

THE NEW MUHC *IN ACTION*

May 2012

Equipment Procurement: milestones being met



PET-CT Scan

“Congratulations are in order for everyone who has been involved in Equipment Procurement (EP) for the Glen Site,” says Pierre Major, Interim Director, Redevelopment, Planning and Real Estate Management. “We have done something unprecedented in the history of healthcare in this province in terms of scope, complexity and involvement of staff. It has been a demanding activity, but our people have been extremely dedicated.”

Indeed, involving health professionals in the process is nothing new; but EP for the New MUHC’s Glen Site has been intense. “Much of the larger pieces of equipment had an impact on design—which means that GISM (Groupe immobilier santé McGill), our private building partner, needed the technical specifications of each machine to be able to build the proper infrastructure for it such as electrical outlets, drains, etc.” explains Major. “We had to deliver these technical specifications by certain dates so as not to delay construction; I am happy to report that this target was achieved on time and on budget.”

“It’s amazing to see how far we have come and how much work was accomplished in

such a short amount of time. We assembled close to 75 teams in less than 8 months to work on Equipment Procurement for the Glen Site,” says Julien Hudon, Director of Equipment Planning for the MUHC. “\$100 million worth of contracts are about to be signed—that means we have met close to half of our objective,” adds Sébastien Poitras, Associate Director of Equipment Integration and Biomedical Technology for the Glen Site. And it is \$100 million well-spent, as a lot of the equipment meets the high standards of MUHC medical staff. “EP is a process

Julien Hudon, Sébastien Poitras
and Pierre Major look over EP plans.

that is closely followed by the provincial government. We must go through a formal call for tender process to make sure we are getting the best product for the best price. This is money that comes from taxpayers, we must be diligent,” explains Poitras.

Next Steps

Now that the bulk of the major pieces of equipment have been chosen, MUHC EP teams will be moving on to the creation of shop drawings. “Users are heavily involved in this process as they are the ones who use the machines and treat our patients,” says

Major, “they know, better than anyone else, what is needed.” “This process has really been about multi-tasking,” says Poitras, “while some groups work on shop drawings, others will be analyzing mobile equipment requirements; what needs to be purchased as well as what is moving to the Glen.”

While it is a challenging task, procuring equipment for the Glen Site has forced planning and biomedical teams and healthcare professionals to carefully think about the future. “We are continuing our usual process on our different sites; however, now, when we look at purchasing new technology, we think of the future and how best to accommodate our people’s needs in function of the coming changes,” explains Hudon.

When it comes to building and designing a brand new modern hospital, nothing is easy. What will ensure the success of the New MUHC’s Glen Site is what has always been our most precious commodity: people who care and invest in the process.

2011-12 Equipment Acquisitions**MONTREAL GENERAL HOSPITAL**

1. DaVinci surgical robot and high-precision endoscopic manipulator.
2. Renewal and modernization of the radiographic technological platform. Four old cassette-based radiographic installations were replaced with 4 high-tech digital wireless detector systems.
3. Creation of a leading-edge integrated Electrophysiology and Cardiac Catheterism Laboratory, including a superb biplane angiographic X-ray system, a series of stimulation, tissue ablation and heart electrical mapping devices.

LACHINE HOSPITAL

1. Creation of a modern MIS suite for bariatric surgery; equipped with high-tech instrumentation, LED OR lights, and first-class OR table, plus component integration software, and intelligent interfaces for surgeons.
2. Urology and Cystoscopy equipment for the accommodation of one of the most highly-regarded MUHC cancer treatment specialties.

From left to right:
Research Institute;
Cancer Centre;
Block D (RVH and MCI);
Block C (RVH);
Block B (MCH) and
Block A (MCH).



GETTING TO KNOW



The Glen Site will be the only hospital in Quebec to be linked to an intermodal station: Vendome. This means that commuters will be able to access a metro line, 3 train lines and 11 different bus routes. The Glen will be linked to the Vendome station via two tunnels. It will take about 5 minutes to get from the metro to the hospital on foot.



Employees of the Glen Site will be able to access an 8-level parking structure situated on the South side of the site.



YOUR GLEN SITE!



The 100% single-patient rooms will not only benefit patients, but our staff too. Designed to be more spacious and efficient, medical personnel will be able to bring care to the bedside more easily and safely.



A committee whose mandate is to look at the question of daycare for employees moving to the Glen Site has been formed and is looking at options.



Being under the same roof as many of your colleagues will be an invaluable advantage of the Glen Site. With easy access from one hospital to the next (all buildings are connected), medical staff will be able to discuss a panoply of issues-making multi-disciplinary care easy to achieve.

Future Workstations at the New MUHC



From cell phones, to tablets to computers, a variety of mobile devices exists.

The reorganization of teams within the New MUHC, along with the fast development of information technology, has prompted Information Services to review their orientations and revamp the MUHC workstation of the future.

The goal is to optimize equipment and application management processes while minimizing maintenance and service costs. The proposed "thin client" solution involves housing applications and documents on servers instead of users' desktop computers. A benefit to this approach is that users can work with equipment that is more powerful but costs less.

"The time it currently takes to set up a computer is several hours—multiplied by 9000 workstations. If we factor in the average lifespan of a computer, which is five years, plus the demand for new software, this new equipment and application management method is definitely the logical choice," stated Mr. Jacques Laporte, Director of Operations, Information Services. "We need to invest where it counts and maximize our use of existing infrastructure. More and more people say they want to use their smartphones or tablets for work. This

orientation aims to meet this demand while optimizing access security."

The success of an initiative such as V-Sign (which allows vital signs to be recorded and consulted via iPhone) clearly shows the real need for mobility. Thanks to the increased capacity of the MUHC's current technological infrastructure, it will be possible to provide solutions that enable personal mobility and mobile access platforms.

"Internet thinking"—quick access to information, social networks, mobility of both people and access solutions, along with the growing number of user-friendly technologies—has found its place in our organizations. With the status quo a thing of the past, we must rethink not only how we process and access information but also how we manage our fleet of personal computers at the MUHC. The New MUHC will operate at high speed indeed!

Lachine: Keeping its sights on excellence



Renovated reception area



Retinal camera for eye exam

The Lachine Hospital's Department of Ophthalmology is one of the MUHC's many sources of pride thanks to the motivation and dedication of its professionals.

Since 2000, the number of patients treated annually at the department has grown from 5,900 to nearly 15,000—an increase of over 150%! The number of cataract surgeries has also tripled in 10 years, with a goal of 6,000 surgeries for 2012, making the Lachine Hospital an undisputed centre of excellence in ophthalmology.

To keep up with demand, the department acquired cutting-edge equipment in 2010. For example, they now have an OCT

(Optical Coherence Tomography) scanner, which creates truly detailed images of the eye, along with a tonometer/keratometer, a device that combines two exams in one and allows doctors to detect severe eye pathologies at an earlier stage. "Thanks to this equipment, we can treat more patients and provide more accurate diagnoses in a shorter timeframe: the objectives we set have therefore been met," stated Bruno Poudrier, Chief of Outpatient Services, who came to the Lachine Hospital in 1987.

In addition to the new equipment, the department's reception area was renovated to double its capacity. Wait times have been reduced, patients are satisfied, and the

pressure on staff has diminished.

Investment continues in the Lachine Hospital's Department of Ophthalmology, an important part of the New MUHC, as major renovations will lead to the 2015 opening of the new clinic to treat macular degeneration, a disease that affects more and more Quebecers.

At the MUHC, we never forget that our resources are human, as Mr. Poudrier points out: "From reception to case management, our staff is highly professional and dedicated, and we are confident that the New MUHC will allow us to maintain these standards in the future."

MCH ON THE GLEN:

Sweeter Dreams at the new Sleep Lab

In 1989, Dr. Robert Brouillette, Director of the Pediatric Sleep Laboratory, saw the need to create a space where children with respiratory and sleeping issues could be helped. The result was the founding of the MCH sleep lab. Twenty-three years later, the lab is thriving.

"We have outgrown our space," says Christine McGregor, Assistant Chief Respiratory Therapist and Sleep Lab Supervisor. "We outgrew it years ago, but we're masters at maximizing space usage." Indeed, the sleep lab we are sitting in is full to bursting with equipment used to monitor young patients. All of the rooms in the current sleep laboratory are used 24 hours a day. At night, the rooms function as sleep bedrooms and control rooms and in the morning the same rooms need to be converted for daytime use. To help with this daily endeavour the sleep lab possesses stackable chairs, foldable tables, equipment housed on mobile carts and even a Murphy bed. "Although we are efficient space-users there is a price to pay: it takes time for our Respiratory Therapists/Sleep Lab Technicians to convert the rooms from daytime to nighttime use," continues McGregor.

"We're going to do our best to make sure the lab at the Glen feels as much like home as possible," says Dr. Brouillette. While better aesthetics may appeal to children, they will have an incidence on test results as well. "We noticed that kids who are tested at home wake up less than kids who sleep in the lab—we're still able to get viable results, but stress affects sleep—so the less there is the better."

Both Dr. Brouillette and Christine McGregor agree that the design of the pediatric sleep lab at the Glen Site will be an improvement over their current space. "We'll



Dr. Robert Brouillette and Christine McGregor

have a 'back-of-house' control room where we can conduct our studies; the rooms where children sleep will be at the front of the lab, so they won't have to see all the equipment," explains McGregor. In addition to this new set-up, the floors in the sleep rooms will be cushioned, the rooms will be sound-proofed, and each room will have independent climate control.

"There are several advantages to moving," says Dr. Brouillette. "We'll have a more streamlined lab for staff and better installations for patients, but we'll also be on the same site as the adult sleep lab—we'll be able to collaborate with colleagues more easily and share information and results." Without doubt, this pioneering lab will continue to help children and their families breathe easier.

More about the MCH Sleep Lab

- The MCH Sleep Lab is world-renowned and collaborates on research projects with children's hospitals across Canada and around the globe.
- Doctors and Respiratory Therapists try to find and treat the cause of respiratory problems kids suffer from during sleep, some causes may be: large tonsils and adenoids, obesity, neurologic, genetic or cranio-facial problems and congenital malformations.
- Doctors and Respiratory Therapists/Sleep Lab Technicians see patients from 0 to 18 years of age.



Le nouveau CUSM prend forme
The New MUHC takes shape

Info / Questions ?

cusm.ca/construction ■ twitter.com/CampusGlen
construction@muhc.mcgill.ca ■ 514 934-8317



Bureau de projet
5325, avenue Crowley (2^e étage)
Jeudi de 9 h à 19 h 30
Vendredi de 9 h à 16 h 30
ou sur rendez-vous

Project office
5325 Crowley Avenue (2nd Floor)
Thursday 9 a.m. to 7:30 p.m.
Friday 9 a.m. to 4:30 p.m.
or by appointment

Consolidating Mental Health at the Montreal General Hospital

On the leading edge of best practices

The consolidation of mental health inpatient services from the Allan Memorial Institute and the Montreal General Hospital (MGH), both soon to be located on the 4th floor of the MGH's A and B wings, has been nearly a decade in the making. "It's been a long journey," admits Angie Perillo, Nurse Manager, Mental Health, Inpatient services, adult sites.

Phase 1 of the mental health inpatient unit renovations (A Wing) was completed in 2010. Phase 2 (the final phase) is nearly complete. "For phase 2, everybody involved really did their homework," says Jeannie Lynn, lead planner for the psychiatry project. "We were determined to meet the architectural design challenges and ensure improvement from phase to phase. We reviewed the literature in terms of norms and best practices, not only in Quebec but internationally." "Now," Lynn says, "the new wing for the mental health unit will be on the leading-edge in terms of key design elements."

Patients, currently in four-bedded rooms, will have single or double rooms in the new unit. Some rooms will also have medical gases, which Perillo says will help significantly as they see more and more patients with medical needs. "We focused on psychiatric patient safety," insists Michel Amor, Project Manager. "We chose the faucets, fixtures, lights – everything – with great care."

"The reality is we're retrofitting a space, so fitting the number of beds required was a challenge," admits Lynn. "But we found a way to make our patients the top priority while improving the space for staff." The functionality of the nursing station has been greatly improved.

Whereas nurses currently have cramped spaces, the new central nursing station will be functional, large and central. There will also be a fully enclosed satellite nursing station and a series of common rooms for patient activities, patient dining, and interviews.

Harmonizing practices

Consolidating two psychiatry units has its challenges. The Inpatient Psychiatry Harmonization Committee was created with the goal of harmonizing and modernizing practices with evidence-based care as the model. The committee looked at four main issues including harmonizing nursing practices, clarifying professional roles and responsibilities and looking at best practices in mental health treatment by reviewing the latest literature.

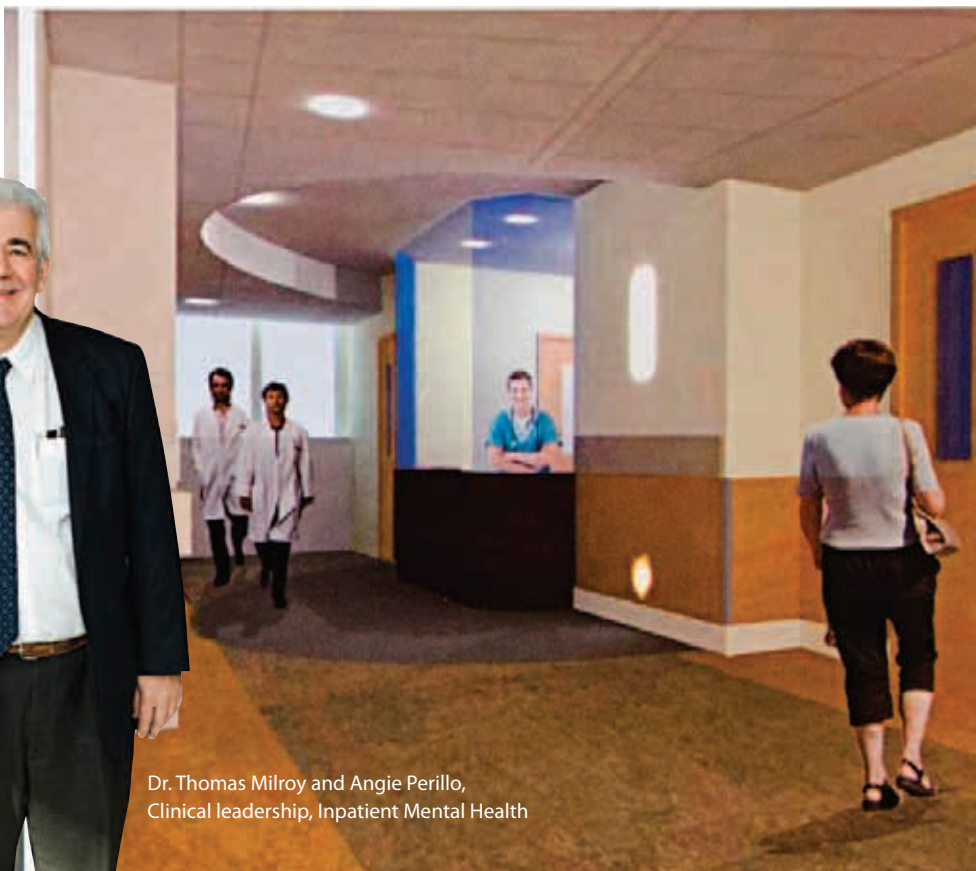
They also created an "inpatient care checklist" to ensure the highest level of efficiency in providing care and a pilot project to test it began April 2nd. Currently, the average length of stay of a psychiatric patient is about 35 days, with the merger, the goal is to reduce length of stay significantly with quality improvement processes and activities. "The goal is to better serve the patient," says Carrie Mazoff, Associate Director of Transition. "We realized this checklist could lead to better, more timely care while reducing the average length of stay."

"All these initiatives have dovetailed very nicely with the Transforming Care at the Bedside (TCAB) initiative," explains Mazoff, as mental health is one of the units in the TCAB pilot project. Perillo agrees. "This inter-professional approach has greatly influenced the quality of care and time spent at the bedside. More importantly, patients have participated actively in the improvements," she says.

For Dr. Warren Steiner, the MUHC Psychiatrist-in-Chief, the intricacies of the planning process were a real revelation. "Working with both Planning and the Transition to prepare for the move was an education for all of the clinician leaders involved. Having a structure to help us ensure that we are prepared for every aspect of the move has been invaluable."

Perillo seems confident the end result will be positive. "There have certainly been some culture issues," she admits. "Although some may be a little anxious, we feel ready."

Future Auxiliary Reception desk in renovated Mental Health Department



Dr. Thomas Milroy and Angie Perillo,
Clinical leadership, Inpatient Mental Health

Nouveaux LOGOS

New LOGOS

Centre universitaire
de santé McGill



McGill University
Health Centre

Institut de
recherche
Centre universitaire
de santé McGill



Research
Institute
McGill University
Health Centre

Hôpital de Montréal
pour enfants
Centre universitaire
de santé McGill



Montreal Children's
Hospital
McGill University
Health Centre

Normes graphiques

Les nouvelles **Normes graphiques de la marque** fournissent d'importantes informations pour utiliser les logos. Vous devrez remplacer votre papeterie avec les nouveaux logos seulement lorsque votre inventaire sera épuisé. Ne jetez pas ce que vous avez en mains.

Quand viendra le temps de commander à nouveau, vous pourrez placer votre commande en ligne, par le service PrintSYS. Pour obtenir votre code d'accès, veuillez écrire à printsys@muhc.mcgill.ca.

Pour en savoir plus, visitez l'intranet, dans la section Marketing, sous l'onglet Information corporative
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Logo Guidelines

New **Brand Guidelines** provide important information for how to use the logos. Please note, you need only replace your stationery items when your current supply runs out. Do not throw out your current stock.

When it comes time to order new stationery, it can be done quickly and easily online via PrintSYS. To obtain your access code, email printsys@muhc.mcgill.ca.

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L'HUMOUR POUR L'ESPOIR,

au bénéfice de l'Initiative vitale
de mieux-être de la Clinique
du sein de l'Institut des Cèdres

**Vous avez besoin
d'idées de cadeau
pour la fête
des Mères?
Ne cherchez plus!**



L'humoriste et conférencière
Loretta Laroche, qui a déjà été
en lice pour un Emmy, viendra
bientôt à Montréal...

Elle est amusante! Elle est

pleine de vitalité! Elle vous fera sourire, voire rire aux éclats!
Toutefois, ce qui est le plus important, grâce à son humour,
elle vous aidera à mettre les moments difficiles de votre vie en
perspective, indépendamment de ce que vous vivez!

Elle s'appelle Loretta Laroche, et le mercredi 30 mai prochain
(19 h 30), elle sera en vedette dans le cadre de l'activité de
financement Humour pour l'espoir de l'Institut des Cèdres
contre le cancer. Cette conférence aura lieu à la salle de concert
Oscar Peterson (7141, rue Sherbrooke Ouest). Loretta Laroche
est une conférencière spécialiste de la motivation et une
humoriste en vue, qui démontre depuis 30 ans que le rire est

une puissante source d'inspiration et de guérison.
Les sommes amassées au cours de cette soirée seront
versées à l'Initiative vitale de mieux-être de la Clinique du
sein des Cèdres au CUSM. Bon nombre de patients atteints
du cancer ont besoin d'un soutien social, physique et
psychologique en plus de leurs traitements et de leurs suivis.
Afin de répondre à ce besoin exprimé par un nombre de
plus en plus élevé de patients, l'Initiative vitale de mieux-
être adopte une approche holistique, qui vise à la fois l'esprit,
le corps et l'âme. L'équipe responsable de ce projet offre
quatre programmes importants : psycho-oncologie, exercice,
thérapies pour le lymphoedème et formation sur le cancer du
sein; tous ces programmes sont offerts gratuitement, grâce
au soutien inestimable de commanditaires et de donateurs.
Nous espérons que vous allez être des nôtres lorsque
nous réunirons des survivantes du cancer, leur famille et un
groupe important de personnes manifestant leur appui. Votre
contribution aura une incidence directe sur les soins offerts
aux femmes de notre collectivité, maintenant et pour de
nombreuses années à venir.

**Pour vous procurer des billets, veuillez communiquer
avec Sandra Afeyan, au 514 934-1934 (poste 71574), ou
rendez-vous à cedars.ca. Le coût unitaire des billets (aucune
place assignée) est de 100 \$ et comprend le stationnement.
Cocktail de desserts après la conférence.**



L'INSTITUT DES CÈDRES CONTRE LE CANCER
THE CEDARS CANCER INSTITUTE

*Nous vous remercions de votre
générosité et espérons vous voir
à la conférence!*

Humour for Hope in Support of the Cedars Breast Clinic Wellness Initiative

**Searching for
a great Mother's Day
gift idea?
Look no further!**

Emma-nominated humorist
and motivational speaker
Loretta Laroche is coming to
town...

She's fun! She's lively! She'll
make you smile and may even
make you laugh out loud! But
most importantly, through her
humour, she will help you put a
new perspective on the difficult
moments in life, no matter what
they are.

Her name is Loretta Laroche and on Wednesday, May 30
at 7:30 p.m. she will be the featured speaker at the Cedars
Cancer Institute's Humour for Hope fundraiser taking place
at Oscar Peterson Hall (7141 Sherbrooke W). Laroche is an
acclaimed motivational speaker and humorist who has
demonstrated, for over 30 years, that laughter is a powerful
source of inspiration and healing.

Monies raised will go towards the Wellness Initiative of the
Cedars Breast Clinic at the MUHC. Many cancer patients require
social, physical and psychological support in addition to their
ongoing treatment and follow-up. In response to this growing
need, the Wellness Initiative takes a holistic approach towards
the mind, body and soul. Their team offers four important
programs: psycho-oncology, exercise, lymphedema therapy
and breast cancer education all free of charge thanks to the
invaluable support of sponsors and donors.

We hope you will join us as we bring together breast
cancer survivors, their families, and a strong community of
supporters. Your contribution will have a direct impact on the
care we provide to women in our community, now and for
many years to come.

For tickets, please contact :
Sandra Afeyan at 514 934-1934 ext 71574 or visit cedars.ca.
**General admission tickets are \$100 and include free
parking. Tea and desserts will be served following the
performance.**

*Thank you for your
generous support
and we look forward to
seeing you at the event!*



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