

### **Info sheet no. 3**

### **English-speaking Community Representation in Network Governance.**

A lexicon of terms used is presented at the end of this sheet.

Bill 10 adopted in February 2015, did not replace the Health and Social Services Act, often referred to as S 4.2. But it substantially changed certain of its provisions. In particular, it radically altered the way in which Quebec's public health and social services system is administered.

It changed the identity of the institutions that deliver health and social services, the composition and manner of appointment of board members, and for the first time created the possibility for at least one person coming from the English-speaking community to have a seat on each one of the 22 Centre Intégrés (CI) which now deliver all of the regionally based services. There is one CI per region where CIs exist, except Gaspé which has two, Montérégie which has three, and Montréal which has five.

In addition to the CIs, Bill 10 confirmed the distinct mandates of seven other institutions, two in Quebec City and five in Montreal, all of which are highly specialized hospitals serving multiple regions. These institutions continue to exist with their own boards.

For more on the impact of Bill 10 on public institutions, please refer to Info sheet no. 1.

At first glance, the merger of the previously existing institutions may seem to reduce the opportunities to participate in governance of the public network. However, in the new configuration there are several opportunities for members of the English-speaking community to participate in network governance, as follows:

#### **On the Board of a CI or specialized hospital**

Bill 10 establishes procedures for the naming of all board members. The professional bodies and users' committees designate their representatives. The minister appoints the representatives of the education community or affiliated universities, and he/she appoints all of the independent members. Once every three years the ministry announces a call for candidates for the independent seats. Any citizen can submit their candidacy during this period. The candidates must establish their claim to possess one or more of the profiles or areas of expertise identified in section 15 of Bill 10:

*15. Before appointing the independent directors, the Minister must establish competency, expertise or experience profiles in the following areas:*

*(1) governance and ethics competency;*

- (2) risk management, finance and accounting competency;*
- (3) human, property and information resources competency;*
- (4) auditing, performance and quality management competency;*
- (5) expertise with respect to community organizations;*
- (6) youth protection expertise;*
- (7) rehabilitation expertise;*
- (8) mental health expertise; and*
- (9) experience as a user of social services.*

*For each board of directors of an integrated health and social services centre, the Minister must appoint one independent director for each of the profiles listed in subparagraphs 1 to 9 of the first paragraph. If such an institution is located in a health region where a university offers a complete undergraduate program in medicine, or operates a centre designated as a university institute in the social sector, an additional independent director must be appointed for the profile referred to in subparagraph 7 of that paragraph. In the case of the board of directors of an unamalgamated institution, at least one independent director must be appointed for each of the profiles listed in subparagraphs 1 to 4 and 9 of the first paragraph.*

*In the case of the board of directors of an integrated health and social services centre, one of the independent directors corresponding to a profile listed in any of subparagraphs 1 to 4 of the first paragraph must be appointed from a list of names provided by the regional committee formed in accordance with section 510 of the Act respecting health services and social services (chapter S-4.2).*

While anyone who meets the criteria for independent members, including members of the English-speaking community, can propose themselves to the ministry for consideration as an independent member, when the minister chooses the independent members for the CIs, section 15 requires that one of the independent members, apart from meeting the other criteria, must come from persons named on a list of candidates approved by a Regional Access committee. (For more on Regional Access committees, see Info sheet no. 5.) This practically guarantees that one person from the English-speaking community will have a seat on each of the 22 CI boards. This provision does not apply to the boards of the seven specialized hospitals. Nonetheless members of the English-speaking community can still propose themselves as independent members of those boards. In the first round of board appointments in 2015, 20 of the 22 CIs

had an appointee who had been proposed by a Regional Access committee, the first time so many members of the English-speaking community found themselves at a board table.

#### **As a member of an Owning Corporation**

Owning Corporations have a right of veto over changes to their own legal status, any sale or proceeds from a sale of their buildings, any change to the cultural or linguistic nature of the services provided in their buildings, and any renunciation of recognition as being bilingual as per section 29.1 of the Charte de la langue française. (For more on this topic, please see the Info sheet no. 1 on Bill 10's impact on the status of public institutions.) They may also support and facilitate relations between a connected foundation and the CI. Community members could express their interest to an existing Owning Corporation, who select their own members. Please see Info Sheet no. 9 on institutional property ownership..

#### **As a member of a Facility Advisory Committee**

Facility Advisory Committees may be created for institutions that were merged into a CI if interested parties make such a request of the minister. They may make recommendations to the board of the CI with respect to the cultural, linguistic, historic or local character of the merged institution. For more about Facility Advisory Committees, please see Info sheet no.7.

#### **As a member of a Users' committee**

Users Committees inform users of their rights and obligations, and advocate within the institution on matters pertaining to their rights and interests. They may assist users in filing complaints. They exist with respect to each of the merged institutions. Bill 10 has added a central Users' Committee for the whole of a CI. For more on this subject please consult Info sheet no. 10 on Users' and Residents' committees.

#### **As a member of a Regional Access committee**

A Regional Access Committee advises the CI responsible for Regional Access Programs, which are the cornerstones of access to services in English. The committee evaluates and revises the Regional Access Program from time to time. (For more on Access Programs and Regional Access Committees, please see Info sheets nos. 6 and 7 respectively.)

It is important that individual citizens volunteer to serve in one or more of the roles, outlined here, and that community organizations that represent the interests of the English-speaking Community encourage and support community members in such efforts.

#### **LEXICON**

Terms in bold are those used in the Information Sheet series.

Terms following the = sign are the equivalent terms found in the English version of the laws referred to, where an English term exists.

**Bill 10** = 0 7.2 = the Act to modify the organization and governance of the health and social services network, in particular by abolishing the regional agencies

**Charter** = la Charte de la langue française

**CI** (Centre Intégré) = integrated health and social services centre

**OQLF** = Office Québécoise de la langue française

**Provincial Advisory Committee** = Provincial Committee on the dispensing of health and social services in the English language

**Regional Access Committee** = Regional Committee

**Resident** = In-patient

**S 4.2** = the Act Respecting Health Services and Social Services

**Specialized hospitals** = unamalgamated institution