

# Public Information Meeting CIUSSS West-Central Montreal

## November 7, 2019



Centre  
d'hébergement  
Father-Dowd

Centre  
d'hébergement  
St-Andrew

Centre  
d'hébergement  
Henri-Bradet

Centre  
d'hébergement  
St-Margaret

CLSC  
Benny-Farm

CLSC  
Côte-des-Neiges

CLSC Métro

CLSC  
Parc-Extension

CLSC  
René-Cassin

Hôpital  
Catherine-Booth

Hôpital  
Mont Sinai

Hôpital  
Richardson

Maison de  
naissance Côte-  
des-Neiges



# Creation of the CIUSSS

On April 1, 2015, the adoption of Bill No. 10: An Act to modify the organization and governance of the health and social services network, in particular by abolishing the regional agencies

Objectives:

- facilitate and simplify public access to services
- help improve the quality and safety of care
- make the network more efficient and effective

Creation of integrated health and social services centres (CISSSs) and integrated **university** health and social services centres (CIUSSSs), which are responsible for providing the majority of services within a given territory

The number of establishments within the network was therefore reduced from 182 to 34.

# Overview of Quebec's health and social services network

## 13 CISSS

- Resulting from the **merger** of public institutions within a single region, in certain cases with the Regional Agency
- Managerial structure reduced from 3 to 2 hierarchical levels
- Located in the heart of their territorial networks

## 9 CIUSSS

- Same model as the CISSS
- In regions that have a university offering a full pre-doctoral medicine program or that operate a university institute related to social services
- Excludes university hospital centres (except for CIUSSS de l'Estrie)

## 12 unmerged institutions

- University hospital centres, university institutes and facilities not targeted by the Act

# Overview of the Montreal network

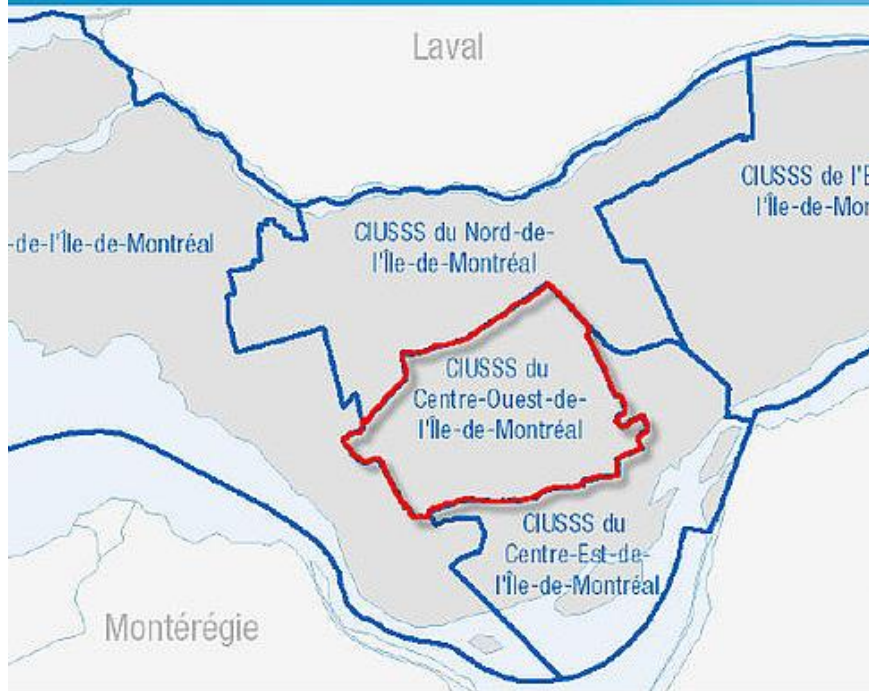
## 5 CIUSSS

1. CIUSSS de l'Ouest-de-l'Île-de-Montréal
- 2. CIUSSS West-Central Montreal**
3. CIUSSS du Centre-Sud-de-l'Île-de-Montréal
4. CIUSSS du Nord-de-l'Île-de-Montréal
5. CIUSSS de l'Est-de-l'Île-de-Montréal

## 5 unmerged facilities

1. Centre hospitalier de l'Université de Montréal (CHUM)
2. CHU Ste-Justine
3. McGill University Health Centre (MUHC)
4. Montreal Heart Institute
5. Institut Philippe-Pinel de Montréal

## Island of Montreal



## Location

Our CIUSSS covers an area of 54 km<sup>2</sup>

It partially or completely serves **five boroughs**:

Côte-des-Neiges/Notre-Dame-de-Grâce, Villeray/Saint-Michel /Parc-Extension, Rosemont/La Petite Patrie, Plateau Mont-Royal and Ville-Marie)

**Five on-island suburban municipalities:**

Hampstead, Westmount, Montreal West, Town of Mont-Royal and Côte-Saint-Luc

# The mission of your CIUSSS

- Provide the highest quality continuum of health care and social services throughout our network of institutions
- Provide compassionate care and services that are centred on the user and create an exceptional user experience
- Develop and promote leadership and excellence in health and social services education
- Advance health and social sciences knowledge and practices through excellence in research and innovation

# Values of your CIUSSS

- Highest quality of care
- Compassion, dignity and respect (core value)
- Safety
- Teamwork
- Knowledge and innovation
- Community
- Integrity and accountability

# Responsibilities of your CIUSSS

- Deliver healthcare services to the population within its territory
- Take on responsibility for the population within its territory
- Oversee the organization of services and complimentary services in its territory as part of its multiple missions (CH, CLSC, CHSLD, CPEJ, CR)
- Enter into agreements with other facilities and organizations within its territory (and other territories)



# CIUSSS facilities



Long-term care

- Donald Berman Maimonides
- Donald Berman Jewish Eldercare
- Saint-Andrew Centre
- Saint-Margaret Centre
- Henri-Bradett Centre
- Father-Dowd Centre
- Mount Sinai Hospital



Rehabilitation

- Miriam Home and Services
- Lethbridge-Layton-Mackay RC
- Catherine-Booth Hospital
- Richardson Hospital



CLSCs

- CLSC Benny Farm
- CLSC René-Cassin
- CLSC Côte-des-Neiges
- CLSC Parc-Extension
- CLSC Métro
- Family Medicine Groups (FMG): 15
- Super clinics: 6



Acute care

- Jewish General Hospital

# Regional vocation

## Specific clinical services

- Info-Santé and Info-Social
- Visual, hearing and motor disabilities
- Technical aids service
- Neurological and respiratory rehabilitation
- PRAIDA and prevention of radicalization

## Specific groups of the population

- English-speaking clientele
- Support for the practice of certain religious traditions (Jewish and Presbyterian)

# Supraregional vocation

## Specific clinical components

- Oncology
- High-risk pregnancies and neonatology
- Urology, urological oncology, gynecological oncology
- Surgery: cardiac, head and neck due to cancer, hepatobiliary, colorectal, neurology
- Infectious diseases, including tuberculosis
- Anti-radicalization intervention team
- Cochlear implant programming and rehabilitation services
- Hearing disability rehabilitation services
- Ligne AAA – The Elder Mistreatment Helpline

## Specific groups of the population

- Welcoming of refugees and asylum seekers (PRAIDA)
- English-speaking clientele

# Population served by your CIUSSS

## **345,275 individuals based on 2016 census – 18% of the Montreal area**

- Population breakdown
  - 17.3% of people ages 65 and up (16.7% for Mtl)
  - 20% of youth under 18 years of age (18.8% for Mtl)
  - 37% of seniors who live alone (36% for Mtl)
  - 42.1% of immigrants (34% for Mtl)
  - 24.3% of people whose native language is neither French nor English (18.3% for Mtl)
  - 18.9% of single-parent families (20.5% for Mtl)
- 64.8% now have access to a family doctor (October 2018)

**Note: close to 50% of patients treated at the JGH do not live within the CIUSSS's territory (close to 20% come from outside the Montreal area)**

# Population characteristics and health status

- **Income**
  - 22.9% of the population under the low income after-tax cut-off (compared to 17.9% in Montreal)
- **Education**
  - 15.5% with no diploma or certification (16.9% for Montreal)
- **Lifestyle and chronic illness**
  - More housing of insufficient size or with mold
  - Less obesity (10.6% vs. 15.7%)
  - Fewer with at least one chronic illness (31.9% vs. 34.7%)
- **Highest life expectancy among Montreal CIUSSSes**
- **Lowest avoidable mortality rate (70.9% vs. 89.4% in Montreal)**

# Medical clinics and Family Medicine Groups (FMGs)

## 131 medical clinics

- Out of the 15 FMGs (grouping of 53 medical clinics), 6 are designated Network FMGs (GMF-R) and 3 are designated University FMGs (GMF-U) providing blood work and medical imaging services
- 567<sup>(1)</sup> family physicians, including 405 physicians (registered)<sup>(2)</sup> as part of FMGs
- 26 specialized nurse practitioners (SNP) practicing in FMGs/FMG-U's
- 465,749<sup>(3)</sup> patients registered with family physicians practicing within the territory, including 364,274<sup>(3)</sup> with physicians in FMGs (78.2%)

Sources:

<sup>(1)</sup> PROS 2019 – 2022 – DRMG, nominal roll

<sup>(2)</sup> RAMQ Report 1 – October 4, 2019

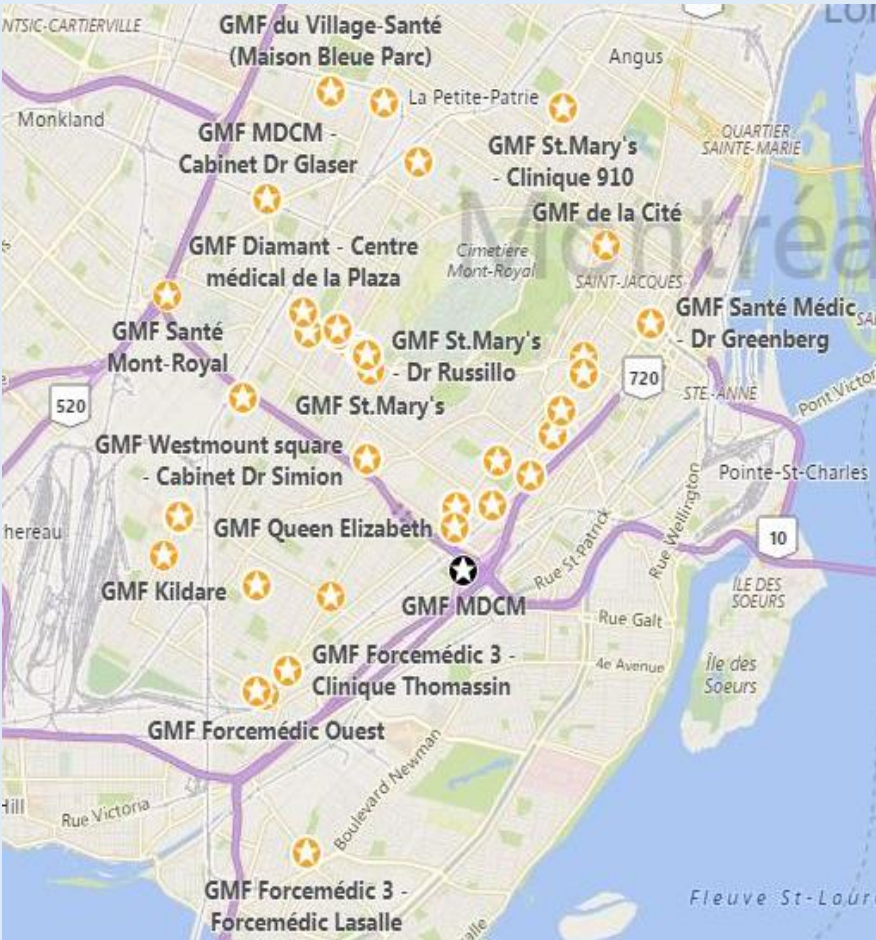
<sup>(3)</sup> RAMQ Report 4 – October 4, 2019

## Medical clinics and Family Medicine Groups (FMGs) - cont'd

- Average attendance rate at all FMGs within the territory increased from 79% to 80.1%
- Deployment of EMRs and addition of professionals at FMG Cavendish
- Increase from 63.7% to 80.6% at FMG Village Santé
- First phase of implementation of Patient Portal for making and confirming appointments at FMG Village Santé



## Configuration of FMGs within the territory

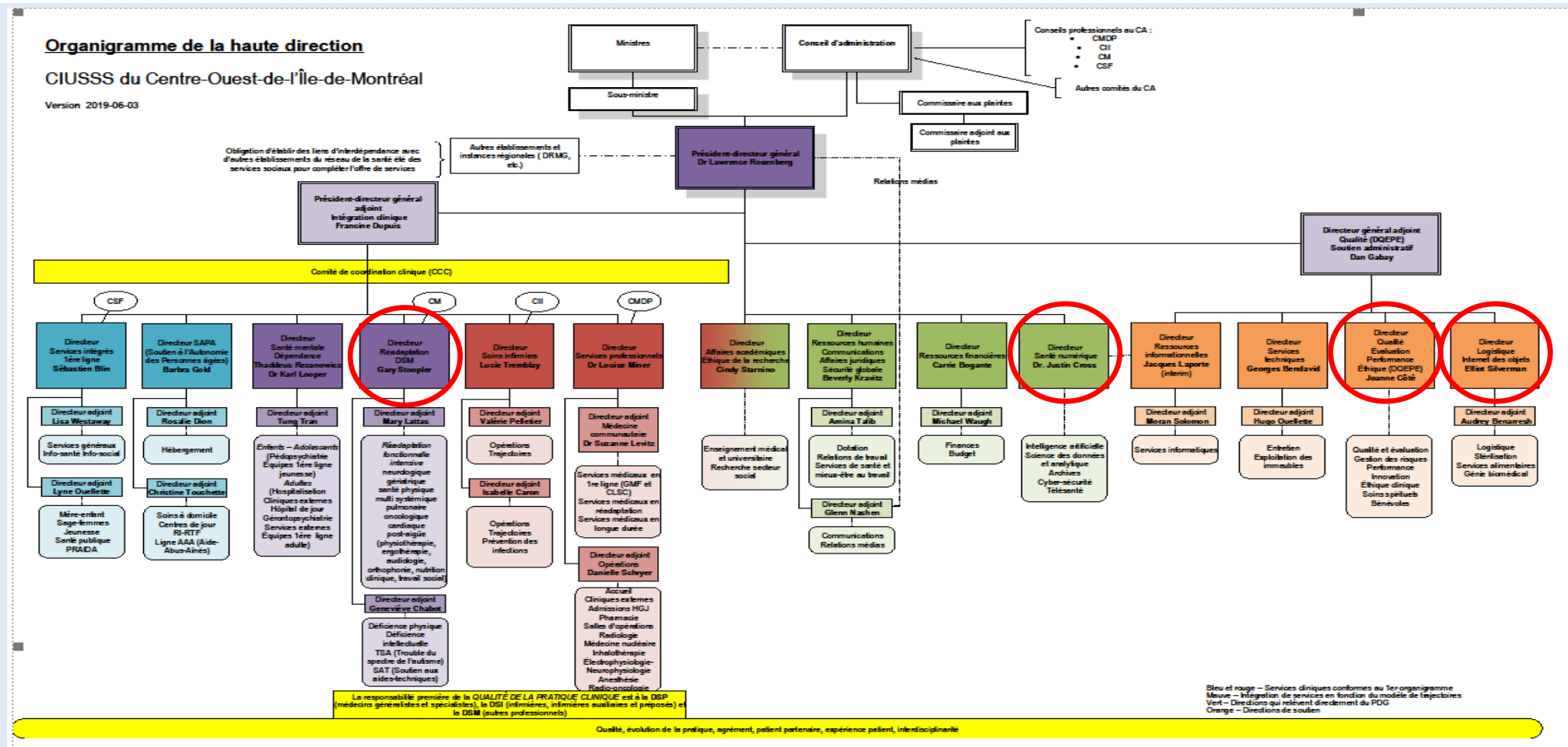


**15 family medicine groups including  
3 university family medicine groups (FMG-Us) and 6 superclinics (FMG-Rs)**

- FMG MétroMédic
- FMG Kildare
- FMG ForceMédic **GMF-R**
- FMG Santé Médic **GMF-R**
- FMG Cavendish
- FMG Westmount Square **GMF-R**
- FMG Santé Mont-Royal
- FMG Queen Elizabeth **GMF-R**
- FMG Cité médicale de Montréal
- FMG Village-Santé **GMF-U**
- FMG St. Mary's **GMF-U**
- FMG Diamant **GMF-R**
- FMG ELNA
- FMG MDCM
- FMG Herzl **GMF-R** **GMF-U**



# CIUSSS Organizational Chart



# Changes to Organizational Chart

- **Merger** of 2 clinic directorates (MSD and Rehabilitation) resulting in a complete integration into the rehabilitation care continuum
- Creation of a new Digital Health Directorate (**a first in Quebec**)
- Fusion of medical technologies with Logistics Directorate in order to form the Logistics and Internet of Things Directorate (**a first in Quebec**)
- Associate Executive Director and Director of Quality, Innovation, Evaluation, Performance, Patient Experience and Ethics converted into two separate positions

# Human Resources

- **The CIUSSS West-Central Montreal employs 10,360 people (9,973 in 2017-2018), representing 7,558 FTE**
- **Increase, especially in the SAPA program, based on MSSS objectives**
- **Breakdown by type of employee**
  - 386 for management staff (406 in 2017-2018)
  - 3,018 for nursing staff (2,935 in 2017-2018)
  - 1,662 for clinical professionals (1,574 in 2017-2018)
  - 4,386 for technical staff (clinical and administrative) as well as office staff (4,241 in 2017-2018)
  - 1,043 general labourers, maintenance workers and service workers (983 in 2017-2018)
- **We have approximately 750 physicians, including 251 general practitioners and 500 specialists**

# Achievements affecting all directorates

## Quality of care and services

- Stability in overall compliance with handwashing according to targets set by MSSS
- Infection prevention and control: one nurse in each department is assigned to continue efforts to raise awareness of handwashing
- Administration of organizational surveys on the culture of safety of mobilization of staff (Pulse)
- Since January 2019, the emergency department has provided technical aids (such as crutches and braces) **free of charge** to users as part of their medical treatment
- The vast majority of the targets outlined in the management and accountability agreement were met (95% to 100%). In 10 cases, the **MSSS's** targets were surpassed: access to medical imaging, access to surgery, users served through SAPA, VS spots
- Adoption and implementation of policy to combat maltreatment

# Achievements affecting all directorates (cont'd)

## Performance of administrative services, management and partnership

### Development and deployment of IPU

An IPU is the organization of a comprehensive continuum of care and services for a specific medical condition, group of people or population.

- Ongoing deployment of 7 IPU: Cardiovascular, Neuroscience, Musculoskeletal, Children 0-7 with developmental delays, Mental health, ages 12 to 25 , Outreach services, and Mother-Child-Family
- 2018-2019 addition of **2 new** IPU: Geriatric profile and Chronic pain

# User experience

- Planetree approach officially **launched** in September 2018 with all missions, directorates and partners
- Recruitment of 45 partner patients/users contributing to the ongoing improvement of quality throughout all of our missions
- Support for creating home-like approach in the CIUSSS's CHSLDs
- **Largest volunteer organization in Montreal** – 2,200 volunteers contribute to improving user experience throughout the CIUSSS
- Palliative care – fund-raising campaign aimed at renewing furniture in care units

# User experience (cont'd)

## Ongoing user experience evaluation and improvement in the different sectors

- **Strengths – acute care (JGH)**
  - Overall appreciation measured by the likelihood of recommending the hospital to other patients and appreciation of being treated with courtesy and respect
- **Strengths – frontline**
  - Respect and guaranteed appointments
- **Strengths – long-term care**
  - Personalization of rooms, respect, privacy, cleanliness, security, improvement of meals
- **Strengths – mental health and addiction**
  - Risk prevention for suicide, runaways and violence, and resource centre
- **Strengths – rehabilitation**
  - Early supported discharge and in-home rehabilitation for clientele with mild-moderate stroke
  - Needs of aging IS-ASD clientele addressed
- **Strengths – CIUSSS: improvement of hand hygiene and safe medication management**

# Achievements: clinical directorates

## Nursing Directorate

- Purposeful Rounding – hourly visits of more vulnerable patients to ensure their comfort, well-being and safety. This project affects 50% to 75% of clientele
- **Specialized Approach to Senior Care** – deployment throughout concerned departments in order to detect delirium (82% of targeted individuals were seen)
- **Conversion of 8 beds to hemato-oncology** – The two first nurse practitioners specialized in adult care in Quebec were recruited to work with this clientele and take part in the launch of digital care by participating in a virtual clinic and providing face-to-face access
- **White boards** – used as tools for communicating with users
- **Videos for teaching** clientele were developed with a view to integrating digital health technologies



# Achievements: clinical directorates (cont'd)

## Multidisciplinary Services Directorate (MSD)

- **Access to radiology and nuclear medicine** – 100% conformity with ministerial agreement
- Implementation of sleep apnea lab at Mount Sinai Hospital and René-Cassin CLSC. In 2018-2019, the lab provided services to 1,686 patients
- Optimization of surgical instrument trays
- **HELP program at JGH** assists seniors in maintaining their level of functionality and helps prevent delirium (K6 and CD6 and one surgical unit). The 41 volunteers have given over **2,560 hours** of their time and visited over 294 patients. A partnership was created with McGill University's School of Physical and Occupational Therapy in order to integrate HELP into their curriculum (90 students expected starting January 2020)
- **Polarization** – review of the conceptual framework for specialized clinical intervention
- Worth noting: the clinical team from the Technical Aids Service at the Lethbridge-Layton-Mackay RC was awarded the **2018 Prix Reconnaissance Desjardins in the "Influence" category**

# Achievements: clinical directorates (cont'd)

## Frontline, PRAIDA and Public Health

- Vaccination for pregnant women integrated into the offer of perinatal services
- **A favourable report** was issued by the Ombudsman following a visit of the Royal-Victoria accommodation site
- Physician care capacity of 142% (highest in Montreal)
- Active participation in an extensive research project carried out with the CHUM and Concordia University on the prevalence of HIV and Hepatitis C among First Nations, Métis and Inuit living in Montreal
- Achieved 100% of deliverables outlined in the Integrated Regional Public Health Action Plan in Montreal
- 3% increase in flu vaccination

## Achievements: clinical directorates (cont'd)

### **Mental Health and Addiction Programs Directorate**

- With the support of the IT Department, a mobile application for the SIM (Assertive Community Treatment) team is currently being developed
- Renovation of the 49-bed internal psychiatric unit – over 28,000 sq. ft.
- Opening of a Mental Health day hospital – moved from basement of ICFP (ambulatory psychiatric pavilion) to the 6<sup>th</sup> Floor of Pavilion B at the JGH

# Achievements: Rehabilitation Directorate

- In the summer of 2018, the Mackay and Philip E. Layton schools of the English Montreal School Board moved into a new building equipped with an ultra-modern environment
- Wait times reduced from 8 months to 3 months thanks to a project aimed at screening children with a suspected developmental delay
- Organization of services resulted in a 35% increase in the number of patients seen for speech-language pathology services
- **EquiToît**, a non-institutional residential alternative in a community continuum for individuals with physical disabilities which meets the MSSS's objectives of helping individuals integrate into the community. Offers 7 tenants the opportunity to improve their quality of life and prevent burnout of their caregivers.
- In March 2019, the research project on telehealth as a means of telerehabilitation was chosen by the *Fonds de soutien à l'innovation en santé et services sociaux* as an innovative project

# Achievements: Support Program for the Autonomy of Seniors (SAPA)

## CLSC

- Evaluation of needs and preparation of action plans based on MSSS target for 2020 (90%). Target nearly met in 2018-2019 (86.5%)
- Increased number of hours of direct in-home services
- Harmonized palliative care for patients who wish to die at home
- 577 patients received in-home palliative care
- Our teams surpassed one million hours of direct in-home support with **1,026,118 hours**, and provided services to **9,982 users**, in direct connection with ministerial guidelines

## Long-term care

- Opening of a new 96-bed IR in order to better serve the users within our territory
- After two years, the end of **major renovations** at Henri-Bradet Centre aimed at improving the physical environment for the well-being of residents and staff. Residents were re-integrated on April 7, 2019.
- Launch of **expansion project** at Henri-Bradet Centre to add 100 new beds

# Achievements: Quality, Innovation, Evaluation, Performance and Ethics Directorate

- Accreditation and ongoing improvement – the CIUSSS was given a **near-perfect rating of 99.6%** during an accreditation visit in November 2018
- Ongoing improvement with relation to safety and quality of care and services:
  - Safe user identification
  - Improved results for medication reconciliation and its adaptation in the community
- 120 clinical ethics consultations

## Highlights: Research

The Lady Davis Institute (LDI) continues to fulfill its role as medical research leader, at both the national and international level, by addressing challenges related to:

- Improving cancer diagnosis and treatment
- Expanding access to clinical trials
- Obtaining more resources for studying degenerative brain diseases
- **Consolidating stem cell research** – Thanks to the JGH Foundation and the Azrieli Foundation, over 2 million dollars was raised to create the research fund
- **Promoting bioinformatics** – Dr. Celia Greenwood, Scientific Director at the Ludmer Centre for neuroinformatics and mental health, received 10 million dollars from the Irving Ludmer Family Foundation to create the International Consortium for Brain Mapping in order to accelerate the discovery of innovative solutions

## Highlights: Research (cont'd)

- Carry out clinical research that will benefit patients of the JGH and other healthcare facilities
- Adopt new technologies to improve **patient access to digital resources**

### University Institute with Regard to Cultural Communities (SHERPA)

- Researchers were involved in 58 active research projects, including 18 new projects

### The Centre for Research and Expertise in Social Gerontology (GREGES)

- Renewal from the *Fonds de recherche du Québec – Société et Culture (FRQSC)*



# Upgrading of infrastructures

- Bathrooms upgraded at the Catherine-Booth Hospital
- Panic button system installed at the Guimont site in Laval
- Energy efficiency project launched throughout the CIUSSS (\$18 M)
- Phase 4 of Pavilion K launched – Upgrading of Legacy Building at the JGH: renovation of care units which will be transformed from rooms with 3-4 beds to double or single rooms, renovation and reorganization of spaces in the pharmacy, medical imaging, endoscopy, ...
- Planning begins with a view to replacing:
  - 2 linear accelerators
  - 1 PET scan room
  - 1 CT room in Emergency
  - 1 Cath Lab
  - 1 stereotaxy room (CRID)

# Information Resources

- Deployment of 275 laptops to clinical staff assigned to home visits for users with loss of autonomy
- Use of electronic health records by physicians at Cavendish FMG
- Access to wireless Internet for all JGH users
- Ongoing projects – Infection control system allowing for real-time analysis and improvement in the management of nosocomial infections
- The Medical Records department and the IR directorate began implementing an organizational patient index (OPI), which provides clinicians and managers with access to the unique identifier of CIUSSS users for communicating information quickly and securely

# Challenges for the CIUSSS

- Providing exceptional patient experience
- Supporting projects in the community
- Mobilizing staff and physicians
- Difficulty finding successors for aging employees and physicians
- Maintaining balanced budget
- Continually seeking opportunities for improvement aimed at our users, residents and clients

# Source of pride for CIUSSS

## Jewish General Hospital ranks N° 1 among Quebec hospitals

NEWSWEEK, April 2019

Rank	Hospital	Score	City	Hospital beds
1	Toronto General Hospital	91.1	Toronto, ON	433
2	North York General Hospital	91.0	Toronto, ON	410
3	Rockyview General Hospital	90.3	Calgary, AB	650
4	Jewish General Hospital	89.3	Montreal, QC	637
5	Sunnybrook Health Sciences Centre	88.3	Toronto, ON	627
6	Montreal General Hospital (McGill University Health Centre)	87.9	Montreal, QC	479
7	Royal Jubilee Hospital (RJH)	87.8	Victoria, BC	500
8	The Royal Victoria Hospital (McGill University Health Centre)	87.8	Montreal, QC	517
9	Vancouver General Hospital (VGH)	87.8	Vancouver, BC	737
10	Foothills Medical Centre	87.5	Calgary, AB	1,062

Source: Newsweek

## Jewish General ranks 4th in Newsweek's Canadian top 10 hospital list

Only one Canadian institution — the Toronto General — managed to earn a spot on Newsweek's global list of top 10 hospitals, placing seventh.

AARON DERFEL, MONTREAL GAZETTE ([HTTPS://MONTREALGAZETTE.COM/AUTHOR/ADERFEL2014](https://montrealgazette.com/author/aderfel2014)) Updated: April 5, 2019



The Jewish General Hospital also ranked as Quebec's top hospital in Newsweek's online list. DAVE SIDAWAY / MONTREAL GAZETTE

# Conclusion

- The CIUSSS's fourth year was once again very **intensive** and productive
- We are increasingly seeing the advantages that being a CIUSSS, rather than independent facilities, has for our users and the organization's performance
- We will maintain our momentum of successful consolidation, integration and improvement projects

# Thank you

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