



## Users' Rights

Code of ethics and conduct

Centre intégré  
de santé  
et de services sociaux  
de la Gaspésie

Québec 

# Our

pledge

Centre intégré  
de santé  
et de services sociaux  
de la Gaspésie  
Québec 



## LEGISLATIVE SOURCES FOR USERS' RIGHTS

Canadian charter of rights and freedoms – Appendix B of the Canada Act 1982, c 11 (UK) enactment April 17, 1982

Charter of human rights and freedoms – R.S.Q., c. C-12

Civil Code of Québec – L. Q. 1991 c. 64

Act respecting access to documents held by public bodies and the protection of personal information – R.S.Q., c. A-2.1

Act respecting health services and social services – R.S.Q., c. S-4.2)

Organization and Management of Institutions Regulation – R.Q., c.S-5, r.3.01

### The CISSS de la Gaspésie consulted the following documents :

- Code d'éthique du CHUQ (Centre hospitalier universitaire de Québec), 2012.
- Droits des usagers — Code d'éthique et de conduite — CSSS de la Baie-des-Chaleurs, février 2014.
- Code d'éthique du CSSS de La Côte-de-Gaspé.
- Code d'éthique : respect, valorisation, responsabilité du CSSS du Rocher-Percé.
- Code d'éthique du CSSS de La Haute-Gaspésie.
- Code d'éthique des personnes œuvrant au Centre jeunesse Gaspésie/Les Îles.
- Code d'éthique du Centre de réadaptation de la Gaspésie.

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## NOTE TO READERS

### Masculine Form

The masculine form is used to simplify the text and includes the feminine.

### Some short forms and abbreviations

In order to make the text easier to understand, here are some of the short forms/abbreviations used in this document :

Code	Users' rights — Code of ethics and conduct
CISSS	Centre intégré de santé et de services sociaux
Establishment	CISSS de la Gaspésie
Act	The Act respecting health services and social services (R.S.Q., c. S-4.2)

Please note that the Code of ethics of the CISSS de la Gaspésie was adopted on November 8, 2018 by the board of directors.

## LIST OF USERS' COMMITTEES

### **Comité des usagers du CISSS de la Gaspésie**

For information :

Telephone : 418 759-3443, ext. 2348

Toll free : 1 888 666-3443, ext. 2348

### **Comité des usagers de La Côte-de-Gaspé et son comité de résidents**

Telephone : 418 368-3301, ext. 3006

### **Comité des usagers du Rocher-Percé et ses comités de résidents**

Telephone : 418 689-2261, ext. 2559

### **Comité des usagers de la Baie-des-Chaleurs et ses comités de résidents**

Telephone : 418 759-3443, ext. 2348

### **Comité des usagers de La Haute-Gaspésie et son comité de résidents**

Telephone : 418 763-2261, ext. 2104

### **Comité des usagers — Volet Réadaptation**

Telephone : 418 689-4286, ext. 3450

### **Comité des usagers — Volet Jeunesse et ses comités de résidents**

Telephone : 418 368-5525, ext. 8372

## INFORMATION

### CISSS de la Gaspésie

**To contact Quality, Evaluation, Performance and Ethics dept.**

418 759-3443, ext. 2193

Toll free :

1 888 666-3443, 2193

**To contact Human Resources, Communications and Legal affairs dept.**

418 759-3443, ext. 2194

Toll free :

1 888 666-3443, ext. 2194

### Ombudsman

Telephone (toll free) : 1 800 463-5070

Fax (toll free) : 1 866 902-7130

E-mail : [protecteur@protecteurducitoyen.qc.ca](mailto:protecteur@protecteurducitoyen.qc.ca)

### Service quality and complaints commissioner

Telephone : 1 877 666-8766, ext. 3604

E-mail : [plaintes.cisssgaspesie@ssss.gouv.qc.ca](mailto:plaintes.cisssgaspesie@ssss.gouv.qc.ca)

### Users' committee - CISSS de la Gaspésie

Telephone : 418 759-3443

(or toll free at 1 888 666-3443), ext. 2348

### Centre d'assistance et d'accompagnement aux plaintes Gaspésie-Îles-de-la-Madeleine (CAAP-GÎM)/Complaint Assistance and Support Centre Gaspe Peninsula/Magdalen Islands)

Telephone : 1 877 SOS-CAAP (1 877 767-2227)

### Access to file

**User file**

418 759-3443, ext. 2193

Toll free : 1 888 666-3443, ext. 2193

**Medical record**

418 689-2261, ext. 2242

## DEFINITIONS

### Code of ethics

Under the Act, “Every institution must adopt a code of ethics which shall set out the rights of the users and the practices and conduct expected, with respect to the users, from the employees, the trainees, including medical residents, and the professionals practising in a centre operated by the institution (Art. 233).”

Lastly : “The institution must give a copy of the code of ethics to every user who is an in-patient or who makes a request therefor.”

### Person working at the CISSS de la Gaspésie

A “person working at the CISSS de la Gaspésie” is defined as : a doctor, a dentist, a midwife, a member of personnel, a medical resident, a trainee, a learner, a volunteer and any normal person providing direct services to a person on behalf of the establishment.

### User

Any person receiving care or services from the establishment on an inpatient or outpatient basis or from a resource connected to the establishment. This term includes, if applicable, any representative of the user under Article 12 of the Act\*, as well as visitors. When required by the care and service delivery process, the family and loved ones are also considered, including significant persons around the user.

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\* Right to be accompanied, assisted and represented.

## MESSAGE FROM THE CEO AND THE PRESIDENT OF THE USERS' COMMITTEE AT THE CISSS DE LA GASPÉSIE (CUCI)

We are pleased to present this booklet with information on users' rights.

At the Centre intégré de santé et de services sociaux (CISSS) de la Gaspésie, the user's well-being is our prime concern. In real terms, this means that we must make his needs our priority and ensure that everything is being done to arrive at the best possible decision. Our goal is to provide safe, accessible, high quality services to all Gaspésians, wherever they may live in the region. It is an exciting challenge that we will face with the help of users' committees and residents' committees from all over the Gaspé Peninsula.

We are in the midst of a major transformation designed to implement best practices in health and social services and to harmonize them for the benefit of our users.

In this reorganization of services, users' committees and residents' committees have been preserved. These committees exist all over the Gaspé Peninsula, in each of the local services networks. The board of directors frequently calls on them to inform the discussion, and the committees remain available for both the board of directors and for the people of the Gaspé Peninsula.

The users' committees and residents' committees are the guardians of the users' rights. It is their responsibility to see that the users are treated with respect for their dignity and recognition of their rights and freedoms. They are one of the important spokespersons for the users with the authorities of the institution. Their actions are based on respect for users' rights, the quality of their living conditions and their degree of satisfaction with the services provided. They must take particular care with vulnerable client groups and work to improve living conditions for residents.

## RULES FOR THE USE OF SPECIFIC PERSONAL INFORMATION CONTAINED IN THE USER'S FILE

Notwithstanding the rights mentioned above, the CISSS de la Gaspésie, as permitted under the Act, may, under certain conditions and for specific purposes, make use of the personal information contained in the user's file.

### Terms and conditions of use

#### *Context and nature of the personal information collected*

In accordance with the Act, the establishment may make use of certain personal information on the user in order to solicit donations on behalf of the CISSS de la Gaspésie or its foundations, or for a survey measuring user satisfaction.

#### *Use and protection of personal information*

Only duly authorized workers/practitioners of the CISSS de la Gaspésie may use the information on file, and only for the purposes specifically described in the legislation.

#### *User's right to refuse*

When he registers or when admitted, and without fear of reprisal, the user may refuse to give the CISSS de la Gaspésie permission to use his personal information for the purpose of soliciting donations or for surveys. He may also contact the person responsible for access to the information to ensure that the establishment ceases using his personal information for the purpose of soliciting donations or for surveys.

### *Who can help me file a complaint?*

The following organizations or individuals can assist the user in filing a complaint :

- a person chosen by the user (family member, friend, a trusted person)
- Service quality and complaints commissioner
- Le centre d'assistance et d'accompagnement aux plaintes Gaspésie-Îles-de-la-Madeleine (CAAP-GIM) at :  
⇒ 1 877 SOS-CAAP(1 877 767-2227)  
(free, confidential service )
- Les comités des usagers du Centre intégré de santé et de services sociaux de la Gaspésie au :  
⇒ 418 759-3443, ext. 2348, or toll free at :  
1 888 666-3443, ext. 2348.

### *What is the normal length of time for processing a complaint?*

It usually takes 45 days for the Service quality and complaints commissioner to study the complaint submitted by the user and notify the user of his conclusions.

During this period, the commissioner may communicate with the user to get his version of the facts. He may meet with members of management or practitioners mentioned in the complaint. He may also consult the file in relation to the complaint. Persons who have access to the file must respect the confidentiality of the information.

The Act specifically forbids any form of reprisal against individuals who file complaints.

If the user is not satisfied with the conclusions drawn by the local Service quality and complaints commissioner, he may request that his complaint be re-examined by the ombudsman.

The user's voice is a valuable resource. His knowledge provides a significant contribution to ongoing improvement of the quality of health care and services and to the identification of the best care and services required. With that in mind, and in order to continue consulting our clients, we are using the patient-partner approach to ensure that our practices remain focused on the needs of our users. With this approach, we recognize the user as a full member of our organization.

We hope you enjoy reading our document and, above all, thank you for your contribution to the richness of our health and social services network in the Gaspé Peninsula.



Chantal Duguay,  
President and CEO

June 11, 2018



Camille Leduc,  
President

June 11, 2018

## ETHICAL COMMITMENT

At the CISSS de la Gaspésie, we believe that when an establishment adopts ethical behaviour that promotes sound practices, everyone benefits. Honesty and integrity contribute to a positive working environment that builds trust among all parties involved.

Moreover, an establishment that acts with integrity generates trust among its practitioners, its users, its suppliers and all its partners in the community.

## OUR MISSION

Maintain, improve and restore Quebeckers' health and well-being by providing access to a continuum of high-quality, integrated health and social services, contributing in this way to the social and economic fabric of Québec.

## OUR VISION

Efficient, accessible health care services adapted to the needs of Quebeckers. Our system of health and social services must strive to ensure :

- **The accessibility of health care and services**, which means providing the care and services required where and as needed and, at the same time, ensuring equity of access to health services based on the needs of the individual without regard to personal characteristics such as income, education, place of residence, etc.
- **The quality of care and services provided**, which means that these must be both safe and efficient (that is, they must improve health and well-being). It must also be possible to adapt them to the expectations, values and rights of users (responsiveness) and to provide them in a coordinated and integrated manner (continuity).
- **The optimisation of resources**, which means one must be able to use available resources efficiently, in such a way as to ensure their viability (sustainability).

## COMPLAINT PROCEDURE

Any user or his legal representative may present a complaint related to the CISSS de la Gaspésie. A complaint may be presented verbally or in writing.

The Service quality and complaints commissioner is the person mandated to take complaints in any health care facility. The user may present his complaint as a letter or use the form provided.

### *Where to find the complaint form*

- At the reception desk in any of our facilities
- By going directly to the office of the Service quality and complaints commissioner located at :
  - ⇒ 205, boulevard de York Ouest, 3<sup>rd</sup> floor in Gaspé
- On the website (print out the form), at this address :
  - ⇒ [www.ciass-gaspesie.gouv.qc.ca](http://www.ciass-gaspesie.gouv.qc.ca)

### *How to submit the complaint or the complaint form*

- By telephone :
  - ⇒ 1 877 666-8766, ext. 3604
- By mail :
  - ⇒ Service quality and complaints commissioner CISSS de la Gaspésie  
205, boulevard de York Ouest, 3<sup>rd</sup> floor  
Gaspé (Québec)G4X 2V7
- By e-mail :
  - ⇒ [plaintes.ciassgaspesie@ssss.gouv.qc.ca](mailto:plaintes.ciassgaspesie@ssss.gouv.qc.ca)

### *Note :*

*If you submit a written complaint, remember to include your contact information (address, telephone, birth date) so that we can communicate with you as necessary.*



## OUR VALUES

### **Foresight**

Foresight means paying careful attention to our clients, to their loved ones, to other people, to things, situations and decisions by anticipating future events and their impact on the clients. It means being open and sensitive in order to be proactive. When uncertainty prevails, foresight helps us to anticipate, to take necessary precautions and to plan for what is preferable and best so that the user's experience is as positive as possible.

### **Caring**

Caring means being constantly vigilant to ensure the user's well-being. To be caring means to anticipate the best for the user in an indulgent, understanding frame of mind so that the process involving care and services can be as comfortable as possible. This vigilance also involves caring about the professional well-being of colleagues. It is supported by the efficiency of the team and its consistency with the values of the organization.

### **Collaboration**

Collaboration means working together and reflecting with the clients and one's colleagues to attain a common goal as a part of a greater whole. Its goal is efficient communication that makes it easier to work together. In the context of continuous quality improvement, it encourages introspection aimed at behaviours focusing on the best possible performance.

### **Competence**

Competence is a professional qualification that includes expertise (knowledge), skills (practices) and usable soft skills (relational behaviours). Attitude is acquired through the actions required while learning a high-quality professional activity, the expected soft skills, mobilization and relational behaviour.

## CONTEXT

### To whom does this code apply?

It applies to any person dealing directly or indirectly with our clients :

- doctor
- dentist
- midwife
- staff member
- medical resident
- trainee
- volunteer, in particular members of users' committees and residents' committees
- any other natural person who provides direct services to a person on behalf of the CISSS de la Gaspésie

Each person must therefore embrace the core values defined in the code and conduct himself appropriately in a spirit of free cooperation and respect for the community to which he belongs.

*Clearly, this code of ethics cannot replace professional obligations or laws or any regulations in force.*

## WHAT IS EXPECTED OF THE USER, THE FAMILY AND FRIENDS

In order to maintain harmonious relations in the establishment, you are invited to collaborate :

- by treating practitioners/workers and other users with respect;
- by participating actively in your care and services;
- by supplying all the information required to give you adequate care;
- by complying with the general regulations of the establishment, particularly in matters of infection prevention, safety and compliance with visiting hours.

- **Right to refuse care**

Any person who has reached the age of majority and is capable of consent may, at any time, refuse a treatment that is necessary to maintain life or withdraw his consent to such care/treatment. No person may be denied end-of-life care for previously having refused to receive a particular care/treatment or having withdrawn consent to a particular care/treatment. (Act 2, art.6)

- **Right to respect with regard to one's advance medical directives**

Any person capable of consenting to care may establish advance directives regarding decisions to be taken for care in the case where he should become incapable of consenting to care. However, that person may not use such directives to request medical aid in dying. Any person may establish such advance directives with a notarial act en minute or before witnesses, using the form prescribed by the minister.

- **Right of caregiving staff**

A doctor has the right to refuse medical aid in dying because of his personal convictions and a health professional may refuse to participate in aid to dying for the same reason.

Such a doctor or professional is nevertheless obliged to ensure continuity of care for the person, in accordance with his code of ethics and the wishes of the person. (Act 2, art.50)

## USERS' RIGHTS AND EXPECTED PRACTICES

### Right to be informed

This is the right to be informed of services and resources available in one's community, in both health and social services. This is the right to know how these services and resources can be accessed. The right to be informed includes the following : physical and mental conditions, diagnoses, prognoses, possible treatments with the associated risks and consequences, as well as incidents occurring while services are dispensed and their consequences.

### Right to services

This is the right to receive appropriate health and social services, on scientific, human and social levels, in a continuous, personalized, safe manner.

### Right to choose a professional or an establishment

This is the right to choose the professional who will provide services and choose the establishment where one will receive services, within the limits imposed.

### Right to receive the care required by one's condition

This is the user's right to receive appropriate care when required because his life or integrity are at risk (this means in an emergency situation) and to be informed, as the case may be, of possible treatment options and their attendant risks.

Therefore, in any case where the staff of the establishment can take action to safeguard the life of a user, they are authorized to do so. This is in fact one of the exceptional measures which may be taken without the immediate consent of the user. A person arriving in a hospital emergency ward and who is incapable of providing free and informed consent will nevertheless get the care that will safeguard his life. However, the doctor must get the person's consent as soon as he is able to give it.

### **Right to consent to or refuse care**

This is the right to consent to appropriate care or to refuse it once one has been informed of one's health status. This means that no one may be subjected to treatments/care such as tests, tissue sampling, treatments or interventions of any kind without his consent.

### **Right to participate in decisions**

This is the right to participate in any decision affecting one's physical or mental health and well-being. This includes the right to participate in the establishment of one's intervention plan (care) or individual services or modification of same.

### **Right to be accompanied, assisted and represented**

This is the user's right to be accompanied and/or assisted by a person of his choice when he wishes to obtain information or undertake any action having to do with the services provided by an establishment or a professional.

### **Right to accommodation**

This is the user's right to stay in the establishment until such time as his health improves enough for him to return or to be reintegrated into his home, or until a place in another establishment or family-type intermediary resource becomes available where he can receive the services required by his condition.

### **Right to be served in the English language**

Under the law, establishments must develop a program of access to services in the English language for English-speaking people in their region. Depending on the established procedures of the program of access, some services are offered in English.

This right allows the user to choose the language that will be used for providing him with information. However, this right is limited by the organization and the material, financial and human resources available in the establishment.

### **Right of access to one's user file**

This is the right of the user to access his own file, subject to certain conditions. This right includes the ability to seek the assistance of a qualified professional who can help the user understand the information. There are several particularities involved in accessing one's file.

### **Right to the confidentiality of one's user file**

This is the user's right to demand that the information in his file not be divulged to anyone without his consent. Except in exceptional cases, all such information must remain confidential. This means that the user's file is confidential and no-one can access it without the consent of the user or the person authorized to give consent in his name.

### **Right to lodge a complaint**

This is the right of the user to lodge a complaint if he is not satisfied with the services provided or the services he should have received or the services he is currently receiving or has requested from the establishment. This mechanism is provided by law to improve the quality of service. In lodging a complaint, the user has the right to be accompanied or assisted. This right shows the user that there is a control framework and that care is taken to ensure that the system functions well and the professionals are qualified.

### **Right to receive end-of-life services**

All doctors and practitioners are obligated to ensure that the death of any person at the end of life occurs with dignity and respect for individual rights.

- **Right to end-of-life care**

Any person at the end of life has a right to receive end-of-life care in accordance with his needs. (Act 2, art.4) The Act defines "end-of-life care" as palliative care provided at the end of life and medical aid in dying. (Act 2, art.3)