Bill 10

An Act to modify the organization and governance of the health and social services network, in particular by abolishing the regional agencies

Introduction

Introduced by
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Minister of Health and Social Services

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EXPLANATORY NOTES

This bill modifies the organization and governance of the health and social services network through the regional integration of health services and social services, the creation of institutions with a broader mission, and the implementation of a two-tier management structure, in order to facilitate and simplify public access to services, improve the quality and safety of health care and make the network more efficient and effective.

Accordingly, the bill provides for the creation, for each health region, of a regional institution resulting from the amalgamation of the region’s health and social services agency and all the region’s public institutions, except for the Montréal region, where the number of regional institutions is set at five, in addition to four supraregional institutions.

The bill establishes a new system of governance for the regional and supraregional institutions by specifying, among other elements, the composition of their boards of directors, whose members, for the most part independent directors, are to be appointed by the Minister of Health and Social Services. Each institution will be directed by a president and executive director, who is also to be appointed by the Minister.

Interpretation and application provisions are included with regard to several Acts and regulations to take into account the organizational and governance changes made to the health and social services network. These provisions mainly concern the exercise, by the regional institutions and the Minister, of certain functions currently exercised by the health and social services agencies.

The Minister is granted new powers with regard to the regional and supraregional institutions, in particular the power to prescribe rules relating to their organizational structure and management and the power to work with the general management in cases of actions incompatible with the rules of sound management.

Finally, the bill contains various transitional and final provisions required for its application.
LEGISLATION AMENDED BY THIS BILL:

– Act respecting health services and social services (chapter S-4.2).
Bill 10

AN ACT TO MODIFY THE ORGANIZATION AND GOVERNANCE OF THE HEALTH AND SOCIAL SERVICES NETWORK, IN PARTICULAR BY ABOLISHING THE REGIONAL AGENCIES

THE PARLIAMENT OF QUÉBEC ENACTS AS FOLLOWS:

CHAPTER I
PURPOSE

1. The purpose of this Act is to modify the organization and governance of the health and social services network in order to facilitate and simplify public access to services, improve the quality and safety of care and make the network more efficient and effective.

   Accordingly, the Act provides for regional integration of health and social services through the setting up of regional health and social services networks that focus on continuity and proximity of services, the creation of institutions with a broader mission and the implementation of a two-tier management structure.

2. This Act applies despite any incompatible provision of the Act respecting health services and social services (chapter S-4.2). It does not apply to the institutions and regional board governed, as applicable, by Parts IV.1 and IV.2 of that Act or to the Cree Board of Health and Social Services of James Bay established under the Act respecting health services and social services for Cree Native persons (chapter S-5).

CHAPTER II
REGIONAL AND SUPRAREGIONAL INSTITUTIONS

DIVISION I
GENERAL PROVISIONS

3. The purpose of this chapter is to constitute regional institutions, designate four supraregional institutions, and provide for the composition and operation of the boards of directors of those institutions.
The regional and supraregional institutions are public institutions within the meaning of the Act respecting health services and social services.

An institution resulting from an amalgamation under this Act is deemed to result from an amalgamation carried out in accordance with the Act respecting health services and social services and to have been constituted by letters patent of amalgamation issued by the enterprise registrar under section 318 of that Act.

DIVISION II
REGIONAL INSTITUTIONS

4. For each of the health regions listed in Schedule I, a regional institution resulting from the amalgamation of the region’s public institutions and health and social services agency is hereby constituted, as provided for in that schedule.

However, for the Montréal region, five regional institutions, each resulting from the amalgamation of several of the region’s public institutions and, if applicable, the region’s health and social services agency, are hereby constituted, as provided for in the schedule.

Only a regional institution may use the words “Centre intégré de santé et de services sociaux” in its name.

5. The name of a regional institution, the location of its head office, the missions it pursues and the territory for which it is constituted are those set out in Schedule I. This territory constitutes the institution’s regional health and social services network.

Subject to the special provisions of this Act, such an institution exercises the activities of a public institution as well as the functions, powers and responsibilities of a health and social services agency, except those exercised by an agency with regard to the institutions, which are exercised by the Minister.

6. A regional institution succeeds, by operation of law and without further formality, the amalgamated public institutions and, if applicable, agency. It enjoys all the rights, acquires all the property and assumes all the obligations of those institutions and, if applicable, agency, and the proceedings to which they are a party may be continued by the new institution without continuance of suit.
DIVISION III
SUPRAREGIONAL INSTITUTIONS

7. For the purposes of this Act, the following institutions are supraregional institutions:

(1) Centre hospitalier de l’Université de Montréal;
(2) Centre hospitalier universitaire Sainte-Justine;
(3) McGill University Health Centre; and
(4) Institut de cardiologie de Montréal.

DIVISION IV
BOARDS OF DIRECTORS OF REGIONAL AND SUPRAREGIONAL INSTITUTIONS

§1. — Composition, term of office and qualifications of members

8. The affairs of a regional institution are administered by a board of directors composed of the following members appointed by the Minister:

(1) the president and executive director of the institution;
(2) one member of the institution’s council of physicians, dentists and pharmacists, other than a general practitioner, chosen from a list provided by the council;
(3) one member of the institution’s council of nurses, chosen from a list provided by the council;
(4) one member of the institution’s multidisciplinary council, chosen from a list provided by the council;
(5) one physician from the territory who practises outside a facility maintained by an institution, chosen from a list provided by the regional department of general medicine;
(6) one member of the institution’s users’ committee, chosen from a list provided by the committee;
(7) if the institution operates a hospital centre designated as a university hospital centre, one person chosen from a list provided by the universities with which the institution is affiliated; and

(8) seven or, if the institution operates a hospital centre designated as a university hospital centre, eight independent persons, chosen in accordance with sections 11 and 12.

9. The affairs of a supraregional institution are administered by a board of directors composed of the following members appointed by the Minister:

(1) the president and executive director of the institution;

(2) one member of the institution’s council of physicians, dentists and pharmacists, chosen from a list provided by the council;

(3) one member of the institution’s council of nurses, chosen from a list provided by the council;

(4) one member of the institution’s multidisciplinary council, chosen from a list provided by the council;

(5) one member of the institution’s users’ committee, chosen from a list provided by the committee;

(6) one person chosen from a list provided by the universities with which the institution is affiliated; and

(7) seven independent persons chosen in accordance with sections 11 and 12.

10. At the request of a foundation of the institution, the Minister also appoints to the board of directors a non-voting observer, chosen from a list provided by the foundation or foundations of the institution.

For the purposes of paragraph 3 of sections 8 and 9, persons who perform nursing assistant activities are deemed to be members of the institution’s council of nurses.

Persons appointed under paragraphs 5 to 7 of section 8 and paragraphs 5 and 6 of section 9 may not be employed by the institution or practice their profession there. In addition, a person, other than an observer, who is a member of the board of directors of a foundation of the institution may not sit on the institution’s board of directors.

11. Before appointing the independent directors, the Minister must establish expertise profiles in each of the following areas:

(1) governance and ethics;
(2) risk management and quality;

(3) human resources;

(4) immovable property resources and information resources;

(5) auditing and performance;

(6) youth; and

(7) social services.

For each regional institution, the Minister must appoint one independent director for each of the profiles listed in subparagraphs 1 to 7 of the first paragraph. If such an institution operates a hospital centre designated as a university hospital centre, an additional independent director must be appointed for the profile referred to in subparagraph 5 of that paragraph. In the case of a supraregional institution, at least one independent director must be appointed for each of the profiles listed in subparagraphs 1 to 5 of the first paragraph.

12. For the purposes of the independent director appointment process, the Minister establishes a committee of governance experts to make recommendations to the Minister, in particular with regard to the candidates to be considered and to what extent their profile corresponds to the profiles established under the first paragraph of section 11.

The expert committee is composed of members whose candidacy was recommended by a body identified by the Minister that has recognized expertise in the governance of public bodies.

13. All lists sent to the Minister in connection with the appointment process must contain an equal number of women and men.

Similarly, all lists must contain at least four names.

If the Minister is unable to obtain such a list, the Minister may appoint any person of his or her choice.

14. When appointing directors, the Minister must take into account adequate representation of the various parts of the territory served by an institution and consider the sociocultural, ethnocultural, linguistic and demographic composition of the user population.

In addition, the board of directors must be composed of an equal number of women and men. An equal number is presumed if the difference is not more than one.

Except in cases in which an equal number is presumed under the second paragraph, the president and executive director is not counted.
15. The Government determines the allowances, indemnities or remuneration of the members of the board of directors with the exception of the president and executive director.

16. Board members other than the president and executive director are appointed for a term of office not exceeding three years.

Board members remain in office until replaced or reappointed.

17. Any vacancy among the members of the board of directors is filled in accordance with the rules of appointment set out in this Act.

Absence from the number of board meetings determined in the institution’s by-laws, in the cases and circumstances specified, constitutes a vacancy.

18. Sections 131 to 133 and 150 to 153 of the Act respecting health services and social services apply, with the necessary modifications, to the board of directors of a regional or supraregional institution.

§2.—Operation

19. Every two years, the Minister designates one of the independent directors as chair.

The Minister may thus designate the same person more than once.

20. Every two years, the members of the board of directors elect a vice-chair and a secretary from among their number.

Neither the president and executive director nor the members described in paragraphs 2 to 4 of sections 8 and 9 may be elected as vice-chair of the board.

If the chair of the board is absent or unable to act, the vice-chair acts as chair.

21. Section 158 of the Act respecting health services and social services applies, with the necessary modifications, to the chair of the board of directors.

22. Sections 160 to 164 of the Act respecting health services and social services apply, with the necessary modifications, to the meetings of the board of directors.

23. Section 166, the first paragraph of section 168 and section 169 of the Act respecting health services and social services apply, with the necessary modifications, to the documents and records of the board of directors.
§3. — *Powers and obligations of the board of directors*

24. The board of directors of a regional or supraregional institution administers the institution’s affairs and exercises all its powers.

25. The board of directors organizes the institution’s services in keeping with province-wide orientations.

   In addition, the board of directors equitably distributes, within the bounds of the resource envelopes allocated by service program, the human, physical and financial resources at its disposal, taking into account the characteristics of the population it serves, and ensures that such resources are used economically and efficiently.

26. The board of directors of a regional or supraregional institution must, at least once a year, hold a public information meeting to which the public is invited. The meeting may be held at the same time as a meeting provided for in section 176 of the Act respecting health services and social services.

   The board of directors must give public notice of the date, time and place of the meeting at least 15 days in advance.

   At the meeting, the board members must present to the public the information contained in the institution’s activity report and annual financial report.

   The report on the application of the complaint examination procedure, on user satisfaction and on the enforcement of user rights referred to in section 76.10 of the Act respecting health services and social services must also be presented to the public at the public information meeting.

   The board members must answer any questions put to them regarding the reports presented to the public.

   The procedure for calling and conducting the meeting must be determined by by-law of the institution.

27. Sections 172 to 176, 178 and 181 to 181.0.3 of the Act respecting health services and social services apply, with the necessary modifications, to the board of directors of a regional or supraregional institution.
DIVISION V
PRESIDENT AND EXECUTIVE DIRECTOR AND ASSISTANT
PRESIDENT AND EXECUTIVE DIRECTOR OF REGIONAL AND
SUPRAREGIONAL INSTITUTIONS

28. The president and executive director is responsible for the administration and operation of the regional or supraregional institution within the scope of its by-laws.

The president and executive director exercises the functions of office on a full-time basis, sees to it that the decisions of the board of directors are carried out, and ensures that all the information the board requires, or needs in order to assume its responsibilities, is transmitted to it.

The president and executive director must also ensure that the institution’s clinical activity is coordinated and supervised.

29. The president and executive director is assisted by an assistant president and executive director appointed by the Minister.

If the president and executive director is absent or unable to act, his or her functions and powers are exercised by the assistant president and executive director.

The person who occupies the position of assistant president and executive director must exercise functions on a full-time basis within the institution.

30. The Minister determines, by regulation, the standards and scales of remuneration, employee benefits and other conditions of employment of the president and executive director and the assistant president and executive director.

A regulation under this section must be authorized by the Conseil du trésor.

31. The Minister determines, in accordance with the regulation made under section 30, the remuneration of the president and executive director and the assistant president and executive director.

Subject to the second paragraph of section 33, no person may pay to the president and executive director or assistant president and executive director a remuneration other than that set under the first paragraph, or grant them a benefit other than those provided for by a regulation made under section 30.

Any person who contravenes the second paragraph is guilty of an offence and is liable to a fine of $2,500 to $25,000 in the case of a natural person or $5,000 to $50,000 in any other case. A president and executive director or assistant president and executive director who accepts such a remuneration or benefit is guilty of an offence and is liable to a fine of $2,500 to $25,000.
32. The president and executive director and the assistant president and executive director are appointed for a term of office not exceeding four years. When their term expires, they remain in office until replaced or reappointed.

33. The president and executive director and the assistant president and executive director of a regional or supraregional institution must devote themselves exclusively to the work of the institution and the duties of their office.

However, with the Minister’s consent, they may engage in remunerated teaching activities, or unremunerated activities for a non-profit body. They may also carry out any mandate the Minister entrusts to them.

The board of directors must, on ascertaining that the president and executive director or the assistant president and executive director has contravened the first paragraph, inform the Minister of the situation.

CHAPTER III
CONTINUITY OF SERVICES

34. A regional institution assumes the responsibilities assigned to a local authority by sections 99.5 to 99.8 of the Act respecting health services and social services.

For the purposes of that Act, a reference to a local health and social services network or its territory is a reference to a regional health and social services network or its territory, and a reference to a local authority is a reference to a regional institution.

35. The public institutions in the Montréal region must jointly establish the service corridors required to meet the needs of the population in the region.

The Minister may also request that these institutions establish such corridors for certain special services.

36. If of the opinion that special inter-regional services corridors must be established to ensure that a region’s users have continuity of services and access to services within a reasonable time, the Minister may request that a regional institution concerned establish them jointly with the public institutions in other regions.

37. Corridors for specialized or superspecialized services must be established after consultation with the integrated university health network that serves the region.

38. If of the opinion that the corridors established are inadequate to ensure continuity of services or access to services within a reasonable time, or that
such corridors have not been established despite the Minister’s request, the Minister may modify them or establish them.

The new corridors become applicable to the institutions concerned as soon as they are informed of the Minister’s decision.

39. A public institution may not refuse care to a user referred to its services by another public institution in accordance with the service corridors applicable to it, unless it has serious reasons for doing so.

40. For the Montréal region, regional institutions that operate a child and youth protection centre and those that operate a rehabilitation centre serve, for each of those missions, the region’s entire population.

In that region, a regional institution that does not operate a child and youth protection centre must enter into an agreement with any other regional institution located in the region that operates such a centre. The agreement determines the conditions of patient management with regard to users who live in the territory of the institution that does not operate a child and youth protection centre and who require care or services to supplement those provided by the institution that operates such a centre.

Agreements to the same effect must also be entered into by all regional institutions in the region that operate a rehabilitation centre belonging to different classes under paragraphs 1 to 3 of section 86 of the Act respecting health services and social services.

CHAPTER IV
ADAPTATION AND APPLICATION OF CERTAIN PROVISIONS

DIVISION I
PRELIMINARY PROVISION

41. The purpose of this chapter is to adapt, specify and, in certain cases, modify the application of various legislative and regulatory provisions in light of the amendments made by this Act to the organization and governance of the health and social services network.

Accordingly, the chapter contains general interpretation provisions and, when required, special application provisions. Such provisions must be read in light of the modifications required for their application.
DIVISION II
GENERAL INTERPRETATION PROVISIONS

42. Subject to the special provisions of this Act, the provisions of any text applicable to a public institution also apply, with the necessary modifications and unless the context indicates otherwise, to a regional or supraregional institution.

Subject to the same conditions and in any text, a reference to a health and social services agency is a reference to a regional institution, except if the provision concerns the functions, powers and responsibilities that an agency exercises with regard to an institution, in which case, it is a reference to the Minister.

For the purposes of the second paragraph, the functions and powers that an agency exercises with regard to an institution include any approval, authorization, recommendation, indication, identification, designation or advice.

43. Subject to the special provisions of this Act and for the purposes of any text, the requests, documents, information, notices, details or proposals that are to be sent to a health and social services agency must be sent to the Minister. References to an obligation to consult an agency do not apply.

If a text provides that a power may be exercised or a request made by the Minister and an agency, only the Minister may act.

44. Any provision of a text that mentions an amalgamated institution by name continues to apply to the new institution resulting from an amalgamation, but only with regard to the facilities indicated on the amalgamated institution’s most recent permit or with regard to the persons who hold an office or practise their profession there.

45. In any text, a reference to the executive director of a public institution is a reference to the president and executive director of a regional or supraregional institution, with the necessary modifications.

DIVISION III
SPECIAL APPLICATION PROVISIONS

ACT RESPECTING HEALTH SERVICES AND SOCIAL SERVICES

46. Complaints filed under section 60 of the Act respecting health services and social services (chapter S-4.2) are examined by a regional institution in accordance with sections 29 to 59 of that Act.

47. Sections 62 to 72 and 76.12 of the Act do not apply to a regional institution.
48. The Minister tables in the National Assembly the report submitted by any regional or supraregional institution under section 76.10 of the Act within 30 days of receiving it or, if the Assembly is not sitting, within 30 days of the opening of the next session or resumption.

49. Sections 182.0.2 to 182.0.4 of the Act do not apply to a public or private institution governed by the Act.

50. The management and accountability agreement mentioned in section 182.1 of the Act is entered into with the Minister.

This agreement and the action plan derived from it must make it possible to implement the strategic directions determined by the Minister.

51. Sections 197 and 198 of the Act also apply to the assistant executive director, the senior managerial advisor and the senior management officer of a regional or supraregional institution.

52. Full-time senior administrators and senior management officers of a regional or supraregional institution must, under pain of sanctions which may include dismissal, devote themselves exclusively to the work of their institution and the duties of their office. However, they may carry out any mandate the Minister entrusts to them.

Section 200 of the Act also applies to those persons.

53. In addition to the information required under section 278 of the Act, the regional institution’s annual activity report must, if applicable, include the information required under the fourth paragraph of section 391 of the Act with regard to community organizations.

54. The Minister tables in the National Assembly the annual report submitted by each regional or supraregional institution under section 278 of the Act within 30 days of receiving it or, if the Assembly is not sitting, within 30 days of the opening of the next session or resumption.

55. The budgetary rules established by a regional or supraregional institution under the first paragraph of section 283 of the Act must not permit transfers of sums allocated to a service program, except with the authorization of the Minister.

56. A regional institution or, for the Montréal region, the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal, exercises the functions and powers of an agency with regard to the intermediate resources or family-type resources provided for in sections 301 to 314 of the Act.

Despite the first paragraph, the functions assigned to an agency by section 306 of the Act are exercised by the Minister. In addition, for the purposes of section 307 of the Act, the functions of the agency concerning a misunderstanding
are exercised by the Minister if a resource attached to an institution applies for a review of a decision made by the institution in its regard.

57. For the Montréal region, the powers of the agency under section 336 of the Act are exercised by the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal.

58. Section 339 of the Act does not apply.

59. The functions assigned to an agency by section 340 of the Act are exercised by the regional institution or the Minister as follows:

(1) the regional institution must enlist the public’s participation in the management of the health and social services network and ensure that users’ rights are respected;

(2) the regional institution must ensure that health services and social services are provided to users safely;

(3) the Minister is responsible for allocating budgets to institutions;

(4) the regional institution is responsible for granting the subsidies referred to in the first paragraph of section 454 of the Act to community organizations and private resources;

(5) the Minister is responsible for granting the subsidies referred to in the second paragraph of section 454 of the Act to community organizations;

(6) the regional institution must ensure the coordination of the specific medical activities of physicians who are under an agreement referred to in section 360 or section 361.1 of the Act and the activities of the community organizations, intermediate resources and private nursing homes and community organizations referred to in section 454 of the Act and foster their cooperation with the other agents of community development;

(7) the Minister must ensure the coordination of the activities of institutions within the same region, as well as the coordination of services between institutions of neighbouring regions;

(8) the regional institution must implement measures for the protection of public health and for the social protection of individuals, families and groups;

(9) the regional institution must ensure that the human, physical and financial resources at its disposal are economically and efficiently managed;

(10) the regional institution exercises the responsibilities assigned to an agency by the Act respecting pre-hospital emergency services (chapter S-6.2);
(11) the regional institution must ensure management accountability on the basis of province-wide targets and recognized standards of accessibility, integration, quality, effectiveness and efficiency;

(12) the Minister is responsible for supporting institutions in the organization of their services and becoming involved with them to foster the signing of service agreements designed to meet the needs of the general public or, if no agreement is entered into, for indicating, in accordance with section 105.1 of the Act respecting health services and social services, the contribution expected of each institution;

(13) the Minister must allow the use of numerous standard agreement models in order to facilitate the making of agreements under subparagraph 12;

(14) the Minister must ensure that the mechanisms for referral and for service coordination between institutions are established and functional;

(15) the Minister must develop information and management tools for the institutions and adapt them to the distinctive characteristics of those institutions;

(16) the regional institution must establish procedures and mechanisms for informing the general public and enlisting the public’s participation in the organization of services, and ascertaining their level of satisfaction with the results obtained; the regional institution must report on the application of this paragraph in a separate section of its annual management report;

(17) the regional institution must develop mechanisms for the protection of users and for user rights advocacy.

60. Sections 341 to 342.1 of the Act do not apply to a regional institution.

61. Section 343.0.1 of the Act does not apply to a regional institution.

62. For the Montréal region, the function assigned to an agency by subparagraph 1 of the first paragraph of section 346 of the Act is exercised by the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal.

In addition, subparagraphs 2, 4 and 5 of the first paragraph of that section do not apply to a regional institution.

63. The functions assigned to an agency by sections 346.0.1 to 346.0.20.4 of the Act are exercised by the Minister.

64. Sections 346.1 to 346.3 of the Act do not apply to a regional institution.

65. Each institution must develop a program of access to English-language health services and social services for the English-speaking population it serves.
The program must take into account the institution’s human, physical and financial resources; it must also be approved by the Government and revised at least once every three years.

66. For the purposes of section 349.1 of the Act, a regional or supraregional institution proposes directly to the Minister that it become associated with the operator of one of the places referred to in the second paragraph of that section.

The proposal so made by an institution is considered the proposal of the agency referred to in sections 349.2 and 349.3 of the Act.

The agreement required under section 349.3 of the Act must be signed by the Minister and the regional institution, and the amount paid to the clinic under subparagraph 3 of the first paragraph of that section must be paid by the institution.

67. The power conferred on an agency under section 349.8 of the Act is exercised by the Minister.

68. For the purposes of section 349.9 of the Act, the Minister determines whether access difficulties exist with respect to the services in the area of jurisdiction concerned.

69. Sections 350 and 351 of the Act do not apply to a regional institution.

70. The Minister exercises the coordinating functions provided for in section 352 of the Act with regard to institutions, and the regional institution exercises those functions with regard to the activities of community organizations and specific medical activities.

71. The Minister may mandate a regional institution to take the measures required to coordinate its services with those of the institutions in neighbouring regions.

72. Sections 354 to 356 of the Act do not apply to a regional institution.

73. Each public or private institution under agreement must submit its criteria for access to services to the regional institution for approval, in particular with respect to the admission and discharge of users and the policies for their transfer. For the Montréal region, the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal is responsible for approving access criteria.

The Minister may require a public or private institution under agreement with a special vocation to submit its access criteria directly to the Minister for approval. In such cases, the Minister must obtain the opinion of the regional institution referred to in the first paragraph.
74. A regional institution mentioned in the first paragraph of section 73 of this Act must set up and manage a regional access mechanism for services determined by the Minister.

Each public or private institution under agreement must receive any person who was referred to its services in accordance with the regional services access mechanism.

75. A regional institution exercises the functions set out in section 359 of the Act.

In the Montréal region, the functions set out in paragraphs 1 to 3 of section 359 of the Act are exercised jointly by all the regional institutions. The Minister determines which institution is to set up the regional information system described in paragraph 4 of that section.

76. The physician’s application referred to in section 362 of the Act must be submitted to the regional institution.

77. Regional institutions exercise the functions assigned to agencies by sections 371 to 372.1 and 374 of the Act.

In the Montréal region, the functions referred to in the first paragraph are exercised by the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal.

78. The Minister exercises the functions assigned to agencies by sections 376 and 377 of the Act.

79. For the purposes of section 380 of the Act, the reference to the agency is a reference to the regional institution.

80. In addition to the functions the Minister assumes under section 383 of the Act, the Minister may, to the extent the Minister believes such action to be justified by the need to optimize resources and after consulting with the public or private institution under agreement concerned, oblige such an institution to use the services of a joint procurement group or to participate in a call for tenders held by such a group. The institution may be relieved of this obligation if it demonstrates, to the satisfaction of the Minister, that such a decision will not achieve the desired objectives.

81. The second paragraph of section 384, sections 385, 385.1 to 385.8, 385.10 and 386 to 396 of the Act do not apply to a regional institution.

82. The powers provided for in sections 413.1.1 to 415 of the Act are exercised by the Minister.

83. The recommendations mentioned in subparagraph 1 of the first paragraph of section 417.2 of the Act must be sent to the Minister.
84. Sections 417.10 to 417.16 of the Act do not apply to a regional institution.

85. For the purposes of paragraph 2 of section 436.7 of the Act, a reference to the agency is a reference to the Minister.

86. Subparagraph 7 of the first paragraph of section 436.8 of the Act does not apply to a regional institution.

87. A regional institution exercises, for its territory and even with regard to private institutions not under agreement, the functions assigned to the agency by the first paragraph of section 454 of the Act. The Minister exercises the functions provided for in the second paragraph of that section.

In addition, for the purposes of sections 457, 459 and 460 of the Act, a reference to the agency is a reference to a regional institution.

88. For the purposes of the second paragraph of section 463 of the Act, the reference to the agencies is a reference to the public and private institutions.

The third paragraph of that section does not apply.

89. Each year, after consulting with the institutions, the Minister establishes budgetary rules to determine the amount of operating and capital expenditures that is eligible for subsidies to be granted to the institutions.

The budgetary rules also concern subsidies to be granted to other eligible persons and organizations that fulfil a special obligation under this Act or an agreement entered into in accordance with the Act respecting health services and social services.

The budgetary rules must be submitted to the Conseil du trésor for approval.

90. Each year, the Minister establishes special budgetary rules for the institutions with respect to their management and the granting of subsidies to community organizations and accredited private resources.

The management rules applicable to an institution must provide for separate accounts to be kept for each service program.

91. In sections 466 and 475 of the Act, a reference to sections 464 and 465 of the Act is a reference to sections 89 and 90 of this Act.

In addition, the third paragraph of section 475 of the Act does not apply.

92. For the purposes of sections 509, 510 and 520.2 of the Act, a reference to the agency is a reference to a public or private institution.
93. As in the case of a regional institution, a supraregional institution may exercise the powers of an agency under section 520.3.1 of the Act.

DIVISION IV
OTHER ACTS AND REGULATIONS

ACT TO PROVIDE FOR BALANCED BUDGETS IN THE PUBLIC HEALTH AND SOCIAL SERVICES NETWORK

94. Sections 5 and 6 of the Act to provide for balanced budgets in the public health and social services network (chapter E-12.0001) do not apply.

At the beginning of the fiscal year, the Minister sends each institution the amount of the sums allotted to it. The Minister also informs them of the ministerial policies and priorities to be complied with as regards budgetary balance, budgeting, services and, for regional institutions, subsidies and the allocation of resources.

95. In section 7 of the Act, a reference to the agency is a reference to the Minister and the reference to section 6 of the Act is a reference to the second paragraph of section 94 of this Act.

96. Section 8 of the Act, and the reference to that section 8 in section 14 of the Act, do not apply to a regional institution.

TAXATION ACT

97. For the purposes of the definition of “private seniors’ residence” in section 1029.8.61.1 of the Taxation Act (chapter I-3), the reference to the health and social services agency for the region in which the facility is situated is a reference to the Minister.

ACT RESPECTING THE SHARING OF CERTAIN HEALTH INFORMATION

98. For the purposes of section 13 of the Act respecting the sharing of certain health information (chapter P-9.0001), a reference to an agency is a reference to a supraregional institution.

ACT RESPECTING THE DETERMINATION OF THE CAUSES AND CIRCUMSTANCES OF DEATH

99. For the purposes of the second paragraph of section 33 of the Act respecting the determination of the causes and circumstances of death (chapter R-0.2), the reference to an agency is a reference to the Minister.
ACT RESPECTING THE REPRESENTATION OF FAMILY-TYPE RESOURCES AND CERTAIN INTERMEDIATE RESOURCES AND THE NEGOTIATION PROCESS FOR THEIR GROUP AGREEMENTS

100. The third paragraph of section 55 of the Act respecting the representation of family-type resources and certain intermediate resources and the negotiation process for their group agreements (chapter R-24.0.2) does not apply to a regional institution.

ACT RESPECTING OCCUPATIONAL HEALTH AND SAFETY

101. For the purposes of the Act respecting occupational health and safety (chapter S-2.1), the reference to an agency is, in all cases, a reference to a regional institution. For the Montréal region, a reference to the agency is a reference to the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal.

PUBLIC HEALTH ACT

102. For the purposes of the second paragraph of section 10 of the Public Health Act (chapter S-2.2), the parameters concerned must enable, as far as possible, a comparison of the health outcomes obtained throughout Québec with those obtained for each health region and, at the regional level, a comparison of the health outcomes obtained in the various parts of the territories served by the regional institutions specified by the Minister.

103. For the purposes of sections 11, 13, 15 and 17 of the Act, a reference to an agency is a reference to a regional institution. For the Montréal region, a reference to an agency is a reference to the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal.

In addition, for the purposes of sections 11 and 12 of the Act, a reference to an institution operating a local community service centre is a reference, for the Montréal region, to the regional institutions not described in the first paragraph.

104. Section 14 of the Act does not apply to a regional institution.

Likewise, an institutions’s obligation under section 17 of the Act to deposit its local action plan does not apply.

105. The regional action plan developed by a regional institution in accordance with section 11 of the Act must include measures that take into account the specific characteristics of the population living in the region. These measures are developed in collaboration with, in particular, the other public institutions in the region and, if applicable, the community organizations concerned.
ACT RESPECTING PRE-HOSPITAL EMERGENCY SERVICES

106. In the Act respecting pre-hospital emergency services (chapter S-6.2), a reference to an agency is a reference to a regional institution.

In addition, the power provided for in section 8 of the Act is exercised by such an institution despite section 82 of this Act.

ACT RESPECTING END-OF-LIFE CARE

107. For the purposes of the second paragraph of section 37 of the Act respecting end-of-life care (chapter S-32.0001), the reference to the health and social services agency territory is a reference to the region.

ACT RESPECTING BARGAINING UNITS IN THE SOCIAL AFFAIRS SECTOR

108. For the purposes of section 9 of the Act respecting bargaining units in the social affairs sector (chapter U-0.1), a bargaining unit may only include employees whose home base is in the same region.

109. For the purposes of section 13 of the Act, an amalgamation under this Act is deemed to be an amalgamation of institutions referred to in section 323 of the Act respecting health services and social services (chapter S-4.2).

INDIVIDUAL AND FAMILY ASSISTANCE REGULATION

110. For the purposes of the first paragraph of section 88.1 of the Individual and Family Assistance Regulation (chapter A-13.1.1, r. 1), the reference to the health and social services agency is a reference to the Minister.

REGULATION RESPECTING ACCESS AUTHORIZATIONS AND THE DURATION OF USE OF INFORMATION HELD IN A HEALTH INFORMATION BANK IN A CLINICAL DOMAIN

111. For the purposes of section 16 of the Regulation respecting access authorizations and the duration of use of information held in a health information bank in a clinical domain (chapter P-9.0001, r. 1), the reference to an agency is a reference to a supraregional institution.

REGULATION RESPECTING THE SUPPLY OF MEDICATIONS TO AMBULANCE TECHNICIANS BY AN INSTITUTION

112. For the purposes of section 1 of the Regulation respecting the supply of medications to ambulance technicians by an institution (chapter P-10, r. 17), the reference to the territory of the health and social services agency responsible for the institution is a reference to the region in which that institution is situated.
REGULATION RESPECTING OCCUPATIONAL HEALTH SERVICES

113. For the purposes of the Regulation respecting occupational health services (chapter S-2.1, r. 16), the reference to an agency is, in all cases, a reference to a regional institution. For the Montréal region, a reference to the agency is a reference to the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal.

REGULATION RESPECTING THE CONDITIONS FOR OBTAINING A CERTIFICATE OF COMPLIANCE AND THE OPERATING STANDARDS FOR A PRIVATE SENIORS’ RESIDENCE

114. For the purposes of the Regulation respecting the conditions for obtaining a certificate of compliance and the operating standards for a private seniors’ residence (chapter S-4.2, r. 5.01), a reference to a local authority is a reference to a regional institution.

In addition, for the purposes of sections 7, 11, 26, 38, 48, 79, 80 and 82 of the Regulation, a reference to an agency is a reference to the Minister.

REGULATION RESPECTING CERTAIN TERMS OF EMPLOYMENT APPLICABLE TO OFFICERS OF AGENCIES AND HEALTH AND SOCIAL SERVICES INSTITUTIONS

115. Section 11.5 of the Regulation respecting certain terms of employment applicable to officers of agencies and health and social services institutions (chapter S-4.2, r. 5.1) applies only with regard to an officer physician position referred to in section 8.1 of the Regulation.

116. The function assigned to an agency by section 80 of the Regulation is exercised by the Minister.

117. For the purposes of section 80.1 of the Regulation, the reference to agencies is a reference to public institutions and to private institutions under agreement.

118. This Act constitutes the notice provided for in section 81 of the Regulation.

119. An officer enjoys the employment stability measures provided for in the Regulation, but the total time period covered by all the measures must not exceed 36 months.
REGULATION RESPECTING CERTAIN TERMS OF EMPLOYMENT APPLICABLE TO SENIOR ADMINISTRATORS OF AGENCIES AND OF PUBLIC HEALTH AND SOCIAL SERVICES INSTITUTIONS

120. Division 1 of Chapter 2 of the Regulation respecting certain terms of employment applicable to senior administrators of agencies and of public health and social services institutions (chapter S-4.2, r. 5.2) does not apply.

121. The third paragraph of section 27.1 of the Regulation applies, except with regard to the reference to agencies.

122. The function assigned to an agency by section 91 of the Regulation is exercised by the Minister.

123. For the purposes of section 91.1 of the Regulation, the reference to the agencies is a reference to public institutions and to private institutions under agreement.

124. This Act constitutes the advance notice provided for in section 92 of the Regulation.

125. The copies of the documents mentioned in the third paragraph of section 132.1 of the Regulation must only be sent to the Minister.

The copies of the documents mentioned in the third paragraph of section 153 of the Regulation must only be sent to the arbitrator and the Minister.

REGULATION RESPECTING THE LEASING OF IMMOVABLES BY PUBLIC INSTITUTIONS AND AGENCIES

126. Sections 3 and 23 of the Regulation respecting the leasing of immovables by public institutions and agencies (chapter S-4.2, r. 16) do not apply.

REGULATION RESPECTING THE PROCEDURE TO BE OBSERVED FOR IMMOVABLE CONSTRUCTION PROJECTS OF HEALTH AND SOCIAL SERVICES AGENCIES AND PUBLIC AND PRIVATE INSTITUTIONS UNDER AGREEMENT

127. The third paragraph of section 3 and section 5 of the Regulation respecting the procedure to be observed for immovable construction projects of health and social services agencies and public and private institutions under agreement (chapter S-4.2, r. 18) do not apply.
REGULATION RESPECTING THE CONDITIONS FOR THE REGISTRATION OF AN AMBULANCE TECHNICIAN IN THE NATIONAL WORKFORCE REGISTRY

128. For the purposes of the Regulation respecting the conditions for the registration of an ambulance technician in the national workforce registry (chapter S-6.2, r. 1), a reference to an agency is a reference to a regional institution.

CHAPTER V
FUNCTIONS AND SPECIAL POWERS OF THE MINISTER

129. If of the opinion that the amalgamation of two or more institutions would improve the continuity of care, the Minister may, in accordance with section 318 of the Act respecting health services and social services and after consulting with the institutions concerned, request that the enterprise registrar issue letters patent of amalgamation in order to amalgamate the institutions.

Under the name attributed to it by the letters patent, the new institution resulting from the amalgamation enjoys all the rights, acquires all the property and assumes all the obligations of the amalgamated institutions, and the proceedings to which they were a party may be continued by the new institution without continuance of suit.

130. The Minister may, by regulation, prescribe rules relating to the organizational structure for managing public institutions.

Similarly, the Minister may prescribe any other measure that a public institution must comply with in the interests of improved organization and sound management of the institution’s resources, in particular with regard to the programs to be set up and the provision of services to users.

131. The Minister may, at the request of a group of employees or professionals who exercise their functions or practise their profession in a facility of a regional or supraregional institution or of any other person from the sector, set up an advisory committee charged with making recommendations to the institution on the measures to be implemented to preserve the cultural, historic or local character of the institutions amalgamated under this Act and establishing, if applicable, the necessary ties with the institution’s foundations and with the persons in charge of research activities in the sector.

The committee is composed of seven members appointed by the Minister on the recommendation of a group or any person referred to in the first paragraph.

132. Within the scope of the Minister’s responsibilities with regard to the organization and operation of the health and social services network and the proper use of public funds, the Minister may issue directives to a regional or
supraregional institution concerning its objectives, policies and actions in the performance of its functions. The directives may be addressed to one or more institutions and their content may vary according to the institution concerned.

The directives must be submitted to the Government for approval. Once approved, they are binding on the institution concerned.

Such directives issued must be tabled in the National Assembly within five days of being approved by the Government or, if the Assembly is not sitting, within five days of the opening of the next session or resumption.

133. To ensure sound management of the health and social services network, the Minister may require public institutions to use in common certain goods and services determined by the Minister.

134. Exceptionally, if the Minister is of the opinion that the general management or the board of directors of a public institution does anything that is incompatible with the rules of sound management applicable to such an institution, the Minister may, for a period not exceeding 180 days, appoint one or more persons to temporarily replace the president and executive director or assistant president and executive director, or to assume some of the powers of the institution’s board of directors.

If deprived of some of its powers, the institution’s board of directors continues to exercise only those powers that were not suspended.

135. The period provided for in the first paragraph of section 134 may be extended by the Minister for an additional period not exceeding 180 days.

136. A person appointed by the Minister to replace the president and executive director or assistant president and executive director, or to assume some of the powers of the institution’s board of directors, may not be prosecuted for acts performed in good faith in the exercise of his or her functions.

137. On ceasing to assume the general management or the administration of the institution, the Minister may make recommendations in order to prevent a re-occurrence of the situation which gave rise to the decision.

The institution must send to the Minister an action plan to implement the recommendations. The board of directors ensures that it is carried out within the time specified in the plan.
CHAPTER VI
AMENDING PROVISIONS

ACT RESPECTING HEALTH SERVICES AND SOCIAL SERVICES

138. Section 131 of the Act respecting health services and social services (chapter S-4.2) is amended by replacing “the executive director, an assistant executive director” in subparagraph 2 of the second paragraph by “a senior administrator”.

139. Section 173 of the Act is amended by replacing “the executive director” in paragraph 1 by “the senior administrators”.

140. Section 274 of the Act is amended

(1) by replacing “executive director” in the first paragraph by “senior administrator”;

(2) by replacing “executive director” in the second paragraph by “senior administrator”.

141. Section 413.1.1 of the Act is amended by striking out “at the latter’s request” in the first paragraph.

142. Section 487.2 of the Act is amended by replacing “executive directors” in subparagraph 1 of the first paragraph by “senior administrators”.

CHAPTER VII
TRANSITIONAL AND FINAL PROVISIONS

143. Subject to section 144, persons who are employees of an amalgamated health and social services agency and institutions on 31 March 2015 become employees of the institution that succeeded that agency and those institutions.

The collective agreements and regulations governing the conditions of employment of agencies and institutions continue to apply.

144. To ensure that the Minister is able to exercise his or her new functions under this Act, and subject to their conditions of employment, persons who are agency or public institution employees on (insert the date of introduction of this bill) and who are identified by the Conseil du trésor on the recommendation of the Minister become, on 1 April 2015 and without further formality, employees of the Ministère de la Santé et des Services sociaux.

The total number of employees so transferred must not exceed 10% of the total number of persons, excluding those who exercise functions related to
public health, who are agency employees on (insert the date of introduction of this bill).

Such employees are deemed to have been appointed in accordance with the Public Service Act (chapter F-3.1.1). For casual employees of health and social services agencies and public institutions, this presumption applies only to the unexpired portion of their contract.

The Conseil du trésor determines their remuneration and their classification and any other condition of employment applicable to them.

145. For the purposes of section 30 of the Act respecting the representation of family-type resources and certain intermediate resources and the negotiation process for their group agreements (chapter R-24.0.2), the date of the amalgamation of institutions under this Act is deemed to be the date that is 30 days after the signing of the group agreements which ensure overall that at least 80% of all the resources represented by a recognized association are covered by those agreements.

146. For the purposes of sections 12 to 28 of the Act respecting bargaining units in the social affairs sector (chapter U-0.1), the date of the amalgamation of institutions under this Act is deemed to be the date that is 30 days after the signing of the agreements concerning the clauses negotiated and agreed on at the national level which ensure overall that at least 90% of all the employees of the health and social services network are covered by those clauses.

Until the Commission des relations du travail has rendered a decision under the first paragraph of section 25 of that Act, any parties who have not entered into such agreements must continue negotiating.

147. Each institution must, no later than six months after the coming into force of the first regulation made under section 130, carry out an administrative reorganization in order to comply with the rules and measures set out in the regulation.

148. The term of office of the members of the boards of directors of amalgamated health and social services agencies and institutions ends on 31 March 2015. This also holds for members of the boards of directors of the supraregional institutions.

The president and executive director of an agency as well as the executive director of an amalgamated institution are not entitled to indemnities other than those provided under their conditions of employment.

149. For the purposes of the appointment of the members of the first board of directors of a regional or supraregional institution, the lists mentioned in paragraphs 2 to 6 of section 8 and paragraphs 2 to 5 of section 9 are provided by the councils, committees and departments existing on (insert the date of assent to this Act).
150. The Minister may, as of (insert the date that is 30 days after the date of assent to this Act), appoint the president and executive director, the assistant president and executive director and the members of the boards of directors of the regional and supraregional institutions. Such appointments take effect on 1 April 2015.

151. The appointments and the privileges granted by an institution to a physician, dentist or pharmacist who, on 31 March 2015, practises within the public health department of the Agence de la santé et des services sociaux de Montréal, are deemed to have been granted to that physician, dentist or pharmacist, under the same conditions, by the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal.

152. The Minister makes known the budgets of regional and supraregional institutions on 1 April 2015.

153. The records and documents of an amalgamated health and social services agency and institutions become, without further formality, the records and documents of the institution that succeeds the agency and institutions.

154. A people’s forum established under section 343.1 of the Act respecting health services and social services, a regional nursing commission established under section 370.1 of the Act, a regional multidisciplinary commission established under section 370.5 of the Act, a regional department of general medicine established under section 417.1 of the Act, and a regional pharmaceutical services committee established under section 417.7 of the Act are continued and their members remain in office and continue to exercise their responsibilities in accordance with the relevant provisions of this Act.

These forums, commissions, departments and committees are deemed to be constituted within each regional institution. For the Montréal region, they are deemed to be constituted within the Centre intégré de santé et de services sociaux du Sud-Est-de-l’Île-de-Montréal. The president and executive director of the institution, or a person designated by him or her, is a member of those entities.

155. An institution that succeeds an institution indicated in a program developed under section 348 of the Act respecting health services and social services, in force on 31 March 2015, must provide access, in the English language for English-speaking persons, to the services mentioned in the program until a new program is approved under the second paragraph of section 65 of this Act.

156. A regional or supraregional institution must continue to provide English-speaking persons access to English-language health and social services in those of its facilities that were designated by the Government under section 508 of the Act respecting health services and social services.
157. If one or more institutions recognized under section 29.1 of the Charter of the French language (chapter C-11) amalgamates with an institution that does not have such recognition, the new institution retains the recognition only with regard to the facilities indicated on the recognized institution’s most recent permit prior to the amalgamation.

158. If an institution that operates a centre designated as a university hospital centre, university institute or affiliated university centre under sections 88 to 91 of the Act respecting health services and social services amalgamates with another institution, the designation remains valid but only for the centre and in the facilities indicated on the most recent permit of the amalgamated institution.

159. Natural persons who, on 31 March 2015, are members of an institution that is a legal person under section 139 of the Act respecting health services and social services may continue to exercise the powers conferred on them by the Act on that date with regard to the immovables that are owned by such an institution on that date. The new institution must keep an up-to-date list of these persons for each of the legal persons so designated of which it is composed.

160. Any designation, recognition, certification, accreditation or other action or decision made or performed by a health and social services agency and that, under this Act, is the responsibility of the Minister or an institution, as applicable, is deemed to have been made or performed by them.

Similarly, any agreement entered into by an agency under section 475 of the Act respecting health services and social services is deemed to have been entered into with the Minister.

161. The Government may, by regulation, take any measure necessary or useful for carrying out this Act and fully achieving its purposes.

A regulation made under this section is not subject to the publication requirement or the date of coming into force set out in sections 8 and 17 of the Regulations Act (chapter R-18.1) and may apply, after publication and if the regulation so provides, from a date not prior to 1 April 2015.

162. The common-interest information assets mentioned in Schedule II that, on 31 March 2015, are owned by a health and social services agency, the Régie de l’assurance maladie du Québec or the Institut national de santé publique du Québec are transferred to the Minister of Health and Social Services with all the related rights and obligations.

Any other common-interest information asset, along with the related rights and obligations, determined by ministerial order before 1 April 2016 and belonging to a public institution, the Régie de l’assurance maladie du Québec
or the Institut national de santé publique du Québec must also be transferred to the Minister.

The application of the first and second paragraphs may not have the effect of transferring ownership to the Minister of the information contained in the information asset or modifying the confidentiality rules that apply to it.

163. The Minister determines the name identifying the facilities indicated on the permit that the Minister issues to an institution resulting from an amalgamation under this Act.

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

165. This Act comes into force on 1 April 2015, except sections 138 to 142 and 148 to 150, which come into force on (insert the date of assent to this Act).
SCHEDULE I  
(Section 4)

**Health region:** Bas-Saint-Laurent (01)

**Amalgamated agency and public institutions:**

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DU BAS-SAINT-LAURENT
- CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVahiSSANTS DU DÉVELOPPEMENT DU BAS-SAINT-LAURENT
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE KAMOURASKA
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA MATAPÉDIA
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA MITIS
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE MATANE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE RIMOUSRuki-NEIGETTE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE RIVIÈRE-DU-LOUP
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE TÉMISCOUATA
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES BASQUES
- CENTRE JEUNESSE DU BAS-ST-LAURENT

**Name of the public institution resulting from the amalgamation:**

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DU BAS-SAINT-LAURENT

**The purpose of the institution is to operate:**

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual, motricity or language impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Rimouski, in the judicial district of Rimouski.

Territory served:

Bas-Saint-Laurent health region
Health region: Saguenay–Lac-Saint-Jean (02)

Amalgamated agency and public institutions:

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DU SAGUENAY–LAC-SAINT-JEAN
- CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVAHISSANTS DU DÉVELOPPEMENT DU SAGUENAY–LAC-SAINT-JEAN
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX CLÉOPHAS-CLAVEAU
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE CHICOUTIMI
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE JONQUIÈRE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LAC-SAINT-JEAN-EST
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DOMAINE-DU-ROY
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX MARIA-CHAPDELAINE
- LE CENTRE JEUNESSE DU SAGUENAY–LAC-SAINT-JEAN

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DU SAGUENAY–LAC-SAINT-JEAN

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual, motricity or language impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Saguenay, in the judicial district of Chicoutimi.

Territory served:

Saguenay–Lac-Saint-Jean health region
Health region: Capitale-Nationale (03)

Amalgamated agency and public institutions:

• AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE LA CAPITALE-NATIONALE
• CHU DE QUÉBEC
• INSTITUT UNIVERSITAIRE DE CARDIOLOGIE ET DE PNEUMOLOGIE DE QUÉBEC
• CENTRE DE RÉADAPTATION EN DÉPENDANCE DE QUÉBEC
• CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE DE QUÉBEC
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE CHARLEVOIX
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA VIEILLE-CAPITALE
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE PORTNEUF
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE QUÉBEC-NORD
• SAINT BRIGID’S–JEFFERY HALE HOSPITAL
• INSTITUT DE RÉADAPTATION EN DÉFICIENCE PHYSIQUE DE QUÉBEC
• INSTITUT UNIVERSITAIRE EN SANTÉ MENTALE DE QUÉBEC
• CENTRE JEUNESSE DE QUÉBEC

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE LA CAPITALE-NATIONALE – CHU DE QUÉBEC

The purpose of the institution is to operate:

• A local community service centre
• A hospital centre belonging to the class of general and specialized hospital centres
• A hospital centre belonging to the class of psychiatric hospital centres
• A child and youth protection centre
• A residential and long-term care centre

• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual or motricity impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

• A rehabilitation centre belonging to the class of rehabilitation centres for mothers with adjustment problems

The head office of the institution is located in Québec, in the judicial district of Québec.

Territory served:

Capitale-Nationale health region
Health region: Mauricie et Centre-du-Québec (04)

Amalgamated agency and public institutions:

• AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE LA MAURICIE ET DU CENTRE-DU-QUÉBEC

• CENTRE DE RÉADAPTATION INTERVAL

• CENTRE DE RÉADAPTATION EN DÉPENDANCE DOMRÉMY-DE-LA-MAURICIE–CENTRE-DU-QUÉBEC

• CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVAHISSANTS DU DÉVELOPPEMENT DE LA MAURICIE–ET-DU-CENTRE-DU-QUÉBEC–INSTITUT UNIVERSITAIRE

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX D’ARTHABASKA–ET-DE-L’ÉRABLE

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE BÉCANCOUR–NICOLET-YAMASKA

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA VALLÉE–DE-LA-BATISCAN

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE L’ÉNERGIE

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE MASKINONGÉ

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE TROIS-RIVIÈRES

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DRUMMOND

• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU HAUT-SAINT-MAURICE

• LE CENTRE JEUNESSE DE LA MAURICIE ET DU CENTRE-DU-QUÉBEC

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE LA MAURICIE-ET-DU-CENTRE-DU-QUÉBEC

The purpose of the institution is to operate:

• A local community service centre
• A hospital centre belonging to the class of general and specialized hospital centres

• A child and youth protection centre

• A residential and long-term care centre

• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual, motricity or language impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

• A rehabilitation centre belonging to the class of rehabilitation centres for mothers with adjustment problems

The head office of the institution is located in Trois-Rivières, in the judicial district of Trois-Rivières.

Territory served:

Mauricie et Centre-du-Québec health region
Health region: Estrie (05)

Amalgamated agency and public institutions:

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE L’ESTRIE
- CENTRE HOSPITALIER UNIVERSITAIRE DE SHERBROOKE
- CENTRE DE RÉADAPTATION EN DÉPENDANCE DE L’ESTRIE
- CENTRE DE RÉADAPTATION ESTRIE INC.
- CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVAHISSANTS DU DÉVELOPPEMENT DE L’ESTRIE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA MRC-DE-COATICOOK
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE MEMPHRÉMAGOG
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES SOURCES
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU GRANIT
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU HAUT-SAINT-FRANÇOIS
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU VAL-SAINT-FRANÇOIS
- HEALTH AND SOCIAL SERVICES CENTRE – UNIVERSITY INSTITUTE OF GERIATRICS OF SHERBROOKE
- CENTRE JEUNESSE DE L’ESTRIE

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE L’ESTRIE – CENTRE HOSPITALIER UNIVERSITAIRE DE SHERBROOKE

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
• A residential and long-term care centre

• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual or motricity impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

• A rehabilitation centre belonging to the class of rehabilitation centres for mothers with adjustment problems

The head office of the institution is located in Sherbrooke, in the judicial district of Saint-François.

Territory served:

Estrie health region
Health region: Montréal (06) – Institution 1

Amalgamated public institutions:

- WEST ISLAND HEALTH AND SOCIAL SERVICES CENTRE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE DORVAL-LACHINE-LASALLE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU SUD-OUEST-VERDUN
- DOUGLAS MENTAL HEALTH UNIVERSITY INSTITUTE
- WEST MONTRÉAL READAPTATION CENTRE
- GRACE DART EXTENDED CARE CENTRE
- LES CENTRES DE LA JEUNESSE ET DE LA FAMILLE BATSHAW
- HÔPITAL SAINTE-ANNE

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE L’OUEST-DE-L’ÎLE-DE-MONTRÉAL

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A hospital centre belonging to the class of psychiatric hospital centres
- A child and youth protection centre
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
- A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Pointe-Claire, in the judicial district of Montréal.
Territory served:

• Réseau local de services de Pierrefonds–Lac Saint-Louis

• Réseau local de services de LaSalle–Vieux Lachine

• Réseau local de services de Verdun/Côte Saint-Paul–Saint-Henri–Pointe-Saint-Charles
**Health region:** Montréal (06) – Institution 2

**Amalgamated public institutions:**

- THE SIR MORTIMER B. DAVIS JEWISH GENERAL HOSPITAL
- ST. MARY’S HOSPITAL CENTER
- MIRIAM HOME AND SERVICES
- CHSLD JUIF DE MONTRÉAL
- MOUNT SINAI HOSPITAL
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX CAVENDISH
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA MONTAGNE
- MAIMONIDES HOSPITAL GERIATRIC CENTER CORPORATION
- INSTITUT DE RÉADAPTATION GINGRAS-LINDSAY-DE-MONTRÉAL
- CONSTANCE-LETHBRIDGE REHABILITATION CENTRE

**Name of the public institution resulting from the amalgamation:**

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DU CENTRE-DE-L’ÎLE-DE-MONTRÉAL

**The purpose of the institution is to operate:**

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
- A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (motricity impairment)

**The head office of the institution is located in Montréal, in the judicial district of Montréal.**
Territory served:

- Réseau local de services de René-Cassin–NDG/Montréal-Ouest
- Réseau local de services de Côte-des-Neiges–Métro–Parc-Extension
Health region: Montréal (06) – Institution 3

Amalgamated agency and public institutions:

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE MONTRÉAL
- CENTRE DE SANTÉ ET DES SERVICES SOCIAUX DU COEUR-DE-L’ÎLE
- CENTRE DE SANTÉ ET DES SERVICES SOCIAUX JEANNE-MANCÉ
- LA CORPORATION DU CENTRE DE RÉADAPTATION LUCIE-BRUNEAU
- INSTITUT RAYMOND-DEWAR
- THE MONTREAL CHINESE HOSPITAL (1963)
- INSTITUT UNIVERSITAIRE DE GÉRIATRIE DE MONTRÉAL
- CENTRE DE RÉADAPTATION EN DÉPENDANCE DE MONTRÉAL

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DES SERVICES SOCIAUX DU SUD-EST-DE-L’ÎLE-DE-MONTRÉAL

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing or motricity impairment)
- A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

The head office of the institution is located in Montréal, in the judicial district of Montréal.

Territory served:

- Réseau local de services de la Petite-Patrie–Villeray
- Réseau local de services des Faubourgs–Plateau-Mont-Royal–Saint-Louis-du-Parc
Health region: Montréal (06) – Institution 4

Amalgamated public institutions:

- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX D’AHUNTSIC ET MONTRÉAL-NORD
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE BORDEAUX-CARTIERVILLE-SAINT-LAURENT
- HÔPITAL DU SACRÉ-CŒUR DE MONTRÉAL
- HÔPITAL RIVIÈRE-DES-PRAIRIES
- CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVAHISSANTS DU DÉVELOPPEMENT DE MONTRÉAL

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DU NORD-DE-L’ÎLE-DE-MONTRÉAL

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A hospital centre belonging to the class of psychiatric hospital centres
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

The head office of the institution is located in Montréal, in the judicial district of Montréal.

Territory served:

- Réseau local de services d’Ahuntsic–Montréal-Nord
- Réseau local de services du Nord de l’Île–Saint-Laurent
Health region: Montréal (06) – Institution 5

Amalgamated public institutions:

- INSTITUT PHILIPPE-PINEL DE MONTRÉAL
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA POINTE-DE-L’ÎLE
- INSTITUT UNIVERSITAIRE EN SANTÉ MENTALE DE MONTRÉAL
- SANTA CABRINI HOSPITAL
- HÔPITAL MAISONNEUVE-ROSEMONT
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE SAINT-LÉONARD ET SAINT-MICHEL
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX LUCILLE-TEASDALE
- CANADIAN POLISH WELFARE INSTITUTE INC.
- LE CENTRE JEUNESSE DE MONTRÉAL

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE L’EST-DE-L’ÎLE-DE-MONTRÉAL

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A hospital centre belonging to the class of psychiatric hospital centres
- A child and youth protection centre
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems
- A rehabilitation centre belonging to the class of rehabilitation centres for mothers with adjustment problems
The head office of the institution is located in Montréal, in the judicial district of Montréal.

Territory served:

- Réseau local de services de Rivière-des-Prairies–Mercier-Est/Anjou–Pointe-aux-Trembles/Montréal-Est

- Réseau local de services de Saint-Léonard–Saint-Michel

- Réseau local de services de Hochelaga-Maisonneuve–Olivier-Guimond–Rosemont
Health region: Outaouais (07)

Amalgamated agency and public institutions:

• AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE L’OUTAOUAIS
• CENTRE DE RÉADAPTATION EN DÉPENDANCE DE L’OUTAOUAIS
• CENTRE RÉGIONAL DE RÉADAPTATION LA RESSOURSE
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE GATINEAU
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA VALLÉE-DE-LA-GATINEAU
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE PAPINEAU
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES COLLINES
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU PONTIAC
• PAVILLON DU PARC
• LES CENTRES JEUNESSE DE L’OUTAOUAIS

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE L’OUTAOUAIS

The purpose of the institution is to operate:

• A local community service centre
• A hospital centre belonging to the class of general and specialized hospital centres
• A child and youth protection centre
• A residential and long-term care centre
• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual or motricity impairment)
• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Gatineau, in the judicial district of Gatineau.

 Territory served:

Outaouais health region
Health region: Abitibi-Témiscamingue (08)

Amalgamated agency and public institutions:

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE L’ABITIBI-TÉMISCAMINGUE
- CENTRE DE RÉADAPTATION LA MAISON
- CENTRE NORMAND
- CLAIR FOYER INC.
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA VALLÉE-DE-L’OR
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE ROUYN-NORANDA
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES AURORES-BORÉALES
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU TÉMISCAMINGUE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX LES ESKERS DE L’ABITIBI
- CENTRE JEUNESSE DE L’ABITIBI-TÉMISCAMINGUE (C.J.A.T.)

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE L’ABITIBI-TÉMISCAMINGUE

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual, motricity or language impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Rouyn-Noranda, in the judicial district of Rouyn-Noranda.

 Territory served:

Abitibi-Témiscamingue health region
Health region: Côte-Nord (09)

Amalgamated agency and public institutions:

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE LA CÔTE-NORD
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA BASSE-CÔTE-NORD
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA HAUTE-CÔTE-NORD – MANICOUAGAN
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA MINGANIE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE L’HÉMATITE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE PORT-CARTIER
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE SEPT-ÎLES
- CENTRE DE PROTECTION ET DE RÉADAPTATION DE LA CÔTE-NORD

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE LA CÔTE-NORD

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
- A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual, motricity or language impairment)
- A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction
- A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Baie-Comeau, in the judicial district of Baie-Comeau.

Territory served:

Côte-Nord health region
**Health region:** Gaspésie–Îles-de-la-Madeleine (11)

**Amalgamated agency and public institutions:**

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE LA GASPÉSIE–ÎLES-DE-LA-MADELEINE
- 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 DE LA HAUTE-GASPÉSIE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES ÎLES
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU ROCHER-PERCÉ
- LE CENTRE DE RÉADAPTATION DE LA GASPÉSIE
- CENTRE JEUNESSE GASPÉSIE/LES ÎLES

**Name of the public institution resulting from the amalgamation:**

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE LA GASPÉSIE–ÎLES-DE-LA-MADELEINE

**The purpose of the institution is to operate:**

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
- A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual or motricity impairment)
- A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction
• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Gaspé, in the judicial district of Gaspé.

Territory served:

Gaspésie–Îles-de-la-Madeleine health region
Health region: Chaudière-Appalaches (12)

Amalgamated agency and public institutions:

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE CHAUDIÈRE-APPALACHES
- CENTRE DE RÉADAPTATION EN DÉPENDANCE DE CHAUDIÈRE-APPALACHES
- CENTRE DE RÉADAPTATION EN DÉFICIENCE PHYSIQUE CHAUDIÈRE-APPALACHES
- CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVRAISSANTS DU DÉVELOPPEMENT DE CHAUDIÈRE-APPALACHES
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX ALPHONSE-DEJSARDINS
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE BEAUCHE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA RÉGION DE THETFORD
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE MONTMAGNY-L’ISLET
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES ETCHEMINS
- CENTRE JEUNESSE CHAUDIÈRE-APPALACHES

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE CHAUDIÈRE-APPALACHES

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual, motricity or language impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Sainte-Marie, in the judicial district of Beauce.

 Territory served:

Chaudière-Appalaches health region
**Health region:** Laval (13)

**Amalgamated agency and public institutions:**

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE LAVAL
- CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVAHISSANTS DU DÉVELOPPEMENT DE LAVAL
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LAVAL
- JEWISH REHABILITATION HOSPITAL
- CENTRE JEUNESSE DE LAVAL

**Name of the public institution resulting from the amalgamation:**

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE LAVAL

**The purpose of the institution is to operate:**

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
- A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder
- A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (motricity impairment)
- A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction
- A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

**The head office of the institution is located in Laval, in the judicial district of Laval.**

**Territory served:**

Laval health region
Health region: Lanaudière (14)

Amalgamated agency and public institutions:

• AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE LANAUDIÈRE

• CENTRE DE RÉADAPTATION EN DÉFICIENCE PHYSIQUE LE BOUCLIER

• 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

• LES CENTRES JEUNESSE DE LANAUDIÈRE

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE LANAUDIÈRE

The purpose of the institution is to operate:

• A local community service centre

• A hospital centre belonging to the class of general and specialized hospital centres

• A child and youth protection centre

• A residential and long-term care centre

• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing, visual, motricity or language impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems
The head office of the institution is located in Joliette, in the judicial district of Joliette.

Territory served:

Lanaudière health region
Health region: Laurentides (15)

Amalgamated agency and public institutions:

- AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DES LAURENTIDES
- CENTRE DE RÉADAPTATION EN DÉPENDANCE DES LAURENTIDES
- CENTRE DU FLORÈS
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX D’ANTOINE-LABELLE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX D’ARGENTEUIL
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE SAINT-JÉRÔME
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE THÉRÈSE-DE-BLAINVILLE
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES PAYS-D’EN-HAUT
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DES SOMMETS
- CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU LAC-DES-DEUX-MONTAGNES
- THE RESIDENCE OF LACHUTE
- CENTRE JEUNESSE DES LAURENTIDES

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DES LAURENTIDES

The purpose of the institution is to operate:

- A local community service centre
- A hospital centre belonging to the class of general and specialized hospital centres
- A child and youth protection centre
- A residential and long-term care centre
• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

The head office of the institution is located in Saint-Jérôme, in the judicial district of Terrebonne.

Territory served:

Laurentides health region
Health region: Montérégie (16)

Amalgamated agency and public institutions:

• AGENCE DE LA SANTÉ ET DES SERVICES SOCIAUX DE LA MONTÉRÉGIE
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE VAUDREUIL-SOULANGES
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DU SUROÎT
• HAUT-SAINT-LAURENT HEALTH AND SOCIAL SERVICES CENTRE
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX JARDINS-ROUSSILLON
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX HAUT-RICHELIEU-ROUVILLE
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX CHAMPLAIN-CHARLES-LE MOYNE
• LES SERVICES DE RÉADAPTATION DU SUD-OUEST ET DU RENFORT
• CENTRE JEUNESSE DE LA MONTÉRÉGIE
• CENTRE MONTÉRÉGIEN DE RÉADAPTATION
• CENTRE DE RÉADAPTATION EN DÉPENDANCE LE VIRAGE
• CENTRE DE RÉADAPTATION FOSTER
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX PIERRE-BOUCHER
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX PIERRE-DE SAUREL
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX DE LA HAUTE-YAMASKA
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX LA POMMERAIE
• CENTRE DE SANTÉ ET DE SERVICES SOCIAUX RICHELIEU-YAMASKA
• CENTRE DE RÉADAPTATION EN DÉFICIENCE INTELLECTUELLE ET EN TROUBLES ENVHIISSANTS DU DÉVELOPPEMENT DE LA MONTÉRÉGIE-EST

• INSTITUT NAZARETH ET LOUIS-BRAILLE

Name of the public institution resulting from the amalgamation:

CENTRE INTÉGRÉ DE SANTÉ ET DE SERVICES SOCIAUX DE LA MONTÉRÉGIE

The purpose of the institution is to operate:

• A local community service centre

• A hospital centre belonging to the class of general and specialized hospital centres

• A child and youth protection centre

• A residential and long-term care centre

• A rehabilitation centre belonging to the class of rehabilitation centres for mentally impaired persons or persons with a pervasive developmental disorder

• A rehabilitation centre belonging to the class of rehabilitation centres for physically impaired persons (hearing or motricity impairment)

• A rehabilitation centre belonging to the class of rehabilitation centres for young persons with adjustment problems

• A rehabilitation centre belonging to the class of rehabilitation centres for persons with an addiction

The head office of the institution is located in Longueuil, in the judicial district of Longueuil.

Territory served:

Montérégie health region
SCHEDULE II
(Section 162)

Common-interest information assets transferred to the Minister

• Couche d’accès à l’information sur la santé (CAIS or health information access layer)

• Québec Health Record (medication, lab analyses and imaging domains)

• Infocentre réseau

• Infocentre Santé publique

• Infocentres régionaux

• Outil d’évaluation multi clientèle (OEMC or Multiclientele Assessment Tool)

• Pandémie H1 N1

• Registre des traumatismes du Québec (RTQ)

• Fonctions évaluatives du continuum de services en traumatologie (FECST or Trauma Care Continuum Assessment Functions)

• Registre et services de gestion des consentements

• Registre québécois du cancer (RQC)

• Répertoire des ressources

• SécurSanté

• Système budgétaire et financier (SBFR)

• Système clientèle jeunesse

• Système d’information clientèle en déficience intellectuelle

• Système de gestion pour les réseaux de services intégrés des personnes âgées (RSIPA)

• Système d’information clientèles pour les services de réadaptation en dépendances

• Système d’information de gestion des services pré-hospitaliers d’urgence (SIGSPU)

• Système d’information de gestion pour un département d’urgence (SIGDU)
• Système d’information intégré sur les activités transfusionnelles et hémovigilance (SIIATH)

• Système d’information pour les services de maintien à domicile

• Système d’information pour personnes ayant une déficience physique

• Système d’information sur la clientèle en milieu d’hébergement et de soins de longue durée (SICHELD)

• Système d’information sur la gestion de l’accès aux services (SGAS)

• Système d’information sur la gestion des plaintes et l’amélioration de la qualité des services (SIGPAQS)

• Système d’information sur les mécanismes d’accès aux services spécialisés (SIMASS)

• Système d’information sur les ressources intermédiaires et de type familial (SIRTF)

• Système d’intégration des CLSC (I-CLSC)

• Système intégré de surveillance et vigie en santé publique

• Système intégré protection des maladies infectieuses (SI-PMI)

• Système Programme québécois du dépistage du cancer du sein (PQDCS)

• Telehealth systems and infrastructures (telepathology, teleassistance, teleconsultation, etc.)

• Système TOXIN (Centre antipoison du Québec)

• Québec Health Record information viewer