

Dialogue

BETTER COMMUNICATION FOR BETTER CARE

www.mcgill.ca/hssaccess | SPRING/SUMMER 2008 | Version française à l'endos

2008-09: A pivotal year for the McGill Project

April 2008 marked the end of the first four years of the McGill Training and Human Resources Development Project. Health Canada has granted funds for an extension period until expected funding for the Project's next phase comes in. Principal investigator Professor Carmen Lambert describes 2008-09 as a "pivotal year" for the McGill Project—one that will involve evaluating the Project's first five years as well as planning for the future.

Taking the findings of the ENAP Centre de recherche et

d'expertise en évaluation into consideration, the Project has hired an independent researcher: "Looking back on Measure 1 and especially Measure 2 is incredibly important. We are determined to find out what we did right and what we need to focus on next," says Carmen Lambert.

Clearly the Project has confirmed McGill's commitment to the English-speaking community, not just in Montreal but in regions across the province. "This is about more than just healthcare," Lambert specifies. "We are working to allow

communities, big and small, to develop on social, economic and cultural levels." Among other things, Dr. Lambert cites the Project's involvement with English-speaking native communities, and initiatives in remote parts of Québec. "We are thrilled to be working with students and professionals who are willing to think outside the box," Lambert beams.

When reflecting on the past five years, Dr. Lambert highlights the innovative partnerships that have developed between McGill

SEE 2008-09 ON PAGE 2

Sharing ideas and strategies for success



CSSS Côte-de-Gaspé project manager Marie-Claude Brière, with her daughter Mia, at the "Creating Sustainable Partnerships: Conditions for Success" Forum in September 2007. DETAILS ON PAGE 4.

Initiatives over four years are a good return on our investment

The Consultative Committee for English-Speaking Minority Communities, whose 2002 report to the Federal Minister of Health laid the groundwork for the McGill Project, published a second report in August 2007 recommending federal investments in the THRDP for another five years.

The report highlighted McGill's key role, citing not

only the remarkable range of its English-language professional programs but also its success in bridging the gap between community organisations and establishments in order to ensure access to English-language health care and social services.

The Committee cited innovative partnership models as one of the Project's key features and outlined many accomplishments

over the past four years: the English language training of over 5,500 francophone professionals; 22 pilot internship partnerships aiming to retain professionals in the regions; the delivery of public health programs by Telehealth to 11 remote English-speaking communities; the development of a distance professional support program; and the estab-

lishment of an inter-university research team.

Roger Farley, Executive Director, Official Language Community Development Bureau, shared his viewpoint: "We are very pleased with the results of Measures 1 and 2. The language training and internship programs implemented across Québec are making a real impact. We have already seen a return on our investment and I

look forward to seeing what the future holds. There is more work to be done."

Indeed, the Committee also made recommendations for the future. According to the Report, English-speaking communities continue to be vulnerable when it comes to access to healthcare and language barriers continue to be

SEE INITIATIVES ON PAGE 2



Dialogue is published by McGill University's Training and Human Resources Development Project, working to ensure that English-speaking people in Québec have equitable access in their own language to the full range of health and social services. The Project is developing and implementing a number of initiatives across the province in partnership with health institutions and community organizations. Visit our website at www.mcgill.ca/hssaccess for more information.

CONTENTS

- 02 From Tadoussac to Blanc-Sablon: A new perspective on social services
- 03 Planting the seeds of change in Thetford Mines
- 03 Telehealth's community radio project: Empowering communities, one listener at a time
- 04 Partnership between Vanier College and the CSSS des Sommets: Taking student internships to the height of success
- 04 Practice makes perfect: McGill develops language workbooks and tools for health and social services professionals
- 05 Montreal's East End Initiative: Small steps towards the big picture
- 05 Language training growing by leaps and bounds in Laval
- 06 130 projects across Québec supported by McGill University's Training and Human Resources Development Project

CONTINUED FROM PAGE 1 2008-09

and its community partners. “The way these communities have mobilized to make it possible for these internships to become realities is remarkable. Organizations like CASA, C.A.M.I., Vision Gaspé-Percé Now, Coasters, MCDC and Townshippers’ have taken the lead and are making a real impact on the English-speaking population in their regions.”

For Dr. Lambert, the synergy that has developed between McGill and the communities is the Project’s most precious resource: “We work together. McGill does not impose a model or dictate how things should be done. We propose solutions. Mostly, we try to empower them with resources that will allow them to make change possible.” Clearly, for Dr. Lambert, partnership is a two-way street.

Lambert knows that success is measured in the long term and that one of the Project’s ultimate goals is to retain health and social services professionals. “We have had some success in that area. Thanks to the Project,



Carmen Lambert, principal investigator and supervisor of the McGill Project, wants to focus on developing professional resources to support its efforts.

many students who come from the regions have an opportunity to return to their hometowns to participate in internships,” Lambert explains. She adds that even students who don’t plan on working in the regions after their internship “have become ambas-

sadors for the Project.”

As for the challenges ahead, Lambert mentions the need to develop models for supervision: “We’ve spent the past four years successfully building partnerships and getting students excited about the prospect of working in

the regions. Now we must focus on developing professional resources to support these efforts.” Lambert explains that since each project is unique, there are many possible supervision models. For some students, an innovative model such as distance supervision can work. Other situations require on-site supervisors, while still others need a model that lies somewhere between the two. McGill understands that proper supervision requires training. In partnership with the Consortium national de formation en santé and based on a model developed by the University of Ottawa, it has implemented a new online supervisor training course.

Professor Lambert and her team look forward to strengthening the Project’s mission over the next five years. “McGill plays a crucial role. There is no doubt that all of our initiatives would be impossible without the support and resources of an institution as well-established and committed as McGill,” Lambert states. “And this is a role that we never take lightly.” ♦

CONTINUED FROM PAGE 1 INITIATIVES



Eric Maldoff, Co-chair of the Consultative Committee for English-Speaking Minority Communities

essential resources to participate in these initiatives. Moreover, the Committee noted that since Québec’s system is in constant evolution and human resources are quite scarce in many parts of the province, training must be ongoing and special measures are needed to recruit and retain English-speaking professionals.

“More targeted action is needed. We have recommended that a multi-year federal contribution be made over the next 5 years,” states Eric Maldoff, Committee co-chair. “We have met the Minister to present our recommendations and hope the government will quickly respond to the pressing needs of our communities.” ♦

FROM TADOUSSAC TO BLANC-SABLON

A new perspective on social services

Looking back on Measure 2, all of the success stories revolve around people who took a chance and got involved.

Patrick McIntyre, who participated in a three month long internship at the Centre de protection et de réadaptation de la Côte-Nord (CPRCN) in the summer of 2007, is one of those people. Enrolled in McGill’s joint Master’s of Social Work and Law program, Patrick was looking for a unique way to fulfill his practicum requirement.

“I was really looking for a change of pace and a different perspective on social services.”

This self-proclaimed city boy certainly found the change of pace he was seeking. The CPRCN services a massive territory in which pockets of English-speaking people reside. As one of only three bilingual social workers on

staff, Patrick spent his time in the field assessing reported cases of youth protection.

“Since the territory is so vast,” he says, “social workers travel long distances to remote communities instead of the other way around. It was a totally different approach for me.”

Not only did Patrick leave his comfort zone in terms of geography, he also took a professional leap, having no practical background in youth protection. Enters Elayne Aber, a social worker with 25 years of experience in Youth Protection and Patrick’s distance supervisor.

For Elayne Aber, distance supervision was extremely rewarding, even though the process did start under some pretty unusual circumstances: “Patrick and I did not meet face-to-face until he returned from his field placement, but our rapport was one of

trust from the beginning. He was always open to the information and advice I gave him during our weekly phone calls. It was a terrific experience.”

Elayne also reflects on Patrick’s contribution to the region’s English-speaking community. “His presence sent a strong message. More than providing services, he opened people’s eyes to the English-speaking people’s reality.”

“The English-speaking families I worked with were surprised and pleased that a program like this existed,” agrees Patrick. “Even those individuals for whom social services were mandatory expressed their gratitude to be able to get the services in their own language. For someone who did not ask for help, to say ‘thank you’ means a whole lot.”

Back in the big city, Patrick wonders why so many students



During his three month internship in social work, Patrick McIntyre visited the Centre jeunesse Côte-Nord. Photograph by Patrick McIntyre.

seeking to make a difference head to developing nations when “there are so many rich learning experiences to be had right here. Some communities live in very difficult conditions,

partially because of their inability to receive services. Hopefully projects like this can change that situation and give students a better sense of the country in which they live.” ♦

Planting the seeds of change in Thetford Mines

As executive director of the Megantic English-speaking Community Development Corporation, Suzanne Aubre is at the helm of a very successful internship program in collaboration with the McGill Project.

"Since the spring of 2006, we have been fortunate enough to welcome eight bilingual interns, surpassing our target of six over a two year period," she says proudly. "We have exceeded our expectations."

Aubre, who knows that the ultimate measure of success for the program is how many interns will return to work in the region, is hopeful. "Our interns are happy. They feel welcome and supported here. Two of them are planning on coming back to work here one day."

But Aubre knows that recruiting and retaining bilingual professionals is only part of the challenge that the MCDC faces.

"People were not asking for services in English," Aubre explains, attributing this reticence to factors such as shyness or not being aware that such services were available. Aubre is blunt about the situation. "If people don't use the services available in English, they will disappear. Asking for services in English justifies training staff, recruiting bilingual interns and translating materials. We had to do something to inform the community that those services were available in English and build their confidence in requesting them."

The MCDC launched a campaign to encourage the English-speaking population to ask for services in their mother tongue. Aubre doesn't shy away from admitting that language is an emotional issue for most people.

"English-speaking people, especially seniors who are more vulnerable and often less bilingual, are afraid they will



The MCDC team, directed by Suzanne Aubre, has put in place a very successful internship program in collaboration with the McGill Project. From left to right - first row: Peter Whitcomb, Ann Marie Powell, Maureen Small, Aline Visser; middle row: H el ene Dor e, Julie Gagn e; back row: Suzanne Aubre, Myriam Gayraud.

be turned down or judged for asking for services in English. We explained that if they asked, people would do their

best to help them in their own language."

The MCDC produced several tools, including newsletters and

fridge magnets inscribed with the campaign's slogan—*Use it or lose it*—to raise awareness. Plaques reminding people to ask for services in English were installed in key areas such as reception desks and triage stations. So far, the results have been promising.

"People are so pleased," Aubre beams. "We are allowing them to ask for services in their own language and recognizing that they matter." In the end, Aubre believes that word-of-mouth will prove to be the best promotional tool.

"A patient recently received services in English at the hospital, simply because she asked for them," recounts Aubre. "She went home and told her neighbours! That's worth more than a hundred fridge magnets."

Aubre is hopeful about the future but knows that old habits are hard to break. "We are planting seeds. It may take time, but I am confident that change will grow." ♦

TELEHEALTH'S COMMUNITY RADIO PROJECT

Empowering communities, one listener at a time

Telehealth, which delivers English-language health information and education to remote English-speaking communities, is a THRDP initiative that well reflects the Project's strategy to support communities who don't have access to health promotion programs in English. By linking isolated communities to Montreal institutional network programs, the McGill Project also supports the professionals involved.

"We've held 14 videoconference sessions this year alone, bringing 700 participants from communities across the province and health and social services professionals together," explains Russ Kueber, Telehealth Project Manager. "These sessions have a direct impact on participants and lead to immediate short-term results."

"More than just provide health information, we want to imple-



Telehealth delivers radio programs that are aired on community radio stations across the province. Seen here, Host Kelly Howarth (left) interviews guest, Judy Ross of Mental Health Estrie.

ment resources in these communities that will be there in the long run," explains Kueber.

In order to reach this goal, the CHSSN is developing follow-up tools and programs, such as the Community Radio Project, a series of segments aired on community radio sta-

tions. Radio is an excellent tool since it has the potential to reach thousands of people at a time, including those who may not want to leave their homes to go to a Telehealth session," adds Kueber.

Kelly Howarth, Program Evaluator and Consultant, explains

that the new radio programming, which is still in its pilot phase, is an important part of Telehealth's mission.

"We align our radio programming with Telehealth. If we just did a session on bone health, we'll do a radio call-in show about arthritis. The two elements work together beautifully."

In order to better meet the needs of the communities they work with, radio segments are pre-recorded.

"We produced a series of 15 minute radio shows, including a segment on grief and loss," Howarth recalls. "In the Magdalen islands, there was a community who had just suffered the loss of a young person. They not only aired our segment but also decided to produce their own."

The Community Radio Project is about more than just getting people to tune in – it's

about inspiring the community to come together.

"We are trying to create community clusters around the radio shows," Howarth says. "We encourage people to gather together and listen to the show as a group."

One of the CHSSN's most lasting legacies may be the creation of links that extend beyond community organizations and health agencies into the lives of individuals – relationships like the one between a cancer patient and nurse who met at a Telehealth session last fall in Thetford Mines.

"We have an impact on these communities and individuals because we create awareness," Howarth concludes. "We teach people that English-language health information does exist and show them how they can come together as a community to access this information and be healthier. That's a very empowering thing." ♦

PARTNERSHIP BETWEEN VANIER COLLEGE
AND THE CSSS DES SOMMETS

Taking student internships to the height of success



From left to right : Maria Di Feo, Sarah Rassenti and Michèle St-Pierre presented the partnership between Vanier College and the CSSS des Sommets to community organizations during the 2007 Forum.

Last spring, three third-year Nursing students from Vanier College participated in a month-long internship at the CSSS des Sommets' acute care hospital in Ste-Agathe-des-Monts. Although the process of sending student nurses to do a clinical placement in a regional francophone milieu was not without challenges, the experience was clearly a success.

"For Vanier, it was a great opportunity," says Maria Di Feo, the nursing teacher who supervised the externship. "We are proud to be contributing to the health care services offered to the English-speaking population in the Laurentians. Being able to offer our students such unique placement experiences increases the competitiveness of our program."

For the CSSS des Sommets which provides service to a large part of the Laurentians (including the Mont-Tremblant tourist area), the internships were an equally precious opportunity.

"There is a need for English services here, especially on the weekends and in summer when the English population skyrockets," explains Michèle St-Pierre, who coordinated the internship program at CSSS des Sommets. "There are also a lot of English-speaking retirees who live in Ste-Agathe. These people all need care."

Sarah Rassenti who was placed in the hospital's emergency department agrees, explaining that the externship provided her with a chance to "do things that most nursing students never get to do."

She welcomed being able to communicate with the hospital's patients in their own language, especially in a situation as critical as the ER.

"They definitely appreciated it," she reports. "Most of them didn't even try to ask for services in English so this must have been a real treat for them."

Armed with French textbooks and terminology booklets provided for her by Vanier, Sarah was well prepared for the challenge of working in a francophone milieu.

"As a future nurse who wants to work in Québec," she notes, "the opportunity to work in a francophone environment was an invaluable experience."

Sarah was offered a job at the CSSS des Sommets thanks to this experience, but she has since decided to pursue her studies and is now enrolled in McGill's Bachelor of Nursing program. Would she consider working in Ste-Agathe after graduation?

"Absolutely!" she says. "My experience was very positive. I still keep in touch with the staff... they even sent me a Christmas card!"

As for Maria Di Feo, she is busy recruiting students for a spring 2008 repeat of the Ste-Agathe experience.

"We are excited about the long-term results of this partnership with McGill," she explains, adding that the College is looking to expand the initiative, possibly through a partnership with Brome-Missisquoi-Perkins Hospital in the Eastern Townships.

This may just be the beginning of another beautiful friendship. ♦

PRACTICE MAKES PERFECT

McGill develops language workbooks and tools

for health and social services professionals

Language training will always be at the heart of the McGill Project. As part of Measure 1, McGill is producing a set of workbooks and tools to follow-up to language training programs. So far, a facilitator's handbook, self-study workbook and DVD designed for receptionists have been published and are being used in healthcare and social services establishments across the province. The materials are presently being evaluated by Nathalie Kishchuk, an expert evaluation consultant. Similar tools destined for triage nurses and social workers are also in the works.

Participants agree that developing resources to follow up on language courses is necessary. The workbook has been designed by specialists in Teaching English as a second language to help users maintain their new English language skills

once a course is completed, so that they can communicate more comfortably and effectively with their English-speaking patients.

Representatives from the province's regions agree that they are a welcome addition to their existing resources. Jocelyne Audet, from the Agence de la santé et des services sociaux de la Montérégie, feels that the material is well-developed enough to stand on its own: "We recommend it to our receptionists who have not yet taken an English course so that they can improve their language skills on their own," she explained at a videoconference in November 2007.

One thing is for sure, the workbooks reflect an ongoing trend in the McGill Project: a desire to empower healthcare and social service professionals and to implement resources that will be there for them in the long run. ♦

CONTINUED FROM PAGE 1

Sharing ideas and strategies for success

When a project relies on the participation of hundreds of people in regions across the province, getting together to share experiences and perspectives can make a world of difference. On September 27-28 2007, as part of Measure 3, the McGill Project hosted a forum called Creating Sustainable Partnerships: Conditions for Success. Participants from community organizations and health and social services establishments across the province gathered in downtown Montreal for the two-day event.

Among the highlights were presentations given by people involved in some of Measure 2's most successful internships. Elayne Aber, Nathalie Bourassa and Patrick McIntyre shared their experience of distance supervision during a Social Work field placement at the Centre de protection et de réadaptation de la Côte-Nord, while Maria Di Feo, Sarah Rassenti and Michèle St-Pierre spoke about the partnership between Vanier College and the CSSS des Sommets. Later in the day, attendees exchanged their ideas and expertise during an

interactive session. Participants developed strategies on issues such as recruiting, placing and supporting students, as well as involving the community.

In the afternoon, following presentations by community leaders such as CASA's Kim Harrison and government officials such as Julie Desjardins, attendees were asked to evaluate their experience. Their feedback was overwhelmingly positive: participants found the accounts of successful internships to be inspiring and were grateful for the chance to share ideas and network. ♦

MONTREAL'S EAST END INITIATIVE

Small steps towards the big picture

McGill University has always had an excellent reputation for educating well-rounded nurses.

Cheryl Armistead coordinates the Community Health Nursing course at McGill. She says that one of the keys to this success is encouraging students to look at health and healthcare with a broader lens.

"Within a decade, 60-70% of nursing care will take place in community settings, outside of hospital walls," she explains. "It's imperative that our students learn how to go beyond the medical and look at a person not just as a set of symptoms but as someone who is part of a community and shaped by a multitude of factors."

Since language is undeniably one of those factors, it

was fitting for students enrolled in Armistead's course to get involved in a unique initiative to bring bilingual nurses to English East End schools.

"We have eight students currently participating in community nursing internships at four English schools in Montreal's East End," explains Lynda Egglefield, who acts as a Clinical Instructor for the project.

In the field, these young nurses provide health promotion and illness prevention tools that address a variety of issues: communication, belonging, healthy growth and development, sexuality, smoking, hygiene, nutrition, and more.

"This initiative—and the McGill Project as a whole—is all about access," says Egglefield. "Not just access to services but access to informa-

tion in a language they can easily understand."

More than just providing valuable information and organizing activities like Halloween safety workshops and sessions on preventing teen pregnancy, the student-nurses are learning how to apply the theories of community health nursing.

"They are learning that a child is not just a child, but is part of a school, a family, and a community," explains Armistead. "And that language really makes a difference."

Even though East Hill Elementary is a French immersion school, intern Elizabeth Murphy Lavallée and her partner have permission to conduct certain activities with the children in English, which is the language they speak at home.

"When we did the workshop on hygiene in English, the stu-



Eight students participate in community nursing internships at four English schools in Montreal's East End. From left to right starting from the front row: Valerie Rea, Clara Lauture, Julie Crépeau-Boisvert, Julie Laliberté; second row: Rebecca Yeung, Perle Arcand-Lussier, Elizabeth Murphy-Lavallée, Mayari Linares Recinos.

dents seemed relieved and happy to be able to speak in their first language," she says. "Even though their level of French is good, they appreciated not having to concentrate so much on language and being able to focus on the material."

Elizabeth just bought a condo in East End Hochelaga-Maison-

neuve. Would she consider working in the area as a nurse after her studies?

"I would, although my long-term goals also involve working outside Montreal in the regions," she says.

No doubt her skills will make as much a difference there as they have at East Hill. ♦

Language training growing by leaps and bounds in Laval

In 2006, the Agence de la santé et des services sociaux de Laval (ASSSL) launched a project to reach out to its growing English-speaking community by translating hundreds of documents. Today, the Agence is setting records with a new language training program for local healthcare providers.

"Laval is the region in Québec where the English population is increasing at the fastest rate," explains Jean Lafortune, Agence community relations coordinator and project manager. "The ASSSL has had a language training program in place for several years, but results were

less than perfect. Training has always been a priority for us - this year we have achieved an unexpected level of success."

ASSSL turned to Champlain College (St-Lambert), with whom they developed a customized language training program as well as a plan to recruit trainees, which, as Lafortune notes, was an important first step.

"We asked each establishment to provide us with a list of professionals who were administering services to the English-speaking population," he explains. "We prioritized candidates who already had a good level of English."

In September of 2007, ninety four participants started the course, which is composed of two intensive week-long sessions and six half-day ones. Right away, there were clear indications of success.

"We had a 97% attendance rate for the first session, going from a 20% drop-out rate to only 2%," Lafortune beams.

"The students are happy; one group is even thinking of hiring one of the instructors for private lessons. That says a lot about Champlain's teaching method."

Although Champlain College has a lot to do with this success, the ASSSL deserves credit as well.

equipped to make the most of their new English skills: each of them received a French-English dictionary and a subscription to *The Gazette*.

Lafortune reports that the participants in the training programs are already much more comfortable speaking English.

"Laval is the region in Québec where the English population is increasing at the fastest rate," explains Jean Lafortune, Agence community relations coordinator and project manager. "The ASSSL has had a language training program in place for several years, but results were less than perfect. Training has always been a priority for us - this year we have achieved an unexpected level of success."

"Communication is key," explains Lafortune. "We hold regular meetings with project managers in each establishment to make sure we are on the same page."

The ASSSL also made sure course participants were

"Our goal," he says, "is to improve access to services for the anglophone population. Those ninety four staff members are more competent today than they were in September. They are providing our English-speaking clientele with better care." ♦



Jean Lafortune, ASSSL community relations coordinator and project manager with his colleagues Louise Vandal (left) and Isabelle Thibault (right).

130 projects across Québec supported by McGill University Human Resources Development Project in 2007–08

130 projets partout au Québec soutenus par le Projet de développement des ressources humaines de l'Université McGill

● Language training/Formation linguistique (97 projects/projets)

REGION 01 BAS-SAINT-LAURENT

Centre de santé et de services sociaux de Rimouski-Neigette

REGION 02 SAGUENAY — LAC-SAINT-JEAN

Centre de santé et de services sociaux de Chicoutimi

Centre de santé et de services sociaux Cléophas-Claveau

Centre de santé et de services sociaux de Jonquière

Centre de santé et de services sociaux Maria-Chapdelaine

REGION 03 CAPITALE-NATIONALE

Centre hospitalier affilié universitaire de Québec

Centre hospitalier Robert-Giffard

Centre hospitalier universitaire de Québec

Centre de santé et de services sociaux de Québec-Nord

Centre de santé et de services sociaux de la Vieille-Capitale

Hôpital Jeffery Hale / St. Brigid's Home

Hôpital Laval

REGION 04 MAURICIE ET CENTRE-DU-QUÉBEC

Agence de la santé et des services sociaux de la Mauricie et du Centre-du-Québec

REGION 05 ESTRIE

Centre de communication santé Estrie

Centre hospitalier universitaire de Sherbrooke

Centre Jean-Patrice-Chiasson / Maison St-Georges

Centre jeunesse de l'Estrie

Centre de réadaptation de l'Estrie

Centre de santé et de services sociaux – Institut universitaire de gériatrie de Sherbrooke

Centre de santé et de services sociaux de Memphrémagog

Centre de santé et de services sociaux de la MRC-de-Coaticook

Centre de santé et de services sociaux du Val Saint-François

Regroupement CNDE-Dixville Inc.

Villa Marie-Claire Inc.

REGION 06 MONTRÉAL

Centre de santé et de services sociaux d'Achamps et Montréal-Nord

Centre de santé et de services sociaux Lucille-Teasdale

Centre de santé et de services sociaux de la Pointe-de-l'Île

Centre de santé et de services sociaux de Saint-Léonard et Saint-Michel

REGION 07 OUTAOUAIS

Centre hospitalier Pierre-Janet

Centre Jellinek

Centres jeunesse de l'Outaouais

Centre de santé et de services sociaux des Collines

Centre de santé et de services sociaux de Gatineau

Centre de santé et de services sociaux de Papineau

Centre de santé et de services sociaux du Pontiac

Centre de santé et de services sociaux de la Vallée-de-la-Gatineau

Pavillon du Parc

REGION 08 ABITIBI-TÉMISCAMINGUE

Centre jeunesse de l'Abitibi-Témiscamingue

Centre Normand

Centre de réadaptation en déficience intellectuelle Clair-Foyer

Centre de réadaptation La Maison

Centre de santé et de services sociaux des Aurores Boréales

Centre de santé et de services sociaux du Lac-Témiscamingue

Centre de santé et de services sociaux Les Eskers de l'Abitibi

Centre de santé et de services sociaux de Rouyn-Noranda

Centre de santé et de services sociaux de Témiscamingue-et-de-Kipawa

Centre de santé et de services sociaux de la Vallée-de-l'Or

REGION 09 CÔTE-NORD

Centre local de services communautaires Naskapi

Centre de protection et de réadaptation de la Côte-Nord

Centre de santé et de services sociaux de la Basse-Côte-Nord

Centre de santé et de services sociaux de Port-Cartier

Centre de santé et de services sociaux de Sept-Îles

REGION 10 NORD-DU-QUÉBEC

Centre de santé de Chibougamau

REGION 11 GASPÉSIE — ÎLES-DE-LA-MADELEINE

Centre jeunesse Gaspésie/Les Îles

Centre de santé et de services sociaux de la Baie-des-Chaleurs

Centre de santé et de services sociaux de la Côte-de-Gaspé

Centre de santé et de services sociaux du Rocher-Percé

REGION 12 CHAUDIÈRE-APPALACHES

Centre de santé et de services sociaux du Grand Littoral

Centre de santé et de services sociaux de Montmagny-L'Islet

Centre de santé et de services sociaux de la région de Thetford

REGION 13 LAVAL

AGAPE inc.

Centre d'assistance et d'accompagnement aux plaintes (CAAP)

Centre jeunesse de Laval

Centre de réadaptation en déficience intellectuelle Normand-Laramée

Centre de santé et de services sociaux de Laval

Hôpital juif de réadaptation

Manoir St-Patrice Inc.

Santé Courville Inc.

REGION 14 LANAUDIÈRE

Centre d'hébergement et de soins de longue durée Heather Inc.

Centre de réadaptation La Myriade

University's Training and

Formation et Université McGill en 2007-2008

▲ Retention and distance professional and community support/ Maintien en poste et soutien professionnel et communautaire à distance (33 projects/projets)

Centre de santé et de services sociaux du Nord de Lanaudière
Centre de santé et de services sociaux du Sud de Lanaudière

REGION 15 LAURENTIDES

Centre jeunesse des Laurentides

Centre de santé et de services sociaux d'Argenteuil

Centre de santé et de services sociaux du Lac-des-Deux-Montagnes

Centre de santé et de services sociaux des Pays-d'en-Haut

Centre de santé et de services sociaux de Saint-Jérôme

Centre de santé et de services sociaux des Sommets

Centre de santé et de services sociaux de Thérèse-De Blainville

REGION 16 MONTÉRÉGIE

Centre hospitalier Charles-LeMoine

Centre jeunesse de la Montérégie

Centre montréalais de réadaptation

Centre de réadaptation en déficience intellectuelle Montérégie-Est

Centre de santé et de services sociaux Champlain

Centre de santé et de services sociaux Haut-Richelieu-Rouville

Centre de santé et de services sociaux du Haut-Saint-Laurent

Centre de santé et de services sociaux de la Haute-Yamaska

Centre de santé et de services sociaux Jardins-Roussillon

Centre de santé et de services sociaux La Pommeraie

Centre de santé et de services sociaux Pierre-Boucher

Centre de santé et de services sociaux Richelieu-Yamaska

Centre de santé et de services sociaux du Suroît

Centre de santé et de services sociaux de Vaudreuil-Soulanges

Institut Nazareth et Louis-Braille

Pavillon Foster

Services de réadaptation du Sud-Ouest et du Renfort

REGION 18 TERRES-CRIES-DE-LA-BAIE-JAMES

Conseil Cri de la santé et des services sociaux de la Baie-James

REGION 03 CAPITALE-NATIONALE

Cégep Champlain – St. Lawrence

Community Health and Social Services Network (CHSSN)

Hôpital Jeffery Hale – Saint Brigid's Home

REGION 05 ESTRIE

Centre hospitalier universitaire de Sherbrooke (2 projects/projets)

Townshippers' Association (2 projects/projets)

REGION 06 MONTRÉAL

Cégep Vanier (2 projects/projets)

Centre de réadaptation de l'Ouest de Montréal

Centre de santé et de services sociaux de la Pointe-de-l'Île

Centre de soins prolongés Grace Dart (2 projects/projets)

Université McGill, Centre d'enseignement du français et de l'anglais

Université McGill, École des sciences de la communication humaine

Université McGill, École de sciences infirmières (2 projects/projets)

Université McGill, École de travail social (2 projects/projets)

REGION 07 OUTAOUAIS

Regional Association of West Quebecers

REGION 08 ABITIBI-TÉMISCAMINGUE

Université du Québec en Abitibi-Témiscamingue,
Département des sciences de la santé

Université du Québec en Abitibi-Témiscamingue,
Module de service social

REGION 09 CÔTE-NORD

Centre de protection et de réadaptation de la Côte-Nord

Coasters Association Inc. (2 projects/projets)

REGION 11 GASPÉSIE — ÎLES-DE-LA-MADELEINE

Centre de santé et de services sociaux de la Côte-de-Gaspé

Committee for Anglophone Social Action (CASA)

Council for Anglophone Magdalen Islanders (C.A.M.I.)

REGION 12 CHAUDIÈRE-APPALACHES

Megantic English-speaking Community
Development Corporation (MCDC)

REGION 13 LAVAL

Centre de santé et de services sociaux de Laval,
Centre de jour Sainte-Dorothée

REGION 15 LAURENTIDES

Centre de santé et de services sociaux d'Argenteuil

Centre de santé et de services sociaux des Sommets
(2 projects/projets)