

*An Act respecting the Ministère de la santé et des services sociaux* (R.S.Q., chapter M-19.2) entrusts the Minister with the command and administration of the Ministère de la Santé et des Services sociaux, as well as the application of the laws and regulations regarding health and social services.<sup>1</sup> The Minister's duties also include the development and tabling before the government of health and social services policies, and he is mandated to oversee their implementation, monitor their application and coordinate their execution.<sup>2</sup>

2006-2007 is the first year where the Québec Ombudsman has jurisdiction over both the Ministère de la Santé et des Services sociaux and the health and social services network. During her regional visits, the Ombudsperson reached certain conclusions regarding the Department, based on the complaints received, the investigations conducted by delegates, and various meetings and exchanges. The Québec Ombudsman deemed these observations worthy of being included in this report, i.e. the mobilization of managers necessary to successfully implement reforms, the gap between the text of policies and the services network's actual ability to meet requirements, the lack of a skilled labour force, and the qualitative monitoring of services.

During the various regional meetings held, health and social services network personnel apprised the Ombudsperson of the impact of the reforms and other planned changes on the mobilization of managers necessary to adapt to the changes. Managers consequently have less time to dedicate to daily program management, personnel supervision and the introduction of measures with a direct effect on users. One excellent example is the delays in implementing quality living environments in various CHSLDs, where staff members claim they are not receiving the needed support from management. As attested to by a number of complaints processed by the Québec Ombudsman, such delays have a definite impact on users. The Québec Ombudsman is cognizant of the requirements for managers of change-related activities but believes that overseeing services on a daily basis should remain their primary focus. Hence, the Québec Ombudsman urges the Department to promote conditions that will enable managers to fully fulfill their management responsibilities in times of change.

1/ Section 1.

2/ Section 2.

Another element worthy of note is the variation between Department policies and directions, and the system's ability to successfully implement them. Examples of this include the policy regarding mental health, the Department's approach to an improved quality of life for persons in CHSLDs, and the policy on palliative care. Persons who need services under the policy regarding home care or the program for adapting the home environment decry the delays in obtaining the necessary help and the fact that the services delivered are insufficient given the needs assessed. A review of complaints filed by users of the health and social services network reveals their numerous difficulties in obtaining services. Users wait to be seen by a professional, wait to get test results, wait to receive in-home services to avoid being hospitalized or otherwise accommodated, and wait to be admitted into an adequate accommodated environment. Being obliged to wait for such services is confounding and worrisome to users, who voice their frustration and concerns by complaining to the local or regional commissioner, or to the Québec Ombudsman. To limit such complaints, the population should be knowledgeable as to the degree of progress in the implementation of Department policies. Otherwise, they will expect them to correspond to their "reality." Users would no doubt welcome more specific information on the limits and delays of policy and program implementation.

Some of the complaints received by the Québec Ombudsman also address service quality. The Québec Ombudsman feels that ongoing improvement with regard to quality of services should be a key concern of managers and other actors in the health and social services network. In this regard, the Québec Ombudsman feels quality indicators should be further emphasized in the management agreements between the department, and health and social services agencies, as well as the management agreements between the latter and local bodies. This would facilitate reporting, much as would quantitative factors regarding the volume of services and the budget involved. Management follow-up with qualitative and quantitative elements would favour improved efficiency and ongoing improvements in service quality.