Voice of English-speaking Québec
1270 Chemin Sainte-Foy, Suite 2141
Quebec, Quebec G1S 2M4
Telephone: 418 683-2366
Fax: 418 688-3273
Taylor Ireland, President: taylor@lesateliers.ca
Jean-Sebastien Jolin-Gignac, Executive Director: js.gignac@veq.ca

Commission de la santé et des services sociaux
Clerk: Mathew Lagacé
Édifice Pamphile-Le May
1035 Rue des Parlementaires
3rd floor, Suite 3.15
Quebec, Quebec G1A 1A3

Brief submitted for the special consultations and public hearings on Bill 10, An Act to modify the organization and governance of the health and social services network, in particular by abolishing the regional agencies

Jeffery Hale – Saint Brigid's: The cornerstone of health, vitality and growth of the English-speaking community in the Greater Quebec City Region

Thursday, October 23, 2014

INTRODUCTION

The Voice of English-speaking Québec (VEQ) is an autonomous, non-profit organization dedicated to the preservation of a dynamic English-speaking community in the Greater Quebec City region and the promotion of its interests. VEQ is governed by a board of directors composed of 15 volunteer members. It currently has active partnerships with over 70 community organizations, institutions and groups, and the support of more than 2,200 members.

The English-speaking community can be defined by its vitality, its comprehensive knowledge of its evolving needs, its diversity and the high level of education of its members. According to the latest data, there are 14,565 English-speaking residents in the region, representing 1.9 percent of the population. Statistics also show that the community has experienced significant growth, with the addition of nearly 2,000 new members. Growth

of this kind, a first in nearly 150 years, is due primarily to a higher birth rate in the community and to the arrival of new English-speaking residents.

VEQ welcomes some 500 newcomers every year. Almost half of them come with their families, for a total of 200 new families in our region. These newly arrived members of our community represent a major source of potential bilingual labour, which is essential to the region's economic development. All newcomers unanimously agree on the three key factors essential to their integration: access to francization services, employment and English-language health and social services.

BRIEF:

VEQ understands and respects the Québec Government's decision to restore the financial health of the healthcare and social services network and cut bureaucracy in order to improve access and ensure better continuity of care. We must, however, voice our opposition to this reform since it will have a detrimental and irreversible impact on the vitality of the English-speaking community.

Jeffery Hale – Saint Brigid's is a pillar of our community and a visible icon of its presence in the Quebec City region. It plays a leadership role in providing bilingual health and social services to residents, including English-speaking newcomers. The loss of Jeffery Hale – Saint Brigid's as an independent entity with deep connections to the community would not only have a direct impact on the English-language health and social service offer in our area; it would also seriously jeopardize the other institutions serving our community.

VEQ believes that the reform to the healthcare system outlined in Bill 10, as it now stands, will raise a number of problematic issues for our community:

- **The loss of an institution essential to the vitality of the English-speaking community in the Quebec City region:** Jeffery Hale – Saint Brigid's is closely connected to the history, vitality and civic life of our community. Members of our community do more than just use the services of Jeffery Hale – Saint Brigid's; they are involved with it at every level: as volunteers, as donors to the various foundations that support it and as active members of its board. Given the nature of the services it provides along with its central place at the very heart of all initiatives serving the linguistic minority in our region, the survival of Jeffery Hale – Saint Brigid's is deeply intertwined with the survival and vitality of the English-speaking community in Quebec City. For example, all the services offered by VEQ to newcomers and seniors are carried out in partnership with Jeffery Hale – Saint Brigid's. As a result, the loss of Jeffery Hale – Saint Brigid's as an independent entity would seriously compromise our ability to integrate newly arrived residents, who are key contributors to the economic development of our region.

- **The permanent loss of the governing structure of the community's only health institution**: Bill 10 would abolish the Jeffery Hale – Saint Brigid's board composed of members from our community. It would be replaced by a board governed by the newly created CISSS made up exclusively of members selected by the Health Minister. This would essentially mean the end of community-based governance and the loss of our ability to influence decisions on matters related to health and social services mandated to respond to our community's needs. Control and management of Jeffery Hale – Saint Brigid's through an autonomous board is key to maintaining a service offer that meets the evolving needs of the English-speaking community and as such maintains the vitality of a community requiring it's services. Who will defend with due dedication the institution's designated status? Who will fight for our right to have access to health and social services in English?

- **The loss of knowledge and expertise needed to serve a linguistic minority:** Managing a health institution adapted to the cultural and linguistic reality of a minority group is an important and complex task. Despite the good will of the new CISSS, we are extremely worried about its ability to continue serving the members of our community with the same level of efficiency and attention as Jeffery Hale – Saint Brigid's. The forced merger of Jeffery Hale – Saint Brigid's within a vast Francophone institution with no representation would reduce our community's voice to that of a drop in the ocean. When it comes to recognizing the evolving needs of our community, Jeffery Hale – Saint Brigid's has always demonstrated leadership and a comprehensive understanding of the needs of the English-speaking community which have led to the continued development of services adapted to an evolving minority community. Understanding the diverse, complex requirements of newcomers, providing additional services and support for young families and implementing programs tailored to the aging members of our community, are some examples of Jeffery Hale – Saint Brigid's expertise in the matter of responding to the community. This ability to adapt to the needs of the community in a timely manner will no longer exist if the reform goes forward as it stands now.

- **The likely, permanent erosion of access to health and social services in English in the Quebec City region:** Bill 10 provides no real assurance that health and social services in English will be maintained in the Quebec City region. It goes without saying that the community is extremely worried. The current guarantees provided under Bill 10 are woefully inadequate and the mechanisms meant to protect services actually allow the CISSS to opt out of its obligations in the medium term without any restrictions. Our voice may be heard, but will it be heeded? In the long run, what will happen to the bilingual ER and to the English-language CLSC-type services for young families,

> seniors living at home and youth with special needs? Which institution, other than Jeffery Hale – Saint Brigid's, will ensure access to palliative care in English so that members of our community can die with dignity? Maintaining the autonomy of Jeffery Hale – Saint Brigid's is the only way to continue offering and developing these services for the English-speaking community in the Greater Quebec City region. The right of access to English services in Quebec is not absolute. It is embodied in an institution that has made it its raison d'être. By abolishing the governance structure of Jeffery Hale – Saint Brigid's, which plays a pivotal role in the Greater Quebec City region, our community will lose its ability to exercise that right.

Every region in Quebec is responsible for providing access to health and social services for its minority English-speaking population. In the last 20 years, a proven organizational model for frontline health services in English has been implemented in the Quebec City region. Jeffery Hale – Saint Brigid's is the only institution of its kind in the whole of Eastern Quebec.

This is not the first time the community has come together to defend its institutions. During the 2004 reform, an agreement was made with Dr. Philippe Couillard, then Minister of Health. Jeffery Hale – Saint Brigid's was subsequently integrated into the local networks that were put in place at that time. It remained an autonomous institution recognized as the corporate owner of both sites, which are historical legacies left by members of our community. By virtue of this agreement, Jeffery Hale – Saint Brigid's was able to preserve its special, deep-rooted ties to the English-speaking community it serves.

It is important to remember that when it comes to the reform proposed by Bill 10, "One size does NOT fit all." Partners in the English-speaking community are studying alternatives to the model currently proposed in order to protect the unique role played by Jeffery Hale – Saint Brigid's in the community, while respecting the goals of the reform. VEQ asks the Government to consider the adjustments required to remain responsive to the needs and reality of the English-speaking community in the Quebec City region and encourages it to study the solutions that will be put forward.

In conclusion, we leave you with a thought by Mrs. Gertie Grogan. A member of the Jeffery Hale – Saint Brigid's board, a dedicated volunteer in the community for 50 years and founder of the Saint Brigid's Guild, she expresses her concern:

"We should be evolving, not dissolving.

Thank you.

Voice of English-speaking Québec

Appendix 1 (en français): Portrait of the English-speaking Population of the Quebec City Region

La communauté anglophone se définie par son dynamisme, une compréhension accrue de ses besoins, le niveau d'éducation élevé de ses membres et la diversité de ceux-ci. Il ne fait donc aucun doute qu'elle représente un atout incontestable pour la Ville de Québec. Selon les données basées sur la langue maternelle (incluant les réponses multiples) du recensement 2011 pour Québec comme région métropolitaine de recensement, la population d'expression anglaise représente 14 565 personnes, soit 1,9 % de la population totale de la région. Si l'on compare les données des années de référence 2006 et 2011, on constate que la population anglophone de Québec a bénéficié d'une forte croissance de près de 2 000 individus. Il s'agit de la première augmentation de notre population en près de 150 ans. Cette croissance s'explique principalement par l'apport des nouveaux arrivants de langue anglaise et les naissances au sein de notre communauté. Il est important de préciser que les nouveaux arrivants et les jeunes familles sont les deux groupes de notre communauté qui utilisent le plus les services de santé offerts par nos institutions.

Dimension démographique

Selon les données de 2011, basées sur la première langue officielle parlée, les jeunes âgés de 0 à 14 ans représentent 10,1 % de la population totale des personnes d'expression anglaise de la Capitale-Nationale. Le groupe des 25-44 ans représente quant à lui 30,7 %. Finalement, 15,4 % de la population d'expression anglaise est âgée de 65 ans et plus, ce qui est plus élevé que la moyenne francophone. Cette tranche d'âge vieillissante est confrontée à des défis importants et non négligeables quant à l'organisation des services permettant leur maintien à domicile. En effet, les personnes âgées d'expression anglaise de la région subissent les conséquences de la mobilité de la population anglophone qui quitte, définitivement ou temporairement, la région pour poursuivre leurs études ou pour des opportunités professionnelles. Cette perte affecte de façon importante le taux de soignants, d'aidants naturels et de bénévoles qui constituent, entre autres, le réseau principal des personnes âgées d'expression anglaise (Pocock, 2006). Cette mobilité entraîne des répercussions tangibles au sein de la communauté d'expression anglaise de par son impact direct sur les besoins de services en langue anglaise, et ce, à tous les niveaux et auprès de tous les groupes d'âge.

Une population éduquée

Lorsque comparée avec les personnes d'expression anglaise des autres régions de la province, la Capitale-Nationale se démarque comme étant l'une des régions où l'on retrouve un niveau d'instruction plus élevé (CHSSN 2014). De plus, lorsque comparées avec la population majoritaire francophone de la région, les personnes d'expression anglaise apparaissent également plus éduquées. En effet, 86,4 % des personnes âgées entre 25 à 64 ans détiennent un diplôme d'étude universitaire (baccalauréat ou supérieur), comparativement à 53,5 % pour la population francophone (CHSSN, 2014). Ces anglophones représentent un potentiel de main-d'œuvre bilingue important et essentiel au développement économique de la ville.

Les migrants et immigrants

Nous ne pouvons pas dresser un portrait de la population d'expression anglaise sans porter une attention particulière aux personnes migrantes et immigrantes, car elles en font partie intégrante. Tous les cinq ans, 25 % de la population anglophone de Québec est renouvelée par les nouveaux arrivants qui ont choisi la Ville de Québec comme terre d'accueil (VEQ 2009).

Dans le dernier portrait statistique de l'immigration permanente au Québec 2009-2013 du ministère de l'Immigration, de la Diversité et de l'Inclusion, 15,5 % des immigrants arrivant au Québec ont déclaré connaître uniquement l'anglais au moment de leur admission et 36,7 % le français et l'anglais (MIDI, 2014). Fait également important à noter, 22,2 % des immigrants ont également déclaré ne connaître ni l'anglais ni le français à leur arrivée. La présence de ces immigrants allophones dont la langue maternelle n'est ni l'anglais ni le français a certainement un effet sur la communauté d'expression anglaise de Québec, car ils ont souvent l'anglais comme première langue officielle parlée (PLOP). Nous pouvons donc penser qu'un certain nombre de ces immigrants choisiront Québec comme terre d'accueil et qu'ils interagiront en langue anglaise lors de leur premier contact avec les différents services offerts, et ce, au moins jusqu'à ce que leur processus de francisation soit complété (ASSS, 2006; VEQ, 2009; Jantzen & Mata, 2012; MICC, 2013).

Considérant ces données, Voice of English-speaking Québec a développé, au cours des vingt-cinq dernières années, un programme d'accueil et d'intégration des nouveaux arrivants anglophones qui accueille de 400 à 500 immigrants chaque année. Les récentes données recueillies dans le cadre de ce programme nous indiquent que la moitié des nouveaux arrivants sont des immigrants et l'autre moitié sont des migrants provenant d'autres provinces canadiennes. Également, 45 % des nouveaux arrivants accueillis via notre programme sont arrivés dans la région avec leur famille, représentant pas moins de 150 à 200 familles qui s'installent dans notre ville chaque année. 90 à 95 % de ces familles comptaient au moins un membre détenant un emploi à leur arrivée. À cela, ajoutons qu'environ 45 % des nouveaux arrivants d'expression anglaise sont de jeunes couples qui considèrent sérieusement fonder leur famille dans notre ville. 100 % des nouveaux arrivants anglophones ayant reçu des services chez nous sont venus nous rencontrer pour obtenir plus d'informations sur trois grands thèmes cruciaux à leur intégration, soit : des endroits où ils pourront améliorer leur français, l'employabilité dans la région et où recevoir des services de santé et services sociaux en anglais.

Il est absolument essentiel de ne pas sous-estimer l'impact que la perte du Jeffery Hale – Saint Brigid's, une institution ancrée dans la communauté depuis 150 ans et qui répond au besoin de la population d'expression anglaise de la région de Québec, représenterait non seulement pour la communauté anglophone, mais également pour la Ville de Québec. La disparition du Jeffery Hale - Saint Brigid's en tant qu'institution autonome intimement liée à la communauté anglophone tant sur le plan de sa gouvernance que de ses fondations et de ses services adaptés aux besoins de notre communauté réduirait dramatiquement la capacité de VEQ d'accueillir et d'intégrer des nouveaux arrivants de langue anglaise. Conséquemment, une telle perte entraînerait également une réduction de la capacité de la Ville de Québec de bien intégrer les nouveaux arrivants anglophones, ce qui ne peut qu'avoir des conséquences néfastes sur la prospérité économique de notre région.

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Jeffery Hale
Saint Brigid's
Une communauté de soins
A Community of Care

Jeffery Hale – Saint Brigid's at a Glance

Our History

Jeffery Hale – Saint Brigid's (JHSB) resulted from the April 1, 2007 merger of two institutions, which together have been offering services to English speakers of the Greater Québec City region for 300 years. It was created to strengthen English-language services to this community.

Our Services

JHSB operates a residential and long-term care (CHSLD) facility, while also fulfilling its complementary mandates as a hospital and provider of community services to English speakers.

- For seniors with reduced autonomy (services in both official languages):
  - 241 long-term care beds (142 at Saint Brigid's Home and 99 at Jeffery Hale)
  - 26 beds in community geriatrics, including 10 in palliative care, and specialized geriatric and psycho-geriatric consultation services
- General services for all age groups (in both official languages):
  - Minor emergencies, diagnostic services (medical imagery and testing) and outpatient services
- Community services for all age groups (mainly in English):
  - English-language community services for English speakers, such as services to youth and families, mental health services, home care for seniors and a day centre
  - Community support: community service organizations, partnerships with voluntary organizations serving English speakers and volunteer development

We have a special mandate to serve the region's English-speaking population and, as such, offer all of our services in English and French. We play a leadership role in various initiatives to ensure that this community has access to adequate care and services in its language.

See reverse

An Overview of our Clientele

English-Speaking Population

The English-speaking population living in the Capitale-Nationale Region (CNR) (based on the 2006 Statistics Canada Census and Warnke, 2009):

- totals close to 12,000 residents – 2% of the population
- has been relatively stable since 2001, despite a decrease in the previous years
- is concentrated mostly in the CSSS de la Vieille-Capitale (53.9%) and CSSS de Québec-Nord (39.7%), for the most part in the municipalities of Valcartier and Shannon
- includes approximately 28% migrants – defined as persons who resided in another municipality five years ago
- is currently older than the regional average (CIM, 2011) and, as early as 2016, will experience a sharp increase in the number of residents aged 75 and over
- has a smaller contingent of "caregivers" – people in the 40-65 age bracket – due to the mass exodus of Anglophones from 1976-1986
- is 17% more likely to live below the low-income cut-off (Warnke, 2009)
- includes 33% university graduates – certificates or diplomas
- is twice as likely to have a body mass index (BMI) greater than 30 KG/m2 compared to the French-speaking population (RISF, 2009)

The English-speaking population has several distinctive features that differentiate it from the majority, thus calling for a specific approach and service offer:

- Less use of public services
- More limited access to a family physician
- Initial reflex to seek help from family, friends and the community
- Access to a more community-minded approach for support (e.g. congregations, neighbours, etc.)
- More socially isolated, especially seniors whose families have left the region

General Population

JHSB is located in a neighbourhood with a comparatively higher proportion of seniors. Our primary care service offer meets the needs of this particular segment of the population but also those of all age groups. Readers who would like more details on the majority population we serve can refer to information provided by the CSSS, which has territorial responsibility for the population and with whom we work closely.

jhsb.ca

2013-10-08

Quality, safety, compassion

Strategic Plan

2012 – 2015

Summary Document

Key actions that will maximize the contribution of Saint Brigid's – Jeffery Hale Hospital to the healthcare network and health and well-being of the English-speaking community of the Capitale-Nationale Region

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Appendix 3: Jeffery Hale – Saint Brigid's: Strategic Plan Summary 2012 – 2015 (page 2 of 3)

Mission of Jeffery Hale – Saint Brigid's

With deep roots in Quebec City's English-speaking community and a long tradition of caring, Saint Brigid's – Jeffery Hale Hospital is a public, bilingual institution under participatory governance dedicated to providing safe, compassionate and high quality care. Together with its partners in the health and social services network and the community, it makes a positive contribution to the health and well-being of the population it serves by delivering primary community and general services for all age groups and a variety of services to persons experiencing a loss of autonomy.

Saint Brigid's – Jeffery Hale Hospital plays a pivotal role in the English-speaking community and fosters its vitality. It spearheads concerted actions that promote the development of this community and the health and well-being of its members.

Two target populations: *Two roles, two approaches, two languages* **One constant**: *Cooperation with network and community partners*

General population: **Role** - Active support of the CSSSs **Approach** - Service and program-oriented	**English-speaking population**: **Role** - Leadership in partnership with the CSSSs **Approach** - Community support and client-centered programs

Two languages: A bilingual institution meeting the needs of users in the official language of their choice

Our Commitment: *Quality, safety, compassion* **Our Values**: *Respect, discretion, professionalism, empathy, courtesy, fairness*

Our Aspirations

Promote the active participation of the community	Exemplify positive partnership	Share expertise	Be a committed leader	Let our successes build our reputation	Share a common commitment to the well-being of our users	Promote linguistic duality and openness to cultural diversity	Be attentive to both those who receive and those who provide care	Build on our founders' tradition of caring

Our Strategic Vision

An institution recognized for safety, quality and compassion in its care and services to users and working environment for staff	A forward-looking institution constantly evolving to better serve the community	A bilingual institution closely connected to the English-speaking community and dedicated to the health and well-being of its members

Our Priority Goals

Place quality, security and compassion at the heart of everything we do	Focus on ensuring the quality of life of residents experiencing severe loss of autonomy	Invest in the quality of life and professional development of our staff	Further support the aging population and patients at the end of life wishing to remain in the community	Increase Jeffery Hale's contribution to the regional continuum of primary care services	Spearhead efforts to improve the health of the region's English-speaking population

Jeffery Hale Saint Brigid's

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Appendix 3: Jeffery Hale – Saint Brigid's: Strategic Plan Summary 2012 – 2015 (page 3 of 3)

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Our Strategic Priorities

Place quality, security and compassion at the heart of everything we do	Focus on ensuring the quality of life of residents experiencing severe loss of autonomy	Invest in the quality of life and professional development of our staff
• Consolidate our culture of continuous improvement	• Provide a warm, home-like living environment	• Retain our staff
• Adopt a comprehensive risk management strategy	• Leverage the financial support of our foundations for the benefit of our residents	• Ensure a stimulating work environment
• Strengthen nursing practice	• Expand volunteering as a way of enriching the quality of life of our residents	• Strengthen competencies
• Learn from adverse events	• Prioritize accessibility and functionality of the premises for clientele with the most compromised autonomy	• Recognize employee successes
• Expand our compassionate patient-centered approach	• Provide activities on the residential units	• Build on cooperative linkages with union partners
• Ensure ethical and responsible behaviour	• Encourage the involvement of family members and the community in the lives of our residents	• Encourage a healthy lifestyle among staff
Further support the aging population and patients at the end of life wishing to remain in the community	**Increase Jeffery Hale's contribution to the regional continuum of primary care services**	**Spearhead efforts to improve the health of the region's English-speaking population**
• Accompany those in the final stage of life	• Optimize the performance of emergency services	• Consolidate the range of English-language services
• Participate in the regional development of innovative projects aimed at better support of home care for the elderly	• Make diagnostic facilities available to front-line doctors	• Build an effective network of partners
	• Invest in efficient integrated , networks	• Bring health promotion to the English-speaking community
	• Enhance our contribution to the management of chronic diseases	• Encourage the active involvement of the English-speaking population

2013-10-08