

Board Info

Information bulletin of the meeting of the Board of Directors

Highlights of the scheduled meeting of the Board of Directors Regular meeting of Thursday, May 5, 2022 (by teleconference)

Report from the Chairman of the Board

Alan Maislin thanked all of the CIUSSS employees for their work.

Report from the President and CEO

Dr. Lawrence Rosenberg presented the COVID-19 situation in the CIUSSS and noted a decrease in the number of patients hospitalized. He announced that surgeries that had been postponed for over a year due to the pandemic would be carried out before the end of June. He also noted that the Jewish General Hospital has one of the shortest wait times in the province. He congratulated the entire surgery team for its tremendous work during the pandemic.

The CIUSSS should be able to return to its pre-pandemic level of activity between now and October. By that time, no patient will have to wait longer than six months for surgery.

Dr. Rosenberg mentioned that the CIUSSS's virtual care program has been receiving positive attention across Canada. He thanked all of the stakeholders who contributed to this program and noted that it is expanding with a view to providing virtual care to a growing number of patients. This program is of great importance because it helps increase the number of beds available in the CIUSSS.

Dr. Rosenberg emphasized that the CIUSSS's mental health program is constantly evolving. He noted that the MSSS has recently recruited several team members from the Mental Health Directorate. Although recent departures within this directorate have undermined the program in the short term, Dr. Rosenberg nonetheless acknowledged the quality of the work done by the existing team and welcomed the arrival of new members.

Concerning the Connected Health Record program, Dr. Rosenberg indicated that an initial update took place last week, and that the program is meeting established deadlines. The first phase of the program will be implemented within eight to nine months, and a status update will be presented to the Board in June or September.

He noted that the *Ministère de l'Économie et de l'Innovation* is interested in the CIUSSS' digital health program, the command centre and the Connected Health Record program. In a letter addressed to Dr. Rosenberg, Minister Fitzgibbon also expressed his support for the Connected Health Record program and indicated that his ministry would like to visit the CIUSSS. The Nova Scotia Health Authority is also interested by this program.

Dr. Rosenberg announced that the strategic planning process will begin in the coming weeks and continue until August. Over the past four weeks, Dr. Rosenberg has met individually with all directors and assistant directors to prepare for this process. There are several challenges that need to be addressed, chief among them the lack of space within the CIUSSS, a problem that is expected to grow in the coming years. The CIUSSS is also awaiting ministerial approval for the renovation of the Richardson Hospital Centre in order to meet the requirements of the next accreditation visit. Another pressing concern is the lack of CHSLD beds within our territory. A third difficulty is a labour shortage

projected for the next five to ten years, for which the CIUSSS will require a specific plan. The final issue is Bill 96.

Tabling of resolutions approved by email

Mr. Maislin tabled the resolutions that had been approved by the members of the Board of Directors by email. The Board acknowledged the resignation of Dr. Carmella Roy as substitute member (physician) of the Revision Committee.

The Board appointed:

- Geneviève Lamy to the position of Associate Director of Professional Services, effective May 8, 2022
- Marie-Ève Lemoine to the position of Local Service Quality and Complaints Commissioner, effective April 24, 2022

Consent Agenda

Dr. Louise Miner, Director of Professional Services, presented the appointments, departures, leaves, changes of status and temporary replacement of specialist physicians and family physicians. She noted that while the MSSS requires all physicians to renew their privileges between now and May 31, 2022, this deadline has been extended due to the pandemic. The list must be approved during the meeting of the Board of Directors on June 15.

Christine Touchette, Director of Frontline Integrated Services, presented a midwife contract offer for approval.

Mr. Maislin thanked Ms. Touchette, who will soon be leaving our CIUSSS, for her immense contribution over the last 10 years.

Beverly Kravitz, Director of Human Resources, Communications, Legal Affairs and Global Security, presented the appointment of Michèle Bleau to the position of Associate Director of Rehabilitation and Multidisciplinary Services. The appointment was approved by the Board. She then presented a new senior management organizational chart, which allows for the addition of a second Director of Capital Assets in the Technical Services Directorate. The new organizational chart was approved.

Gustavo Wendichansky, Chief Operating Officer and Chief Financial Officer at the Lady Davis Institute and Myriam Sahi, legal counsel at the Lady Davis Institute, presented the agreement on the sharing of intellectual property between our CIUSSS and McGill University. Mr. Wendichansky emphasized that McGill University already has an intellectual property policy but has no formal agreement with the CIUSSS, which could create certain difficulties.

Ms. Sahi explained that the agreement will be appended to the affiliation contract with McGill from 2021. Since this agreement is the result of negotiations between the CIUSSS, the *CIUSSS de l'Ouest-de-l'Île-de-Montréal*, the McGill University Health Centre and McGill University, the terms of the agreement will be the same for all four parties.

The objective of this agreement is to clarify the relationship between McGill University and the CIUSSS with respect to the development and commercialization of intellectual property resulting from research projects.

Ms. Sahi stressed that the agreement is limited to research agreements:

- involving research conducted in the CIUSSS facilities
- by researchers affiliated with McGill University who have research privileges in the CIUSSS or at the Jewish General Hospital and McGill University
- in which patentable or otherwise legally protectable intellectual property rights designed, developed or reduced in practice or otherwise carried out by researchers affiliated with McGill University, who

have research privileges at the CIUSSS or at the Jewish General Hospital and McGill University are provided to third parties

- in which the Jewish General Hospital and McGill University participate

She added that the new elements of the agreement include:

- clarification of the allocation of commercialization revenues
- the creation of a mechanism for dealing with inventions, software and works created by researchers affiliated and not affiliated with McGill University
- clarification of the allocation of indirect costs, of the allocation of profits and of McGill's insurance coverage for its researchers and students under this agreement

Mr. Maislin presented the appointment of Dr. François Béique to the position of Chief of the Clinical Department of Anesthesia. The nomination was approved.

Dr. Mark Karanofsky, President of the Council of Physicians, Dentists and Pharmacists, presented the modifications to Schedule 1 of the CPDP's Internal Management By-Law. These changes will allow for the appointment of a department head for a term of less than four years in situations where the head has already served an eight-year term. In addition, a department head who has served a 12-year term will only be able to apply after an unsuccessful call for external candidates. The board adopted the proposed modifications.

Board of Directors' Committees and Bodies

Mr. Morty Yalovsky, President of the Audit Committee, presented the financial results for Period 12, ending on February 26, 2022, as well as the year-end forecast. The operating fund has a deficit of \$3.3M which is offset by a surplus of \$3.3M in the capital fund. These two funds combined provide an overall balance.

These projections remain unchanged since the previous report.

Mr. Yalovsky informed the Board that the MSSS is conducting a pay equity review this year. New collective agreements were also signed. For both of these reasons, pay scales have changed. At this time, due to a lack of information, it is impossible to know whether the amount reserved by the MSSS for pay equity and the adjustments for the new collective agreements will be sufficient. Owing to this situation, which affects all healthcare institutions, an additional "whereas" was added to the resolution to be approved for AS-617 at P12. Mr. Yalovsky went over the revised resolution.

Lucyna Lach, President of the Vigilance and Quality Committee, submitted the modifications made to the Charter of the Vigilance and Quality Committee. These modifications concern the addition of a sixth member to the committee and the increase in the minimum number of committee meetings, from four to eight per year. These changes will allow the Board of Directors to authorize the participation of the Director of Quality, Transformation, Evaluation, Performance and Ethics (DQTEPE) in the meetings and request that she act as the committee's secretary. The Board adopted these modifications.

Dr. David Eidelman, President of the Academic Affairs Committee, submitted the Delegation and Endorsement Agreement regarding the use of the services of the Rehabilitation and Physical Disability Research Ethics Board, which was approved by the Board.

Jean-Philippe Payment, Service Quality and Complaints Commissioner, provided a summary of the activities of the Office of the Service Quality and Complaints Commissioner for 2021–2022. He pointed out that the number of cases that go through the Office of the Commissioner has doubled in the last five years. He also indicated that, in the CIUSSS overall, most complaints concern the care and services provided. Most cases in which assistance is requested have to do with individual rights. He noted that

accessibility represents 84% of the reasons for intervention. Moreover, specific rights represent the majority of the reasons for consultation, namely 69%. Finally, 68% of the cases handled by the Office of the Commissioner include measures such as recommendations.

Information Points

Joanne Côté, Director of the DQTEPE, provided an overview of the directorate's different mandates. The DQTEPE is a cross-functional department that provides support to all departments in four main areas: quality and risk management, transformation, evaluation and performance, and clinical ethics.

The mission of the DQTEPE is to support teams in meeting their objectives as well as the institution's strategic objectives.

The mandate of the quality, risk management and user experience component include:

- risk management
- Vanessa's Law
- follow-up on recommendations
- best practices
- accreditation and certification
- ministerial visits to CHSLDs
- IR–FTR quality assurance in partnership with three clinical directorates (SAPA, RMS, Nursing)
- the policy against abuse of vulnerable persons
- NSQIP (quality indicators related to surgery)
- satisfaction surveys
- PROMS
- volunteers and user experience
- music therapy at the Jewish General Hospital

Ms. Côté noted that the accomplishments of this component include developing a structure to support private seniors' residences, a tool for filing evidence for accreditation visits and improvement of user experience.

The mandate of the transformation component includes:

- integrated practice units
- Lean deployment
- strategic guidance
- project management;
- Phase 4 of Pavilion K (renovation of care units)
- the C4 Command Centre
- virtual care
- transformational change

Ms. Côté specified that the accomplishments of this stream include C4 and virtual care, namely the *COVID@Home* and *Hospital@Home* projects.

The evaluation and performance component includes:

- a clinical and administrative aspect
- integrated performance management
- the Quality of information committee
- costs per care pathway and services
- patient-centered financing, Value Based Health Care (VBHC)
- care variability

Ms. Côté noted that the accomplishments in this area include the redesign of the periodic statistical reports (2021–2022), work done with PowerHealth Solutions (PHS) to develop a tool that will allow to calculate the cost of pathways, incorporate VBHC and analyze care variability, training and coaching, work on patient access financing (PAF), the frontline services dashboard and the virtual unit dashboard.

The mandate of the clinical ethics component includes consultation and the reference framework. Lastly, the quality initiatives include a mechanism and letters of support.

The DQTEPE has provided support to several teams during the pandemic.

Isabelle Caron, Associate Director of Nursing, presented the Magnet Recognition Program and explained the steps that the Nursing Directorate is required to take to obtain this recognition. She said that the shortage of nursing staff around the world has been exacerbated by the pandemic. She pointed out that during the pandemic, nurses had to work particularly hard under difficult conditions, which led to a large number of resignations within the CIUSSS. With the labour shortage creating competition among healthcare institutions, the Nursing Department has initiated the process with the Magnet Recognition Program. She added that, in Canada, the Mount Sinai Hospital in Toronto is currently the only hospital that has achieved this recognition.

The strict standards of excellence that must be met in order to obtain this recognition are reflected in a healthy work environment designed to attract and retain employees. Ms. Caron stated that the Nursing Directorate's goal in obtaining this recognition, through a process that will take place from 2022 to 2025, is to secure this status for the entire CIUSSS. Such an achievement would reduce the use of independent labour agencies, increase the retention rate and improve the quality of care. She specified that the cost of undergoing this process is funded by the Jewish General Hospital Foundation and is well worth the investment, as this recognition will have a positive impact on the CIUSSS, and ultimately on our users.

Dr. Mark Karanofsky provided an overview of the CPDP's activities. The CPDP has streamlined its approach to approving and reviewing group prescriptions to ensure timely and efficient participation. In addition, the CPDP has been actively involved in the Primary Care Access Point (GAP) to find ways for non-registered patients to access care without having to go to the ER.

He also noted that the CPDP has conducted a review of the selection process for department heads. In addition, the CPDP has asked department heads to update their respective by-laws, which includes the criteria for selecting new hires. Dr. Karanofsky mentioned that the CPDP adopted a declaration for the CIUSSS to support pharmacists, physicians and dentists with disabilities to include reasonable accommodations to allow them to practice within the institutions.

He added that the CPDP has helped the Commissioner of Complaints and Quality of Services, as well as the Revision Committee, to select and train medical examiners. Finally, having observed a higher level of stress among its members during the pandemic, the CPDP helped implement a peer support program to assist medical staff.

Erin Cook, Associate Director of Quality, Evaluation, Performance and Ethics, introduced Judith Tiao, Coordinator of Quality, Risk Management and User Experience as well as Marko Obradović, Head of Volunteer Services, who are both involved in the volunteer program.

While the pandemic has made volunteer recruitment more difficult, it has also provided an opportunity to reinvent the volunteer program. She emphasized that the vacancy rate is currently 45%, but that the majority of these positions will be filled by the end of the week. She also specified that the program is

based on four components, including social prescribing, companions, patient partners and care partners.

Ms. Cook explained that the social prescribing component aims to bridge the gap between clinical and social care by referring users to local, non-clinical services chosen in accordance with their interests and goals. This component also allows consumers to improve their health by developing new skills through participation in meaningful activities, and to become more connected to their community.

The companion's component, meanwhile, aims to support the quality of life of the residents through kindness and comfort. Volunteers are also involved in improving the quality of life of the residents. Finally, volunteers are trained to ensure their own safety as well as that of the residents.

The goal of the patient partner component is to further develop the acute care volunteer programs, in keeping with best practices.

The care partners component represents a patient-centred approach, through which the patient is considered a partner and a member of the healthcare team.

Ms. Cook concluded that the volunteer program's strategic priorities are focused on skill building, volunteer building, volunteer appreciation as well as promotion and communication.

THE BOARD OF DIRECTORS OF CIUSSS WEST-CENTRAL MONTREAL

A calendar of meetings of the Board of Directors is available at www.ciusss-centreouestmtl.gouv.qc.ca/en/home/.

Click on CIUSSS West-Central Montreal | Board of Directors

Board-Info is produced by the Department of Communications and Media Relations for the Office of the President and CEO. All of the

information in this bulletin has received official approval. The next meeting of the Board of Directors will be held on:

**Thursday, June 15, 2022, at 7:30 a.m.
by videoconference**

For more information about the Board of Directors, please visit ciussswestcentral.ca/about-us/board-of-directors/