

# Chez nous

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## Meet the new MCH ambassador

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Hôpital de Montréal  
pour enfants  
Centre universitaire  
de santé McGill



Montreal Children's  
Hospital  
McGill University  
Health Centre



# Strategic objectives: where do we stand?

On September 15, the Montreal Children's Hospital (MCH) held its third town hall of 2023. These events are an opportunity to present the hospital's strategic orientations, as well as a chance to exchange ideas between the different professionals that make up our great organization.

One of our priority objectives is the recruitment, retention and professional development of our workforce. In this respect, we are pleased to note that our current statistics show an improvement in our hiring and retention rates. We continue to implement various strategies to strengthen our teams, such as the creation of the MCH ambassador role, held by Atif Abbas.

Atif's work aims to increase the visibility of our organization within academic institutions in order to encourage recruitment. You can learn more about this new position in the feature article on page 4 of this issue.

We also held our second job fair on September 28. It was a resounding success, with over 200 visitors. We would like to thank all the professionals and managers who took part, and to acknowledge the excellent work done by Susan McIlvinney, who organized the event.

Recognition of each person's contribution, peer support and mutual assistance are pillars of the value system intrinsic to the MCH. With this in

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mind, we invite you to join us at the next Schwartz Care Rounds. These meetings are intended to be a time of exchange, where all MCH staff (clinical and non-clinical) and the Women's Health Mission staff can get together and share their experience as healthcare workers on specific themes. Unlike other forums, the goal is to explore the emotional and social aspects of their work.

The quality of our care and the safety of our patients remain another key strategic priority. The McGill University Health Centre and, by extension, the MCH officially received its accreditation following a visit from Accreditation Canada last January. This is an important recognition which deserves to be celebrated and we

congratulate you on your commitment to providing safe, high-quality healthcare to our patients. We'd like to take this opportunity to thank you in advance for your efforts in preparing for our next accreditation visit in November 2024.

Finally, the MCH recently launched brand new Facebook, Instagram, X (formerly Twitter) and LinkedIn pages. We invite you to follow us and share our content to make your exceptional accomplishments shine even brighter.

We thank you for your excellent work and the extraordinary care you provide to sick children and their families!

*Cindy McCartney*

Associate Director of Nursing  
Montreal Children's Hospital and  
Women's Health Mission of the MUHC

*Frédéric De Civita*

Associate Director of Multidisciplinary  
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## Ambassador bridges the gap for new employees

First-time initiative works to support recruitment and retention

By Maureen McCarthy

**A**tif Abbas has held several different roles in his 10-year nursing career at the McGill University Health Centre (MUHC), from working in the pediatric Emergency Department and Pediatric Intensive Care Unit to his most recent turn as a nursing resource manager. He recently added some new responsibilities to his roster, ones that take on as much importance outside the Montreal Children's Hospital (MCH) as inside: Atif is the new MCH ambassador.

[continued >](#)

► Above: MCH ambassador Atif Abbas leads a recent session with nursing students starting rotation at the MCH.

As a representative of the hospital, Atif is building relationships with nursing schools in and around Montreal including five universities, 11 colleges and five private nursing schools. He assumed his new ambassador responsibilities in May of this year and hit the ground running in August as many nurses started clinical rotations/training at the MCH.

The ambassador program is a new initiative, and its goal is to increase the MCH's visibility among students and to support new recruits. Atif is also a professor of nursing at Dawson College which has given him the opportunity to hear what students have to say about their biggest challenges concerning employers and how best to support these new employees coming into our workforce.

"In the past, we've been very good at supporting staff when they come into the hospital," says Atif, "but until now we haven't really focused on how we help smooth the transition from the schools into our hospitals."

### A TAILORED APPROACH

Through the nursing schools' coordinators and instructors, every clinical group coming in to the MCH now has the opportunity to meet with Atif on the first day of rotations. "Our meetings are very much a 'back and forth', very open and no conversation is ever the same," he mentions.

Working closely with his Human Resources colleagues Rita Diorio and Catherine Robineau, and the Clinical Placement



► Atif Abbas

coordinator at the MUHC, Antonietta Cocciolo, Atif is ensuring that new recruits get answers to their questions and concerns, and to date, he has met with more than 150 students and fielded several hundred emails. "If I don't have the answer, I connect them to people who do."

Atif also adapts his presentations to the needs and interests of the students he's meeting. "If it's a group who are just starting out in their studies, I talk about the amazing work we do at the MCH, the technology advancements, new research findings, etc.," he says.

"If they're in third year and ready to come into the workforce, I might focus on which units they're interested in working on and how they can achieve this goal. I also detail what we're doing to support staff mental health, continu-

ing education, how we schedule shifts and many other services we provide that they may not have known about otherwise."

### A PROJECT DESTINED TO GROW

This new ambassador program at the MCH was implemented after a successful trial project on the MUHC adult side. While Atif is currently focused on nursing students, ideas under consideration include expanding the ambassador service by creating a committee with representatives from each inpatient unit and multidisciplinary team to act as a liaison with incoming students.

In the future, Atif wants to ensure that he reaches every student enrolled at the nursing schools in the Montreal region. "When I talk to them, some are discovering roles in nursing which they didn't know existed," he says.

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► Atif tailors his presentations to the needs and interests of the students he's meeting.

In the upcoming months, Atif plans to meet with each head nurse at the MCH to find out about specific unit initiatives that help promote recruitment and retention. "Collectively, it's incredible what we're doing at the MCH," he insists. "I had the opportunity to appreciate this first-hand as a nursing resource manager and I'd like to see everyone sharing these great initiatives."

For Atif, the ambassador's role is a big one, but it's also a privilege, one which makes him honoured to speak for the MCH and its community. "I cannot be more proud to represent the diverse and patient-centered, driven team at the MCH — it is truly humbling."

The work he's accomplished since starting as ambassador is already paying off and Atif thinks that might be largely due to students seeing the possibilities for careers at the MCH and the level of support they'll receive. Human Resources saw the number of applicants triple after a successful job fair held at the MCH at the end of September compared to a previous job fair in March 2023.

In the decade since he started working at the MUHC, Atif has already seen a transformation in what students are searching for in their employers and place of employment. "Priorities have changed," he says.

"In the past, the idea was always to get a job and hold on to it until retirement

but now, new employees are searching for a work-life balance, an employer that supports the employee's physical and mental well-being and most of all provides an environment that promotes their personal growth. With all the career possibilities and support systems in place at the MCH, we can offer new nurses and many other healthcare professionals different opportunities. Thus, my goal is to provide the information about what we have done at the MCH and what we continue to do, in an effort to increase our recruitment and provide a safe environment to all new employees."

There's no question that Atif is off to a very promising start to achieving that goal. ✨



# Better support for bereaved parents

By Christine Bouthillier

**L**osing a child is undoubtedly one of the most painful moments a parent can experience. But healthcare staff can help ease the navigation of that turbulent time and provide comfort. To improve the support given to families during this tragic event, the Montreal Children's Hospital (MCH) introduced a new bereavement follow-up program last May, the first of its kind in Quebec. [continued >](#)

► Above: The bereavement follow-up program's legacy building working group. From l. to r.: Sabrina Drudi, Child Life professional coordinator, Caroline Bélanger, psychologist, Christelle Jacquet, music therapist, Matthew Park, bereavement coordinator, Doreen Shalla, Spiritual Care professional coordinator, and Jill Gasco, Child Life specialist. Missing from the photo: Viviane Fontes de Souza, registered nurse, PACT.

The project is overseen by the MCH Pediatric Advanced Care Team (PACT)/ Palliative Care. As soon as he was appointed program coordinator, social worker Matthew Park carried out an assessment of the services offered throughout the hospital: he found that there was no standardized approach to responding to the death of a child at the MCH.

“Each unit had its own process. Some areas of the hospital, where deaths are less frequent, don’t have their dedicated psychosocial team. We also realized that there was no specific mechanism triggering follow-up with the family. And yet, the support provided

to them should be timely and charted,” he explains.

### A UNIFIED RESPONSE

Matthew’s main objective is to develop a standardized service for families who have lost a child. The MCH is the first hospital in Quebec to implement a unified and dedicated program across all its divisions.

The Pediatric Intensive Care Unit, for example, offers memory making opportunities, notably a memory box including a recording of the patient’s heartbeat, their handprints and two stuffed animals, one that stays with the child and one that the parents and siblings keep.

From now on, all families will be offered such a memory box.

Parents and siblings are now accompanied for a year after the child’s death by a staff member who has already worked with the family (social worker, spiritual care professional, etc.). Matthew can also provide follow-ups as needed, for example with families who have arrived from another hospital and have not spent much time at the MCH.

“I coordinate an initial meeting with the healthcare staff who knew the patient and we decide who will be the lead professional who will take care of the [continued >](#)



► A memory box including a recording of the patient’s heartbeat, their handprints and two stuffed animals, one that stays with the child and one that the parents and siblings keep, will be offered to all families.



family. This person will meet the family (in person, by telehealth or by phone) at regular intervals throughout the year, as well as on important dates, such as the child's birthday," he says.

A card will also be sent to acknowledge the one-year anniversary of the child's death. Families who are already involved with the Psychology Department at the time of the death are offered six months of bereavement therapy by that service, then Matthew takes over for the rest of the year.

"When a child dies, however, some families don't want any contact. So I ask them if I can call them back later to see if their needs are different and I tell them how to reach me in case they change their minds. We adapt to what they want," he stresses.

### **REACHING EVERY FAMILY**

To ensure that all families receive these services, Matthew has developed a new standardized form for all units to complete when a child passes away, to request support for loved ones.

"Everyone is busy, there are always emergencies... It could be easy to overlook the people who have left the hospital, even though they are just as important. With the form, no one will fall through the cracks," he adds.

### **LOOKING TO THE FUTURE**

The program's next steps include the creation of a database in which each death will be entered, reminding the professional in charge of bereavement follow-up when to contact the family for the next appointment.



► Matthew Park, bereavement coordinator at the MCH.

A retrospective analysis of deaths between 2020 and 2022 will also be carried out to see what has changed since the program came into effect. Debriefing sessions will be offered to staff to recognize the impact of a patient's death and allow them to express how they feel.

Matthew is also looking to develop partnerships with external resources sometimes less accustomed to pediatric

deaths, such as CLSCs, to support them when working with families. As early as 2024, he hopes to establish support groups at the hospital for parents and siblings, with an integrated quality improvement process to provide an opportunity to learn more about aspects of the program that could be refined.

The coordinator's services are presently available four days a week. The Montreal Children's Hospital Foundation

**continued >**

is looking to raise funds to extend this role to five days and add a part-time psychologist to the team.

"I'm very grateful to have the opportunity to do this work with the families. It's very sad, but also very important and needed. Health professionals, extended family members and friends are sometimes uncomfortable when faced with the death of a child. They

don't know what to say, so they often don't say anything. But what I say is not as important as how I say it and how I can be there with the family and for them. They will remember that I supported them," he concludes.

Thanks to the Montreal Children's Hospital Foundation and its donors for generously supporting this new program. ✨

- There are between 80 and 90 deaths at the MCH each year.
- More deaths occur in the Neonatal Intensive Care Unit than in other units (between 30 and 35 per year).

## Taking hold of a helping hand

"There's nothing that can give you back your child, but rejecting the help offered slows down your healing process. At your own pace and according to your needs/feelings, choosing the appropriate services (psychologist, social worker or other) is essential so that you can talk about it, vent, share. The death of a child is still a rare, taboo and delicate situation, and being able to discuss it with professionals really helps."

This is the message that Geneviève and Steve, parents of Sam\*, who died at birth, want to pass on to families who are going through the same ordeal as they did.

Perfectly healthy during his mother's pregnancy, Sam was born at full term on June 22. His heart stopped beating during the birthing process and he was unresponsive. After being resuscitated, he was transferred from the hospital where he was born to the MCH Neonatal Intensive Care Unit, where his condition continued to deteriorate. The next day, his parents had to make the difficult decision to discontinue his care.

"The doctor advised us to ask for an autopsy, something we wouldn't have thought of at the time," explain Geneviève and Steve.

The autopsy eventually revealed that Sam had been deprived of oxygen due to an umbilical cord problem.

### Essential support

The healthcare team presented the family with a memory box containing their child's personal effects, and foot and hand prints. The team also suggested a follow-up with a social worker.

"Matthew contacted us to meet with us. He put us in touch with the doctor who had looked after Sam when he arrived, so that we could ask questions and find out more about the autopsy results. The social worker also put us in contact with our local CLSC. Matthew told us about community organizations, offered to take charge of certain elements of the funeral procedures, guided us in obtaining copies of the medical file and followed up according to our needs," say the parents.

"It made all the difference. While we were in the midst of the tragedy, in a state of shock, feeling overwhelmed, his support and attentiveness enabled us to move forward, because we felt powerless, devastated and we didn't yet realize the extent of the situation. Also, the fact that we were contacted, that someone came to us and not the other way round, meant we didn't have to look for help ourselves at a time when we think we don't need help or don't know where to find it, especially as we didn't have the energy to take the necessary steps ourselves," they add.

Both parents remind staff that every detail of their approach counts. It's important to explain what's going on, to take the time to answer questions, to care for parents as much as for children, to empathize and understand what they're going through.

"Thank you for your little gestures, for giving our baby his own identity, for setting up the support process with an attentive, caring and respectful person. We are very grateful. The interactions with the medical team and the social worker certainly had a positive influence on our grief."

*\*In sharing their account of these difficult times, the family wished to remain anonymous. The names have been changed.*



# Coming of age

## Easing the transition to adult care

By Roxane Gaudreault

**M**edical follow-ups are an important part of the routine for patients with chronic illnesses or requiring long-term care. Accustomed to their care team and pediatric approach, these young people sometimes find it difficult to make the transition to adult care once they turn 18. To help them, the Montreal Children's Hospital (MCH) has just created a team entirely dedicated to this important time in their lives.

At the MCH, many patients are seen over several months or even years, whether for specific treatments, follow-up visits or multiple surgical procedures. These patients often become well-known to the care teams.

When they turn 18, they are transferred to adult care and undergo a significant period of adaptation. For clinical teams, accompanying patients through this transition can be challenging since [continued >](#)

► Above: Anna Paliotti, Child Life specialist, and Mai Christine Nguyen, occupational therapist, are part of the Pediatric-Adult Transition Hub.



► Dr. Lorraine Bell



► Jordana Saada

practices, resources and levels of communication between pediatric and adult care vary from one division to another.

To better support clinical staff in this work, the MCH has set up a special team, the Pediatric-Adult Transition Hub (PATH), consisting of Dr. Lorraine Bell, nephrologist specialized in transition, Mai Christine Nguyen, occupational therapist, and Anna Paliotti, Child Life specialist.

The team led by Jordana Saada, senior advisor, Partnership and Patient Support Programs, will be focusing on three specific goals in the coming months:

1. Support clinical professionals in establishing protocols to accompany patients in their transition to adult care.
2. Create tools for parents to inform them about the measures in place to help them. Parents often have to learn to cope with the reality of an adult child who is not in a situation of autonomy or to prepare themselves to support their child through the changes to come if they are autonomous.
3. Build resources to help young people develop the skills needed to navigate the healthcare system, such as understanding their medical records and history, knowing their rights and how to defend themselves, etc.

To support the clinical teams, PATH organizes meetings with the various departments and divisions. Following an assessment of existing practices and the specifics of the clinical specialty, a precise protocol would be drawn up in partnership with adult and pediatric care teams to coordinate practices, and facilitate collaboration and the transfer of information.

### SELF-ADVOCACY WORKSHOPS

The projects PATH would like to implement are many. First, a series of workshops that will enable young patients to become more independent will be launched.

From the age of 14, teens could attend sessions that help them better communicate their needs and symptoms to healthcare professionals on the adult side.

The workshops also aim to ensure that these young people are aware of their rights and give them the confidence to demand that their rights are always taken into account.

“The idea is to equip young people enough to know that it’s ok to question the staff who give them care, that it’s important to understand and that sometimes you have to make waves when you don’t feel respected,” says Jordana. The workshops are even entitled “It’s time to make waves!”.

### SUPPORT JUST A FEW CLICKS AWAY

Resources and tools created by PATH will also be available on the web to help patients and their families, as well as clinical teams. These will be developed by incorporating the different practices and taking into account improvements that need to be made to current protocols.

Ultimately, these tools should help the various teams to make the transition process as smooth as possible for their patients.

To learn more, please contact [path-etap@muhc.mcgill.ca](mailto:path-etap@muhc.mcgill.ca). ✨

# Activities to warm hearts

By Christine Bouthillier

Autumn is well underway and to brighten up the grey days, the Quality of Life at Work Committee and Child Life Services organized several colourful events at the Montreal Children's Hospital (MCH), which ensured that patients and staff alike were all smiles!

*Thanks to the Montreal Children's Hospital Foundation for its support of the Committee.*

In August, MCH staff enjoyed the vibrant debut of the Carnival on the outdoor terrace of the P.K. Subban atrium! Games, bouncy castles and delicious treats made it an unforgettable day.



Arts and crafts, face painting, a tattoo table, nail bar, entertainment by Stretch & L'il John, a photobooth... and great food: the Child Life Services family picnic on September 26 had something for everyone!



During a beautiful afternoon in September, MCH employees had the opportunity to enjoy waffles with all the trimmings — a sweet coffee break to end the work day!



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