Celebrating National Volunteer Week  
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To all our 450 volunteers: 
we couldn’t do it without you!

Thank you for the 20,000 hours of service you give to the MCH every year.

Happy National Volunteer Week – April 21 to 27

Two years ago, Stephanie Richard decided to do something more meaningful with her free time. “I only work in a hair salon three days a week, so I would spend the rest of my time in shopping malls,” she admits. “I wasn’t being productive and I really wanted to give back to the community.” After her first year of volunteering at the MCH, staff found out that she was a hairdresser and suggested she start cutting and styling hair for patients and their families. Stephanie now volunteers every Wednesday afternoon and rotates between the 6th, 7th and 9th floor. “This whole experience has been so humbling. At first I expected these parents to be sad and angry at the world, but most of them are optimistic and have a smile on their face,” she says. In fact, Stephanie herself was even treated at the MCH as a child while recovering from back surgery.

In the photo below, Stephanie is seen cutting Loïc Bydal’s hair; Loïc is a patient who has been at the hospital since last July. Later on that afternoon, his mother, Anik Pilon, was also treated to a wash and blowdry. “I’m definitely going to meet a friend for dinner after this,” she laughs. “I need to show off my new hairdo!”

Here’s just one of our very special volunteers!
A new pilot project is under way on 6C1 and 6C2 that is designed to help any family whose child has just been admitted to the MCH. The Meet and Greet program will help provide information to families and answer their questions as they get to know the hospital and its services. The project was developed by Ann Hébert, Volunteer Coordinator, MCH, and Imma Gidaro, Patient- and Family-Centered Care Coordinator, MCH, in collaboration with the staff from Admitting. Several MCH volunteers have been trained for the program.

Every Monday to Thursday morning, the Meet and Greet volunteers receive the list of new patients who were admitted to the floor in the past 24 hours. The volunteers then find an appropriate moment to introduce themselves to the family, make sure they’ve received the hospital’s Welcome Guide, and answer any questions they may have. If time permits, the volunteers will go over the services available to them, both on 6C and elsewhere in the hospital.

The pilot project will run until May 16 and families are being asked to provide their evaluation of the program once their child is discharged. Preliminary feedback has been positive with comments such as:

“it’s great to find out this info as well as learn about patients’ rights in such a personalized manner.”

“Wow–this is great to have volunteers to help us when we need it.”

To submit story ideas or texts to Chez nous, contact the Public Relations and Communications office at ext. 24307 or send your email to info@thechildren.com.

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Breathing, eating and talking used to be painful for eleven-year-old Miguel Bettey. He was born with Treacher Collins syndrome, a genetic disorder, which led to many head and facial deformities, including an underdeveloped face and small lower jaw. When Miguel was born, doctors had to install a tracheostomy to help him breathe and he’s been living with the apparatus ever since. “He’s extremely nervous at the thought of having it removed,” says his mother, Cinthia Lachance. “He’s had it since birth. It’s part of him.”

But even though he’s nervous, Miguel is ready. He can now look forward to life without a tracheostomy thanks to Dr. Mirko Gilardino, a pediatric plastic surgeon at the Montreal Children’s Hospital. Last year, on August 20, Dr. Gilardino performed a Canadian first by implanting a custom-made device to lengthen Miguel’s deficient jaw, which was entirely designed before surgery with the help of an experienced biomedical engineer.

“I worked closely with Synthes, a company that specializes in preoperative surgical solutions,” says Dr. Gilardino. “We basically had a meeting over my computer where I told the engineer what I wanted and he brought it to life,” he says. “It was like working with an architect.”

This virtual planning process allowed Dr. Gilardino to make critical clinical decisions before Miguel’s surgery, thus giving him the opportunity to plan, organize and successfully design a custom-made bone stretching device for his patient. “Before computer-assisted surgery, I would spend hours in the operating room trying to figure out all of these details,” he says. “Now everything is organized and ready to go by the time I get into surgery.”

Using the same technology as in Miguel’s case, Dr. Gilardino is now applying this software to design custom-made implants for more complex skull defects. He uses a resilient, hard, moldable plastic called PEEK (poly-ether-ether-ketone), which is lighter, stronger and more resistant to infection than traditional prosthetics.

Even though these prosthetics are generally more expensive to manufacture, the overall cost is balanced out by the amount of time and money saved from using this new preoperative software. “And more importantly, it’s more beneficial for our patients,” he says. Dr. Gilardino has proven that he can actually reduce his operating room (OR) time by half, which means less blood loss for his patients, fewer blood transfusions and shorter hospital stays.

“At first glance this procedure might seem more expensive, but the data shows it’s actually more cost-effective,” he adds. “Each additional hour in the OR has real costs associated to it, but by designing these implants ahead of time, we can really find ways to reduce our operating time.”

Miguel and his mother Cinthia Lachance
Dr. Gilardino is now completing his research on the cost-effectiveness of this new technology and will be presenting his findings at the Canadian Society of Plastic Surgeons annual meeting in May – making his research on cost-savings another first in Canada. “I’m really excited about using software to better the outcome for patients like Miguel,” he says.

Needless to say, Miguel’s mother is also excited about how this new technology has changed her son’s life.

“My son can finally close his mouth!” she says. “I am so happy we found Dr. Gilardino. My husband Robert and I appreciate everything the MCH has done for us. Miguel is our pride and joy. He teaches us life lessons every day and gives us the courage to keep going.”

Above are computer graphics of Miguel Bettey’s small lower jaw before surgery (left) and the custom-made device which was designed and implanted by Dr. Mirko Gilardino to lengthen Miguel’s jaw (right).

What’s your email pet peeve?

Thanks to Rachel Abugov who wrote to us after reading “Email etiquette” in the March 14 issue of Chez nous. Good advice for anyone who wants to save more trees!

“My PPP (Personal Pet Peeve) is... people who send e-mails to a loooong list of names and don’t use the ‘bcc’ feature. Inevitably, the e-mail is printed, requires multiple pages, and at the end, what do we find but the well-meaning but futile Siggy inviting people to save a tree (“Do you need to print this?”) If it hadn’t rolled over onto an extra page, many sheets of paper would have been saved by everyone who decided to print it!”
The facts are there: technology has already changed the way our brains function. But is all this technology helping us or hindering us? And more importantly, how is it affecting our children? The truth is, we really don’t know. Scientists are still not 100 per cent sure of all the potential dangers surrounding the use of technology in young children, so we should seriously consider its possible side effects on their development.

**Too much information to process for young children**

More and more school-aged children now have access to smartphones and social media. These devices have become a necessity, just like the telephone was for most parents and grandparents. The difference is they now have virtual access to everyone and everything 24/7. Dr. Shuvo Ghosh, a developmental behavioural pediatrician at the Montreal Children’s Hospital, says the main concern is when very young children get involved with technology as their brain is still developing, both physically and emotionally. “Children under 7-years-old should not be using technology on a daily basis,” he says.

“The younger the child the more disturbing all these external stimuli are to them, because in many instances they haven’t yet learned how to divide their attention effectively. It is often too much information to handle.” In essence, we may be creating an environment conducive to inattention and even ADHD, by choice. Part of a younger child’s development is the need to learn how to focus, but it becomes much harder when they have so many virtual and physical stimulations surrounding them.

**Inability to pick up on social cues and emotions**

Another developmental concern is that technology use—as it takes over from other forms of communication—may hinder a child’s ability to pick up on social cues. Children need to learn how to read people’s emotions and it usually takes practice from a very young age. The problem with texting is that there’s no emotion – you’re only receiving non-verbal, inaccurate versions of what someone is trying to say. This creates a socially-flawed form of communication. It’s missing the part called “pragmatics” that relates to emotion and non-verbal interaction, and this could be detrimental to young children who are still learning how to make sense of different emotions and nuance.

“Some kids might start thinking that maybe they don’t need to express emotions in every situation,” says Dr. Ghosh. “This will make it harder for them to understand and handle their own emotions and those of others.”

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On Thursday, March 21, Socio-cultural Consultation and Interpretation Services (SCIS) organized a 3-hour workshop for MCH staff on “Family Diversity and Strategies to End Homophobia.” The interactive session was moderated by two members of The Lesbian, Gay, Bisexual and Trans-identified (LGBT) Family Coalition. The moderators spoke honestly about their own personal experiences with homophobia and answered questions about family diversity and homoparental families (a family composed of one or two LGBT parents). Participants also viewed a video on parents and children discussing their LGBT families with others and were given tips on how to combat discrimination and promote positive integration of LGBT youth and homoparental families in a hospital setting. At the end of the session, a resource guide was handed out, which included the video, posters and more information on how to promote and respect diversity. For more information call SCIS at 22529 or 23002 or to register for a workshop, please contact The LGBT Family Coalition at 514-846-1543 or visit their website at www.familleshomoparentales.org.

Respecting differences and recognizing diversity

Teenagers and their super, smart phones
Lastly, when it comes to adolescents and cellphones, Dr. Ghosh says a potential concern is that some teenagers may become risk takers, because of their addiction to technology. Studies have shown addictive brain patterns in people who are heavy cellphone users, and in some cases these heavy users have admitted to feeling high after receiving an incoming text message. This can become problematic when an already rebellious teenager starts looking for the next or better high, which can sometimes lead to drugs and alcohol. Skeptical? A recent US study concluded that withdrawal symptoms experienced by young people deprived of technology is comparable to those felt by drug addicts or smokers going “cold turkey.”

TIPS FOR WORRIED PARENTS
If you’re concerned about your child spending too much time on their smartphone or in front of a computer screen, try the following:
• assign certain times every day or every week where no screen time is allowed;
• set an example by blocking off ‘quiet time’ for yourself with no computer or smartphone usage;
• discuss their reactions to situations to help them learn and better understand certain emotional and/or social cues;
• find activities for your child with other kids where no screen-time is available, to spur other forms of creativity and interaction.
Paging all nurses and nursing assistants
Let’s celebrate Nurses Day together!

On Tuesday, May 7, coffee and muffins will be served in D162 starting at 7:30 a.m., followed by a light lunch from 11:00 a.m. to 2:00 p.m. and topped off with the Nursing Awards of Excellence from 2:00 p.m. to 4:00 p.m. in D182.

But the fun doesn’t stop there! Activities will be running all day from 7:30 a.m. to 2:00 p.m., including massages and over 100 door prizes. So please remember to wear your hospital IDs!

Awards and Nominations

Dr. Ronald Gottesman has been appointed Interim Director of the Arnold and Blema Steinberg Medical Simulation Centre in the Faculty of Medicine at McGill University.

Dr. John Manoukian, program director of Otolaryngology, was presented with the Best Program Director of the Year Award from the Royal College of Physicians and Surgeons of Canada.

TIME FOR A LITTLE SPRING CLEANING!

No matter how long the winter, spring is sure to follow. ~Proverb

Here in Quebec, we never want to speak too soon, but it looks like spring may have finally arrived. And as everything outside starts to wake up, it gives us fresh ideas for inside too. You’ve probably been thinking about getting your office into tip-top shape with the help of a dust cloth, a few new file folders or maybe even a new plant or two.

While you’re at it, step outside your office and have a good look around the common areas in your department and the hallways where patients and their families wait for appointments. If you notice old meeting or event announcements on the bulletin boards, out-of-date magazines on the tables, or anything else that has seen better days, scoop them up and head to the recycling bin. It only takes a minute, but you’ll see a big difference immediately.

MUHC Quality and Risk Management wants to remind staff to use tape—not thumbtacks—to post material to bulletin boards around the hospital since thumbtacks present a choking hazard for children.
Delivering great care starts by building positive relationships with patients and families. At the Children’s, our Youth Advisory Forum (YAF) plays an important role in this. The YAF gives patients and their siblings the opportunity to provide feedback, and share their observations and ideas on improving future patient experiences. The YAF is currently recruiting new members. Let us know if you’d like to recommend a teenager who meets the following criteria:

- a former or current patient at the Children’s, or a sibling of a patient;
- age 14 to 20 years old;
- creative, organized, motivated, reliable, passionate, and excited to share their ideas and opinions on how we can improve a patient’s hospital experience;
- able to attend an evening meeting at the hospital once a month;
- able to commit to a one-year membership with the Youth Advisory Forum.

If you have someone in mind, please get in touch with Wendy Reis by email at wendy.reis@muhc.mcgill.ca or by phone at 514-412-4400 ext. 22385 or ask them to contact Wendy directly.

For the last 15 years, Dr. Laberge has been making maple syrup with his wife at his cottage in the lower Laurentians. Between March and April, he taps 44 maple trees and produces over 25 liters of syrup. From drilling holes to collecting sap – he does everything by hand and looks forward to the process every year. His family even has maple syrup tasting parties! “I also give pots of maple syrup to members of my surgical team – but the really special ones get maple butter too!” he laugh.
Congratulations...

to our MCH colleagues who recently celebrated service anniversaries of 25 years and up!

AUDRA ANELIUNAS, PIERRE BERTHIAUME, MICHAEL BLACK, DIANE BOUCHARD, DEBORAH CAHILL, LUCY CARON, BRENDA LYNN CHARBONNEAU, DONALD CLOGG, MARIA CORINTHIOS, CLAIRE CREPEAU, PAULA DE BELLIS-VENTURA, SYLVIE DESSUREAULT, LIVIA DISANO, JULIE ANN DOUCET, DONNA DRURY, GAIL DUNBAR, BERTRAND DUPUIS, DONNA ELLIS, JOCELYNE EMERY, BILL FANI, ANIK FERLAND, DONNA FESKUN, FRANÇOISE FILION, HENRY GACKI, MONICA GALLAGHER, GYULAIIME GAMACHE, HUGHES GAUTHIER, MICHÉLE GEOFFRION, ROSARIA GIUNTI, MAUREEN GRAY, PATRICIA GRIER, IRWIN HABERMAN, LEE CHOO HAYAMI, DOMINIQUE HEBERT, DENISE HEBERT, NANCY IANNANTUONO, GLENN KEAYS, REG KENNEDY, JOSE LAFORTUNE, MARCEL LALANCETTE, JOSE LAMARRE, LYNE LAPOINTE, THAO LE, CHRISTINA LEGGE, ANITA LEGLER-MCGUIGAN, DONNA LEIER, MARTINE LESTAGE, SYLVIE LEVESQUE, KATHRYN LINDSAY, PATRICIA LORE, EILEEN MAHONEY, CATHERINE MARTELL, ROSALIE MATYS, GRACE MEDEIROS, AZHAR MAHMOOD MIRZA, PATRICE MITCHELL, LINA MOISAN, ANDRÉE MORIN, JANICE MURPHY, MONICA O’DONOHUE, ALLYSON ORR, PAULETTE MARIE PHILLIPS, SYLVIE PILON, ANNA PISTACCHIO, GINETTA PRIMIANI, HELENE RAINVILLE, JANET RENICK, RITA RICCIO, DIANE RICHARD, LISON ROBERT, FRANCE ROY, LINDA SAND, SYLVIE SAIHYOUN, KATHLEEN SANFACON, ANTOINETTE SANTUSANO, LISA SAUVE, ALAIN SEGUIN, LORENZINO SERIGNESE, DIANNE SENSENWEIN, DALILA SILVEIRA, PATRICIA TARQUINIO, GILLIAN SARAH TAYLOR, FAYROUZ TELJ, KIMBERLY THIBEAULT, LYNETE TYRRELL CALDER, CARMEN VOKATY, ROBERT WHITTICK.

PRIX D’EXCELLENCE
AWARDS OF EXCELLENCE

La Fondation de l’Hôpital de Montréal pour enfants
The Montreal Children’s Hospital Foundation

Invitation à tout le personnel
Invitation to All Staff

THÉ MERCREDI LE 8 MAI 2013
TEA, WEDNESDAY, MAY 8, 2013

À LA CAFÉTERIA, 14 H à 16 H / IN THE CAFETERIA, 2:00 - 4:00 PM