

Public meeting

McGill University Health Centre Board of Directors

November 8, 2016
5:30 p.m. – 7:00 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**
6. **Report of Committees of the MUHC Board**
 - 6.1 Strategic Initiatives Committee – M. Sonberg
 - 6.2 COQAR Committee (June 17, 2016 and September 28, 2016) – M. Sonberg
 - 6.3 Comité de Liaison de Lachine – P. Abraham
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

- Mandate as Interim PDG
- Implementation of Clinical Plan
- Plan to return to budget equilibrium
- Sale of Legacy MCH / MCI Sites
- OPTILAB
- Portfolio
- Cardiac Surgery Recall
 - Sorin 3T Heater-Cooler System
- Research Institute Search Committee
 - Executive Director and Chief Scientific Officer of the MUHC-RI

Melissa Sonberg
Strategic Initiatives Committee

CONSULTATION PROCESS


Future direction of the MUHC

Context

- In **May 2016**, the BoD set up a committee consisting of several Board members and senior managers of the MUHC to start a strategic orientation process, to position the MUHC contribution as an Academic Health Centre within the healthcare network, taking into consideration the reorganization under Bill 10;
- In **June 2016**, N. Rinfret announced that he would not seek the renewal of his mandate as PDG of the MUHC. Martine Alfonso's appointment as PDG per interim allows time for the MUHC to proceed with its strategic orientation process;
- The Strategic Initiative Committee of the Board, chaired by Ms. Melissa Sonberg has been mandated to oversee the consultation process on the future direction of the MUHC.
- This work will be an important input to any conversation on the contribution of an AHC in healthcare delivery.

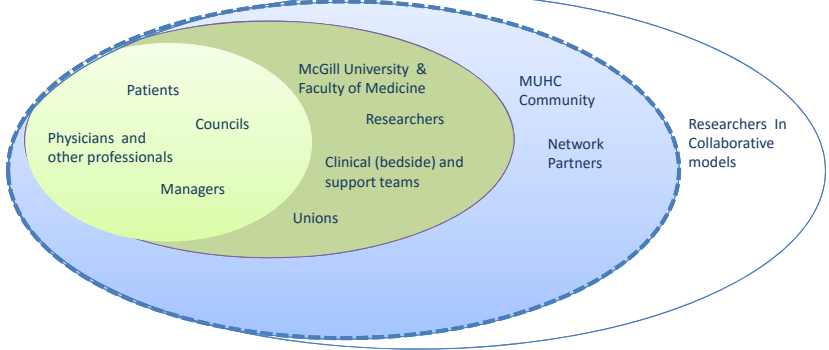
Objective of the consultation process

1. Identification of key imperatives for the MUHC to:
 - Provide excellence in patient care and marked improvements in patient experience
 - Nurture and build innovation, performance and excellence in patient care, teaching and research
2. Alignment on priority outcomes and critical indicators of success that will guide our efforts
3. Exploration of optimal collaborative models that will create the best environment in which to achieve **success** (best patient experience, best quality, best performance throughout the continuum of care)




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Consultation process





Internal stakeholders

External stakeholders

External and internal key stakeholders

Phase I: November 7th to December 16th 2016

Phase II: January 2017

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Under TAB 1

Melissa Sonberg
COQAR

Under TAB 1

**Highlights of the
Mental Health Mission's
activities throughout 2015-
16**
Presented June 17, 2016

Mental Health Mission: Priorities and Goals

Under TAB 1

- Patient Engagement
 - Recovery Transition Project, designed and managed by patients, awarded the 2015 Challenge Q+ grant: an important innovation for patient partnership.
- Patient Flow: Hospital Stay
 - Length of stay for patients in an acute bed has decreased (26 vs 39 days): close to 25-day standard in psychiatry
 - 30-day readmission rate of still lower (7.8%) than the Canadian standard of 12%
- Safety in the Emergency Department
 - Improved environment to reduce aggression/violence
- Planning for full consolidation of psychiatric services at the MGH – conducted as part of the MGH Visioning Taskforce

Under TAB 1

Highlights of the Montreal Children's Hospital Infection Prevention and Control 2015-16 Annual Report

Presented September 28, 2016

Under TAB 1

MCH Infection Control: Highlights

- Overall Healthcare Associated Infection rates within expected range
 - Slight ↓ since last year (5.85 vs 6.56 infections/1,000 patient days)
- C.difficile infection rates lower than rates for the Montreal region (6.7) and the Province of Québec (5.9)
 - Slight ↑ – 5.1 vs 4.98 infections per 10,000 patient days
- Units that have maintained *Transforming Care at the Bedside – Controlling Specific Infections* initiatives (Challenge Q+ 2013 grant recipient), have improved the most

Under TAB 1

MCH Infection Control: Achievements

- Hand Hygiene compliance improved & close to reaching the MSSS target of 80%
- Marked improvement in infection rate of catheter-related urinary tract infections due in part to regular audits
- Surgical prophylaxis guidelines developed, disseminated and audited
- Continued education in infection control activities

Under TAB 1

Highlights of the Montreal General Hospital & Royal Victoria Hospital Infection Prevention and Control 2015-16 Annual Report

Presented September 28, 2016

Under TAB 1

MGH & RVH Infection Control: Highlights

- Overall Healthcare Associated Infections show a ↓ in the transmission of:
 - C.difficile (↓ 34%)
 - Methicillin-Resistant Staphylococcus Aureus (a.k.a MRSA - ↓ 46%)
 - Vancomycin-Resistant Enterococcus (a.k.a VRE ↓ 64%)
- Hand Hygiene compliance stable at 60% - needs improvement
- Units that have maintained *Transforming Care at the Bedside – Controlling Specific Infections* initiatives (Challenge Q+ 2013 grant recipient), have improved the most

Under TAB 2

Peter Abraham

Comité de Liaison de Lachine

Under TAB 2


Comité de Liaison de Lachine

- Ce comité est composé de membres issus de la communauté interne et externe de l'Hôpital de Lachine
- La *raison d'être* de ce comité est :
 - a) de promouvoir et préserver le caractère francophone de l'Hôpital de Lachine et du Pavillon Camille-Lefebvre
 - b) d'assurer la poursuite de l'intégration de l'Hôpital de Lachine et du Pavillon Camille-Lefebvre au CUSM dans le respect de sa vocation d'hôpital francophone et communautaire, conformément aux termes de la motion adoptée à l'unanimité par l'Assemblée nationale du Québec le 7 juin 2007
 - c) de promouvoir et de veiller à la réalisation du plan de redéveloppement de l'Hôpital de Lachine
- Ce comité se réunit 4 fois par année

Under TAB 2

Comité de Liaison de Lachine

- Une réunion s'est tenue le 4 octobre 2016
- Les principaux sujets abordés:
 - a) **Sommaire des activités récentes du CUSM présentées par Martine Alfonso, Présidente-Directrice générale du CUSM**
 - b) **Sommaire des activités récentes de l'Hôpital de Lachine:**
 - Le plan clinique de 60 lits a été accepté par le Ministère pour le projet de redéploiement
 - Le Département de la Qualité et Performance du CUSM est très impliqué dans l'organisation d'ateliers LEAN Design pour le nouvel hôpital. Une série d'ateliers s'est tenue (en mars et juin 2016) et est en cours (novembre 2016, janvier, février et le dernier en mars 2017)
 - Initier la préparation des plans fonctionnels et techniques parallèlement à ces rencontres
 - Enthousiasme de la part des employés et de la communauté de Lachine


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Under TAB 2

Comité de Liaison de Lachine

- c) **Comité de bon voisinage**
 - la création d'un Comité de bon voisinage similaire à celui du Glen
 - le Comité de bon voisinage sera mis sur pied dès que l'on commencera à regarder les plans fonctionnels et techniques (vers l'hiver 2017)
 - Il sera piloté par les Communications et par le Comité de direction du redéploiement
- d) **Transports des patients inter-sites**
 - Question d'étudier la possibilité d'avoir un autobus *Express* qui serait dédié au transport des patients et qui utiliserait un trajet déterminé pour se rendre directement au Site Glen
 - une lettre de demande de services sera émise à Mme Jacinthe Clossey (Responsable du développement du réseau de Transport de Montréal), laquelle sera signée par M. Harmat, M^{me} Alfonso et M. Dauphin

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Consent Items Resolutions

7.1 Report from the MUHC Council of Physicians, Dentists & Pharmacists **Under TAB 3**

- Qualifications Committee Report
- Leaves of Absence and Resignation Reports
- MUHC MCH Department of Pediatrics Internal Regulations
- Reappointment - Dr. A. Aprikian, MUHC Chief Department of Oncology
- Appointment - Dr. R. Cecere, MUHC Division Director Cardiac Surgery
- Appointment - Dr. T. Maniatis, MUHC Division Director Internal Medicine
- Appointment - Dr. S. Tanguay, MUHC Chief Department of Urology
- CPDP Annual Reports 2015-2016


7.2 Report from the MUHC Professional Services **Under TAB 4**


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- Adjournment



Thank you!

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