Children’s Hospital employees from designated signatories list of the RAMQ retroactive to December 31, 2016: Patricia Fontaine, Biling Office, Administrator; Françoise Filion, Biling Office, Supervisor and Pier-Marie Teixeira, Biling Office, Administrative Assistant.

• Question Period
• Adjournment
Thank you!