



**SPECIAL EDITION**

# JGH News

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SIR MORTIMER B. DAVIS - JEWISH GENERAL HOSPITAL

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## Emergency overcrowding: everyone's concern

In late March, a task force appointed by Health Minister Marc-Yvan Côté to study the overcrowding in the province's hospital emergency rooms released its report. The Jewish General Hospital was one of ten hospitals named for the state of its emergency room.

Unfortunately, the task force report tells only part of the story. Emergency overcrowding reflects the demographics of the Montreal Jewish community where a large percentage of the population is elderly and frail. The situation is compounded by a shortage of appropriate resources such as nursing homes, clinics and home care services. Since for many of these patients there is nowhere else to go, the Jewish General has no choice but to care for them.

Since the mid 1980's, the hospital has been extremely concerned with the severe overcrowding in our Emergency Department. Members of the Board and the administration continue to seek solutions to this most complex problem.

### Increasing demand

The JGH Emergency Department is one of the busiest in the entire city, and the demand for service keeps growing. The number of elderly and stretcher patients has been considerably higher than any other university teaching hospital. Last year, of the 52,825 Emergency Room visits, 19,678 were stretcher patients. By comparison, both the Montreal General and Royal Victoria Hospitals had 11,184 and 11,127 stretcher patients respectively.

While overcrowding is not unique to the Jewish General, the situation here is particularly acute for several reasons. We serve densely populated areas of the city including Côte des Neiges, Côte St. Luc, Notre Dame de Grace, Snowdon, Hampstead, Ville St. Laurent, Cartierville, Laval and Chomedey. The demographics of the Montreal Jewish community, where almost one in four individuals is over the age of 65, compel the JGH to receive and treat a greater load of frail elderly patients. These patients usually arrive with several problems and therefore, require more care and attention.

The Jewish General is a McGill University teaching hospital providing a wide range of ultra-specialized services. Although we are an acute care hospital, a major cause of our critically overcrowded situation is that at least 25% of our beds are occupied by long term care patients, i.e. people who are unable to return home and awaiting placement in a nursing home.

This means that, on average, of a total of 628 beds, the 160 beds occupied by long term care patients are not available for patients who need to be transferred from Emergency, nor for patients seeking elective admission.

Staff on all levels are devoting their energies to improving the situation, and the Quebec government has agreed to supply the necessary funding for renovations to the Emergency Department. Once completed, this expansion will almost double our space, enabling us to increase from 15 to 40 stretchers, and to double the number of resuscitation and trauma rooms.

### Community must cooperate

Over the years, the hospital has been strengthening its ties with local CLSC's as well as nursing homes. The relocation of the Jewish Nursing Home and the Hospital of Hope to the JGH grounds will make more beds accessible to JGH patients. Unfortunately, this is only a partial solution to the problem because there still will be an urgent need for many more nursing home beds in the community.

The extent of the problem goes far beyond the walls of the Jewish General Hospital. We require and are actively seeking the cooperation of other hospitals, community clinics, home care services and the government.

As stated earlier, we serve a very large population of aging, frail people, and are committed to caring for all who come through our doors.

Our Emergency Room is staffed by highly skilled and dedicated doctors, nurses and support staff. They are working under most stressful conditions, and deserve the understanding and cooperation of the entire community.

To hasten the transfer of patients from the Emergency to the wards, the time of patient discharge has been changed. **On the day of discharge, all patients will be required to vacate their beds by 8:30 a.m.** We ask that arrangements be made accordingly, and thank our patients and their families in advance for their cooperation.

## Helping patients through the system

Every hospital in Quebec must have a formalized procedure for reporting and handling complaints, in accordance with Bill 120, an act respecting health and social services, effective April 1, 1993.



In 1973, the Jewish General Hospital became the first hospital in Canada to appoint a patient representative. Since then, the JGH has been committed to helping patients through what can be a confusing, bewildering system.

JGH patient representative Roslyn Davidson explains that her role is to act as a liaison between the patient and the institution. Patients may contact her by phone, in person or in writing. Problems and issues are investigated; the patient or whoever acted on his or her behalf, is advised of the outcome. All interactions are documented, statistics are kept, reports are made to the hospital's Quality Assurance Committee, and recommendations for corrective action are

sent to the administration. As well, Ms. Davidson speaks at orientation sessions for new employees, describing her role and letting them know that she is available for consultation before a problem turns into a complaint.

Under Bill 120, all of these procedures will remain intact. The difference is that there will be a more formalized mechanism for accepting, documenting and responding to problems. To begin with, the responsibility for overseeing this process will be assigned to a senior management officer. If a complaint initially is made in writing, the senior management officer must send a written acknowledgement of receipt of the letter.

Issues involving a medical, dental or pharmaceutical act will be referred to the Council of Physicians, Dentists and Pharmacists, and the patient must be informed of this in writing. The council will be responsible for investigating the matter, and will send its conclusions to the senior management officer. At the same time, the professional involved must be informed that a complaint was sent to the council, and he or she has the right to have access to the record of complaint.

**Helping...** Continued on page 2.

## Join us for a fantastic day JGH Golf Classic - June 7th '93



Part of the Core Committee, left to right: Morton Brownstein, Mel Ellen, Chairman Frank Leboff, Arthur Diamond. Not shown: Hospital President Stephen Vineberg, Steve Favor, Gerald Gold, Leonard Kantor, Jackie Margolese, Al Regenstreif, Betty Rozovsky, Rose Yaffe.

**JGH First Golf Classic offers special prizes:  
Airfare for two to Switzerland courtesy of Swissair  
A Mercedes-Benz for a specified hole-in-one.**

Please see page 2 for details.



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THE SIR MORTIMER B. DAVIS – JEWISH GENERAL HOSPITAL

## First Golf Classic

will take place

Date: Monday, June 7, 1993

Place: Elm Ridge Country Club

HOSTED BY MERCEDES-BENZ

Your gala day of golf, lunch and dinner will help to purchase colour ultrasound equipment used in the diagnosis of cancer.

Chairman: Frank Leboff

**Tickets going fast: sign up now!**  
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Or contact your club representative:

**Elm Ridge:** Gerald Gold, Esther Landsman, Leila Paperman or Ron Waxman

**Green Valley:** Hershey Levy

**Cedarbrook:** Norman Richman or Howard Starr

**Hillsdale:** Beatrice Krupp, Michael Shapiro, Harvey Sternthal or Harriet Waxman

**Pinegrove:** Manny Young

**Special prizes:**

**Airfare for 2 to Switzerland courtesy of SWISSAIR**  
**A Mercedes-Benz for a specified hole-in-one**

## Hospital welcomes Social Service back to the fold

As of April 1, 1993, in accordance with Bill 120, Quebec's new health care and social services legislation, the JGH Social Service Department is once again under the jurisdiction of the hospital.

The Social Service Department "belonged" to the hospital until 1974, when it became attached to the Jewish Family Services Social Service Centre (JFSSSC). Under Bill 120, JFSSSC has been disbanded, and most of its social workers have been transferred to CLSC's. Social workers at the JGH now are employed directly by the hospital.

According to Caroline Burman, director of the Social Service Department, the change will have important benefits for patients. Because the department is no longer accountable to two different establishments (the hospital and JFSSSC), social workers

can concentrate exclusively on addressing the needs of patients affiliated with the hospital and their families. As well, the department legally is required to provide a service that will receive and assess all requests for social service, and if unable to fulfill them, refer patients to appropriate community resources.

Social workers are pleased to be part of the hospital family once again, says Mrs. Burman. "We'll be able to participate in general programs available to hospital employees and be considered real members of the JGH in every sense of the word."

### Helping... Continued from page 1.

If the initial complaint was made in writing, the senior management officer must provide a written report of the results of the investigation within 60 days.

The executive director will receive a report of all patient care issues, measures taken to correct the problems, and recommendations for improvement. A copy of this report should be forwarded to the Board of Directors. When a complaint is judged to be severe, or if disciplinary action was taken against an employee, the Board must notify the appropriate professional corporation.

Regardless of how the initial complaint was made, the complainant will be informed of the conclusions of the investigation. If he or she is dissatisfied with the response, the matter may be taken to the Regional Board.

The law also clearly states that the

senior management officer does not have to pursue complaints that are unfounded or in bad faith.

To conform to the new law, the hospital is refining its complaint handling procedure. Following approval by the Board, this procedure will be distributed to all inpatients, and also will be available upon request.

At the same time, in accordance with Bill 120, a code of ethics is being prepared for hospital employees. Once finalized, all employees will receive a copy of this document.

Patient representative Roslyn Davidson believes these changes will have a positive impact. "We've always been open to working together with patients to resolve issues. When patients and employees are better informed about their rights and responsibilities, we can have a more open dialogue."

## Golf Classic proceeds will enhance diagnostic radiology

*Early disease detection improves survival rates*

The Jewish General Hospital Department of Radiology has earned its reputation as a leader in the field in Quebec through superior diagnostic skills, research and an excellent teaching program.

The department performs hundreds of thousands of sophisticated tests per year, tests which are essential to the diagnosis and treatment of inpatients and outpatients throughout the hospital. Thanks to the expertise of our team of radiologists, physicians are able to plan further treatment effectively.

JGH radiologists have demonstrated their commitment to excellence in patient care. To continue doing so, they must be able to replace antiquated equipment and purchase state of the art machinery.

One piece of equipment which the department sorely needs and now will

be able to acquire thanks to the Golf Classic is a **colour doppler ultrasound scanner**. A remarkable imaging tool, colour doppler has proven useful in detecting cancer in many areas of the body, including the ovaries, the female breast, the liver and the prostate. **Research proves that early detection of malignancy is key to treatment planning and improved survival rates for cancer patients.**

A prime advantage for the patient is that this technique is non-invasive — nothing enters the body — and no injections are used.

The acquisition of sophisticated technology such as the colour doppler ultrasound scanner will enhance our diagnostic capability and treatment planning, will enable the Radiology Department to attract medical professionals of the highest calibre and will enable our radiologists to expand their research program.

Ultimately, the benefits of this machine will clearly be felt where it matters most — the care of our patients.



### Radiology project planned

The hospital plans to establish a centre for excellence in the Department of Radiology. The Quebec Government has approved and will contribute towards this major project.

The hospital will be seeking the support of the private sector and the centre for excellence may be dedicated in honour of a very generous donation.

