



Photo: Marrel La Hoya

## Questions raised by the new CHUM

The question of where the new Centre hospitalier de l'Université de Montréal (CHUM) would be located garnered considerable media attention this past winter. We heard a great deal about Saint-Denis Street, Outremont, square feet, accessibility, technopoles, ultra-specialized care, research, safety, contamination and more.

The whole issue was highly politicized, and surrounded by intense controversy. On March 24, the government finally announced its decision to modernize Montreal's university hospitals, i.e. the CHUM, the McGill University Health Centre (MUHC) and Hôpital Sainte-Justine. The decision calls for investment of \$2.6 billion, including \$1.8 billion from the Quebec government. The choice of a downtown site for the CHUM has clearly put an end to the debate. The government is wagering that this massive investment will propel Quebec to the cutting edge of technology and allow it to position itself as a key player in biomedical research, with significant economic spin-off.

And what does the future of the CHUM mean for us, as nurses? Everyone knows that there is a shortage of nurses and especially of specialist and ultra-specialist nurses. It must be remembered that the CHUM has a major role to play in training the undergraduate, graduate and postgraduate nurses who will form the next generation. The Faculty of Nursing at the Université de Montréal is the largest in Quebec and the second-largest in Canada. It awards 48% of all undergraduate nursing degrees and 62% of all master's degrees in Quebec and is the only one in the entire French-speaking world to offer a PhD in nursing, jointly with McGill University. It is also the

only one to hold two research chairs in nursing. In other words, collaboration between the CHUM and the Faculty is crucial for training future nurses.

The Department of Health and Social Services (MSSS) and the OIIQ have set a target of 1,500 university-educated nurses a year for Quebec as a whole. This is an extremely critical goal if we are to have enough teachers and professors, clinical nurses, researchers, specialist nurses and managers, not to mention liaison and case management nurses and nurse navigators. If we consider the number of nurses needed in the Laurentian, Laval, Lanaudière and Montréal regions, the Faculty of Nursing at the Université de Montréal should be awarding some 700 undergraduate nursing degrees a year. Unfortunately, the Faculty lacks the financial means to reach this goal. In addition, the demand for specialist nurse practitioners will create more pressure on the CHUM, as an institution that hosts nursing students. Increasing the Faculty's actual capacity to train enough nurses is a serious challenge that demands resources and political will.

### UHCs for training and professional culture

But what is a UHC, in fact? We are told that it is a healthcare setting and a centre of teaching and research. Unfortunately, thus far, the specific contribution by UHCs to training specialist and advanced-

practice nurses has received little recognition in Quebec. Not only does their role in supervising nursing students receive no financial support at the university or the hospital level, but it adds to the workload of all nurses at the UHC, who must donate their time to training future nurses in addition to their clinical responsibilities. Gisèle Besner, Chair of the Council of nurses at the CHUM, pointed out to the special commission on the site of the future CHUM that its budget for nursing care should be augmented to take account of the serious nature of the cases handled there and the supervision of students.

As we all know, the quality of the clinical training setting and the resources available have consequences for the training of healthcare professionals, in terms of not only their clinical skills but also their professional culture. The setting also plays a role in promoting interdisciplinarity and pride in the profession – and hence our ability to keep our professionals in Quebec. Retaining nurses is certainly a vital goal, especially in Montreal, and more specifically at the CHUM.

Should workforce planners seek to have a significant percentage of nurses with university degrees at a UHC? In other words, should the specific vocation of a UHC be reflected in the makeup of its nursing staff, who by definition will be contributing to training university-level nurses? No departmental policy specifies that UHCs must have a given proportion of university-educated nurses, who are often even seen as an unjustified expense by different administrative levels! While administrators and the MSSS in Quebec are still pondering the relevance of having nurses with university training in UHCs, it has become the norm in all other provinces. In Ontario, for example, since January 2005, all new nurses must hold a baccalaureate. So even if we build the finest hospital on the best site, it will take more than good intentions to make it a real UHC that meets North American standards.

Another aspect of the mission of a UHC is to contribute to redefining professional practices, based on research. Nursing practice founded on proven research findings calls for close collaboration between the Faculty and the UHC. A UHC must support nursing excellence that is a real model and source of inspiration for students. For instance, the Director of nursing at the CHUM has drawn up a clinical guide to nursing care, integrating the most recent research results. She has also invested in systematic and standardized evaluation of healthcare outcomes. Indicators and statistics are compiled on pain relief and the prevalence of pressure wounds and those caused by restraints. The

CHUM budget (like those of other UHCs) should allow her to continue in this vein, and increase the number of her nurses with graduate and postgraduate training.

The role of UHCs in promoting the profession and acting as leaders can be seen in the way all the directors of nursing at UHCs in Quebec have supported the Secrétariat international des infirmières et infirmiers de l'espace francophone (SIDIIIEF). A UHC should be a reference hospital for the nursing community, be they caregivers, clinical nurses or researchers. The CHUM was an incubator for nursing projects in the field of case management, in fact. It is now suffering from a critical shortage of nurses, probably as a result of all the uncertainty regarding its future. According to a reliable source, this is the hospital with the most critical shortage in Quebec at the moment, for it needs 300 more nurses. This worrisome and unacceptable situation undermines its prestige vocation and represents a very serious threat to the whole nursing profession in Quebec, not to mention the risks involved for clients.

So I wonder: How will the construction of a new CHUM remedy the situation? Does the government truly plan to make it a real UHC in terms of nursing? Being a UHC in Quebec, and especially in the metropolis that provides services for the entire province, should be more than a label. It comes with special obligations and requires the means to meet them. World-class training for nurses at the university level should be at the heart of the UHC's mission, and this calls for investment in much more than bricks and mortar. ●



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