

ORGANIZATION PLAN

MAY 2018



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RÉGIE RÉGIONALE DE LA NUNAVIK REGIONAL
SANTÉ ET DES SERVICES BOARD OF HEALTH
SOCIAUX DU NUNAVIK AND SOCIAL SERVICES

NUNAVIK
REGIONAL BOARD
OF HEALTH
AND SOCIAL SERVICES

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MESSAGE FROM THE EXECUTIVE DIRECTOR

Recent mobilization efforts on the Nunavik territory, including Parnasimautik, have highlighted the importance of leadership and coordinated action in matters of health and social services. The regional board is recognized as the principal body to assume leadership in this area and deal with the challenges we face. First, we need to heighten efforts at health promotion aimed at the development of healthy lifestyles and safe behaviour, increase the services available in the region, train and appreciate our workforce, and make use of all the available resources to respond to our population's needs in terms of health and well-being.

As we prepare for a new phase of our strategic planning, I believe it important to review the regional board's organization plan to clarify our role and responsibilities and clearly define each department's broad functions. Our new organization plan reflects our will to work as a team and to work closely with our partners and the Nunavik population.

In the present plan, all members of our organization and all our partners will find guidelines to update our mission, and this in accordance with the values that guide us. I wish to take this opportunity to thank everyone who contributed to drafting this plan.

Minnie Grey
Directrice générale

INTRODUCTION

The Nunavik Regional Board of Health and Social Services (NRBHSS) is truly unique. It differs from the other agencies that make up the Québec health network.

The NRBHSS' distinct status is based on several foundations. The first is the legal framework under which it was created and by which it continues to exercise its responsibilities today. The James Bay and Northern Québec Agreement (JBNQA), signed on November 11, 1975, and specifically section 15 of that document, established an administrative structure to deliver health services and social services throughout Nunavik, i.e., over nearly a third of the territory of Québec.

The JBNQA created the Kativik Regional Council of Health and Social Services. Although the title of the organization has since changed, Québec laws still apply to the organization. In other words, the legislative provisions of the JBNQA prevail over provincial legislation, including the Act respecting health services and social services.

The unique status of the NRBHSS carries with it a number of particular powers and specific obligations. The JBNQA also establishes special obligations for the Québec government. By way of an example, "[...] Québec should recognize and allow to the maximum extent possible for the unique difficulties of operating facilities and servi-

ces in the North: [...] in providing employment and advancement opportunities for Native people in the fields of health and social services, and in providing special educational programs to overcome barriers to such employment and advancement [...]". (JBNQA, 15.0.21)

The JBNQA is unlike other documents. It is not a simple agreement with the governments of Québec or Canada. It is a treaty, arrived at through negotiations with Inuit concerning their territorial claims. No Québec law may amend the treaty. The JBNQA holds a foremost position in the Canadian legal hierarchy, on equal footing with the Constitution Act, 1982.

This autonomy and freedom guaranteed under the JBNQA and not enjoyed by any other organization in the Québec health network should afford the NRBHSS in the coming years opportunities to enhance its responses to the needs of Nunavik residents through major changes and with the best legislative tools available. For this purpose, we are developing health and social services legislation for Nunavik. Once adopted by the Québec National Assembly, this legislation will reflect our realities, our values and our principles.

1. NUNAVIK'S SITUATION

In the context of Parnasimautik—an unprecedented initiative—the territory's population, in its declaration of 2015, clearly expressed its determination to promote and protect its culture, language and lifestyle while improving the socioeconomic conditions of families and communities. Thus, several civil-society entities assumed an increasingly coordinated leadership, and the Nunavik Regional Board of Health and Social Services (NRBHSS) is among those leaders on the territory. Principles of cooperation and partnership therefore apply between those entities and the regional board. The latter occupies the place of leader in its field: health and social services. Responsibility toward the population thus assumes a particular nature and becomes an omnipresent issue in all strategies for promoting health and planning the service supply on the territory of Nunavik.

During the Parnasimautik consultation, issues specific to the Inuit and their territory concerning health and well-being were highlighted:

- tangible improvement of Inuit health and well-being;
- capacity to deal with challenges relative to social determining factors, given their impacts on Inuit health and well-being;
- adaptation of organization methods and practices to Inuit identity, values and traditions;
- integration of front-line services and use of new technologies enabling access to specialized services;
- families and traditional helpers as part of the solution;
- self-sufficiency in terms of an increasing Inuit workforce to ensure health and social services.

These elements must be taken into account in establishing the regional board's organization plan such that the components of the organization share the efforts required in responding or contributing to the response to these issues. The regional board also wants to promote equitable access to health and social services for the population, in close collaboration with the health centres.

2. THE REGIONAL BOARD'S MISSION

The regional board's mission is to contribute to the development, improvement and maintenance of the Nunavik population's health and well-being and to ensure access to health and well-being services adapted to the population's needs and particularities.

That mission is assumed in close cooperation with the health centres, the community organizations and partners in the economic, social, cultural, education and municipal sectors.

The regional board is the main contact with the ministère de la Santé et des Services sociaux (MSSS) and is responsible for communications with the two health centres.

In fulfilling its mission fully, the regional board must:

- develop in-depth knowledge and understanding of the needs of the population and local communities in matters of health and well-being;
- design a strategic plan taking the needs into account and in accordance with Inuit values and practices;
- ensure respect and defence of user rights;
- set up measures aimed at protecting public health and promoting health;
- ensure access to services for the population, and this in each community;
- ensure coordination of services provided outside the region;
- manage the program for insured/non-insured health benefits (INIHB);
- assume the responsibilities assigned by the Act respecting pre-hospital emergency services;
- allocate the available budgets to the health centres and community organizations for fulfilling their mandates;
- ensure follow-up to the strategic plan and assess its results in terms of access, integration, quality, efficiency and effectiveness;
- assume responsibilities for capital assets, equipment and technologies;
- support the health centres in organizing services, carrying out actions and applying measures in public health;
- promote the development of Inuit manpower;
- perform rendering of accounts as stipulated by regulations and agreements binding the regional board;
- inform the population of its territory of the actions carried out and the results obtained in matters of health and well-being.

The regional board also wants to promote equitable access to health and social services for the population.

3. VALUES AND VISION GUIDING THE REGIONAL BOARD

The regional board is guided by five important values in assuming its mission, carrying out its actions and maintaining its relations with its partners and the various sectors.

These values are as follows:

RESPECT, which translates into:

- recognition and protection of Inuit values and practices;
- consideration for individuals and groups in terms of courtesy, a willingness to listen and discretion;
- maintenance of a healthy work atmosphere;
- evaluation of user satisfaction with and appreciation of services;

QUALITY, which supports:

- quality promotion and development in a process of ongoing improvement;
- assessing, fostering, developing and maintaining the quality of our actions;
- development of human resources with supports focussing on Inuit workforce;
- continuous application of best practices;

COOPERATION, which entails:

- promoting and ensuring teamwork with and between the departments;
- cultivating partnership and mutual contribution with the two health centres and the Nunavik health and social services network;
- close cooperation with local and regional organizations to promote and develop cross-sector actions in terms of health promotion and service provision;

INTEGRITY, which is expressed through:

- ongoing support for sound management;
- rendering of accounts relative to use of budgets and available resources;
- respect for contractual and management rules in effect in the various activity sectors;
- an approach of transparency within the board, within the community and with partners;

EQUITY, which promotes:

- access to services and decent living conditions for all;
- adaptation of organization methods and service provision to the realities of the various settings;
- access to services as close as possible to the local communities and in accordance with standards of quality and safety;
- promotion of a level of care and services comparable to other settings and regions based on the Nunavik context.

4. THE REGIONAL BOARD'S ENVIRONMENT IN THE HEALTH AND SOCIAL SERVICES SYSTEM

Specifically tasked with planning and organizing services as well as promoting and protecting health on its territory, the regional board is a stakeholder of the Québec health and social services system under the JBNQA. For the Nunavik territory, that system is subject to three levels of responsibility: the MSSS, the regional board and the health centres.

The regional board works closely with the MSSS and the entities under the latter's jurisdiction, notably the Institut national de santé publique [Québec public-health institute], the Régie de l'assurance maladie du Québec [Québec health-insurance board], the Institut national d'excellence en santé et services sociaux [Provincial institute for excellence in health and social services] and others.

The regional board also maintains relations with the federal authorities involved in the health and social services sector and is responsible for applying programs accessible for the population.

The regional board, as integral component of the Nunavik health and social services network comprising the health centres, the local and regional community organizations involved in health and social services, and the McGill integrated university health network (RUIS), supports and coordinates activities and intervention strategies on the territory.

The MSSS assumes the following responsibilities:

- determine guidelines in matters of health and social services;
- adopt the policies and plan of action for application;
- coordinate the entire health and social services system;
- submit proposed legislation to the government for adoption;
- determine the guidelines and standards relative to service organization as well as to management of human, physical and financial resources and see to their application;
- assume provincial functions in public health, i.e., monitoring of the state of health, promotion of health and well-being, prevention of disease, psychosocial problems and trauma, and protection of the population's health;
- ensure interregional coordination of services;
- equitably distribute the financial, human and physical resources and ensure control of their use;
- for the entire network, evaluate the results obtained relative to the defined objectives, from a perspective of improving the system's performance;
- ensure respect for user rights.

The Inuulitsivik and Tulattavik Health Centres assume the following responsibilities:

- ensure the provision of health and social services in each community of their respective territories, and this for all authorized service programs;
- ensure, in agreement with the regional board, management and rendering of accounts for services on a regional basis;
- apply, on their respective territories, the approved measures in the strategic regional planning;
- refer users to the required specialized services in response to their needs;
- apply the public-health measures defined in the regional plan;
- develop and apply the local plan in public health;
- ensure respect for user rights;
- ensure optimal use of resources from a perspective of access, quality, effectiveness and efficiency;
- report to the regional board on the results obtained in the management of health and social services programs;
- inform the population of the available services and the conditions for access.

5. THE REGIONAL BOARD'S ORGANIZATIONAL STRUCTURE

Under the authority of the board of directors, the regional board structured its internal organization by department in accordance with the three following elements: 1) organization by clientele and service program to facilitate concerted effort within the health and social services system, 2) regional particularities requiring recognition of Inuit values and practices and 3) particular challenges related to the issues of workforce availability and development of the administrative resources.

Annex 1. Organizational chart of the Regional Board

6. BOARD OF DIRECTORS

The board of directors constitutes the regional board's highest authority and assumes broad functions of guidance. Those functions notably consist of:

- ensuring knowledge of the population's state of health and well-being and its cultural, social and linguistic particularities;
- identifying priorities relative to the population's needs and the services to offer;
- proposing the strategic regional planning to the MSSS for adoption;
- equitably distributing human, physical and financial resources within the region;
- appointing the executive director;
- appointing the organization's senior officers as well as the service-quality and complaints commissioner;
- approving management and accountability agreements;
- approving financial statements;
- ensuring rendering of accounts concerning results obtained;
- ensuring the implementation of the regional public health action plan;
- making decisions on various recommendations by the advisory committee;
- approving the organization of services;
- approving by-laws and policies.

6.1 COMPOSITION OF THE BOARD OF DIRECTORS

The board of directors is composed of 20 members elected or designated to sit on the board, as follows:

- one representative of each northern village;
- the executive director of each health centre and another person appointed by the board of directors of each health centre;
- one representative designated by the board of directors of the Kativik Regional Government;
- the regional board's executive director.

6.2 COMMITTEES OF THE BOARD OF DIRECTORS

The board of directors set up five committees to support it in the fulfilment of its mandates and to ensure the ability to make rapid decisions in case of emergency or in situations necessitating rapid response. The board also established two advisory committees: the Regional Advisory Committee on Youth Services (RACYs) and the Regional Committee of Out-of-Region Services (RCORS).

The executive committee is responsible for:

- assuming the tasks delegated by the board of directors and making required decisions;
- making routine decisions relative to management of the board of directors' affairs between sessions;
- proposing expectations of the executive director to the board of directors;
- evaluating the executive director's performance and reporting thereon to the board of directors.

The committee on governance and ethics is responsible for:

- drafting the regional board's code of ethics and rules concerning conflicts of interest and submitting them to the board of directors;
- applying the complaint-review procedure as defined in the code of ethics;
- proposing measures required for the board of directors' proper functioning;
- proposing orientation and training programs for the members of the board of directors.

The committee on vigilance and quality is responsible for:

- receiving the reports of the regional service-quality and complaints commissioner;
- ensuring follow-up to the commissioner's recommendations with the board of directors;
- receiving, reviewing and establishing context for accreditation and quality-control reports;
- advising the board of directors on measures to take to support the quality of services destined for the population.

The audit committee is responsible for:

- recommending the budget for adoption to the board of directors;
- ensuring setup of internal fiscal controls;
- recommending the choice of the external auditor;
- recommending the adoption of financial statements;
- ensuring appropriate use of human, physical and financial resources.

6.3 REGIONAL SERVICE-QUALITY AND COMPLAINTS COMMISSIONER

The regional service-quality and complaints commissioner falls under the direct authority of the board of directors and works closely with the committee on vigilance and quality. She¹ is responsible for:

- proposing the complaint-review procedure to the board of directors;
- applying the complaint-review procedure adopted by the board of directors;
- informing users and the population of their rights in matters of health and social services;
- assisting any person who requires help in formulating a complaint;
- ensuring proper functioning of the complaint-review procedure in the region;
- submitting to the board of directors the annual report on processing of complaints at the regional board and the health centres.

7. EXECUTIVE MANAGEMENT

The Department of Executive Management assumes the administration of all the regional board's activities. It provides the board of directors with pertinent information, proposes measures and actions to carry out, and executes the board of directors' decisions. It maintains close contacts with governmental partners, local organizations and representatives of each community.

The department documents and represents the health and social services needs of the Nunavik population, in terms of both promotion of health and well-being and access to services. The regional board's senior officers assist the department in its role and acts under its authority.

The department assumes the following functions:

- manage the regional board's activities efficiently;
- draft the strategic regional plan, submit it to the board of directors and ensure its follow-up;
- propose to the board of directors the budgets to be allocated to the health centres;
- submit the regional board's budget to the board of directors for approval and ensure follow-up after adoption;
- draft management guidelines, policies and frameworks, submit them to the board of directors for approval and ensure follow-up;
- maintain close ties with the MSSS and other ministries working with the regional board;
- maintain ongoing relations with the health centres and local and regional organizations;
- chair the internal director's meetings;
- prepare the annual report;
- represent the regional board in dealings with partners, in accordance with the guidelines determined by the board of directors, and serve as spokesperson;
- ensure the existence of emergency measures and responses on the territory;
- ensure proper functioning of processes for rendering of accounts.

Annex 2. Organizational chart of the Department of the Executive Management

7.1 ASSISTANT TO THE EXECUTIVE DIRECTOR

Under the authority of the executive director and in accordance with the established guidelines, the assistant to the executive director assumes the assigned tasks and carries out the required follow-up. At the request of Executive Management, he attends meetings with the partners and reports on the results.

The assistant assumes the following functions:

- manage the regional board's communications department and the resources assigned to it;
- manage and ensure availability of interpretation and translation services;
- manage the regional board's Quality, Evaluation, Performance and Ethics portfolio;
- assist the executive director in the preparation of portfolios for presentation to the board of directors;
- direct the organization's strategic projects under the authority of the executive director ;
- design and submit aids to be used for following up activities delegated to him by executive director;
- at the request of the executive director, attend meetings of working or governance-level committees of the regional board, the MSSS and other partners;
- work jointly with the executive director at preparing meetings of the regional board's management committee (IDM);
- support and facilitate others directors in the performance of their duties;
- assume any other tasks assigned by the executive director.

7.2 DEPARTMENT OF INUIT VALUES AND PRACTICES

The Department of Inuit Values and Practices assumes three roles: 1) promote and ensure the application of Inuit values and practices, 2) advise the regional board's other departments and 3) act as liaison with the institutions and the community. It enables the regional board to ensure constant vigilance concerning respect for and application of Inuit values and practices.

The department assumes the following functions:

- ensure support for the community organizations;
- plan and contribute to the organization of midwifery services on the territory;
- coordinate the activities under the residential-schools program;
- ensure intervention by the community workers when required;
- coordinate activities under the Brighter Futures program;
- recommend for the executive director the funding to be allocated to the local organizations under its jurisdiction;
- propose approaches and strategies enabling the contribution of Inuit as traditional helpers;
- support the regional board's departments in integrating Inuit values and practices into their actions;
- cooperate in the design of approaches to development of the Inuit workforce;
- assist the executive director in promoting Inuit values and practices;
- ensure the application of the Nunavik action plan on the implementation of the program to prevent elder abuse;
- participate in the portfolio of traditional adoption;
- contribute to activities for rendering of accounts in its activity sectors.

Annex 3. Organizational chart of the Department of Inuit Values and Practices

8. DEPARTMENT OF PUBLIC HEALTH

In accordance with the Act respecting health services and social services (sections 373 and 90) and the Public Health Act (chapter S-2.2), the director of Public Health coordinates the services and the use of resources for the implementation of the regional plan in public health. The director is accountable for the region's public-health service-programs. Those services include services related to surveillance and monitoring of the population's health and its determinants:

- integrated services for perinatal and early childhood (Ilagiilluta);
- prevention services and approaches related to the Healthy Schools program;
- mental-health promotion and suicide prevention;
- chronic diseases-prevention services, including smoking-cessation services;
- drug and alcohol addiction-prevention services;
- prevention services for seniors;
- services related to promotion of healthy lifestyles, including preventive dental services;
- prevention of violence and sexual abuse;
- support services for cross-sector action and the creation of healthy environments, including support for community development and food security;
- integrated services for prevention and screening of sexually transmitted and bloodborne diseases;
- protection services in case of threat to the health of the population (ongoing monitoring, investigations, risk management);
- services for occupational health and safety;
- environmental-health services;
- expertise and support services for front-line activities. ;

The director oversees the development and implementation of local public-health action plans by each health centre. In addition to the regional action plan for public health and according to the Public Health Act, he is also responsible for the mobilization plan in case of health threat. Within the regional board, the director contributes to the development and application of the regional strategic plan as well as rendering of accounts.

Annex 4. Organizational chart of the Department of Public Health

9. DEPARTMENT OF PLANNING AND PROGRAMMING

The Department of Planning and Programming principally works in the area of services destined for the population. For that purpose, it assumes roles of development, organization, coordination and evaluation of health and social services on the territory, and this for all the clientele programs established by the MSSS, including medical affairs.

The department assumes the following functions:

- identify and analyze the population's need for services;
- design the programming and the clinical projects to respond to the population's needs and ensure access to services under all the clientele programs;
- work closely with the health centres and local and regional organizations at implementing the clinical projects;
- ensure follow-up to and evaluation of the clinical projects;
- determine the procedures and processes for access to services destined for the population;
- establish service coordination with the community organizations, family-type resources and intermediate resources;
- plan and coordinate emergency prehospital services;
- establish and submit the medical manpower plan;
- cooperate in the activities of the Regional Department of General Medicine;
- set up tools for quantifying the use of health and social services;
- contribute to gathering data on and documenting the use of services outside the region;
- facilitate and coordinate the mandate of the RACYS;
- ensure the creation and revision of the clinical plan;
- participate in the design of the strategic regional plan;
- cooperate closely in the development of an integrated approach for actions and interventions in health and social services;
- contribute to the regional board's activities for rendering of accounts.

Annex 5. Organizational chart of the Department of Planning and Programming

10. DEPARTMENT OF OUT-OF-REGION SERVICES

The Department of Out-of-Region Services plays a major role in terms of access to services for the population by assuming management of the program for insured/non-insured health benefits (INIHB). Through that program, Nunavik patients are referred to centres offering services unavailable in the region. Further, the program ensures access to non-insured benefits, as stipulated in the JBNQA. For that purpose, it manages the funds granted for the program.

The Department of Out-of-Region Services assumes the following functions:

- design access and operation policies for the INIHB program;
- supervise, manage, render accounts for and monitor the INIHB program;
- participate in the governance and joint working group of the INIHB program;
- apply the regional policy on user transportation;
- ensure proper functioning of Ullivik;
- set up processes for program follow-up;
- support the application of access policies at the health centres;
- facilitate and coordinate the Regional Committee for Out-of-Region Services;
- document the use and costs of programs under its jurisdiction;
- assess the program's operating procedures and control processes;
- supervise rendering of accounts by the health centers;
- jointly with the other departments, propose strategies for patriating services to the Nunavik territory;
- participate in the strategic regional planning;
- represent the NRBHSS on the Regional Committee for Out-of-Region Services;
- advise the executive director on the elements for consideration in the renewal of agreements for services outside the region.

Annex 6. Organizational chart of the Department of Out-of-Region Services

11. DEPARTMENT OF REGIONAL HUMAN-RESOURCES DEVELOPMENT

The Department of Regional Human-Resources Development is responsible for developing strategies and means for attracting, retaining and training personnel as well as preparing succession in the field of human resources. It also aims at enhancing working conditions for the Inuit workforce in the health and social services network and at establishing working conditions favourable to Inuit personnel.

The department assumes the following functions:

- plan the regional workforce in accordance with future needs;
- ensure regional coordination and enhance the human-resources action plan with the health centres;
- participate in the design and application of the strategic regional plan;
- develop and apply strategies for attracting and retaining a workforce to respond to the region's needs;
- promote job and career possibilities in the Nunavik health and social services sector within the region's academic sector;
- plan, coordinate and evaluate training programs for the region's personnel;
- design and apply strategies for the hiring, training and mobilization of an Inuit workforce;
- propose enhanced benefits for locally hired Inuit employees;
- design training programs jointly with the academic sector;
- establish a succession plan to increase the number of Inuit management officers;
- ensure the implementation of the action plan for the application of Draft Bill 21;
- serve as regional respondent with the MSSS for issues concerning human resources;
- contribute to the regional board's activities for rendering of accounts.

Annex 7. Organizational chart of the Department of Regional Human-Resources Development

12. DEPARTMENT OF ADMINISTRATIVE SERVICES

The Department of Administrative Services comprises financial services, the internal human-resources sector, fixed assets and equipment, informatics services, and maintenance and transportation services. It plays a role of support for the regional board's other departments by providing human, financial, physical and technological resources and assumes control thereof. At the regional level, it assumes roles of planning and control of the regional budget envelope, fixed assets and equipment as well as management of information resources.

The department assumes the following functions:

A – INTERNAL HUMAN RESOURCES

- assume management of the regional board's human resources;
- support the management officers in developing their human-resources skills concerning the approach to develop the Inuit workforce;
- set up measures to attract, train and retain personnel for the regional board;
- establish and evaluate internal policies for human-resources management;
- contribute to the development of the human-resources plan;

B – FINANCIAL RESOURCES

- submit the regional budget for approval;
- allocate and oversee the annual budget;
- allocate the annual budget to the NRBHSS' various departments, provide them with regular financial reports and ensure proper control;
- propose the distribution of the region's credit envelope and the assets-maintenance envelopes;
- ensure financial analysis, follow-up and control of the regional credit envelope;
- ensure financial analysis and follow-up of the budgets and funds made available to the regional board;
- cooperate in the external auditing process;

C – FIXED ASSETS

- design plans for fixed assets and assets maintenance, submit them to the executive director and the board of directors for approval, and ensure follow-up;
- develop and coordinate efforts to apply the regional capital master plan;
- manage the construction of infrastructure projects for the Nunavik health and social services sector;
- ensure planning, support and control of regional medical equipment;
- propose the regional plan for equipment acquisition and renewal;

D – INFORMATION TECHNOLOGIES (IT)

- propose regional planning for informatics services;
- coordinate the implementation of informatics projects in the region, in accordance with the ministerial guidelines;
- ensure planning, support, development and control of the regional Québec health record for Nunavik;
- provide internal support for informatics services;

E – ADMINISTRATION

- cooperate in the development of the strategic plan;
- provide the MSSS with the follow-up report required for the sectors under its jurisdiction;
- support and facilitate the activities of the audit committee;
- ensure maintenance of the regional board's buildings and equipment;
- maintain regular communications with the health centres in the sectors under its jurisdiction;
- contribute to the regional board's activities of rendering of accounts;
- manage the support services of the regional board (transportation, cleaning services, reception).

Annex 8. Organizational chart of the Department of Administrative Services

13. PROCESSES FOR COMMUNICATION AND CONCERTED EFFORT

13.1 MANAGEMENT COMMITTEE (INTERNAL DIRECTORS' COMMITTEE (IDM))

The management committee consists of the executive director, the assistant to the executive director and the departmental directors. It contributes to attainment of the following objectives:

- ensure the circulation of information relative to the regional board's activities, the board of directors' decisions, and the information sent by the MSSS and other funding agencies as well as information from the health centres and local organizations;
- discuss and propose regional priorities to be covered by strategic planning, including the annual report;
- establish shared approaches to issues related to the regional board's functioning;
- assess work in the files involving several departments and set up processes for cooperation;
- ensure follow-up of priority files and cooperate in the preparation of portfolios to be submitted to the board of directors;
- develop, review and recommend projects, policies and the annual action plan for approval by the board;
- share the results of actions carried out in the departments.

13.2 REGIONAL EXECUTIVE COMMITTEE

The regional executive committee brings together the chairpersons of the boards of directors of the regional board, the Inuulitsivik Health Centre and the Tulattavik Health Centre as well as the executive directors of these three organizations. The committee constitutes a forum for discussion and strategic cooperation for the functioning and development of health and social services in Nunavik. It pursues the following objectives:

- share information on the evolution of each of the organizations;
- identify and discuss priority issues;
- define perspectives for submission to the board of directors of each organization for a decision;
- design shared strategies for action;
- develop an approach and a culture of cooperation and concerted efforts among the three organizations.

13.3 REGIONAL ADVISORY COMMITTEE ON YOUTH SERVICES (RACYS)

Established in accordance with regulation, the regional advisory committee on youth services ensures the organization, coordination, development and evaluation of regional rehabilitation services and submits recommendations to the authorities to ensure service availability and quality. It consists of 13 members determined under By-Law No. 17 of the regional board.

The committee assumes the following functions:

- organize the availability of youth services;
- coordinate activities under youth services;
- ensure the development of youth services jointly with the health centres and in accordance with the annual regional plan of action;
- jointly with the health centres, ensure the evaluation of regional youth services to maintain service quality and efficiency;
- submit recommendations to the health centres to consolidate and develop regional youth services;
- work jointly with the health centres at defining the mission of regional youth services;
- contribute to the cooperation between the health centres and the regional board;
- contribute to the sharing of information among the partners;
- jointly with the health centres, ensure implantation of the tools and resources necessary to management of regional youth services (youth intervention plan);
- support the health centres in managing complaints concerning youth services;
- draft the minutes of each meeting;
- prepare and approve the annual financial report and the annual activity report at the end of each fiscal year for submission to the regional board's board of directors; the annual activity report must be produced in Inuktitut and English;
- assign a committee member to participate in activities;
- participate in the selection of resource persons as needed;
- plan and adopt the annual activity schedule;
- work jointly with the health centres at setting up a selection committee for the hiring of a regional director of rehabilitation services.

13.4 REGIONAL COMMITTEE FOR OUT-OF-REGION SERVICES (RCORS)

The Regional Committee for Out-of-Region Services is a steering committee for the development of health and social services. Concerned with the regional operation of services, it aims at ensuring the greatest possible harmony between the institutions and developing regional guidelines relative to the deployment and evolution of certain services that require a regional approach. It consists of seven members.

The committee assumes the following functions:

- define the objectives, policies and procedures of out-of-region services;
- provide recommendations concerning the organization of Ullivik;
- improve the services provided for clients and others receiving health and social services and out-of-region services;
- receive activity reports on out-of-region services and provide recommendations;
- examine the financial reports;
- provide recommendations relative to availability of budgets at the beginning of the year as well as corrective measures to take in case of deficit during the fiscal year;
- provide recommendations for the two health centres concerning the application of the policy for user transportation for health reasons;
- provide the NRBHSS board of directors with the necessary information so that it is able to make appropriate decisions concerning the administration of out-of-region services;
- support the institutions in provision of services.

13.5 RISK-MANAGEMENT COMMITTEE

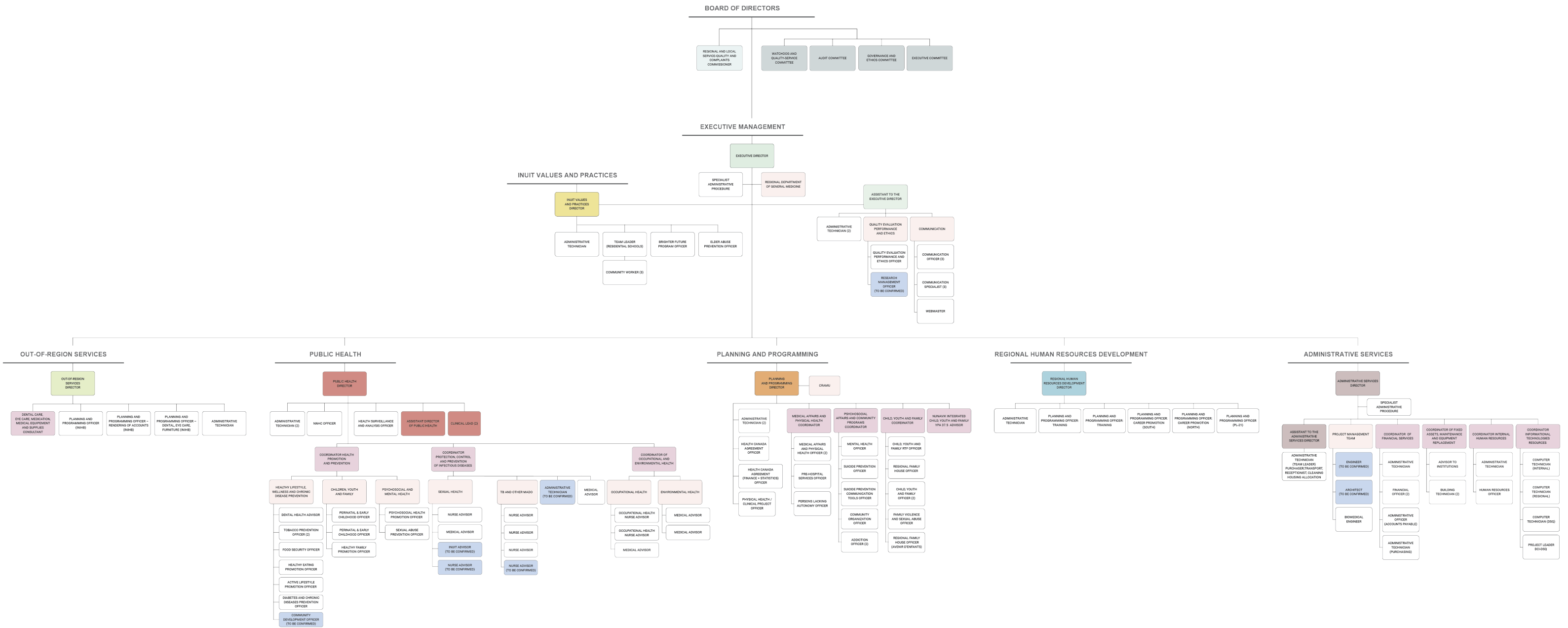
Under the authority of the executive director, the risk-management committee establishes the measures required to mitigate risks in various activity sectors and periodically report to the board of directors. It is composed of five members, including the executive director and a director appointed by the executive director. The other three members are selected by the regional board from among the employees or persons exercising their profession at the regional board or at one of the health centres. As much as possible, these members possess experience and skills in risk management or a related field.

The committee assumes the following functions:

- ensure the institutions set up a monitoring system, including a local register of incidents and accidents;
- ensure that the community resources and organizations subsidized by the regional board offer safe services;
- ensure follow-up to the annual reports on risk management sent to the regional board by the health centres;
- coordinate and support risk-management activities at the regional board;
- see to the preparation of the portion of the regional board's annual management report concerning risk-management activities.

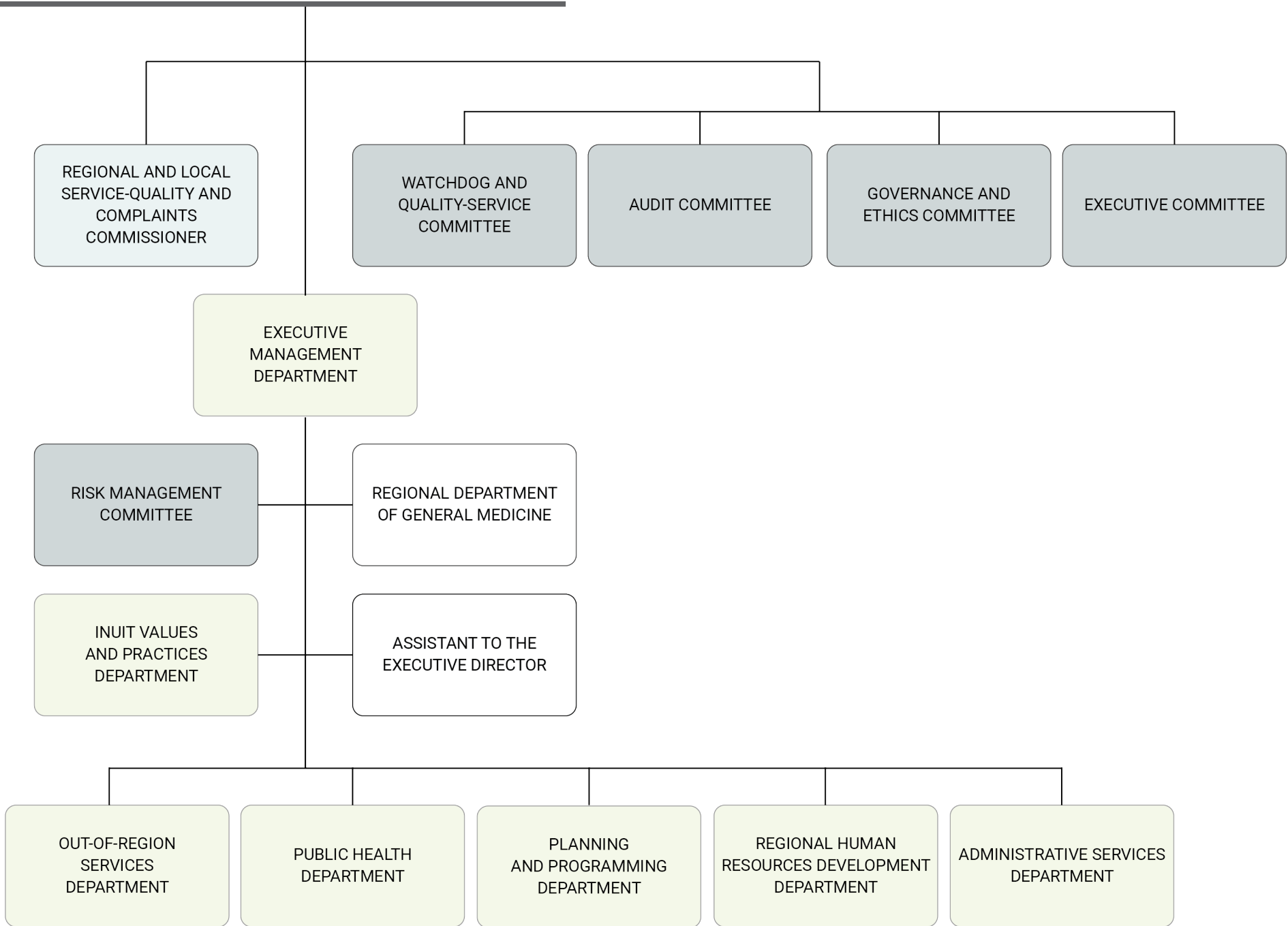


Annex



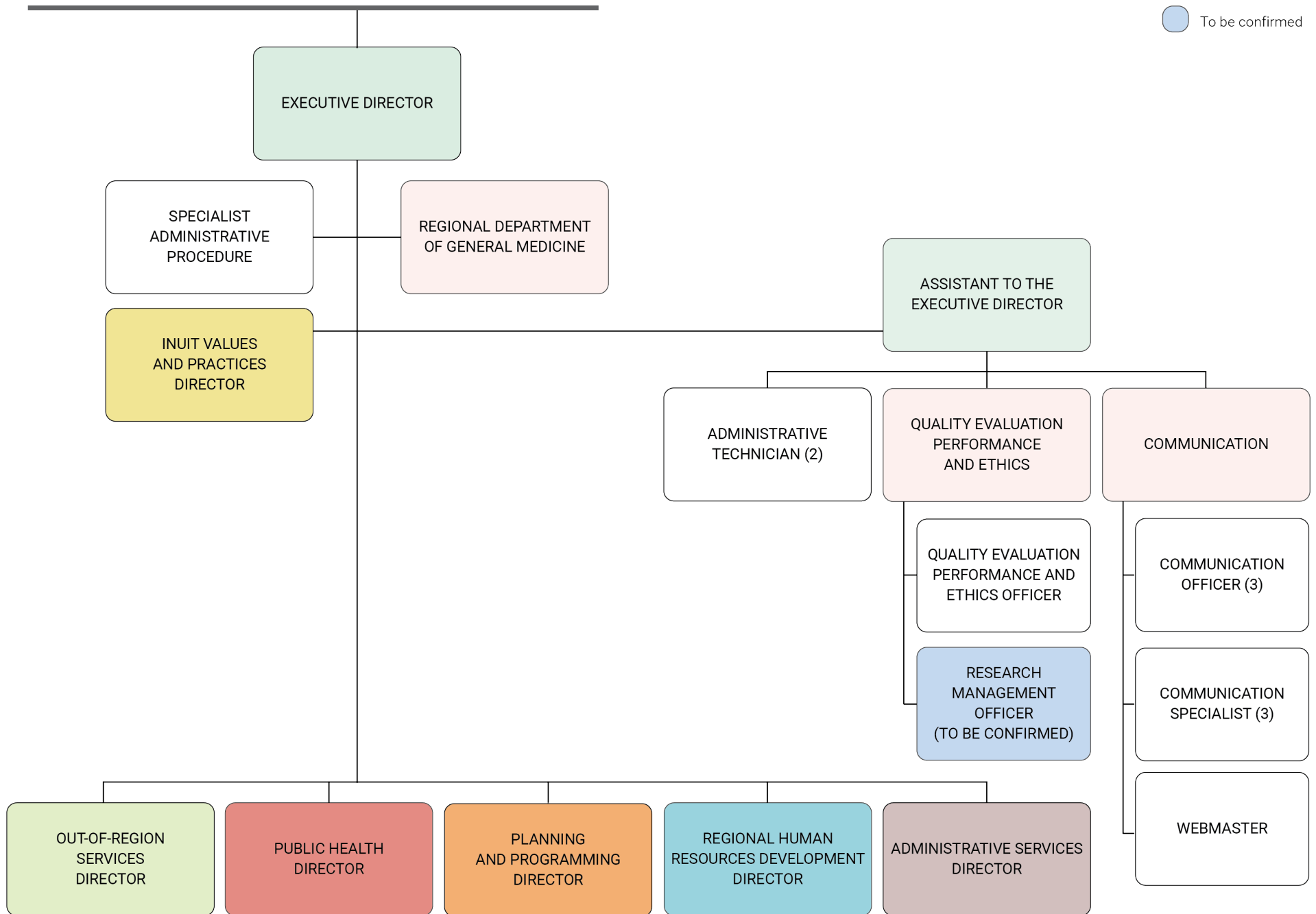
BOARD OF DIRECTORS

Folder
Committee

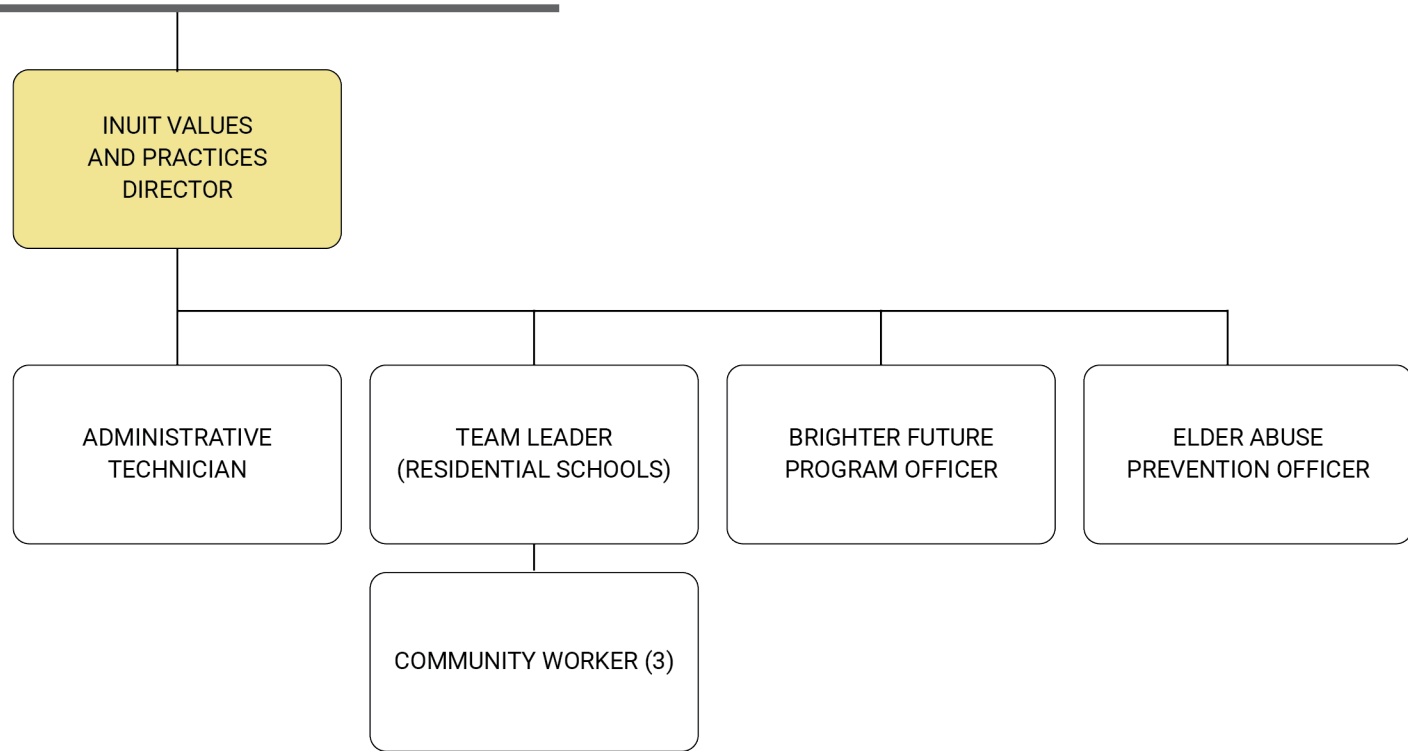


EXECUTIVE MANAGEMENT

- Director/Assistant
- Folder
- To be confirmed

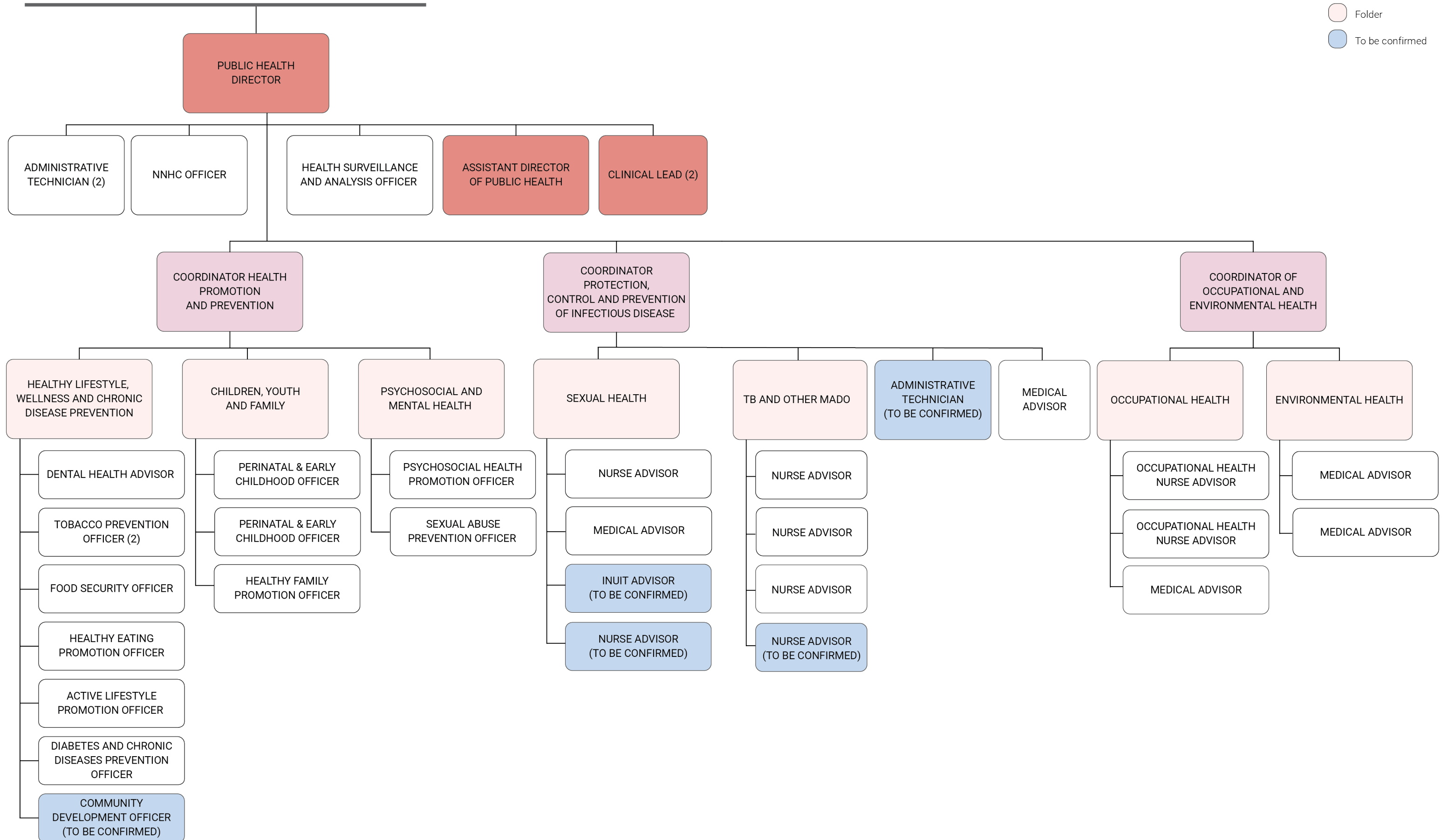


INUIT VALUES AND PRACTICES



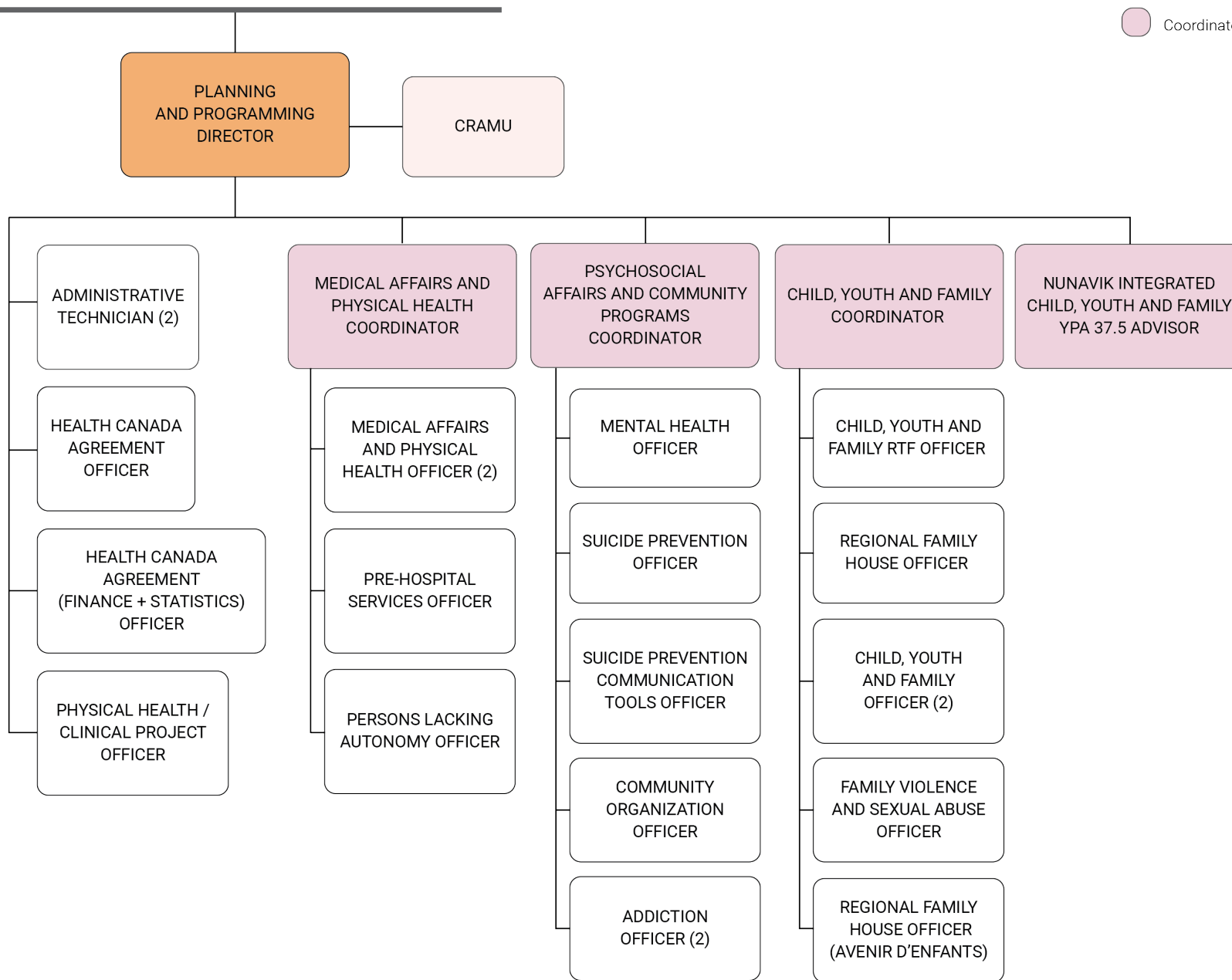
PUBLIC HEALTH

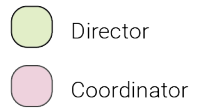
- Director/Assistant
- Coordinator
- Folder
- To be confirmed



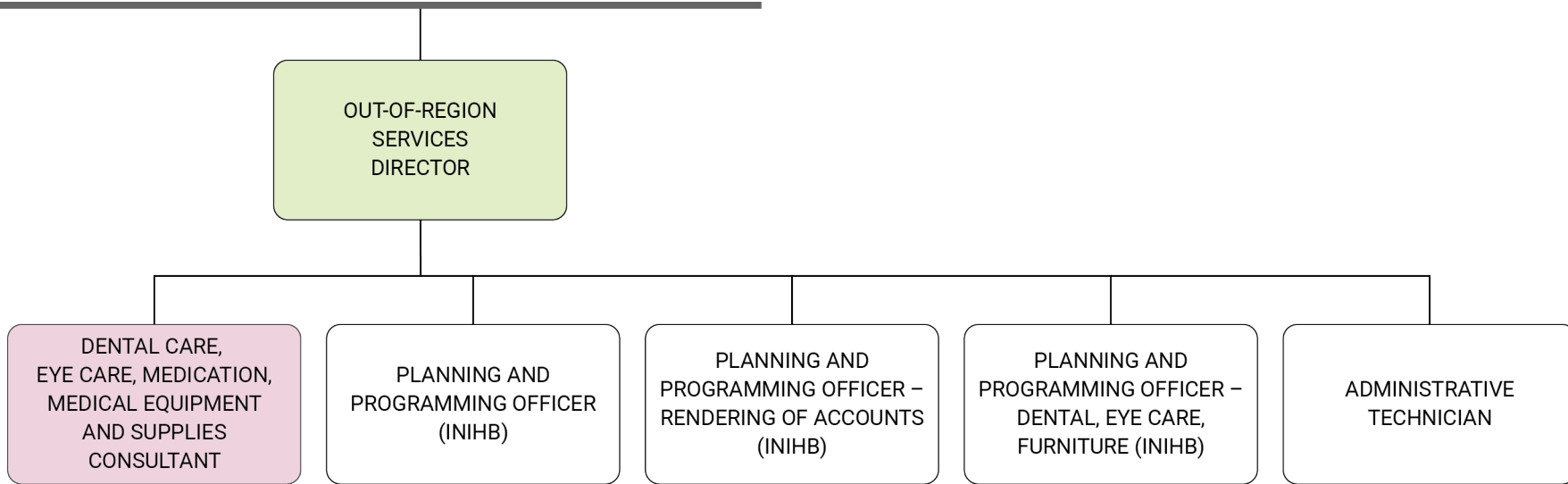
PLANNING AND PROGRAMMING

- Director
- Folder
- Coordinator

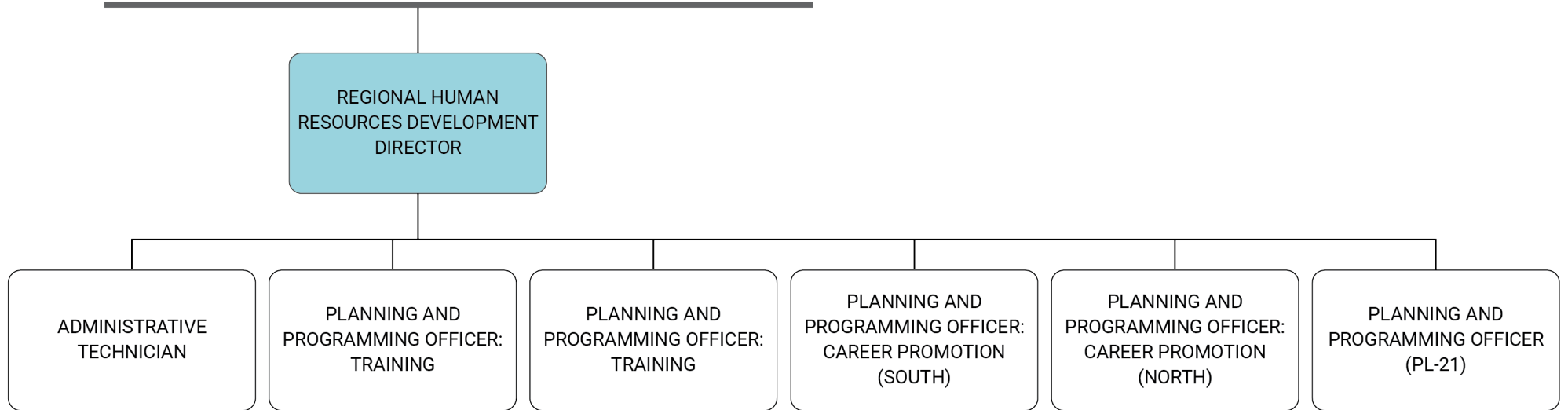




OUT-OF-REGION SERVICES



REGIONAL HUMAN RESOURCES DEVELOPMENT



ADMINISTRATIVE SERVICES

- Director/Assistant
- Coordinator
- Folder
- To be confirmed

