

Chez nous

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Hôpital de Montréal
pour enfants
Centre universitaire
de santé McGill



Montreal Children's
Hospital
McGill University
Health Centre

Dear Frédéric,

As you embark on your new journey as the Associate Director of Planning and Organizational Development at the McGill University Health Centre (MUHC), we want to take a moment to express our sincere gratitude and best wishes.



► Frédéric De Civita

Your dedication and leadership over the past 12 years at the Montreal Children's Hospital (MCH) have been truly exemplary. Your unwavering commitment to improving the quality of care, ensuring patient safety and implementing innovative approaches has made a profound impact on our teams and the families we serve.

Being entrusted with this new role is a testament to your exceptional skills and the deep respect you have earned throughout the MUHC community. While we will certainly miss your presence and guidance, we are excited to see the incredible contributions you will undoubtedly make in your new position.

Thank you for your steadfast support, your mentorship and the positive energy you brought to our workplace. Your legacy at the MCH will continue to inspire us to leverage data-driven decision-making and embrace continuous improvement methods for optimizing our processes and how we work.

On behalf of the entire MCH community, we wish you all the best in your new role and your future endeavours. We look forward to collaborating with you in this new chapter.

Warmest regards,

Cindy McCartney

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

Dr. Tanya Di Genova

*Associate Director of Professional Services
Montreal Children's Hospital*



Quebec's first Colorectal Centre of Excellence opens its doors

By Christine Bouthillier

The Montreal Children's Hospital (MCH) of the McGill University Health Centre (MUHC) announced in October the opening of its new Colorectal Centre of Excellence, the first in Quebec to offer complex digestive and pelvic reconstructive surgeries.

Every year in Canada, some 150 children are born with a life-altering condition that prevents them from doing what most take for granted: empty our bowels. These newborns require urgent surgery to address their condition.

Approximately 2,000 Canadians under the age of 18 currently live with Hirschsprung's disease or anorectal malformations. For many of these young patients, the challenges extend far beyond their initial surgery. As they grow, they often face incontinence, which profoundly affects their social integration, mental health and sense of dignity. This ongoing struggle impacts every

aspect of their lives, from school and friendships to self-esteem and overall well-being.

For these children, simple joys like field trips or sleepovers become complex challenges, fraught with potential embarrassment. Parents watch helplessly as their children withdraw from activities, their confidence eroding.

While medication and pelvic physiotherapy benefit many patients, those with severe conditions often face persistent challenges. In the United States, specialized centres have emerged as a solution, offering complex reconstructive

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► Above: The team from the Colorectal Centre of Excellence at the press conference on October 1 announcing the opening of the centre.

surgeries and comprehensive bowel management programs. These centres feature multidisciplinary teams comprising colorectal surgeons, urologists, gynecologists, gastroenterologists and specialized nurses to provide cutting-edge treatments for children with the most complex problems. Until recently, Quebec lacked such a specialized facility. To address this critical need, the MCH opened its Colorectal Centre of Excellence (COCOÉ).

“While colorectal disorders affect just as many children as well-known conditions like cystic fibrosis, they are rarely discussed due to the stigma surrounding bowel issues. These conditions profoundly impact a child’s dignity and quality of life, but many families suffer in silence. We’re breaking that silence. I was thrilled to announce the opening of a specialized centre that will transform the lives of these brave children and their families,” says Dr. Hussein Wissanji, pediatric colorectal and general surgeon at the Montreal Children’s Hospital and founder of the project.

“The MUHC and its community comprise people who understand that innovations, such as the Colorectal Centre of Excellence of the Montreal Children’s Hospital, are vital to the goal of providing the best care and services to patients and their families,” adds MUHC President and Executive Director Dr. Lucie Opatrny. “It is an honour and a privilege to support their ideas and dedication, as well as to recognize our donors’ generosity.”



► Dr. Hussein Wissanji

The MCH’s Colorectal Centre of Excellence will set new standards for pediatric colorectal care in Quebec. Its mission is to:

- Offer outstanding, compassionate clinical care using a comprehensive, interdisciplinary approach;
- Investigate and improve outcomes for children with colorectal diseases, focusing on patient and family experiences;
- Provide medical education for patients, families and communities, and provide training for healthcare practitioners and professional development programs.

The Colorectal Centre of Excellence joins the many other specialized surgical clinics offered by the MCH’s Pediatric General Surgery Division.

CONVINCING RESULTS

Nationwide Children’s Hospital in the United States studied the impact of

opening a colorectal care centre and noted several benefits:

- 66 per cent reduction in the number of surgeries patients undergo by combining multiple interventions by different surgeons during the same procedure;
- 20 per cent reduction in length of hospital stays by standardizing care and decreasing complications;
- 50 per cent reduction in post-surgical hospital visits (including emergency visits) thanks to improved care coordination.

“When we learned about the physical and mental distress endured by children and teens with untreated or under-treated colorectal disorders, The Montreal Children’s Hospital Foundation knew it had to move the Colorectal Centre of Excellence from idea to reality. Like many innovative projects launched by the hospital, the centre is funded solely by The Children’s Foundation,”

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says Renée Vézina, President of The Montreal Children's Hospital Foundation.

"I sincerely thank the numerous donors supporting this important project,

particularly lead donors — Opération Enfant Soleil and the R. Howard Webster Foundation — who have helped launch this project. We are confident more donors and partners will step up to

help us reach our goal and, more importantly, provide life-changing care to the children who need it most. Thank you for helping us find *Unexpected Ways to Heal.*" ❁

THE TANGIBLE EFFECTS OF A COLORECTAL CENTRE OF EXCELLENCE

Kelly noticed early signs of a digestive issue in her son, George, as a preschooler. He wasn't eating enough, had a distended stomach and experienced intense, near-constant pain.

For Kelly, her child's suffering was heart-wrenching: "He was always in pain, always rocking on the floor with high fever, screaming. The pain was so brutal he would vomit."

Now turning 16, George recalls how the disorder left him bedridden: "I missed a ton of school," he says. "And I wasn't sleeping or eating enough, which didn't help my growth."

At 10, he appeared much younger and Kelly noted: "He was never hungry and when he wanted to eat, it would just end in pain. It was very difficult."

Kelly and George became regulars at the Montreal

Children's Hospital (MCH), where doctors could see that as he got older, the digestive disorder would put increasing stress on his body. Yet, a precise diagnosis remained elusive.

A GLIMPSE OF HOPE

Dr. Hussein Wissanji, pediatric surgeon at the MCH, sought specialized help in the U.S., taking George to the Children's National Hospital in Washington, D.C. There, colorectal specialists performed a colon resection and complex rectal reconstructive surgery in November 2022. Dr. Wissanji observed the operation and set out to bring the same expertise to the MCH.

The surgery had an immediate effect on George: his digestive problems, constipation and pain vanished. For the first time since birth, the teen embraced an everyday life, saying, "I eat everything now." "Well,



► Dr. Hussein Wissanji and George Stavriadis

poutine anyway," his mom adds, joking.

Kelly believes that a specialized colorectal centre in Montreal could have led to an earlier diagnosis and prevented George from becoming so ill. His prolonged digestive issues have compromised his kidneys, potentially requiring dialysis. "We're not out of the woods yet," Kelly says, recalling her shock at learning no pediatric hospital in Quebec had a healthcare team special-

ized in complex digestive and pelvic reconstructive surgeries.

Thanks to generous donors, the MCH is now home to a new Colorectal Centre of Excellence, the first in Quebec to offer such surgeries.

"This clinic is such a breakthrough for us," Kelly adds, feeling empowered after feeling helpless. "It's fantastic! I really do believe this is going to make a big change in many lives."



iMatter: taking the pulse of workplace engagement

By Caroline Fabre

In an ever-evolving healthcare environment, ensuring that employees feel valued and motivated is essential to delivering the best possible care. At the Montreal Children's Hospital (MCH), the leadership team has taken a proactive step to continue to prioritize the well-being and satisfaction of its staff with the launch of the iMatter survey on November 25. Designed to measure engagement and identify areas for improvement, the iMatter tool is set to play a key role in fostering a more collaborative and supportive work environment.

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► Above: Saskia Weber, Dr. Tanya Di Genova and Cindy McCartney are part of the team behind iMatter.

THE GENESIS OF iMATTER

In 2019, the MCH executive team decided to put new measures in place to further enhance staff well-being, a key factor in the future success of the hospital. “Giving priority to our employees and physicians is the way forward, but before we could improve engagement, we needed to measure it,” explains Dr. Tanya Di Genova, Associate Director of Professional Services at the MCH.

A motivated team including Dr. Stephen Liben, Dr. Samara Zavalkoff, Maia Aziz, Alexandra Black, Nadia Eldaoud, Mélanie Langelier, Alison Jung, and led by project manager Saskia Weber, spent one year researching and benchmarking, resulting in the decision to adopt iMatter — a tool originally developed by the National Health Service in the United Kingdom.

What made iMatter stand out was its comprehensive approach: “We wanted an all-encompassing questionnaire to measure the pulse of what employees and physicians at the hospital are thinking every few years,” notes Cindy McCartney, Associate Director of Nursing at the MCH. In addition to measuring engagement, iMatter also includes a

question about burnout, making it a powerful tool for identifying areas of concern.

A CONTINUOUS IMPROVEMENT JOURNEY

The survey is not a one-time solution; it is part of a long-term strategy to improve workplace culture at the MCH. “The objective isn’t to fix everything overnight. It’s about gradual improvement over time. This tool will help us measure where we are and identify team challenges we can address,” emphasizes Dr. Di Genova.

The goal is to use the survey results to inform action plans at both team and organizational levels. “Each team will receive their own results and then managers will sit down with the staff to identify what’s working and where improvements can be made,” explains Saskia. This process is designed to be collaborative, with senior leaders, managers and team members working together to create solutions.

PILOT PROJECT IN MEDICAL IMAGING

The iMatter survey was first tested at the MCH in October 2023, in the Medical Imaging Department. This

department, with its various subdivisions like magnetic resonance imaging (MRI) and ultrasound, was an ideal candidate for the pilot due to its multifaceted structure, which allowed for trying the survey in different contexts.

The initial reaction from staff was positive overall, though there were some questions about the survey’s purpose. The participation rate was impressive, with about 80 per cent of staff responding. “There was concern about how the survey would help, but the idea was that if we don’t know the situation, we can’t improve on it,” explains Carole Proulx, Chief Technologist of the Medical Imaging Department.

Once the results were in, meetings were held in each group — MRI, general radiography and administrative staff — to discuss the findings and collectively devise action plans.

“The goal wasn’t just for managers to make changes but to have a collective team response,” says Carole.

The pilot project not only provided valuable insights into the well-being [continued >](#)

CLARIFICATION

In the Summer 2024 issue of *Chez nous*, it was written that Meriem Ferkli was a community organizer, Interpreters and Cultural Diversity. It should have read Cultural Navigator (Community Organizer), Multicultural Clinic. Our apologies.



► iMatter was first tested as a pilot project in the Medical Imaging Department.

of the Medical Imaging team but also paved the way for improvements that were both practical and meaningful. As Carole points out, “The technologists felt heard,” which meets the broader goal of iMatter: fostering a culture of open communication and collaboration.

ENSURING CONFIDENTIALITY AND ENCOURAGING HONEST FEEDBACK

One of the key concerns with any survey of this type is ensuring that staff feel comfortable providing honest feedback. To address this, iMatter was designed as an anonymous tool. “We’re hoping that the confidentiality of the survey will

allow people to open up and share their honest thoughts,” says Saskia.

Additionally, only teams with five or more responses will receive a team-specific report. If fewer than five staff members answer the survey, the results will only be reported at the directorate level to protect individual anonymity. This approach encourages participation without concern of being personally identified, fostering an environment where feedback can be shared freely.

The iMatter survey represents just one piece of a larger effort to create

lasting cultural change at the MCH. “We’re hoping that this tool fosters transparency and helps us enhance the hospital’s work culture. The expectation is that everyone will be open and honest, and that we can work together to make things better,” says Dr. Di Genova.

Ultimately, the leadership’s goal is to support a work environment where respect and teamwork thrive. “We want everyone to come to work feeling happy and safe, and leave work at the end of the day feeling the same way,” concludes Cindy. ❁



Experience and expertise help children with musculoskeletal conditions

By Maureen McCarthy

Anyone who has never actually needed the services of an orthopedic surgeon might be surprised to learn that this specialty area is about so much more than broken bones. The team of orthopedic surgeons at the Montreal Children's Hospital (MCH) illustrates that point perfectly through their collective expertise in treating a wide range of conditions. continued >

► Above: Heïdi Laporte had to undergo emergency surgery at the Montreal Children's Hospital after a tobogganing accident.



► Heidi fully recovered after her surgery and continues to enjoy a number of different sports.

Numbering eight orthopedic surgeons, the team has expertise in trauma and between them, share a range of subspecialties covering everything from the treatment of complex spine problems, limb lengthening and deformity correction, to sports medicine and the care of neuromuscular deformities and adolescent hip diseases. They see patients at both the MCH and the Shriners Hospitals for Children — Canada located next door to the MCH.

Dr. Mitchell Bernstein explains that he and his colleagues — Drs. Jean Ouellet, Thierry Benaroch, Justin Drager, Reggie Hamdy, Chantal Janelle, Thierry Pauyo and Neil Saran — are always ready and eager to serve children and teens with musculoskeletal issues. “We can

handle everything from minor sprains to very complex cases requiring ultra-specialized care,” he says.

Many children under the team’s care have long histories with the division, especially those with lifelong conditions. But there are also children who present to the MCH Emergency with traumatic injuries that often require immediate care. Every week the team deals with multiple trauma cases and they also see a large number of outpatients in their clinics.

Dr. Bernstein says the growing skill set of the Orthopedic Surgery team has meant that more and more children experiencing a traumatic injury can receive complete care at the MCH. They

have subspecialty training in orthopedic trauma that allows pediatric patients to be treated expertly and efficiently at the MCH. They also work closely with the hospital’s multidisciplinary Trauma team to optimize outcomes and ensure all aspects of a patient’s care are managed.

EXPERT CARE FOR AN URGENT CASE

Heidi Laporte is one of the patients who initially presented at the MCH Emergency. Almost four years ago, when Heidi was 11 years old, she went out tobogganing with her cousins on a winter Saturday. On one of the runs, Heidi hit a tree which, at first, didn’t seem overly concerning.

“I really thought she had just hurt her leg,” says her dad, Eugene.

They ended up going to the emergency at their local hospital, but the wait was very long, due in part to the ongoing COVID-19 pandemic. Eugene remembers that he and Heidi were talking and laughing, and he figured she was probably fine. It was late in the evening and, still waiting to be seen, Eugene decided they should go home, with a promise to his wife Lise that they would take Heidi to a clinic the next morning.

The next day, things turned out much differently than they expected. The doctor who saw Heidi at the clinic sent her immediately for an x-ray. The images showed a break at the top of Heidi’s

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femur, and the clinic staff said it was urgent that they get to a pediatric hospital.

“They quickly made us realize that we had to go *now*,” says Eugene. The family immediately went to the MCH and by nighttime, Heidi was in surgery.

Dr. Bernstein explains the urgency of this type of surgery. “Heidi had a femoral neck fracture which can only really be treated at a hospital like the MCH,” he says. “It’s something that needs to be done urgently and properly. And when it is, it’s non-eventful.”

When it’s not done properly, however, the patient will have irreversible, life-long problems with their hip. The bone dies, arthritis sets in and a 12-year-old child can end up having the hip of an 80-year-old.

Eugene says Heidi received great care at the MCH and she healed more quickly than they expected. She even wrote about the day of her accident for a school project. The family is very active and Heidi is doing plenty of sports like skiing, hiking and cycling.



► Dr. Mitchell Bernstein

“You wouldn’t know this happened to her,” says Eugene. “It was obviously very serious, but in the end, everything went so well.”

A PROVINCIALY DESIGNATED TRAUMA CENTRE

Several years ago, then 15-year-old Simon* sustained a complex pelvic fracture and other serious injuries after falling from a height of three stories. Because of his broken pelvis, he had to be taken to a provincially designated Tertiary Care Level Trauma Centre, of which the MCH is one.

“This type of injury requires both orthopedic and trauma expertise, which we provide at the MCH,” explains Dr. Bernstein. “So a young patient can have their entire care here and work with our physiotherapists, social workers, etc. without having to switch hospitals.”

Simon’s stay at the MCH was long but he credits the many professionals at the MCH who helped him completely recover from his injuries. “It’s incredible that the staff did what they did to get me 100 per cent functional again,” he says.

READY AND WAITING

Dr. Bernstein emphasizes that a major benefit to patients coming to the MCH is the size of the orthopedic surgery team along with the many allied health and administrative staff aligned with the division. “We really do have a lot of people here to take care of patients and we’re in a position to handle many complicated cases,” he says. “We’re always ready for the challenge.” ❄

**Name has been changed at the patient’s request.*

Chez nous is published by the MCH Communications office.

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On the cover:
Dr. Hussein Wissanji with patient George Stavriadis and his parents.

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Thibault Carron

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Celebrating fall at the MCH

By Caroline Fabre

As the crisp autumn air settles in, the Montreal Children's Hospital (MCH) has been bustling with energy and excitement. Our early fall activities brought together staff, patients and their families for a series of fun and engaging events.

On August 25, Sergeant, Chef, Pacific, Sheriff, Urbain and Commandant, along with officers from the Service de police de la Ville de Montréal cavalry spent some time with the young patients and staff of the MCH.



The Quality of Life at Work Committee shared the love by giving out tattoos, stickers and Skittles to the MCH staff following Montreal's Pride parade.



Child Life Services and School Services joined forces to organize a special visit from the Montreal Fire Department to the MCH. Patients had the opportunity to explore the fire truck, take part in activities and learn more about what firefighters do!



Over 100 guests enjoyed a whirlwind of games, activities and scrumptious treats, a photo booth to capture keepsake moments, and even a dazzling bubble show at the Annual Family Picnic thrown by Child Life Services and Up with Adam.



The MCH National Bank Family Resource Centre set up a booth for the National Day for Truth and Reconciliation and offered visitors the opportunity to explore books about the history of Indigenous peoples, a selection of drawings, and receive stickers and bookmarks.

