



ADMINISTRATIVE UPDATE

Update on redevelopment at Lachine

The MUHC Redevelopment Project has been a topic of conversation for a long time now. Based on the comments we receive every day on the subject, many of you are wondering if the Lachine Hospital is still included in the plans. The answer is a resounding yes! A major redevelopment project for the Lachine Hospital is indeed in the works. Some elements are already finished as is the case for the Minimally Invasive Surgery suite, others are in the development phase. For instance, we are moving forward with the Magnetic Resonance Imaging (MRI) project. Preliminary plans have already been distributed to key departments and the project is on track. One thing is certain: with a budget of more than \$60 million, this project will have an extremely positive impact on our hospital and the care we provide to our patients on a daily basis.

Redevelopment planning has to follow a strict process (which is the case for all projects over \$45 million) led by the Agence de la santé et des services sociaux de Montréal. At this point, the administrative team along with members of the clinical teams are actively working to respond to the requests for information of Infrastructure Québec. As set out in its policy on the governance of major public infrastructure projects, Infrastructure Québec acts as a consultant, coordinates the business case development process, and participates in the follow-up committee. As we were given the green

light in 2011 to officially start the first project step, we are currently working to develop the Initial Business Case (IBC), which will be used to define how the project will be delivered, i.e., PPP, conventional approach or construction management. Our goal is to have the IBC ready for September. We will continue to provide you with updates as the project unfolds. A project of this scale requires not only diligent planning but also a lot of patience, and we are confident in its future.

CAPS Lachine

Following the official launch of the workbooks on February 6, orientation sessions took place on February 6, 7 and 8 to provide the best possible support to the teams and individuals involved in the process. Thanks to all of you who took part in these meetings. Rest assured that we will continue to support your efforts during the period dedicated to the completion of the workbooks.

Sincerely,

Dr. Louis-Marie Simard, Associate Director of Professional Services
Jocelyne Faille, Administrative Director
Jasmine Boyer, Associate Director of Nursing

PROFILE

Infectious Expertise

If you do not yet know Dr. Marty Teltscher, it is time to take this opportunity. At 34, this specialist in medical microbiology and infectious diseases already has a solid reputation at the Lachine Campus and across the MUHC. However, he did not plan this career path. "My first love was biodefense. I thought I would become a researcher. Today, I am doing what I love most: treating patients and teaching students, residents, and healthcare professionals," said Dr. Teltscher.

A graduate of McGill University, where he is now an assistant professor in the Faculty of Medicine, Dr. Teltscher excelled throughout his education and received numerous recognitions and awards for his leadership and expertise. His talent now has positive impacts on the Lachine Campus, where he previously served as an Internal Medicine and Intensive care physician and is currently a microbiologist and infectious diseases consultant. He is also a member of the immunodeficiency service at the Montreal Chest Institute, and does clinics and consultations in infectious diseases and tropical medicine at the MGH.

While describing his work, Dr. Teltscher said, "the work of our team is very exciting on a daily basis. Every day, we have a direct impact on the health and safety of our patients." Dr. Teltscher emphasized that infection control ☺



From left to right:
Chantal Boulais,
Dr. Marty Teltscher
and France Nadon

PROFILE

☺ is an important part his job, where he works closely with France Nadon, Lachine's expert infection control practitioner. Dr. Teltscher is also very proud of the outpatient antibiotic program at Lachine. "It is a credit to the work of physicians, nurses, and community resources working well together."

It seems that there is no shortage of fascinating cases at Lachine Campus. "Seeing what no one else sees is our role

and that's what makes it so exciting," concluded Dr. Teltscher.

The Lachine Campus team of Medical Microbiology and Infectious Diseases is composed of Dr. Teltscher, Dr. Richard Lalonde (Clinical Infectious Diseases), Dr. Katherine Elie, (Microbiologist), Dr. Vivian Loo (MUHC Chief Microbiologist) Chantal Boulais (Medical Technologist) and France Nadon (Infection Control Practitioner and wound care specialist).

Did you know? Medical Microbiology and Infectious Diseases is a specialty that focuses on prevention, diagnosis and treatment of infectious diseases. The specialty includes four major spheres of activity: 1) the scientific and administrative leadership of a clinical microbiology laboratory; 2) the development and leadership of a nosocomial infections prevention program; 3) clinical consultations for assessment, diagnosis and treatment of patients with infectious diseases; and 4) Public health as well as epidemiology and prevention of contagious diseases.

Letter from Maurice Bélanger

Dr. Laflamme's patient in Ophthalmology

Dear Clinical Ophthalmology Team at the Lachine Campus: For 25 years, I worked in quality assurance at Bell. Observation is therefore second nature to me, and rarely have I had the opportunity to witness such positivity as I did during my time at the Lachine Hospital.

I was very impressed by the ambiance of the clinic and the hospital. Staff members are always cordial and in a good mood. I would like to congratulate them personally for their dedication to giving the best possible care to their patients.

I would also like to acknowledge in particular the support and exceptional expertise of Dr. Laflamme, whom I told has the talents of a magician. Having perfect 20/20 vision at the age of 73 is indeed something worth mentioning. My only problem now is dealing with the side effects—I never realized my house was so dusty! My new vision has made me quite the stickler for cleanliness...

I would also like to thank Dr. Laflamme's incredible team. Each and every one of you has made a difference for me. Thank you for treating me with dignity and respect. Thank you for making me feel unique and important. Thank you for laughing with me and answering my questions with such kindness.

My daughter is a nurse and she accompanied me on my appointments at the Lachine Campus. She too was impressed by the feeling of family that permeates the hospital.

When I returned home after my first operation, I couldn't stop thinking about my grandmother, who was completely blind for nearly 10 years due to the same problem with cataracts that I had. I am so very lucky to have received care from such a wonderful team, which gave me back the vision I had in my 20s.

Thanks to you all and keep up your great work.

From the bottom of my heart,

Maurice Bélanger

WHAT'S HAPPENING AT LACHINE...

Townhall meeting

A great deal of the Lachine Campus' employees gathered on January 27 to learn about the latest news from the MUHC and the Lachine Hospital.



Normand Rinfret, Interim Director General and Chief Executive Officer, presented his vision for the future and his key priorities for the next year.



Dr. Sunil Garg, Cardiologist, Lachine Hospital, and **Dr. Yoel Moyal**, Emergency Department Physician, Lachine Hospital, talked about their experience at Lachine and their involvement in the event Dancing with the DOCs.



Jocelyne Faille, the host and MC of the event.

Dr. Louis-Marie Simard, Associate Director of Professional Services, gave an update on the CAPS Lachine project.



»CLINICAL CARE AND TEACHING

Teamwork under pressure

Once again our clinical teams have been tested and, once again, they have demonstrated an exceptional commitment to patient care. The team of the Respiratory Therapy Services of the Royal Victoria Hospital recently managed to fast-track the implementation of special treatment protocols for three immuno-suppressed adult patients infected with the Respiratory Syncytial Virus (RSV). RSV causes an infection of the lungs and airways that is very common in infants and young children, but that can be extremely serious, even fatal, in immunocompromised individuals.

The critical aspect of the situation was exacerbated by a number of challenging factors: the availability of ribavirin (drug to treat the virus), limited RSV-related expertise within the team as this infection in adults is usually treated at the Hôpital Maisonneuve-

Rosemont, a team that was short-staffed during the holiday season, as well as a facility that did not meet the specific needs for the care and treatment of RSV.

"It was wonderful to witness the dedication and focus of the team. In a very short time, we organized sessions to train the team to administer a RSV treatment; conquered the impossible to find the drug; collaborated with Maisonneuve-Rosemont in order to properly implement the treatment protocol and rallied all necessary resources to care for our patients. The entire team came together to overcome a tremendous amount of difficulties. I would, however, like to underline the special contribution of Audrey Gero (Assistant Chief), Steve White (Technical Coordinator), the team of Respiratory Therapists (Shaun Lockhart, Annie Bellerose, Donna Austin, Mélanie Giroux, Parwicz Yakuby, Chantal Piché, Katherine

Malo), Josée Gendron (MGH), Wayne Fountain (Purchasing) and Dr. Ewa Sidorowicz," explained Margaret Moon, Manager Respiratory Therapy Services, MUHC Adult Sites. "We saw once more the slogan *The Best Care for Life* come to life. I could not be more proud to work daily with such talented professionals."

A tip of the hat also to Louise Fullerton, Sylvie Ampleman, Nathalie Ferlatte, Annie Chevrier and Keith Carter (Nursing), René Favre (Nursing Professional Development Educator), Yves Rousseau (Pharmacy), Kathy Kowal and Terrence Meehan (Housekeeping), Dr. Vivian Loo (Microbiology), Dr. Gizelle Poporadi (Hematology), Dr. Peter Goldberg (ICU), Filomena Pietrangelo (OH&S), Dr. David Dawson (10 Med). Their collaboration and contribution were key to the success of this initiative.

»VOLUNTEER PROFILE

An inspiring volunteer

Since her retirement, Mrs. Marie Deslauriers-Simard remains very active and involved in the Lachine community. For almost 15 years, she has been a steady presence at the Palliative Care Unit of the Lachine Hospital. "Providing compassionate, honest support is a priority. A patient approaching the end of his or her life is most in need of someone to listen, to smile or simply to provide a warm, sincere presence," she explains.

In June 2010, in recognition of the positive impact of her volunteering on the community, Mrs. Simard was awarded the Seniors Silver Medal from the Lieutenant-Governor of Quebec. This is a very special honour which she shares with everyone who, like her, has shown devotion to the well-being of patients. She also recently received a plaque in recognition of his volunteer work, donated by the Mayor and Council of the Borough of Lachine.

Most recently, Mrs. Simard has been chosen to represent the patients on the Strategic Directions Committee that is responsible for establishing the prioritization of clinical activities (CAPS) at Lachine. With her discreet, straightforward and gracious personality, she does not hesitate to take a firm stand when needed. As she states, "The patient must be at the heart of all clinical

activities. I am very happy when I hear of a doctor or service that is centred around the patient. This is a wonderful concept that we must promote and embrace in our daily lives."



Marie Deslauriers-Simard, Volunteer

Volunteering is a longstanding tradition in Mrs. Simard's family. She was the wife of the late Albert Simard, for whom a Lachine church hall is named, in recognition of his community involvement. As well, she was the grand-daughter of Hormidas Deslauriers, who was the mayor of Lachine at the beginning of the 20th century; in fact, Hormidas-Deslauriers street in Lachine was named in his honour.

More than 2,000 volunteers work at the MUHC, and, like Mrs. Deslauriers-Simard, they all contribute to a caring, compassionate environment where each person's dignity is respected as a fundamental value. Thank you Mrs. Simard! The comfort, companionship and care that you offer to all those patients who are approaching the end of their lives makes a world of difference.

MUHC News

Ovarian cancer – the great pretender is exposed

The most deadly type of ovarian cancer often starts outside the ovary, causes symptoms, and has the potential to be diagnosed early enough to be treated effectively. These are the findings of the DOVe (Diagnosing Ovarian Cancer Early) study, led by a research team from the McGill University Health Centre (MUHC).

Saliva HIV test passes the grade

A saliva test used to diagnose the human immunodeficiency virus (HIV), is comparable in accuracy to the traditional blood test, according to a new study led by the Research Institute of the McGill University Health Centre (RI-MUHC) and McGill University.

Emergency Room visits risky for elderly residents from long-term care facilities

Elderly patients who have visited an emergency department (ED) are three times more likely to develop respiratory or gastrointestinal infections in the week following their return to a long-term care facility, such as a Centre d'Hébergement de Soins de Longue Durée (CHLSD).

To learn more, visit www.muhc.ca



Message from Normand Rinfret

I have been fortunate in recent weeks to have met many of you either at the Townhall meetings that were held at each site in January and the beginning of February or during site walk-about that I have conducted in that last few weeks. These meetings have given me the opportunity to discuss some of the key issues and priorities that we have been managing since my appointment as Interim Director General and CEO and, most importantly, to answer your varied questions about different aspects of life at the MUHC. I welcome these opportunities to exchange with you and plan to continue to do so regularly.

This month has been busy on a number of fronts, and with budget planning underway for 2012-13, it is important to focus on the key elements of this process.

Budget Optimization Plan

During the course of the 2011-12 fiscal year, we have been working on establishing a plan to return to financial equilibrium. The 2010-11 budget year ended in equilibrium only because of extraordinary measures and corrective actions have been required to redress this situation. In order to return to a healthier financial portrait that will give us flexibility in our planning for the future, we have put in place a performance optimization plan in the amount of \$34.2 million that is aligned along four guiding principles:

- To examine and apply corporate and system-wide initiatives for efficiencies
- To establish specific targets for efficiencies in clinical areas
- To accelerate several targets set out in the clinical plan for 2015
- To restrict clinical activity to funding targets and programs covered by our Entente de gestion

Much work has been done throughout this fiscal year by the Budget Oversight Committee working in concert with each mission and clinical directorate to identify and capture possible efficiencies. A first exercise emphasized non-clinical areas, in order to minimize the potential impacts on clinical care. This current exercise will involve both clinical and non-clinical areas. Several initiatives

have been implemented and others are now being rolled out across the missions and administrative departments of the MUHC and are being managed at that local level. A similar exercise is underway at the Research Institute to identify cost efficiency measures for the 2012-13 budget year.

I know I can count on your cooperation during this process.

CAPS Lachine

As part of the CAPS Lachine (Clinical Activity Priority Setting) project, each clinical team was invited on February 6 to begin thinking about the future of the Lachine Hospital and to evaluate our clinical activities by filling out the workbooks.

I would like to thank all of these people for their contribution to this major undertaking, and I will keep you updated on the project's results.

The MUHC welcomed a New Board of Directors

On February 1, 2012, the MUHC welcomed its newly constituted Board of Directors. This transition has given us the opportunity to celebrate the contribution of the outgoing board members and I would like to reiterate the gratitude that was expressed at a gathering for these wonderful people last night. Over the years, these volunteers have been valued members of our MUHC family, investing their time, energy and goodwill for the betterment of our organization. We are truly grateful for the counsel they have given us.

I would also like to underline the significant contribution that the outgoing chair, Senator W. David Angus, has made to the MUHC. We are truly indebted to him for his leadership over the last 5 years and his participation on the MUHC and affiliated hospital boards since 1985.

The process of identifying a new board in accordance with the revised board composition guidelines,—established by the Ministry of Health and Social Services—, occurred during the fall of 2011. From September to December, the appointment, election or delegation of representatives from the MUHC's councils and foundations as well as McGill University and the Agence de santé et de services sociaux de

Montréal occurred; public elections were also held on November 1, 2011. A final step was undertaken in January to co-opt six members to the new board and we are very pleased to welcome this new Board of Directors to the MUHC family.

The members of the new MUHC Board of Directors are:

Two representatives from the population

- ♦ Jill Hugessen
- ♦ Gwen Nacos

Two representatives from the User's Committee

- ♦ Maria Mastracchio
- ♦ Pierre Hurteau

One member from the Council of Physicians, Dentists and Pharmacists (CPDP)

- ♦ Dr. Earl Rubin
- ♦ One representative from the Council of Nurses
- ♦ Susan Drouin
- ♦ One representative from the Multidisciplinary Council
- ♦ Colleen Timm

One representative from the Council of Non-Clinical Personnel

- ♦ Alison Laurin

One representative from the Foundations

- ♦ Joan Ivory

Two representatives from McGill University

- ♦ Robert Rabinovitch
- ♦ Rose Goldstein

Two representatives from the Agence de la santé et des services sociaux

- ♦ Marie Giguère
- ♦ David H. Laidley

Six Co-opted members

- ♦ Peter Abraham
- ♦ Claudio Bussandri
- ♦ Gail Campbell
- ♦ François Laurin
- ♦ Glenn R. Rourke
- ♦ Norman G. Spencer

Director General and CEO

- ♦ Normand Rinfret, Interim Director General and CEO, MUHC

I invite you to join me in extending a warm welcome to our new Board of Directors. I look forward to working closely together in the future.



Introducing CVManager Health

TIME SAVER... TALENT SEEKER

In March, the Human Resources Recruitment Department will introduce CVManager. This powerful database is a web-based full-featured integrated applicant tracking system and talent management system that facilitates quality hiring and increases recruiting effectiveness. External candidates will now be able to fill the online application form and submit their resumes as well as apply for postings. In order to maximize the efficiency of this application and fully benefit from this data base, we will progressively transition away from processing paper CVs as well as CVs sent by fax or email.



Here are a few advantages of the application:

- Great ease of use
- Improved customer service, by centralizing job application and staffing processes
- Assure discovery of all qualified candidates
- Follow-up on students throughout their studies
- Manage candidates referred by our employees efficiently

We will keep you informed of the details regarding the implementation of this innovative project.



Commemorating Patricia Kalnitsky's memory

On November 3, 2011, in the presence of over 60 staff and family members, the Human Resources Department proudly dedicated one of its conference rooms in honour of Patricia Kalnitsky, a former recruitment professional, who passed away in February 2011.

"We wanted the evening to be a celebration of life and legacy", said Rose-Marie Sevigny, Manager, Recruitment Services. Patricia was an exemplary employee known for her dedication, hard work, integrity and meticulous nature!

Patricia taught us all about passion, strength of mind, perseverance and the importance of love, family and traditions.

Patricia was incredibly devoted to her family and often made fresh muffins for them. Muffin Mondays have been held in her memory for the past 12 weeks and has raised over \$1,000. This money was used to pay for 5 new chairs for the MGH Oncology Day Centre in her memory; this purchase will contribute positively to the patient and family experience at the Oncology Day Centre, where Patricia was treated.

The commemorative evening was about the Mitzvah; it was about preserving her memory and in her honor, trying to make a small difference in the world of oncology patients and their families. It was the opportunity to illustrate to her family, how much she truly meant to the Human Resources Department. The commemoration of this room in her honor is our way of keeping her memory alive and her spirit with us forever.

Royal Victoria Hospital Auxiliary makes historic donation

The Auxiliary of the Royal Victoria Hospital was pleased to announce on January 31st a \$1 million donation to the McGill University Health Centre's (MUHC) *Best Care for Life* Campaign, making this the largest contribution in the Auxiliary's 167-year history.

In recognition of the donation, the MUHC will name the 12-bed pod of the Antepartum and Postpartum Care Unit at the Glen site in honour of the Auxiliary. On this unit, mother and baby will be in the same room and perinatologists will be able to carefully monitor both typical and high-risk pregnancies before and after birth.

From left to right: David Culver and Alex K Paterson, honorary chairs, *The Best Care for Life* Campaign; Normand Rinfret, interim director general and CEO, MUHC; Donna Carroll, president of The Auxiliary of the Royal Victoria Hospital; Dr. Sylvia Cruess, co-chair, *The Best Care for Life* Campaign; John A. Rae, chair, The Best Care for Life Campaign; Dr. Richard Cruess, co-chair, *The Best Care for Life* Campaign.

Launch of the Québec Health Record

The Minister of Health and Social Services, Dr. Yves Bolduc, announced on February 6 that the Québec Health Record (QHR) will be implemented in the territory of Montréal. The QHR is a computer-based tool that modernizes and improves the methods of gaining rapid and more efficiently access to certain vital medical information deemed essential to frontline healthcare workers and to ensure the continuum of care and the quality of healthcare services.

An information campaign will be launched shortly to present the ways in which the project will function, its expected benefits, the information that the QHR will make available, the manner authorized health professionals will use to gain access and the rights of citizens. The campaign will equally enable the population of Montreal to understand the benefits of this tool, whose objectives are notably to facilitate the management and monitoring of patients and improve the quality of care and health services offered to them.

It should be noted that while the QHR will provide patients with several advantages, it is possible that some people will refuse to have one. Provisions were made to provide people with the ability to exercise their right of refusal, which can be provided by mail using the form designed for that purpose, by telephone or Internet. A QHR will not be created for people whose refusal requests are received prior to March 26, 2012. After that date, at any given time, a person may change their decision to have a QHR.

For more information on the QHR, its advantages, confidentiality and security of the QHR, or for more information on planned provisions to handle your refusal to have a QHR, please visit the Web site: www.dossierdesante.gouv.qc.ca



Comité des grands projets Montréalais visits the MUHC

MSSS and Agence update on dossiers

On January 19 and 24, 2012, MUHC senior administration had the pleasure of welcoming a delegation from the Ministry of Health and Social Services (MSSS) and the Health and Social Services Agency (Agence) to review our clinical planning and network partnership development as well as provide a review of the ED context now and an assessment of our plans for 2015.

The delegation was led by M. Jean Rodrigue, the newly appointed Sous-ministre adjoint et responsable de la Direction générale des services de santé et médecine universitaire and included Isabelle Savard, Direction de la main d'oeuvre médicale, Danielle Fleury, Direction des soins infirmiers, and, from the Agence, David Levine, Président - directeur général, Louise Masicotte, Directrice générale adjointe, Louise Ayotte, Affaires médicales et universitaires and Mr. Frédéric Abergel, Adjoint au directeur de la Direction des affaires médicales et universitaires.

These meetings brought some interesting discussions around our clinical planning, with a strong focus on the CAPS process that is currently in its implementation phase. It also provided the opportunity to examine the interaction this produces with the design-build process that is underway at the Glen and the planning and strategy around the distribution of services at the Montreal General Hospital and Lachine. It also gave the MUHC the opportunity to review the progress to date with our network partners and the service corridors in Montreal and the outlying regions and to reinforce the areas where additional emphasis will be needed as we move towards 2015.

These meetings were part of a series of meetings that the Comité is undertaking to review the redevelopment of the academic hospital network in Montreal that is underway.

»RESEARCH

Genetic breakthrough for brain cancer in children

Canadian-led research team identifies two mutations in crucial gene involved in deadly pediatric brain tumours

An international research team led by the Research Institute of the McGill University Health Centre (RI MUHC) has made a major genetic breakthrough that could change the way pediatric cancers are treated in the future. The researchers identified two genetic mutations responsible for up to 40 per cent of glioblastomas in children - a fatal cancer of the brain that is unresponsive to chemo and radiotherapy treatment. The mutations were found to be involved in DNA regulation, which could explain the resistance to traditional treatments, and may have significant implications on the treatment of other cancers. The study was published this week in the journal *Nature*.

Using the knowledge and advanced technology of the team from the McGill University and Génome Québec Innovation Centre, the researchers identified two mutations in an important gene known as the histone H3.3. This gene, one of the guardians of our genetic heritage, is key in modulating the expression of our genes. "These mutations prevent the cells from differentiating normally and help protect the genetic information of the tumor, making it less sensitive to radiotherapy and chemotherapy," says Dr. Nada Jabado, hematologist-oncologist at The Montreal Children's Hospital of the McGill University Health Centre (MUHC) and principal investigator of the study.

"This research helps explain the ineffectiveness of conventional treatments against cancer in children and adolescents - we've been failing to hit the right spot," says Dr. Jabado. "It is clear now that glioblastoma in children is due to different molecular mechanisms than those in adults, and should not be treated in the same way. Importantly, we now know where to start focusing our efforts and treatments instead of working in the dark".

Inappropriate regulation of this gene has been observed in other cancers such as colon, pancreatic, lymphoma, leukemia and pancreatic neuroendocrine cancer, and future research could therefore reveal improved treatments for these diseases. "What is significant here is that for the first time in humans we have identified a mutation in one of the most important genes that regulates and protects our genetic information. This is the irrefutable proof that our genome, if modified, can lead to cancer and probably other diseases. What genomics has shown us today is only the beginning," says Dr. Jabado.

»AWARDS AND APPOINTMENTS

Christina Rosmus, Nursing Consultant and CNS for Pain at The MCH, has been awarded the Nursing Excellence In Pain Management Award - 2012 from the Canadian Pain Society. This award is presented annually to a nurse who consistently exemplifies leadership in an area of nursing practice, education, or research in pain management.

The Women's Health Mission welcomes Lynn Lauzon, the new nurse manager for the Neonatal Intensive Care Unit at the RVH. She has held a number of positions during her career, including a background in Neonatology, Community and Public Health and Long Term Care. Lynn is a surveyor for Accreditation Canada. She holds a Bachelor of Science (Nursing) and a Masters of Education from the University of Montreal. Lynn will work very closely with the NICU team at the MCH towards the merger of the two Neonatal ICUs at the Glen site. Please join us in welcoming Lynn in her new role!

The 2012 Nursing Awards of Excellence

The 2012 Nursing Awards of Excellence an exciting opportunity to appreciate the excellence of our colleagues. **Nomination deadline: April 2, 2012.**

The site/mission-based Awards include: The Evelyn Malowany Award for Clinical Practice; The Lorine Besel Award for Leadership in Nursing (all nurses); The Patricia O'Connor Award for Evidence-Informed Project or Program (Nurse-led project or program); the Isobel McLeod Award for Nursing Assistants; the Laraine Imperial Partners in Practice Awards (PAB, Unit Coordinators and Admin Techs); The Anne-Marie Lejeune Award for those who support and collaborate with nurses to give quality care (person or group of persons outside the Department of Nursing who have stood out in the last year for their dedication as well as their support and collaboration with nurses to give quality care); The Valerie Shannon Award for Outstanding Leadership at the MUHC is awarded to a nurse of a group of nurses demonstrating outstanding leadership in nursing practice.

Information is available on the Nursing Intranet site. Martha Stewart (88-09006) - Neurosciences; Donna Murray (43806) - MCH; Val Cass (43650) - RVH; Denis Gaumond (43658 or 46900) - MGH; and Bruno Poudrier (77254) - Lachine.



Dr. Nada Jabado

THE NEW MUHC

Glen Site Public Information Session

On January 24, 2012, the MUHC, in collaboration with its partners, Groupe Immobilier Santé McGill (GISM) and Ville de Montréal held a public information session. The evening was a great success. Over 150 people attended and got the chance to ask questions directly of MUHC, city and transport officials.

The aim of the session was to inform residents and local business owners about the MUHC Glen site project, as well as the construction activities and roadwork in the area expected in the coming year.

Main concerns that were voiced had to do with traffic and roadwork in the area, as well as planning around the Vendôme metro link. While the coming months will not simplify moving around the neighbourhood, at the end of it all, the work will greatly benefit the district and its residents.

Residents who attended heard the following presentations:

- MUHC: the Glen site, how it will transform patient care and benefit the surrounding community.
- GISM: update on the progress of the project and construction activities for the coming year.
- Ville de Montréal: overview of the upcoming construction and roadwork projects along de Maisonneuve, Décarie and adjacent to Sherbrooke.
- Also in attendance were Transports Québec, Société de transport de Montréal (STM) and Agence métropolitaine de transport (AMT). They presented an overview of plans for changes to adjacent transport links.

For more information on the Glen project or to view the presentations that were given, please go to: <http://muhc.ca/new-muhc/article/glen-site-public-information-session-presentation>



Robert Hamilton and Pierre Major (left) from the MUHC led the panel of speakers at the January public information session

The medication distribution system: optimized efficiency

Few people are aware of the complexity and thoroughness involved in getting thousands of medications from the hospital's central pharmacy to the right patient at the right dosage—every day! However, absolute precision is essential for the safety of our patients and the quality of care they receive. This challenge can only be met through the contribution of a range of staff members from multiple disciplines, such as assistant pharmacy technicians, pharmacists, nurses, doctors, patient service associates, housekeeping staff, and others.

For several months now, the MUHC has been carrying out a vast operation to optimize its medication distribution system and make it more secure with the ultimate goal of ensuring that best practices are applied when it comes to prescribing, preparing, distributing and

administering medications. This project requires the participation of all staff members mentioned above, many of whom will have to adopt new work methods.

Some phases of the project have already begun: for example, computerized medication administration records and automated medication dispensing cabinets are now available. By summer 2012, all care units will be distributing medications in individual bags and using new medication carts that are equipped with electronic locks and that are restocked every 24 hours.

André Bonnici, Pharmacist-in-Chief, acknowledges the support of all individuals at the MUHC who are part of the project's success and added, "I would like to recognize, in particular, the contribution of the Assistant Pharmacy Technicians (APT) at the Royal Victoria Hospital, where more extensive changes will be implemented. In fact, the Royal Victoria Hospital is one of the last hospitals in Quebec with a fully manual medication preparation process. The work of these APTs will significantly help us improve quality of care for patients." This project is supported by the Transition Support Office.



Myrcia Dezardouin (Nurse) and Dena Pope (PAB)



Nadine Côté (APT)

Dancing with the Docs brings the house down at Métropolis

Ten MUHC docs amazed, thrilled and thoroughly entertained the 800-plus capacity crowd at Saturday night's inaugural event:

- **Dr. Dara Charney** – Director McGill RUIS Addiction Program, Mental Health Mission
- **Dr. Frederic Dankoff** – Site Director, Department of Emergency Medicine, Royal Victoria Hospital
- **Dr. Sunil Garg** – Cardiologist, Lachine Hospital
- **Dr. Nadia Giannetti** – Medical Director of the Heart Failure and Heart Transplant Centre, Royal Victoria Hospital
- **Dr. Rayan Kaedbey** – Hematology-Oncology, Montreal General Hospital
- **Dr. Nadine Korah** – General Pediatrics Fellow and Chief Resident, The Montreal Children's Hospital
- **Dr. Preetha Krishnamoorthy** – Pediatric Endocrinologist, The Montreal Children's Hospital
- **Dr. Dick Menzies** – Director of the Respiratory Division, Montreal Chest Institute
- **Dr. Yoel Moyal** – Emergency Department Physician, Lachine Hospital
- **Dr. Donatella Tampieri** – Director of Diagnostic and Interventional Neuroradiology, Montreal Neurological Hospital and Institute



Dr. Preetha Krishnamoorthy



Dr. Nadine Korah



Dr. Rayan Kaedbey

Dr. Krishnamoorthy, who performed a rollicking Bollywood-inspired cha-cha with her Arthur Murray partner Cristopher Panasuk, was crowned the winner with Drs. Korah and Kaedbey as 2nd and 3rd place finishers respectively.

"This whole experience has been amazing, from start to finish," said Dr. Krishnamoorthy. "It has been an honour to work alongside so many people – the dancers, my fellow doctors, the incredible organizers and the people behind the scenes – all for the same great cause."

The event raised \$203,000 for *The Best Care for Life* Campaign and promises to be a much-anticipated annual fundraiser.

A huge thank you goes out to all the doctors who participated, honorary co-chair Alex K. Paterson, event co-chairs Dr. Ewa Sidorowicz and Dr. Miguel Burnier and Steve Merling, the organizing committee and all the volunteers. See you next year!

Event partner Sponsors

Arthur Murray Dance Schools (Jean Talon, West Island and Laval locations)

Platinum Qatar Airways, SAQ; **Silver** Borden Ladner Gervais (BLG), Ministry of Health and Social Services, Pharmaprix, Simard Transport; **Bronze** Criso, Le Groupe Charbonneau, Montreal Medical International, Norton Rose, Paladin Labs, ProDanse (Dancers' Apparel), St-Laurent Coiffure - Christina Stavropoulos (Dancers' Hair), Jisele Cosmétiques Studio (Dancers' Makeup), Supa Dance (Dancers' Shoes)

»PATIENT TESTIMONIAL

You probably usually get complaints or queries about service. I could not find a general email address for administration so I would appreciate you forwarding this message to the proper people.

These days, we commonly hear about complaints of our healthcare system in general (and about wait times, rude staff etc.), well I had to take the time to send kudos for everyone in the Montreal General Hospital Radiation Oncology team. Not only the expertise and perfect bedside manner of your physicians, but each and every staff member, from receptionists, technicians as well as the MGH Volunteers.

I was first diagnosed with cancer at your emergency room in early May, followed by surgery by (wonderful) Drs. Maleki and Lessard at the Neuro, then treatments in Oncology by Dr. Hirsh (tremendous) at the RVH and radiation treatments on 3 occasions. Twice with Dr. Panet-Raymond and once by Dr. Kopek. Wow! What patience with patients these 2 physicians have. I was made to feel like a VIP instead of a burden, as unfortunately happens these days.

But what stands out most is that every single employee, Registered Nurses, PAB's, receptionists, technologists and even the volunteers were absolutely great. Never did I see them act or react negatively to any patient or co-worker. Even if I asked redundant questions, or came early, or asked for help, they always tried to assist me. I don't know what this department does to keep the employees (super busy) be so outstanding, but you should duplicate the formula if you can everywhere within the MUHC. It may be great administration in this department or respect from higher ups, but it works.

I am still a patient with all three hospitals (waiting for more surgery) but though I cannot make complaints about other departments, Radiation Oncology certainly gets 10 out of 10!

With my sincerest regards to all,
Oksana Andruchiw