

# Transversal Services at the MUHC



Mathieu Jetté

There's no doubt that 2015 will bring many changes to the MUHC and that many of the things being planned now will come to fruition in the coming 18 months. However, while we're hard at work optimizing and implementing best practices, not everything will change and what we're already successful at will be transferred as well.

Logistics is a strong example of this balance. "We're definitely re-organizing services and re-orienting roles, but the aim is a heightened efficiency that allows our logistical teams to be freed from routine tasks to work more closely with clinical teams," says Mathieu Jetté, director, Logistics Services, MUHC. "Roles are evolving and the goal is to get our staff working in the care units and directly with the people we support—our healthcare professionals."

"We're trying as much as possible to keep teams together and associate them to their respective site, but at the Glen, the Logistics staff will not be site-specific, we will be activity-specific," explains Jetté. This means that there will be one transport team for the Glen site and not one transport team per hospital. "Some people might be assigned

**LOGISTICS IS:**

- Emergency Measures
- Security
- Housekeeping
- Laundry
- Waste Management
- Recycling
- Call Centre
- Internal Transport
- External Transport

the transportation of goods and others of patients, but the services will be transversal, meaning everyone will work for the whole Glen site," says Jetté.

The Logistics Department at the Glen site is located in block D, level S2. With everyone in the same place, the sharing of knowledge and expertise is possible and allows for better practices to emerge. "The transfer to the Glen is a chance for us to improve processes and re-think how we provide client services on all of our sites—it's a rare and unique opportunity and we are trying to take full advantage of it," says Jetté.



## UPCOMING IMPROVEMENTS

A new section of the Call Centre recently created is the Help Desk. The goal of centralizing requests through the 23456 line is to allow logistics staff to be more present and accessible on all MUHC sites.

## GETTING GREENER

A larger recycling program is being developed. Staff will be able to not only recycle paper but plastic, metal, glass and e-waste; the new program will be implemented on all sites.

## COMPUTERIZED SYSTEM

At the Glen, service requests will be able to be opened via computers and not just by phone. This feature will potentially be available before the move.

## IN THIS ISSUE

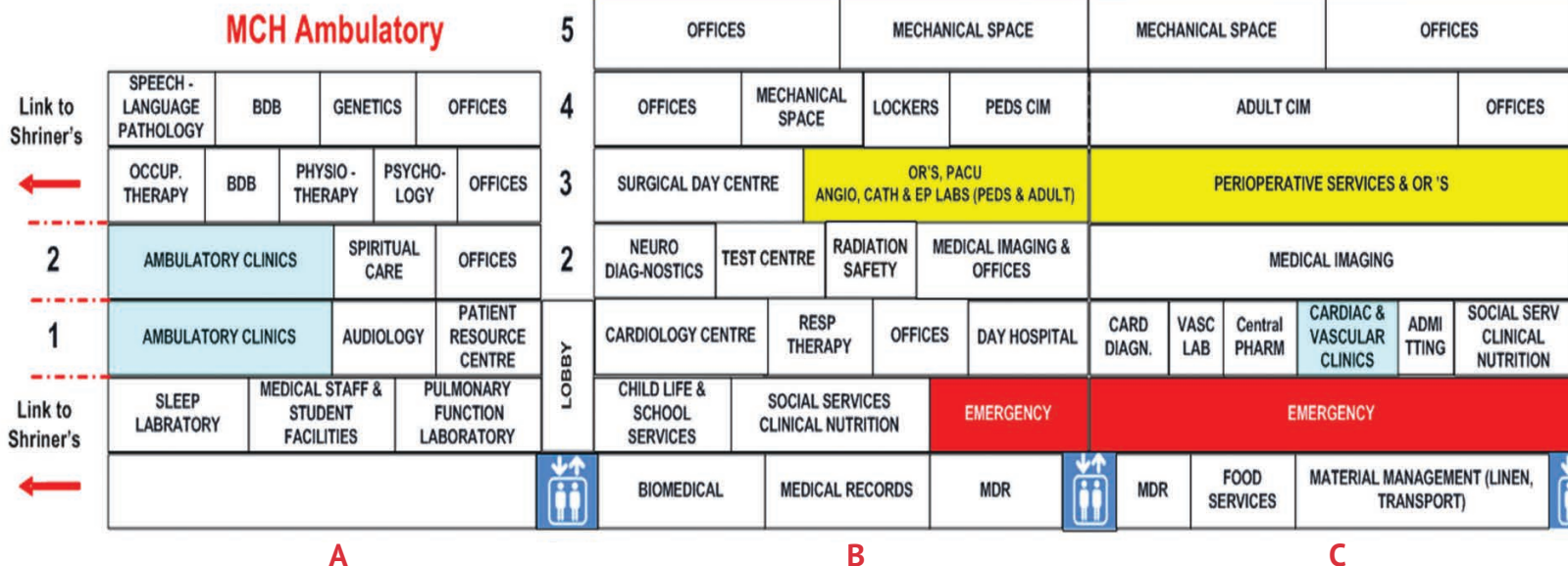
Get an update on MGH developments

Learn more about the transfer of long-term respiratory care to Lachine

Get spooked with a few ghost stories!

# Glen Stacking Diagram

View from Saint-Jacques Street  
(West to East)



## Board of Directors highlights

In order to keep the community apprised of its decisions, our Board of Directors has decided to report regularly on resolutions that it has passed.

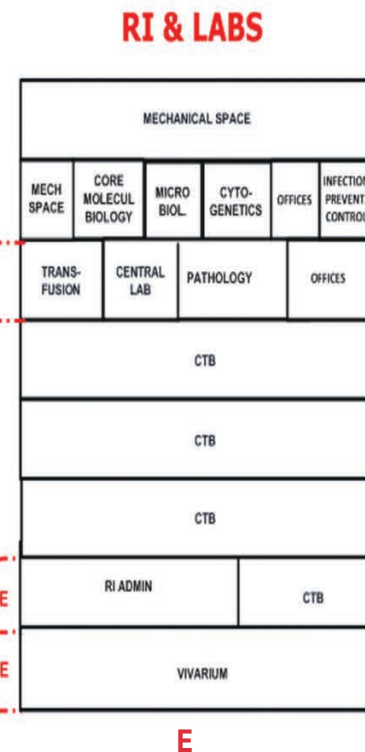
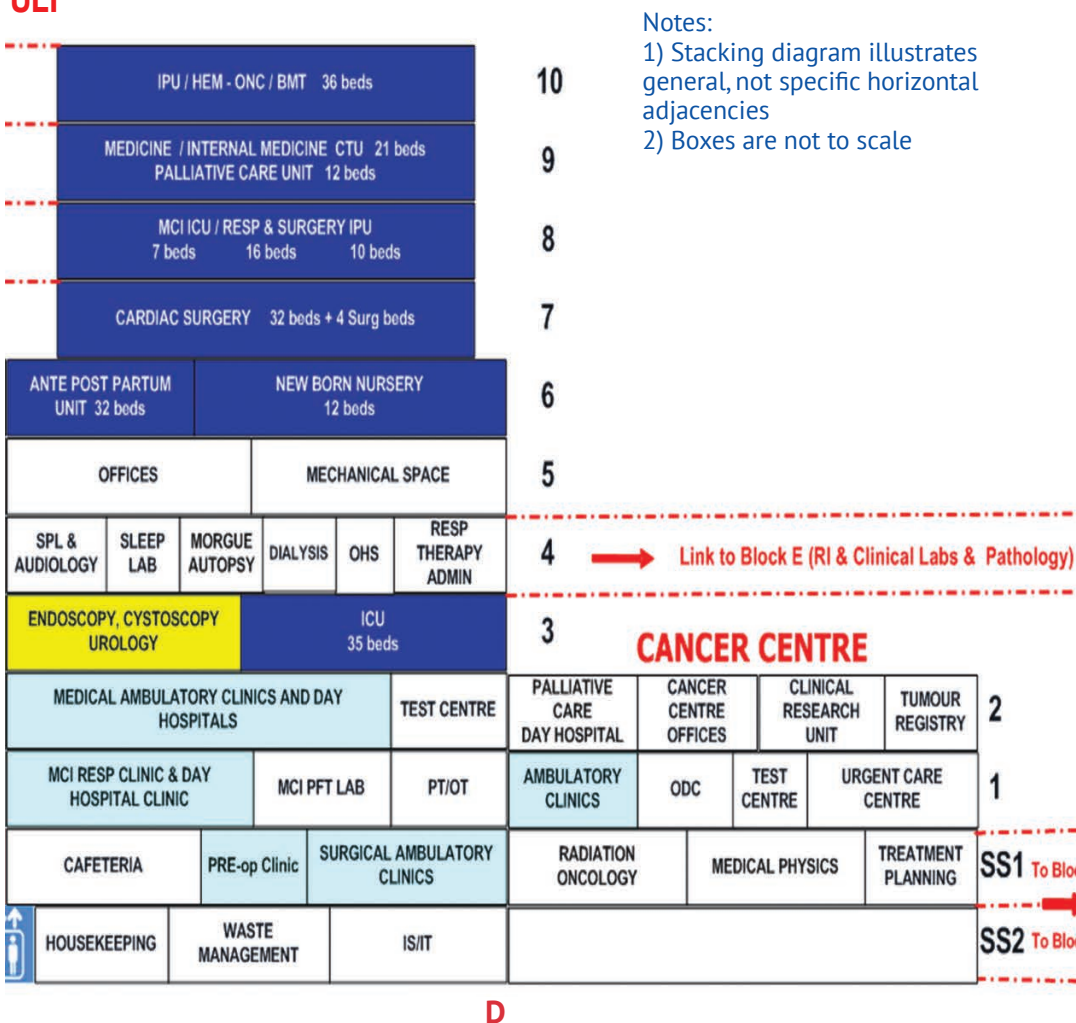
The items following relate to decisions taken at meetings held on September 10<sup>th</sup> and October 8<sup>th</sup>, 2013.

### The Board of Directors approved:

- A legal agreement to correct some irregularities dating back to 2008 associated with the transfer of immovables (land and buildings) of the Lachine Hospital.
- The appointment of Mario Di Carlo as a Users' Committee representative to the Board in replacement of Maria Mastracchio-Lafontaine;
- The creation of the MUHC Legacy Committee for the purpose of celebrating the rich heritage of the MUHC and organizing and overseeing celebrations relating to the inauguration of the Glen site. Chaired by Drs. Richard and Sylvia Cruess, the activities of the Committee should be self-financed and designed to promote pride in Montreal;
- A new contract of affiliation with McGill University, which now must be supported by the Agence and authorized by the Ministre de la Santé et des Services Sociaux
- The appointment of new members of three Research Ethics Boards of the McGill University Health Centre:
  - Ronald Olivenstein, MD Biomedical A
  - Margaret Becklake, MD Biomedical B
  - Marie Courchesne, MSc Biomedical B
  - William Powell, PhD Biomedical B
  - Mair Richards, BEd Biomedical B
  - Bernard Stern, BCL Biomedical B
  - Ma'n Zawati, LLM Biomedical B
  - John Gravel LLB, LLL Pediatric

- A number of resolutions pertaining to loan authorizations in support of our regular operations.





**On recommendation from the Council of Physicians, Dentists and Pharmacists, the Board approved the appointments of:**

- Dr. Laura Russell, Interim Chief, Department of Medical Genetics
- Dr. Renzo Cecere, Interim Director, Division of Cardiac Surgery
- Members of the MUHC Clinical Ethics Committee of the Council of Physicians, Dentists and Pharmacists
  - Eugene Bereza (Chair), Director, MUHC Office of Clinical Ethics
  - Lori Seller
  - Rachel Kiddell-Monroe
  - Dr. Alan Fielding
  - Dr. Mark Angle
  - Jasmine Boyer
  - Robert Lambert
  - Laura Palma
  - Nancy Wright

**The Board of Directors approved contracts valued at \$2 million or more for the following:**

- 18 echocardiography machines, 3 review stations and associated equipment from GE Healthcare;
- Surgical Gloves & Medical Exams Gloves;
- Furniture for the Glen site;
- Neurostimulation/Neuromodulation products;
- Contrast Media for Radiology Departments;
- Purchase of furniture, comprised mainly of: armchairs, chairs, & Lab stools for the Glen site.

**The Board of Directors approved the issuing of public tenders for the following:**

- Radiopharmaceutical supply - Fludeoxyglucose (FDG) for Nuclear Medicine Department;
- An automated transportation system – Automated Guided Vehicles (AGV's) for the Glen, pending approval from l'Agence de la Santé et des Services sociaux de Montréal;
- Angiography Supplies;
- Hemodynamic/Cathlab supplies;
- Rental of Linens/Gowns and Drapes;
- Nuclear medicine supplies;
- Dialysers (artificial kidneys);
- Portable ventilators required to support the National Program for Home Ventilation Assistance;
- Purchase of three (3) MRI Systems for the MGH, RVH and Neuro.

# Long-term respiratory care program moving to the Pavillon Camille-Lefebvre

Due to the upcoming move to the Glen site, the McGill University Health Centre's (MUHC) long-term respiratory care program, currently housed at the Montreal Chest Institute, will be moving to the Pavillon Camille-Lefebvre in Fall 2014.

Given the MUHC's focus on complex care at the Glen site, the long-term respiratory care program will be transferred to our long-term care centre, the Pavillon Camille-Lefebvre, which is integrated with the Lachine Hospital. The Pavillon Camille-Lefebvre will be the only long-term care centre in the province equipped to handle long-term respiratory care patients, and as mandated by the Agence de la santé et des services sociaux, is the only MUHC institution charged with the responsibility of long-term care.

To accommodate patients and their healthcare needs, renovations will be carried out on the second floor of the Pavillon Camille-Lefebvre, these include: upgrades to medical gases and general infrastructure



enhancements. Some patients currently residing on the second floor may have to be moved to another unit. Staff will ensure that all patients being moved have a smooth transition: rooms will be decorated to patient specifications and routines will remain essentially the same.

The care teams from both institutions, which will now include a respirologist, will merge their expertise and become one interdisciplinary unit specializing in long-

term and respiratory care. "I'm certain that patients will positively benefit from the multi-disciplinarity of the team and their new, improved living environment," says Dr. Ronald Olivenstein, medical director, Montreal Chest Institute.

"The professionals at the Pavillon Camille-Lefebvre and Lachine Hospital have really developed an expertise in long-term care," says Dr. Mathias Kalina, associate director, Professional Services, MUHC. "The institution provides a home-like environment with modern single-patient rooms, outdoor space and activities for patients that are not currently available at the Montreal Chest Institute. We are confident they will receive excellent care in the new facility."

MUHC representatives from the Montreal Chest Institute and Pavillon Camille-Lefebvre met with patients and families to address questions and concerns regarding the transfer and will continue to do so throughout the move.

## MEMBERS OF THE APTS INSURED WITH THE SSQ AND ESNS AND EMPLOYEES INSURED WITH DESJARDINS

**Did you know that** certain upgrades to your Group Insurance must be requested prior to December 1<sup>st</sup> and will only become effective the following January 1<sup>st</sup>?

If you were thinking of making changes to your group insurance, please call the HUMAN RESOURCES INFO-CENTRE at 31617 for more information.

## GHOST STORIES



### HAUNTED PAINTING

Hanging upon the walls of a patients' ward in the Ross Pavilion of the Royal Victoria Hospital, was once a unique painting. The scene was of a house and a beautiful landscape but it had been reported by patients and staff that sometimes, an old lady appeared in the window looking out. At times, patients said they saw an old lady coming out of the house, looking around, before going back in. The painting was so disturbing to the patients and staff, they decided to remove it from the wall.



### GHOSTS OF THE RVH

One night at the Royal Victoria Hospital, a nurse was taking a break. While lying on a couch she saw an apparition standing over her, which she described as a white smoky light. She got up to take a better look and told it to go away. When it didn't move, she proceeded to pass her hands through the apparition several times to disperse the white "fog." Eventually, it did go away but it came back with two other apparitions. She tried to scream, but nothing came out. The apparitions finally left but the nurse never rested on that couch again.



### LOCKED DOOR...

A patient had just passed away in M5-Cardiac of the Royal Victoria Hospital. The staff arranged him and closed the door as they waited for his family. Later, they realized the door of the room was locked from the inside. No one was in the room, except for the dead patient. Security had to come and unlock the door. The staff thought the patient did not want his family to see him like that.



PIERRE DURAND



# GLEN SITE CONSTRUCTION UPDATE



- Work at the Glen site is now more than 80% complete.
- The installation of the exterior aluminum cladding for the Glen should be completed by spring 2014. Of the 28,000 panels to be mounted, approximately 10,000 have been installed, which represents about 37% of the total number. The installation of the yellow panels, located on the upper part of the Montreal Children's Hospital is underway.
- The installation of the exterior cladding of the aboveground employee parking lot will begin in the coming weeks.
- Inside, gyproc is being installed and joints are being pulled.
- Painting, ceramic and flooring is underway and furniture is beginning to be moved into place.
- Landscaping of the plaza, situated over the underground visitor and patient parking lot has begun and will continue till spring 2014.
- Over the next weeks, more and more greenery will be seen on the South side of the Glen site, along St-Jacques Street, since another 40 mature trees will be planted by the end of the year.



## MUHC 2015 at the Montreal General Hospital

The year 2015 represents the culmination of several significant projects at the McGill University Health Centre (MUHC) and also a new era in the delivery of care and management of our hospitals. Departments and programs are being moved and there is an MUHC-wide effort to streamline practices and group services together.

At the Montreal General Hospital (MGH), the planning, transition, construction and clinical team leaders are committed to ensure that the MGH site and its teams are ready for 2015. The focus will be twofold

from now until 2015: firstly, ensuring the MGH is ready to receive programs from our other sites; and secondly, making sure that the specific initiatives of the Ambulatory Care GPO are implemented to the fullest extent possible. The clinical and real estate leadership (Dr. Ewa Sidorwicz, Ann Lynch and Wayne Heuff) are committed to the foregoing priorities and are implementing the necessary measures to ensure that these goals are attained in a timely, efficient and cost-effective manner.

There will be a dedicated office at the

MGH to facilitate interaction between the Planning, Transition, Construction and Clinical teams regarding the upcoming transfers and transition.

For the next 18 months, the focus will really be to take the necessary steps to ensure the smooth integration of new programs and services at the MGH. Post 2015, the focus will shift to advancing the MGH modernization and redevelopment program, which of course will require the support of the Ministère de santé et des services sociaux and the MGH Foundation.





1913-2013 **LES 100 ANS**  
**DE L'HÔPITAL DE LACHINE**

**100**

**THE LACHINE HOSPITAL'S**  
**100 YEARS 1913-2013**

On hand for the official unveiling of the new Centennial Statue were: Jacques Filion, president of the Lachine Hospital Foundation Board of Directors; Claude Dauphin, mayor of Lachine; François Ouimet, MNA for Marquette; Edgar Rouleau, mayor of Dorval; Jocelyne Faille, administrative director of the Lachine Hospital; artist Susan Stromberg; and Normand Rinfret, director general and CEO of the MUHC.

## New statue at Lachine Hospital marks its Centennial Year

On your next visit to the Lachine Hospital you may notice something new: a seven-foot statue that will greet you as you approach the main entrance.

This stunning aluminum sculpture, entitled “Régénération”, is the hospital’s new Centennial Statue and was unveiled on October 18 to help mark 100 years of excellence.

It was created by Montreal artist Susan Stromberg, whose works are found in public and private collections around the world. With its well-defined style, Stromberg said she wanted to “symbolize what happens when a century-old institution merges with a hospital such as McGill University Health Centre.”

The Centennial Statue was supported by the Lachine Hospital Foundation, the Borough of Lachine and the City of Dorval.

The unveiling was organized as part of the hospital’s Centennial Year celebrations, which will wrap up in December. But there are a few more events coming up.

On November 10 there will be a card tournament held in collaboration with several local community groups. Then on November 28, staff at the Lachine Hospital can leave their lunch at home and enjoy a \$5 St-Hubert meal in rooms A and B of the Camille-Lefebvre Pavilion.

The Lachine Hospital Centennial Year comes to a close at a special event taking place on December 5 at the Camille-Lefebvre Pavilion.

For more information on the Lachine Hospital’s Centennial Year and these upcoming events, visit [muhc.ca/lachine100](http://muhc.ca/lachine100).

## The MUHC is accredited!

“Some of your patients described you as miracle workers and as far as a quality endorsement it just doesn’t get any better than that.” During the summary of results from Accreditation Canada, Kris Gustavson, team leader, could not have said anything more powerful.

The recent Accreditation Canada visit constituted a comprehensive review of our governance, leadership, clinical programs and services. The surveyors assessed us against more than 3,000 criteria and based their findings on multiple sources of evidence, ranging from a review of relevant documentation to discussions with our Board members, leaders, staff, physicians, clients, families, community partners and stakeholders, as well as observations of the delivery of care. Despite the 22 per cent increase in criteria against which we were evaluated, the MUHC achieved a score of 92.9% (compared to 92.2% in 2010).



Accreditation inspectors enjoy the view of the Glen site

Points that the accreditors highlighted include the exceptional commitment of our Board of Directors; the dedication and resilience of staff, physicians and volunteers; our focus on our transformation to a culture of performance; and the passion and engagement of our entire Community towards patient satisfaction.

Although Accreditation Canada’s positive evaluation is a significant achievement, it constitutes only one step on our journey towards a culture of quality and continuous performance improvement. A concerted effort is now required to meet all Required Organizational Practices (ROPs) so we continue to meet the expectations and needs of our patients and their families.

Thank you to everyone who helped in the preparation for the Accreditation Canada visit and who participated in the latest peer review of organizational practices and standards.

The full Accreditation report is available on the MUHC Intranet.