

PRESS RELEASE no. 3

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THE 2012-2013 ANNUAL REPORT OF THE QUÉBEC OMBUDSMAN Highlights regarding the Ministère de la Santé et des Services sociaux and its network

Québec City, September 25, 2013 – In 2012-2013, the Québec Ombudsman received 1,186 complaints and 239 reports regarding health and social services. It deemed 43% of complaints and reports to be substantiated. Most had to do with difficulties accessing care and services, unjustified wait times, or failure to respect users' rights. It should be remembered that with regard to health and social services, the Québec Ombudsman is, allowing for exceptions, a second-level recourse subject to the conclusions of institutions' local service quality and complaints commissioners.

In its annual report, the Québec Ombudsman reminds the Ministère de la Santé et des Services sociaux that it is important to remain responsible for quality control of the services it devolves to private or community sector institutions.

Physical disabilities, intellectual disabilities and pervasive development disorders (PDD)

The Québec Ombudsman urges the Ministère de la Santé et des Services sociaux to improve its program of assessment visits to ensure that people living in an intermediate or family-type resource receive suitable services and enjoy a quality physical environment. It cites situations where resources like these, attached to the public network, presented severe shortcomings in the living environment, the food, and monitoring by staff. The Québec Ombudsman is also worried by shortcomings in day activities available to adults with a disability. These activities are not only subject to long waiting lists but are disparate, fragmented and sometimes expensive. (Pages 75 to 77)

Age-related loss of independence

In 2012-2013, substantiated complaints and reports mainly concerned organization of care and services, quality of help with everyday activities, and supervision. The Québec Ombudsman is particularly concerned by shortcomings found in quality control at certain private resources with which the public network has "purchasing agreements" for temporary places. It is not opposed to the public network turning to these resources, among

other reasons to help free up hospital beds and ultimately reduce overcrowding in emergency rooms. However, complaints and reports reveal situations where the public agencies responsible had not monitored resources sufficiently. As a result, resources exhibited shortcomings in resident supervision, staff training and attitudes towards residents. The Québec Ombudsman would like to underline that one should not generalize the shortcomings listed here to all private resources. (Pages 77 to 81)

Mental health

Regarding mental health, complaints and reports mainly concern inadequate application of the Act respecting the protection of persons whose mental state presents a danger to themselves or to others, inappropriate use of control measures, and restrictions of users' rights. The Québec Ombudsman found that some facilities do not obtain the consent of a user or their representative, nor court authorization, when applying a control measure (isolation or restraint) over several days. So it recommends the Ministère de la Santé et des Services sociaux take necessary measures to ensure that where an unplanned control measure turns into a measure of some duration, facilities obtain the required consents. (Pages 82 to 84)

Physical health

Regarding the problem of emergency room overcrowding, the Québec Ombudsman believes that total waiting times (on stretcher and ambulatory) should be compiled for each hospital centre in Québec. The data should be accessible to the public in real time and be easy to consult so citizens can make an enlightened choice as to where to go for treatment. It therefore supports the Department's decision to set up a common emergency room database by the end of 2013, and invites it to put it into action within the planned time frame. It also asked the Department to measure the impact of solutions to reduce overcrowding in emergency rooms by drawing up a report on patients who were redirected by virtue of agreements between hospitals and family medicine groups or network clinics. (Pages 85 to 87)

The Québec Ombudsman's annual report is posted on its website at www.protecteurducitoyen.qc.ca/en/annualreport.

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