



NATIONAL ASSEMBLY

FIRST SESSION

THIRTY-SEVENTH LEGISLATURE

Bill 25

(2003, chapter 21)

An Act respecting local health and social services network development agencies

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Passage in principle 10 December 2003
Passage 17 December 2003
Assented to 18 December 2003

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EXPLANATORY NOTES

This bill, by establishing an integrated health and social services organization, seeks to bring services closer to the public and make it easier for people to move through the network. To that end, it proposes the creation of local health and social services network development agencies to succeed the regional health and social services boards by operation of law and without further formality.

The bill states that the mission of such an agency is to establish an integrated services organization in its area of jurisdiction. To do so, an agency must draw up and propose an organization model based on one or more local services networks covering all or part of the agency's area of jurisdiction.

The bill also stipulates that each of the local networks must include a local authority consolidating the institutions, identified by the agency, that provide local community service centre services, long-term care centre services and, except in certain cases, hospital centre services. In addition, each local network must include the services or activities of physicians, pharmacists, community organizations, social economy enterprises and private resources.

The bill states that an agency will exercise the powers, functions and duties conferred on a regional board in the board's place, unless the Minister of Health and Social Services deems it inappropriate for an agency to exercise any of them.

The bill also specifies that the decision of the Minister to accept the organization model proposed by an agency must be approved by the Government. Once the decision has been approved, the Minister will ask the Inspector General of Financial Institutions, if necessary, to issue letters patent amalgamating all the public institutions referred to in the proposal into a single public institution constituted under the Act respecting health services and social services. The new institution will act as the local authority for the local health and social services network. The letters patent will also name the 15 provisional members of the new institution's board of directors.

The bill confers certain powers on the Minister, including the power to take over the provisional administration of an agency if it fails to propose an organization model in keeping with the Act.

The bill also contains various transitional measures.

Bill 25

AN ACT RESPECTING LOCAL HEALTH AND SOCIAL SERVICES NETWORK DEVELOPMENT AGENCIES

THE PARLIAMENT OF QUÉBEC ENACTS AS FOLLOWS:

DIVISION I

ESTABLISHMENT AND ORGANIZATION

1. The purpose of this Act is to establish an integrated health and social services organization, including prevention, assessment, diagnostic, treatment, rehabilitation and support services, in order to bring health and social services closer to the general public and make it easier for people to move through the health and social services network.

2. The local health and social services network development agencies whose names appear in the schedule are hereby established.

Each of these agencies is a legal person that succeeds, by operation of law and without further formality, the regional health and social services board designated in the schedule opposite its name.

3. Each agency is a mandatory of the State. Its property forms part of the domain of the State, but the execution of its obligations may be levied against its property.

An agency binds none but itself when it acts in its own name.

4. The area of jurisdiction of an agency is the territory of the regional board that it succeeds and its head office is located in the same place as the head office of that regional board.

5. The affairs of an agency are administered by a board of directors composed of not more than 16 members appointed by the Minister, including

- (1) the president and executive director of the agency;
- (2) a member of the regional medical commission;
- (3) a member of the regional nursing commission; and
- (4) a member of the regional multidisciplinary commission.

6. The following persons may not be members of the board of directors of an agency:

- (1) persons not resident in Québec;
- (2) minors;
- (3) persons under tutorship or curatorship;
- (4) persons convicted in the preceding five years of a crime punishable by three years of imprisonment or more;
- (5) persons who, in the preceding three years, forfeited office as members of the board of directors of an institution or regional board under paragraph 2 of section 498 of the Act respecting health services and social services (R.S.Q., chapter S-4.2);
- (6) persons convicted in the preceding three years of an offence against the Act respecting health services and social services or its regulations.

7. With the exception of the members referred to in paragraphs 1 to 4 of section 5, no person who is employed by the Ministère de la Santé et des Services sociaux, an agency, an institution or the Régie de l'assurance maladie du Québec, is remunerated by the Régie, or has entered into a service contract under section 259.2 of the Act respecting health services and social services may sit on the agency's board of directors.

Scholarships, grants, subsidies and sums of money paid under a research contract are not deemed to be remuneration for the purposes of the first paragraph.

8. A member referred to in paragraphs 2 to 4 of section 5 ceases to be a member of the board of directors upon losing the qualification required for appointment.

9. The president and executive director is appointed for a term of not more than three years; the other board members are appointed for a term of not more than two years.

At the expiry of their terms, the members remain in office until replaced or reappointed.

10. A vacancy occurring after the appointment of a member of a board of directors must be filled for the remainder of the term of office.

An unexplained absence from the number of board meetings stipulated in the agency's rules of internal management, in the cases and circumstances provided in those rules, constitutes a vacancy.

11. A board member may resign by sending a notice in writing to that effect to the board of directors. A vacancy occurs upon acceptance of the resignation by the board of directors.

12. The president and executive director is responsible for the administration and operation of the agency within the scope of its by-laws.

The office of president and executive director is a full-time position. The president and executive director sees that the decisions of the board of directors are carried out and that the board receives all the information it requires or needs to discharge its responsibilities.

The remuneration, employment benefits and other conditions of employment of the president and executive director are determined by the Government.

13. The members of the board of directors elect the chair and vice-chair of the board from among their number.

The president and executive director of an agency and the members referred to in paragraphs 2 to 4 of section 5 may not be elected as chair or vice-chair of the board.

The vice-chair of the board replaces the chair if the chair is absent or unable to act.

14. The members of the board of directors other than the president and executive director of the agency are not remunerated. They are, however, entitled to the reimbursement of expenses incurred in the exercise of their functions, on the conditions and to the extent determined by the Government.

15. The quorum at meetings of the board of directors is a majority of the members, including the chair or the vice-chair.

Decisions of the board of directors are made by a majority vote of the members present. In the case of a tie-vote, the person chairing the meeting has a casting vote.

16. The chair calls board meetings, presides over them and sees that they proceed smoothly. The chair exercises any other functions assigned to the chair by the board.

17. The board of directors must meet at least six times a year.

However, it must meet at the request of the chair or at the written request of one-third of its members in office.

18. The meetings of the board of directors are public; the board of directors may, however, order that a meeting be held *in camera*, particularly when it considers this appropriate to avoid causing a person harm or when it is

deliberating on the negotiation of working conditions; the decisions made at meetings held *in camera* are public, subject to the protection of any personal information they may contain.

The board of directors must hold a question period at each meeting.

Documents submitted or sent to the board of directors and information given at public meetings of the board, as well as the minutes of those meetings, are public, subject to the protection of any personal information they may contain.

19. When a quorum of members is physically present at the place where a meeting of the board of directors is to be held and a majority of those members have given their consent, a board member may participate in the meeting by means of videoconferencing, telephone or other communications equipment that allows everyone participating in the meeting to communicate verbally with one another. In such a case, the member is deemed to have attended the meeting.

The minutes of such a meeting must mention

(1) the fact that the meeting was held using the communications equipment indicated;

(2) the name of the members physically present at the meeting, and the names of the members who agreed to the use of the communications equipment; and

(3) the name of the member who participated in the meeting with the assistance of the communications equipment.

20. In an urgent situation, the members of the board of directors may participate in a special meeting by telephone conference call, if there is a quorum and if all the members reached have given their consent.

The minutes of such a meeting must mention the fact that the meeting was held by telephone conference call, and that all the members who participated in the meeting agreed to the procedure. The decisions made at the meeting must be tabled at the following public meeting.

21. The fiscal year of an agency ends on 31 March.

An agency may adopt rules of internal management for the conduct of its affairs.

22. No instrument, document or writing binds an agency unless it is signed by the chair, the president and executive director or, to the extent determined by by-law of the board of directors, by a person the board designates.

23. The minutes of the meetings of the board of directors, approved by the board and signed by the chair and the secretary, are authentic. The same applies to documents and copies or extracts issued by the agency or forming part of its records if certified true by the chair or the secretary.

DIVISION II

MISSION

24. The mission of a local health and social services network development agency is to establish, in its area of jurisdiction, an integrated health and social services organization.

25. To accomplish its mission, an agency must draw up an organization model based on one or more local health and social services networks covering all or part of the agency's area of jurisdiction, and propose it to the Minister within the time the Minister specifies.

Each of these local health and social services networks must be designed so as to

(1) provide the people in its territory with access to a broad range of primary health and social services, including prevention, assessment, diagnostic, treatment, rehabilitation and support services;

(2) guarantee the people in its territory access to the specialized services available in the agency's area of jurisdiction and to superspecialized services, through agreements or other means, and taking into consideration the activities of the integrated university health network recognized by the Minister and associated with the local health and social services network;

(3) allow the establishment of mechanisms for the referral and follow-up of users of health and social services, and the introduction of clinical protocols for those services;

(4) involve the different groups of professionals working in the territory and enable them to build linkages;

(5) foster the cooperation and involvement of all the stakeholders in the other sectors of activity in the territory that have an impact on health and social services; and

(6) ensure the participation of the available human resources needed to provide health and social services.

26. Each of these local health and social services networks must include a local authority consolidating the institutions, identified by the agency, that provide local community service centre, long-term care centre and, except in the cases provided in the second paragraph, hospital centre services.

In order to give the general public in its territory access to general and specialized hospital services, a local authority must make an agreement with an institution operating a hospital centre if such an institution could not be included in the authority because of

(1) the absence of such services in its territory; or

(2) the complexity involved in integrating those services or consolidating them with the other services provided through the local authority, particularly considering the size of the territory served by the institution, the number or capacity of the facilities situated in the territory, or the sociocultural, ethnocultural or linguistic characteristics of the population served.

27. In addition to the local authority, each local health and social services network must include the activities and services of physicians and pharmacists.

Each of these networks must also include the activities and services of community organizations, social economy enterprises and private resources in its territory.

28. The local authority is responsible for coordinating the activities and services of each of the local health and social services networks through agreements or other means.

Where physicians are concerned, such agreements or means must be the subject of consultations with the regional department of general medicine established under section 417.1 of the Act respecting health services and social services and the regional medical commission instituted under section 367 of that Act.

29. A local health and social services network development agency exercises all the powers, functions and duties conferred by law on a regional health and social services board in place of that board and in keeping with the rules applicable to it, unless the Minister deems it inappropriate for an agency to exercise certain of those powers, functions and duties.

In addition, the president and executive director of such an agency exercises all the powers, functions and duties conferred by law on the president and executive director of a regional health and social services board in place of the president and executive director of such a board.

DIVISION III

ORGANIZATION MODEL

30. For the purpose of defining and proposing an organization model in accordance with section 25, the agency carries out consultations, in particular with the institutions concerned, the regional department of general medicine

established under section 417.1 of the Act respecting health services and social services, the regional committee formed under section 510 of that Act and the population of its territory through the people's forum established under section 343.1 of that Act.

In addition, the agency makes sure that the activities in the organization model it proposes and those in the integrated university health network will be carried on in a complementary manner.

31. At the expiry of the time specified under section 25 and after complying with section 30, the Minister may propose an organization model on the Minister's own initiative.

32. A decision made by the Minister to accept the organization model proposed by an agency under section 25 must be approved by the Government, with or without modification. The same applies to an organization model proposed by the Minister under section 31.

The Minister tables every order made under the first paragraph in the National Assembly within 30 days of the day on which it is made or, if the National Assembly is not sitting, within 30 days of resumption.

33. Once the order under section 32 has been made, and if necessary, the Minister, in accordance with section 318 of the Act respecting health services and social services and despite sections 325 to 327 of that Act, requests the Inspector General of Financial Institutions to issue letters patent amalgamating all the public institutions covered by the proposal and having their head office in the territory of the local health and social services network concerned to form a public institution constituted under that Act.

The letters patent must, despite the second paragraph of section 319 of the Act respecting health services and social services, name 15 persons who will act as provisional members of the board of directors of the new public institution resulting from the amalgamation for a period of two years from the issue of the letters patent. Those persons, chosen after consulting with the institutions covered by the proposal, must include one member of the board of directors of each of those institutions. Upon appointment by the provisional members of the board of directors, the executive director of the institution also sits on the board.

The new public institution resulting from the amalgamation acts as the local authority of the local health and social services network concerned.

34. If the services that an institution mentioned in a program developed under section 348 of the Act respecting health services and social services was required to make available in the English language to the English-speaking population are transferred to a local authority referred to in section 33, the local authority must maintain those services as if it were mentioned in the program until the program is revised.

35. Where an institution recognized under section 29.1 of the Charter of the French language (R.S.Q., chapter C-11) is amalgamated with an institution holding such recognition, the new institution retains the recognition until such time as, at its request, it is withdrawn by the Government pursuant to that Charter.

36. Where an institution recognized under section 29.1 of the Charter of the French language is amalgamated with an institution not holding such recognition, the new institution only retains the recognition for the facilities previously maintained by the recognized institution, until such time as, at its request, the recognition is withdrawn by the Government pursuant to section 29.1 of that Charter. For the purposes of sections 20 and 26 of that Charter, a person who exercises functions or performs work in such a facility is deemed to be an employee of the facility.

DIVISION IV

POWERS OF THE MINISTER

37. If at any time the Minister finds that an agency is not complying with the requirements of section 25, the Minister may, for that sole reason, assume the provisional administration of the agency as set out in the Act respecting health services and social services.

38. The Minister may exercise all the powers with respect to an agency that are conferred on the Minister by law with respect to a regional board.

In addition, the Minister may exercise the powers mentioned in sections 499 to 501 of the Act respecting health services and social services, on the Minister's initiative.

DIVISION V

TRANSITIONAL AND FINAL PROVISIONS

39. A local health and social services network development agency has all the rights, acquires all the property and assumes all the obligations of the regional health and social services board that it succeeds, and proceedings to which the board is a party may be continued by the agency without continuance of suit.

40. Persons who, on 29 January 2004, are employees of a regional health and social services board listed in the schedule become, without further formality, employees of the agency that succeeds the regional board.

These employees hold the position and exercise the functions assigned to them by the agency.

41. The term of office of the members of a regional health and social services board listed in the schedule ends on 29 January 2004.

However, the person who, on 29 January 2004, holds the position of president and executive director of a regional health and social services board listed in the schedule becomes, by operation of law, without further formality and until the expiry of the person's term, the president and executive director of the local health and social services network development agency that succeeds the regional board. As well, the remuneration, employment benefits and other conditions of employment that are applicable to that person are maintained.

42. As of 30 January 2004, the amount allocated by the Minister to the operating budget of a regional health and social services board for a fiscal year becomes the amount allocated to the operating budget of the agency that succeeds it.

43. The records and documents of a regional health and social services board listed in the schedule become, without further formality, the records and documents of the local health and social services network development agency that succeeds it.

44. A people's forum established under section 343.1 of the Act respecting health services and social services, a regional medical commission established under section 367 of that Act, a regional nursing commission established under section 370.1 of that Act, a regional multidisciplinary commission established under section 370.5 of that Act, and a regional department of general medicine established under section 417.1 of that Act are continued, and their members remain in office, and these bodies and their members continue to exercise their responsibilities in accordance with the relevant provisions of that Act.

45. Unless the context indicates otherwise and as of 30 January 2004, a reference to a "regional health and social services board" in any Act, regulation, order, order in council or other document is a reference to a "local health and social services network development agency".

46. The term of office of the provisional board members of a local authority of a local health and social services network, determined under the second paragraph of section 33, may be extended by the Minister, as long as the additional period does not exceed one year.

47. The Minister of Health and Social Services is responsible for the administration of this Act.

48. Not later than 30 January 2006, the Minister must report to the Government on the application of this Act and, if necessary, on the expediency of maintaining it in force or amending it.

The report is tabled in the National Assembly by the Minister within the next 30 days or, where the National Assembly is not sitting, within 30 days of resumption. The report is examined by the appropriate committee of the National Assembly.

49. This Act comes into force on 30 January 2004.

SCHEDULE

- Agence de développement de réseaux locaux de services de santé et de services sociaux de l'Abitibi-Témiscamingue
- Agence de développement de réseaux locaux de services de santé et de services sociaux du Bas-Saint-Laurent
- Agence de développement de réseaux locaux de services de santé et de services sociaux de Chaudière-Appalaches
- Agence de développement de réseaux locaux de services de santé et de services sociaux de la Côte-Nord
- Agence de développement de réseaux locaux de services de santé et de services sociaux de l'Estrie
- Agence de développement de réseaux locaux de services de santé et de services sociaux de la Gaspésie—Îles-de-la-Madeleine
- Agence de développement de réseaux locaux de services de santé et de services sociaux de Lanaudière
- Agence de développement de réseaux locaux de services de santé et de services sociaux des Laurentides
- Agence de développement de réseaux locaux de services de santé et de services sociaux de Laval
- Agence de développement de réseaux locaux de services de santé et de services sociaux de la Mauricie et du Centre-du-Québec
- Régie régionale de la santé et des services sociaux de l'Abitibi-Témiscamingue
- Régie régionale de la santé et des services sociaux du Bas-Saint-Laurent
- Régie régionale de la santé et des services sociaux de Chaudière-Appalaches
- Régie régionale de la santé et des services sociaux de la Côte-Nord
- Régie régionale de la santé et des services sociaux de l'Estrie
- Régie régionale de la santé et des services sociaux de la Gaspésie—Îles-de-la-Madeleine
- Régie régionale de la santé et des services sociaux de Lanaudière
- Régie régionale de la santé et des services sociaux des Laurentides
- Régie régionale de la santé et des services sociaux de Laval
- Régie régionale de la santé et des services sociaux de la Mauricie et du Centre-du-Québec

- Agence de développement de réseaux locaux de services de santé et de services sociaux de la Montérégie
- Agence de développement de réseaux locaux de services de santé et de services sociaux de Montréal
- Agence de développement de réseaux locaux de services de santé et de services sociaux de l'Outaouais
- Agence de développement de réseaux locaux de services de santé et de services sociaux de la Capitale nationale
- Agence de développement de réseaux locaux de services de santé et de services sociaux du Saguenay—Lac-Saint-Jean
- Régie régionale de la santé et des services sociaux de la Montérégie
- Régie régionale de la santé et des services sociaux de Montréal-Centre
- Régie régionale de la santé et des services sociaux de l'Outaouais
- Régie régionale de la santé et des services sociaux de Québec
- Régie régionale de la santé et des services sociaux du Saguenay—Lac-Saint-Jean