

Gouvernement du Québec

O.C. 317-2022, 16 March 2022

Act respecting health services and social services
(chapter S-4.2)

Minister of Health and Social Services
— **Information that institutions must provide**
— **Amendment**

Regulation to amend the Regulation respecting the information that institutions must provide to the Minister of Health and Social Services

WHEREAS, under subparagraph 26 of the first paragraph of section 505 of the Act respecting health services and social services (chapter S-4.2), the Government may, by regulation, prescribe the personal and non-personal information that an institution must provide to the Minister concerning the needs for and utilization of services;

WHEREAS, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), a draft Regulation to amend the Regulation respecting the information that institutions must provide to the Minister of Health and Social Services was published in Part 2 of the *Gazette officielle du Québec* of 29 September 2021 with a notice that it could be made by the Government on the expiry of 45 days following that publication;

WHEREAS it is expedient to make the Regulation to amend the Regulation respecting the information that institutions must provide to the Minister of Health and Social Services with amendments;

IT IS ORDERED, therefore, on the recommendation of the Minister of Health and Social Services:

THAT the Regulation to amend the Regulation respecting the information that institutions must provide to the Minister of Health and Social Services, attached to this Order in Council, be made.

YVES OUELLET
Clerk of the Conseil exécutif

Regulation to amend the Regulation respecting the information that institutions must provide to the Minister of Health and Social Services

Act respecting health services and social services
(chapter S-4.2, s. 505, 1st par., subpar. 26)

1. The Regulation respecting the information that institutions must provide to the Minister of Health and Social Services (chapter S-4.2, r. 23) is amended by inserting the following section after section 5.1.2:

“**5.1.3.** An institution operating a hospital of the general and specialized class of hospitals in which a clinical department of laboratory medicine is established must provide the Minister with the information in Schedule V.3 in respect of the following users:

(1) every user for whom an examination of the immunochemical fecal occult blood test is carried out;

(2) every user for whom an examination of the human papillomavirus test is carried out.”

2. Section 5.2.1 is replaced by the following:

“**5.2.1.** A public institution or a private institution under agreement operating one of the following centres must provide the Minister with the information in Schedule VI.1 in respect of a user who receives rehabilitation services from such a centre:

(1) a rehabilitation centre of one of the following classes:

(a) a rehabilitation centre for mentally impaired persons or persons with a pervasive developmental disorder;

(b) a rehabilitation centre for physically impaired persons;

(2) a hospital of the general and specialized class of hospitals.”

5.2.2. A public institution operating a rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction must provide the Minister with the information in Schedule VI.2 in respect of an individual user or a group user that receives services from such a centre.”

3. Section 6 is amended by replacing “5.2.1 and 5.3” in the portion before subparagraph 1 of the first paragraph by “5.1.3 and 5.2.1 to 5.3”.

4. Schedule I is amended

(1) in section 1

(a) by inserting the following after subparagraph *h* of paragraph 3:

“(h.1) the intervention program to which it is related;”;

(b) by inserting the following after subparagraph *e* of paragraph 4:

“(e.1) the priority code assigned to the assignment;”;

(2) in section 2

(a) by replacing subparagraphs *b* and *c* of paragraph 1 by the following:

“(b) the province or territory responsible for the health care insurance plan insuring the user;

(c) the date on which the user’s file was opened;”;

(b) by inserting the following after subparagraph *f* of paragraph 2:

“(f.1) an indication of whether the user is socially isolated;”.

5. Schedule V.1 is amended

(1) by inserting “in respect of any user suffering from cancer” after “the following information” in the portion before paragraph 1 of section 1;

(2) by adding the following at the end:

2. An institution referred to in section 5.1.1 of the Regulation must provide the following information in respect of any user for whom a request for a radiation oncology consultation is made or to whom radiation oncology treatment is administered:

(1) the date of receipt of the request for consultation;

(2) the clinical priority code assigned to the user’s cancer;

(3) the date of the first consultation;

(4) an indication that the administration of radiotherapy treatment was deemed appropriate following the consultation;

(5) the date as of which the user is deemed ready to receive a first radiotherapy treatment;

(6) regarding the radiotherapy treatment administered or determined following the consultation:

(a) the date on which it is administered for the first time;

(b) its anatomic target;

(c) an indication of whether it is teletherapy treatment or brachytherapy treatment;

(d) in the case of teletherapy treatment, the planning technique used in accordance with the financial management manual published by the Minister under section 477 of the Act respecting health services and social services (chapter S4.2);

(e) the name of the treatment plan;

(f) an indication of whether the treatment is curative or palliative;

(g) the number of treatment fractions scheduled;

(7) for each period of the user’s unavailability:

(a) the dates on which the user’s unavailability begins and ends;

(b) an indication of whether the unavailability is due to personal or medical reasons;

(8) the explanations of the institution regarding any delays incurred and any period of unavailability reported.

3. An institution referred to in section 5.1.1 of the Regulation must provide the following information in respect of any user for whom a request for an oncology consultation or a hematology consultation is made or to whom oncology or hematology treatment is administered:

(1) the date of receipt of the request for consultation;

(2) the priority code assigned to the request;

(3) the date of the first consultation;

(4) the tumour site of the cancer concerned by the treatment, where applicable;

(5) if the request for consultation concerns a user whose cancer diagnosis has not been confirmed, an indication that the user is awaiting a diagnosis;

(6) an indication that, following the consultation, it was determined that the user does not have neoplasia, where applicable;

(7) an indication that the administration of systemic treatment (chemotherapy, targeted therapy or immunotherapy) was deemed appropriate following the consultation or that the treatment plan has not yet been determined;

(8) regarding the systemic treatment administered or determined following the consultation:

(a) the date on which it is administered for the first time;

(b) an indication of whether it is administered orally or intravenously;

(c) in the case of intravenous systemic treatment:

i. an indication that the treatment is administered in an institution other than the institution where the consultation was carried out, where applicable;

ii. an indication that the treatment is administered simultaneously with radiotherapy, where applicable;

(9) if the administration of systemic treatment was not deemed appropriate following the consultation, an indication of whether another treatment will be administered or that only active follow-up will be maintained;

(10) for each period of the user's unavailability:

(a) the dates on which the user's unavailability begins and ends;

(b) an indication of whether the unavailability is due to personal or medical reasons;

(11) the explanations of the institution regarding any delays incurred and any period of unavailability reported;

4. Every transmission of the information required under sections 2 and 3 must be accompanied by the following:

(1) the year, financial period and week number concerned;

(2) the name and permit number of the institution concerned;

(3) the name and number, on the institution's permit, of the facility concerned.”.

6. Schedule V.2 is amended by striking out “provincial” in subparagraph d of paragraph 1 of section 4.

7. The following is inserted after Schedule V.2:

“SCHEDULE V.3

(s. 5.1.3)

1. An institution referred to in section 5.1.3 of the Regulation must provide the following information:

(1) the sequence number assigned to the test by the laboratory;

(2) the date on which the sample was taken;

(3) the date on which the sample was received at the laboratory;

(4) an indication that the test must be conducted again and the reason therefor, where applicable;

(5) concerning any immunochemical fecal occult blood test, the numerical result of the test and an indication of whether it was deemed positive, negative or invalid;

(6) concerning any human papillomavirus test:

(a) the anatomical region where the sample was taken;

(b) the result of the test and an indication of whether it was deemed positive, negative or invalid;

(7) the date of verification of the result of the test;

(8) the name and number, on the institution's permit, of the facility, or the name of the private health facility, where the person who prescribed the test was practising at the time of prescription;

(9) the name and permit number of the institution that provided services to the user;

(10) the name and number, on the institution's permit, of the facility that provided services to the user.”.

8. The following is inserted after Schedule VI.1:

“SCHEDULE VI.2
(s. 5.2.2)

1. An institution referred to in section 5.2.2 of the Regulation must provide the following information in respect of any type of user:

(1) concerning each request for services:

(a) sequence number;

(b) date of receipt;

(c) origin;

(d) object;

(e) the centre or sub-centre of activities concerned;

(f) the decision rendered after examination of the request and the date of the decision;

(g) an indication that it is a request from an individual or a group;

(h) the priority code assigned to the request;

(2) indication of the type of user;

(3) concerning each sporadic intervention or activity:

(a) sequence number;

(b) the centre or sub-centre of activities concerned;

(c) date;

(d) type;

(e) the reasons therefor;

(f) any act performed by the provider;

(g) follow-up;

(h) the master program to which it is related;

(i) the intervention program to which it is related;

(j) mode;

(k) the place of the intervention or activity;

(l) in the case of an intervention, the duration;

(m) the language used during the intervention or activity;

(n) the provider’s class of employment and link with the institution;

(o) the number of providers participating in the intervention or activity;

(p) if the intervention or activity is performed in a school environment, the education level;

(q) if the intervention or activity is intended for a group user, the number of participants;

(4) the category and target population of the group user.

2. In addition to the information required under section 1, an institution referred to in section 5.2.2 of the Regulation must provide the following information in respect of any individual user:

(1) concerning the user:

(a) the reason for which the user’s health insurance number cannot be provided, where applicable;

(b) the province or territory responsible for the health care insurance plan insuring the user;

(c) the date on which the user’s file was opened;

(d) the code of the territory of the local community service centre where the user’s residence is located;

(e) the user’s overall deprivation;

(f) the user’s material deprivation;

(g) the user’s social deprivation;

(2) concerning each episode of service rendered to the user:

(a) the sequence number;

(b) the dates on which the service begins and ends;

(c) the sequence number of its assignment to a centre or sub-centre of activities;

(d) the centre or sub-centre of activities covered by the assignment;

- (e) the dates on which the assignment begins and ends;
 - (f) the priority code assigned to the assignment;
 - (g) the sequence number associated to each period of the user's unavailability, where applicable;
 - (h) the dates on which the user's unavailability begins and ends, where applicable;
 - (i) the date on which services will be required for the user at a later date;
 - (j) the reason for interrupting the service episode;
- (3) concerning each addiction profile drawn up for the user:
- (a) the sequence number;
 - (b) an indication that the assessment was conducted directly by the institution operating the rehabilitation centre for persons with an addiction or by an external resource;
 - (c) the date of the assessment and, if the assessment could not be conducted in a single session, the date on which the assessment was continued;
 - (d) the types of disorders related to psychoactive substance use, gambling or problematic Internet use observed in the user;
 - (e) the level of services required by the user, as determined in the assessment;
 - (f) the conditions observed in the user that require particular follow-up;
 - (g) an indication of whether the user lives with a partner with or without children, is a single parent, lives alone, lives with a relative, or lives with a non-relative;
 - (h) the type of the user's occupation;
- (4) concerning each stay of the user in a facility maintained by an institution operating a rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction:
- (a) the sequence number;
 - (b) the reason for the user's admission;
 - (c) the date and time of the user's admission;

- (d) the date and time on which the user's lodging ends;
- (e) the reason for ending the lodging;
- (f) the dates on which each occupied bed in the institution began and ceased to be occupied, and the duration of each occupation;
- (g) the total duration of the user's lodging in the institution.

3. Every transmission of the information required under sections 1 and 2 must be accompanied by the following:

- (1) the code of the health region from which the information originates;
- (2) the permit number of the institution providing the information;
- (3) the date of transmission;
- (4) the number assigned to the transmission;
- (5) the dates on which the period concerned begins and ends.”.

9. Schedule VII is amended in section 1

- (1) in paragraph 3
 - (a) by replacing subparagraphs *h* and *i* by the following:
 - “(h) the results of the computation of the SMAF and social SMAF;
 - (i) the results of the computation of incapacity and handicap for each element of the SMAF and social SMAF;”;
 - (b) by replacing subparagraphs *n* and *o* by the following:
 - “(n) the permit number of the institution that provides assessment services to the user;
 - (o) the number, on the institution's permit, of the facility that provides assessment services to the user;
 - (p) the type of resource or living environment where the assessment was conducted;
 - (q) the name and code of the local services network entered in the file of the user concerned by the assessment;

(r) the name and code of the local services network where the residence of the user concerned by the assessment is located;

(s) the type of living environment where the user concerned by the assessment is residing and, in the case of a facility maintained by an institution, a private seniors' residence or another lodging resource, the name of that facility, residence or resource;

(t) an indication that a case management worker participated in the assessment, where applicable;

(u) for each element of the SMAF that was assessed:

i. the items and technical aids used by the user to compensate for incapacity, where applicable;

ii. an indication of whether the human resources available to compensate for the user's incapacity meet the user's needs, do not meet them, or meet them in part and, in the latter case, of whether that shortcoming is due to the quantity of services obtained, the quality of those services, or both;";

(2) by inserting the following after paragraph 3:

“(3.1) concerning a user who underwent an assessment of his or her loss of autonomy using the OEMC or the SMAF:

(a) the weekly frequency at which the user takes care of his partial or complete hygiene or at which it is provided to the user, and an indication of the mode of hygiene used;

(b) an indication of whether the user is able to get around inside the living environment using a wheelchair;

(c) an indication of whether the user is able to get around using a wheelchair, a 3-wheel scooter or a 4-wheel scooter within 20 metres of the living environment;

(d) an indication of whether the user uses stairs;

(3.2) concerning a user who underwent an assessment of his or her loss of autonomy using the OEMC:

(a) if the user is 65 years of age or over, an indication of whether examination of the file revealed a nutritional risk, and the level of risk identified;

(b) an indication of whether static and dynamic synthesis of the file using the OEMC revealed signs of the following risks:

i. if the user is under 65 years of age, the user's nutritional risk;

ii. the user's risk of falling;

iii. the risk of exhaustion of the user's informal caregiver;

iv. the user's risk of wound;

v. the user's risk of suicide;

vi. the risk of maltreatment toward the user and, when specified, the types of risks of maltreatment (physical, sexual, material or financial and psychological);

vii. the risk of neglect toward the user;

viii. the risk of the user's rights being violated;

ix. the user's risk of fragility;

(c) regarding the user's state of health:

i. the user's body mass index;

ii. the weight fluctuations observed in the user during the year preceding the assessment;

iii. an indication of whether the user has a medical history;

iv. an indication of whether the user was hospitalized during the year preceding the assessment and the reason for that hospitalization, where applicable;

v. an indication of whether the user fell during the year preceding the assessment and the number of falls, where applicable;

vi. an indication of whether the user expresses a fear of falling, or an indication that the user is unable to answer that question;

vii. the symptoms experienced by the user with regard to the user's sensory, genitourinary, digestive and motor functions, the condition of the user's skin, and the user's mood or anxiety disorders, suicidal ideation, agitation or disruptive behaviours;

viii. an indication of whether the user has a mental health problem and, if so, of whether that problem is taken in charge;

ix. an indication of whether the user has experienced trauma and, if so, the type of trauma;

x. the reason why the user has difficulty taking medication, where applicable;

xi. the type of side effects experienced by the user after taking his or her medication, where applicable;

xii. the extent to which the user felt weak during the 4 weeks preceding the assessment, or an indication that the user is unable to answer that question;

xiii. an indication of whether the user is followed by a family physician;

xiv. an indication of whether the user is followed by a medical specialist;

xv. an indication of whether the user is followed by a health or social services professional who is not a physician;

(d) regarding the user's lifestyle:

i. the user's appetite level;

ii. an indication of whether the user feeds orally, enterally or parenterally, or through a combination of those methods;

iii. an indication of whether the user eats the following foods for breakfast:

(I) fruits or fruit juice;

(II) eggs, cheese or peanut butter;

(III) bread or cereal;

(IV) milk;

iv. the nature of the user's feeding problems, where applicable;

v. the user's type of dentition;

vi. the weekly frequency at which the user consumes alcohol;

vii. the weekly frequency at which the user walks for at least 10 minutes;

viii. the weekly frequency at which the user plays sports for at least 10 continuous minutes;

ix. the weekly frequency at which the user engages in moderate activity;

x. an indication of whether the user has ceased or significantly reduced a social activity he or she engaged in during the year preceding the assessment and the reasons therefor, where applicable;

(e) regarding the user's psychosocial state:

i. an indication of any previous event experienced by the user that is likely to significantly impact his or her lifestyle and the date of each event identified, where applicable;

ii. an indication of whether the user is surrounded by a family or social network;

iii. an indication of whether the user is assisted by an informal caregiver;

iv. regarding each informal caregiver of the user, where applicable:

(I) an indication of whether he or she is the main informal caregiver or another type of informal caregiver;

(II) an indication that he or she is 75 years of age or over, where applicable;

(III) the date on which he or she began providing services to the user;

(IV) an indication of whether he or she cohabits with the user;

(V) an indication of whether his or her income is sufficient to meet his or her needs;

(VI) his or her state of health;

(VII) the nature of his or her relationship with the user;

(VIII) his or her employment status;

(IX) the nature of the problems with regard to his or her role in the user's life, as stated by the user or observed by the provider, where applicable;

(X) the weekly frequency at which he or she is involved with the user;

(XI) an indication of whether he or she is satisfied with his or her situation;

(XII) an indication of whether the user has agreed to have the institution communicate with the informal caregiver concerned;

- v. the nature of the user's family dynamics;
- vi. the type of contact between the user and his or her social or family network, and the frequency of that contact;
- vii. the state of the relationship between the user and his or her social or family network;
- viii. the nature of the social support that the user receives from his or her social or family network;
- ix. the types of maltreatment of which the user seems to be a victim, where applicable;
- x. the emotional state expressed by the user;
- xi. the user's perception of his or her general situation;
- xii. the nature of the means used or not used by the user in order to get his or her situation under control, or an indication that the user is unable to answer that question;
- xiii. the nature of the user's problems with regard to his or her intimate and emotional life, where applicable;
- xiv. the nature of the user's problems with regard to the practices and obligations related to his or her religion, where applicable;
- xv. the type of the user's current occupation;
- xvi. the user's civil status;
- xvii. an indication of whether the user lives with a partner with or without children, is a single parent, lives alone, lives with a relative, or lives with a non-relative, or an indication that that information is not available;
- xviii. the user's number of years of education;
- (f) regarding the user's economic situation:
 - i. an indication of whether the user's income is sufficient to meet his or her needs, or an indication that the user is unable to answer that question;
 - ii. the nature of the user's problems with regard to finances or payments;
 - iii. the user's sources of income;
- (g) regarding the physical environment in which the user lives:

- i. the nature of the elements whose absence or presence in the user's living environment is likely to cause a risk of falling, where applicable;

- ii. the nature of the user's problems with regard to accessibility inside his or her living environment;

- iii. an indication of whether the user avoids going up stairs or carrying small loads;

(3.3) an indication of whether an assessment of the user's social functioning was conducted using the OEMC and, if so, the date of that assessment;";

(3) in paragraph 4

(a) by inserting the following after subparagraph *l*:

"(l.1) the date of any improvement of the plan;";

(b) by inserting the following after subparagraph *r*:

"(s) an indication that a case management worker participated in the development of the plan, where applicable;";

10. This Regulation comes into force on the fifteenth day following the date of its publication in the *Gazette officielle du Québec*.

105605

Gouvernement du Québec

O.C. 319-2022, 16 March 2022

Extension of the COVID-19 Self-test Distribution Program

WHEREAS, under paragraph *h* of section 3 of the Act respecting the Ministère de la Santé et des Services sociaux (chapter M-19.2), the Minister of Health and Social Services is to promote the development and implementation of programs and services according to the needs of individuals, and families and other groups;

WHEREAS, under the first paragraph of section 2 of the Act respecting the Régie de l'assurance maladie du Québec (chapter R-5), the function of the Board (Régie) is to administer and implement the programs of the health insurance plan instituted by the Health Insurance Act (chapter A-29) and any other program entrusted to it by law or by the Government;