

Dialogue

BETTER COMMUNICATION FOR BETTER CARE

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Symposium gets researchers and community organizations talking

“**K**nowledge and data are the foundations which allow us to define health problems, design solutions, and evaluate programs and services,” explains Johanne Lapointe, Team leader for the Official Language Minority Communities (OLMC) initiative at the Canadian Institutes of Health Research (CIHR).

The OLMC initiative's mandate – to create knowledge and facilitate its application to reduce health disparities between official language minority and majority communities in Canada – is so in line with that

of McGill's Training and Human Resources Development Project's that it made perfect sense for McGill to be interested once approached about CIHR's objectives. A big idea was born – to bring researchers dedicated to OLMC health issues together with organizations representing Québec's English-speaking communities.

McGill, the Community Health and Social Services Network (CHSSN) and Saint Brigid's - Jeffery Hale Hospital, all participated in a symposium which CIHR organized in Montreal on March 27. “Community organi-

zations are the eyes and ears of the population,” says Lapointe. “They are crucial partners within a research team. The Symposium was a first step in bringing them closer.”

Louis Hanrahan is the Executive Director of Saint Brigid's - Jeffery Hale Hospital, which has a special mandate to serve the English-speaking community of the Québec City area. He knows that community organizations have a lot to gain from researchers as well. “We see the population every day but

SEE SYMPOSIUM ON PAGE 2

Interactive online course trains the supervisors of tomorrow... and today



Online Supervision Course Team, from left to right: Caroline Storr, Oonagh Aitken, Marcia Beaulieu, Francine Granner, Estelle Hopmeyer, and Mariette Xenopoulos DETAILS ON PAGE 2.

The Training and Human Resources Development Project is part of the fabric of the Faculty of Arts

The Faculty of Arts at McGill University has had a leadership role in the Training and Human Resources Development Project (THRDP) since its beginnings in 2004, overseeing its activities and contributing valuable expertise. Today, as the THRDP

enters a new period of development, research and renewal, the Faculty of Arts is entirely committed to accompanying the Project through its next phase.

For Nathalie Cooke, Associate Dean, Research and Graduate Studies, the Faculty of Arts is a natural home for the Project.

“We are known for our interest in and commitment to research and dialogue on health issues and social policies,” she explains. “One of our primary strengths is an interdisciplinary group of faculty members and scholars working in the areas of – and at the intersection of – health and society.”

The Faculty of Arts is the largest at McGill, comprising Humanities and Social Sciences, as well as the McGill School of Social Work which has emerged as a leader in training and research, both in Québec and across Canada. The Faculty's commitment to social issues and

to community outreach made it the perfect home for the Project five years ago and an invaluable partner as it moves forward today.

“McGill has a long and rich tradition of working closely with community partners to

SEE THE TRAINING ON PAGE 3



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.

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Jennifer Johnson, Executive Director of the CHSSN



Carolyn Turner, Associate Professor, Department of Integrated Studies in Education at McGill



Johanne Lapointe, Team leader for the Official Language Minority Communities (OLMC) initiative at the Canadian Institutes of Health Research (CIHR)

to share. But we are all on the same page."

For Johnson and the community organizations she works with every day, the event was undeniably a big success. "The communities are so happy with the way it turned out," she says. "They feel like they are part of an important process. The research that comes out of this will be better connected to the communities; that is very encouraging."

Many of the day's presenters and participants commented on how rare it was to get such a diverse group of researchers and community organizers in the same room. In his opening remarks, representative of the Commissioner of Official Languages Charles Taker summed it up best using the words "planetary alignment" to describe the exceptional quality of the moment. "We form a circle," he said. It's a circle that the Project and its collaborators hope will continue to widen and grow in the years to come. ♦

we don't always have the data required to prioritize our services or to put our resources in the right spot."

There is a glaring lack of data about the English-speaking population of Québec and its access to health and social services. Jennifer Johnson, Executive Director of the CHSSN, echoes Hanrahan's concerns, adding that knowledge and data are not only needed to organize and define health issues, but also to under-

stand what is happening in communities across the province.

In her keynote address at the symposium, Johnson set out to debunk some of the myths that exist about Québec's English-speaking communities. "Every time I give that talk, people say to me afterwards 'I had no idea!' There are a lot of preconceived notions about the English-speaking community in Québec, regarding its level of income and education and

access to services," she explains, "and a lack of awareness about its level of vulnerability, both in the regions and in Montreal."

It was an effective way to start a symposium designed to generate interest about English-speaking minority groups and to get researchers and community organizations talking. To maximize the networking potential of the event, the day was scheduled around several sessions which allowed

participants to dialogue in small discussion groups.

Carolyn Turner is a professor at McGill's Faculty of Education and is currently conducting research about language use in the context of healthcare access. For her, those discussion groups were the most useful part of the day. "Speaking with people one-on-one really brought the challenges home for me," she recalls. "Researchers have expertise to contribute, and communities have stories and issues

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Interactive online course trains the supervisors of tomorrow... and today

Measure 2 of the McGill Project – Retention and Distance Support – focuses on building partnerships with Health and Social Services establishments across the province. One of the Project's main challenges of successful internships has become the implementation of professional resources to supervise field placements. Working in collaboration with the University of Ottawa component of the Consortium national de formation en santé, the Project has developed an English-

language online supervision training course that is both interactive and interdisciplinary. Over 100 participants across Québec and Canada, ranging from first-time supervisors to seasoned professionals, have already taken the course. For Caroline Storr, Clinical Coordinator of the School of Physical and Occupational Therapy, the course is like "comfort food" for novice supervisors: "just knowing that these tools are online to support them in their work makes a big difference."

The free course, which is offered on a voluntary basis,

is made up of five modules that mirror the supervision trajectory: from orientation to evaluation. Each module is comprised of readings, videos, as well as moderated discussions during which participants exchange on what they have learned. For Marcia Beaulieu, Assistant Director of the Bachelor of Nursing program, witnessing students' lively online interactions was rewarding: "Their comments were a joy to read. These are highly motivated, thoughtful professionals."

The course was originally developed in French at the University of Ottawa by a team of interdisciplinary professionals representing several of the major Health and Social Services fields. For Estelle Hoppmeier, Project Co-investigator, and her colleagues, this rich collaboration has been one of the project's "unexpected benefits".

Veteran supervisors have found the course to be immensely valuable as well. Mary Hendrickson-Nelson, Clinical Coordinator for McGill's dietetics program who took the course last fall,

is no stranger to supervision: "It was a great refresher and contained information that would benefit any supervisor, especially with regards to feedback and evaluation."

The Project hopes to be able to get people in the regions involved in the course, which will be offered again in September 2009. Until then, limited access is available to interested participants.

To find out more about the course or to register online, you can visit the Project's Website at www.mcgill.ca/hssaccess/two/supervision. ♦

Managing diabetes in a handheld world

In a world where text messages have replaced traditional communication, using technology to provide better care for chronic diseases like hypertension and diabetes makes perfect sense. Dr. Antonia Arnaert, Assistant professor at the School of Nursing and instigator of a study using BlackBerry cell phones to help patients does just that.

Thanks to funding from the THRDP, Arnaert and her collaborators conducted a 45-participant study of patients suffering from hypertension who were asked to monitor their symptoms and use BlackBerry mobile phones to communicate with health care professionals.

"The hypertension project was so successful that we decided to see what this technology could do for patients suffering from uncontrolled diabetes," explains Dr. Arnaert, who hopes to recruit as many as 20 participants for the two-month study.

Participants test their blood sugar three times a day and



Donna Byrne (left) and Antonia Arnaert (right) demonstrate how patients can manage their hypertension using BlackBerry mobile phones.

measurements are submitted via BlackBerry to nurses at Health Access Santé. Nurses, who check in with participants once a week,

phone them immediately if their measurements are out of range. Donna Byrne, President and founder of Health Access Santé,

a private homecare company, knows that technology can play a major role in keeping people independent. "We are not just

monitoring these patients; we are teaching them to monitor themselves, to take control and manage their symptoms."

Janet Forsyth, community organizer at Canadian-Italian Community Services in the East End of Montreal, is involved in a Diabetes Initiative linking over 140 partners across the province aimed at helping English-speaking Quebecers get information and support about diabetes in their own language. As coordinator of the community end of the BlackBerry Project, Forsyth believes that technology is essential in linking up people who need help with necessary resources.

"English-speaking people are very dispersed geographically in Québec," she observes. "Telemonitoring means that one precious person can serve an entire community."

And while the BlackBerry cell phones are currently only being used in Montreal, Forsyth is determined to expand this high-tech initiative to isolated communities across Québec. "We are going to do whatever it takes." ♦

CONTINUED FROM PAGE 1 THE TRAINING



Nathalie Cooke, Associate Dean, Research and Graduate Studies, Faculty of Arts
Photo by Owen Egan

improve outcomes in health and society," says Sandra Crocker, Assistant Vice-Principal (Research Operations). "We are deeply committed to improving the lives of Canadians through our research and teaching mission and this project is a unique opportunity to advance both. Our experiences over the past five years have been rewarding on many fronts and we very much look forward to increasing the level of engagement with our partners afforded under the next phase of work within the Project."

The next phase of the Project will see McGill building on the many fruitful partnerships with community organizations and government agencies that have been nurtured over the past five years. The Project plans to invest in knowledge creation that includes an evaluation of the impact of its own programs and the development of tools to measure the needs of the communities it serves.

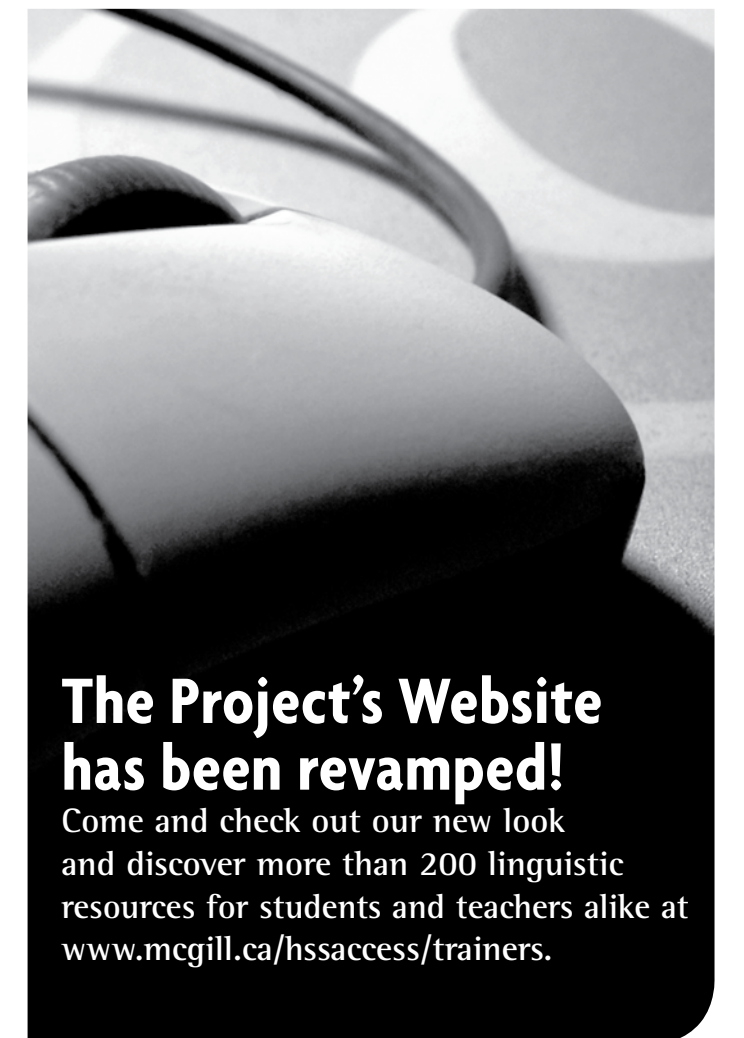
"This is an exciting time," beams Professor Cooke. "We are evaluating the impact and achievements of THRDP with an eye to continuing and enhancing knowledge creation in the area of linguistic minorities."

In the coming months and years, the Project hopes to recruit more collaborators.

"As the Project moves forward, its momentum inevitably draws a new generation of Arts faculty members to contribute their strengths and key insights," explains Professor Cooke.

Health Canada has lauded the Project's intention to grow into the future and is planning with the Faculty a colloquium on research and the health of the OLMCs, to be held in Ottawa on November 5-6. "We look forward to discussing the first phase of THRDP and forging additional partnerships and synergies with a larger network of researchers," says Professor Cooke. "Together, we will continue working to improve access to healthcare services for linguistic minorities and measuring the impact of service delivery."

On top of widening its circle of contributors, the Project will also debut a new name, which should be unveiled in the upcoming months. There is no doubt that the Project is heading in a strong new direction. ♦



The Project's Website has been revamped!

Come and check out our new look and discover more than 200 linguistic resources for students and teachers alike at www.mcgill.ca/hssaccess/trainers.

LANGUAGE TRAINING WORKBOOKS FOR TRIAGE NURSES AND PSYCHOSOCIAL SERVICE PROVIDERS A “formidable collaboration” between McGill and professional corporations

“Our goal is to create authentic material that mirrors the reality of what is going on in healthcare and social services establishments today,” says Hélène Riel-Salvatore, Project Co-investigator and Coordinator of the THRDP Language Training Program, about one of the latest “Measure 1” language training endeavours: workbooks and tools designed for triage nurses and psychosocial service providers.

Over 600 copies of the training workbooks produced last year for receptionists are being used in healthcare and social services establishments across Québec. Hot off the heels of that success, the McGill Project has expanded its efforts. “Our mandate continues,” explains Riel-Salvatore, “to create material that professionals can use to perfect their



Workbook production team, from left to right: Donna Lisney, Tanya Seredynska (top row), Pat Tedford (lower row) and team leader Sue Harrison. Missing from photo is project manager, Les Bairstow.

skills after they have completed language training.”

This time around McGill has enlisted the help of two professional orders – the Ordre des infirmières et infirmiers du Québec (OIIQ) and the Ordre

about much more than simply approving material. “The OIIQ was involved in the production of these tools from A to Z. We participated in the selection of copywriters. We supervised the writing of scripts and the production of videos.”

Riel-Salvatore adds that this “formidable collaboration” with the OIIQ would not have been possible were it not for the efforts of a core group of people who have worked on the production of these tools from the beginning. Sue Harrison, production team leader, marvels at how well she and her three colleagues have taken on the huge task of putting together the tools. “We work individually but in close collaboration,” Harrison explains. “It’s a very supportive and creative environment.”

Harrison and her team, each of whom has expertise both in

teaching English as a second language and teaching language for working purposes to healthcare and social services professionals, design the exercises that make up the workbooks, and adapt the scenarios for the accompanying video and audio tools, which are produced by project manager Les Bairstow.

Like their predecessor, the training tools for triage nurses will be evaluated by an independent consultant. “We want to know how professionals and language trainers across the province feel about the materials; we are constantly readjusting our approach to meet our target audience,” says Riel-Salvatore.

The McGill team is also working with the OPTSQ on the creation of material destined for psychosocial service providers, which will be available in early 2010. ♦

THE RIGHT WORDS

A new partnership between McGill and the AQPA

In the basement of a Montreal hospital, men and women of all ages and backgrounds gather every week to make conversation. There’s a buzz in the room, lots of giggling and talking, and when the group disperses a couple of hours later, many of them are sad to go home.

Sounds like just another meeting, but for these men and women living with aphasia, there’s nothing ordinary about it. Thanks to funding from the McGill Project, the Association québécoise des personnes aphasiques (AQPA) now offers bi-weekly English-language conversation groups facilitated by students from McGill University’s School of Communication Sciences and Disorders (SCSD).

For the University, the partnership with the AQPA was a win-win

situation. “We’re always looking for placements for our English-speaking students,” explains Jeanne Claessen, Head of Clinical Program at the SCSD. “It’s important that our students learn to treat individuals in a social setting, not just in a clinical environment.” For the AQPA, whose English-language activities had dwindled due to lack of funding, the initiative has allowed them to reach out to their English-speaking members.

Darla Orchard, the speech-language pathologist who supervises the students, speaks passionately about the group.

“We create an aphasia-friendly environment where members can socialize and work on their language skills at the same time. Most of our members speak no French at all,” she explains, “so

it’s absolutely critical for them to be in an English setting, and this is the only open-ended English conversation group for aphasic people on the Island of Montreal.”

Judging by its members, the group seems to be a resounding success. Stan Backman, in his early seventies, has come a long way since his stroke. “Four years ago, I didn’t know my own name.” Like many other members, Stan frequents the AQPA’s English activities several times a week: “Today is the conversation group, Tuesday, I come to the singing choir...”

“Me too,” calls out another client, beaming.

Another member, who suffers from severe aphasia, simply gives a thumbs-up. Their gratitude is louder than words. ♦



Clients at the AQPA English-language conversation group with the McGill students who facilitate these sessions

The Order of Nurses partners with McGill for online training in English

Since April 1st, 2009, nurses across Québec are required to document decisions pertaining to clinical follow-up using a Therapeutic nursing plan. This represents a major change for members of the Ordre des infirmières et infirmiers du Québec (OIIQ), and its introduction is impacting establishments and educational institutions across the province. To facilitate the new plan’s integration, the OIIQ developed an interactive online training module for nurses.

Dr. Judith Leprohon, Scientific Director at the OIIQ, explains that while the document defining the plan and the form itself were

available in English, its accompanying training module was not. “It is our policy to provide bilingual versions of all normative documents,” Dr. Leprohon explains. “Complimentary tools, like the training module, do not usually get translated, but we felt an English version of the module would facilitate the training of English-speaking nurses and students for this critical change.”

The OIIQ approached the THRDP, which agreed that translating the training module fell under their mandate of retaining English-speaking professionals by improving their access to necessary work tools. To determine if a

translation was warranted, McGill University conducted an informal survey of all English language Nursing Programs and hospitals in the Montreal region.

“The response was very positive,” says Dr. Marcia Beaulieu, Assistant Director of McGill’s Bachelor of Nursing program. “A majority of the professionals I spoke with felt an English version of the training module would be useful, and we felt it may also help English-speaking nurses in the regions.”

Translation of the module was completed this spring and an English version is available online at www.oiiq.org/uploads/publications/autres_publications/pti_en.pdf.

Dr. Leprohon believes that the English training module will positively impact the way that English-speaking Quebecers receive care. “Indirectly it will,

because the Therapeutic nursing plan is now easier to understand and use for all nurses and nursing students. This will contribute to the quality of care.” ♦

Don’t forget to consult our brochure

on internship requirements for McGill students enrolled in Health and Social Services programs. A copy is inserted in this issue of Dialogue.

You can also visit our Website at www.mcgill.ca/hssaccess/two/supervision.

SHOW AND TELL

Getting communities involved in language training programs

“One of my former students recently told me that she no longer breaks into a sweat when the phone rings and there’s an English voice on the other end,” recalls Jim Warbanks, coordinator of in-house language training at the Argenteuil Health and Social Services Centre since 2003. “That made my day.”

Thanks to funding from the THRDP, similar success stories from thriving language training programs are echoed across Québec. Some regions, however, are taking language training a step further by getting the English community involved – a growing trend that aims to bridge the gap between communities.

From the very beginning, Warbanks has been a proponent of getting people from Argenteuil County’s English community involved in his intensive classes which run for three full days. “Right from the get-go, we invite a guest speaker from the community to come in and talk to the group. Our students



Jim Warbanks (seated, left) and Alain Lefèvre (standing, right) pose for a picture with their language training class and guest speaker at the Argenteuil Health and Social Services Centre.

should hear as many different voices as possible,” he explains. “People from the community are a real hook.”

Guests talk about their jobs and experiences in a relaxed atmosphere, and Warbanks says that these encounters have led to people linking up in different ways.

“Our goal is to increase awareness and promote a sense of openness in the English community. We are not just teaching English, we are teaching attitude.”

At the ASSS Gaspésie-Îles-de-la-Madeleine, Mathieu Bernatchez coordinates an equally successful language training program. Over

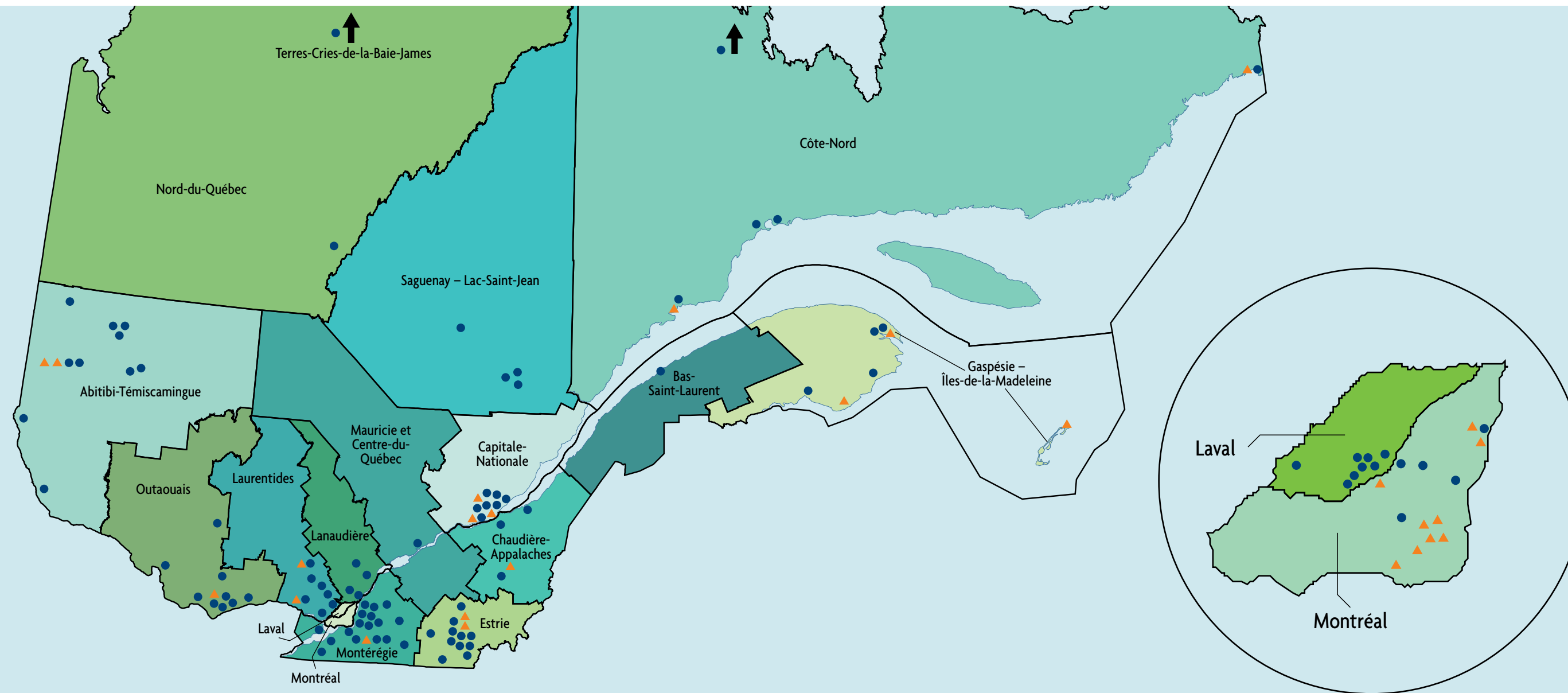
300 front-line healthcare professionals have been trained since 2005, a feat that is all the more impressive given that the training is offered on a voluntary basis and takes place outside of regular work hours. “There is a real openness to the training in our region,” beams Bernatchez.

The Agency has also implemented a program that encourages participants to get out of the classroom and practice their skills in a social environment. In collaboration with community organizations Council for Anglophone Magdalen Islanders (C.A.M.I.), Committee for Anglophone Social Action (CASA) and Vision Gaspé-Percé Now, the Agency’s English Language Committee organizes different activities, everything from dinner parties to board game nights. The only rule is that everyone must speak English.

Manon Dufresne, who sits on the Committee, believes that these activities have had a positive impact on the Agency and the community as a whole. “There is a growing need for these types of initiatives,” she explains. “These activities have benefited not only the clients receiving services but also the personnel, the community and the other partners that contribute to the success of this program. A real synergy has developed, one that must be nurtured.” ♦

130 PROJECTS ACROSS QUÉBEC SUPPORTED BY MCGILL UNIVERSITY'S TRAINING AND HUMAN RESOURCES DEVELOPMENT PROJECT IN 2008-09

130 PROJETS PARTOUT AU QUÉBEC SOUTENUS PAR LE PROJET DE FORMATION ET DE DÉVELOPPEMENT DES RESSOURCES HUMAINES DE L'UNIVERSITÉ MCGILL EN 2008-2009



▲ **Retention and distance professional and community support/Maintien en poste et soutien professionnel et communautaire à distance (32 projects/projets)**

REGION 03 CAPITALE-NATIONALE

Cégep Champlain – St. Lawrence
Community Health and Social Services Network (CHSSN)
Hôpital Jeffery Hale – Saint Brigid's

REGION 05 ESTRIE

Centre hospitalier universitaire de Sherbrooke (2 projects/projets)
Townshippers' Association

REGION 06 MONTRÉAL

Cégep Vanier
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
Ordre des infirmières et infirmiers du Québec
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) (2 projects/projets)
Council for Anglophone Magdalen Islanders (C.A.M.I.) (2 projects/projets)

REGION 12 CHAUDIÈRE-APPALACHES

Megantic English-Speaking Community Development Corporation (MCDC)

REGION 15 LAURENTIDES

Centre de santé et de services sociaux d'Argenteuil
Centre de santé et de services sociaux des Sommets

REGION 16 MONTÉRÉGIE

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

● **Language training/Formation linguistique (98 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 Jonquières
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 – Saint Brigid's
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 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'Ahuntsic et Montréal-Nord
Centre de santé et de services sociaux Lucille-Teasdale
Centre de santé et de services sociaux de la Montagne
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 Témiscaming-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
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 montréalien 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 Pommeraiie
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 Suroit
Centre de santé et de services sociaux de Vaudreuil-Soulanges
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