

IF WE'RE **75,000**
TO BE HEARD...



Law on safe ratios



Eliminate violence against women



Work-family-study balance policy



Better access to care and services

EDITOR'S NOTE:

This electoral tool kit is intended for healthcare professionals. It presents two series of fact sheets: one presenting the Québec political parties' main positions on health, women, family and work issues, and the others proposing a summary of the problems linked to these issues as well as questions intended for the parties' candidates.

This kit was developed using information taken from the programs, orientations, convention resolutions and electoral platforms as of May 30, 2018, for the following political parties: Parti Québécois, Québec solidaire, Coalition Avenir Québec, Québec Liberal Party, New Democratic Party of Québec, Green Party and Conservative Party. This information is a translation of the information as written in the parties' documents and likely to evolve with time. Therefore, we invite you to consult the websites of the parties and the FIQ.

The information in this brochure comes from the positions of the FIQ debated and adopted in its democratic decision-making bodies.

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It is with great pride that I am presenting this electoral tool kit that will help you take a position as a healthcare professional, woman or ally during this critical period when you will be casting your vote!

At the FIQ, we know that you are working very hard to give humane, quality care. Your working conditions, too often determined by those with power, distort the profession that you have chosen and clash with the core values that you hold as a caregiver. Compulsory overtime, unthinkable in the vast majority of other professions, becomes your daily lot. Smaller teams, whether in Emergency, CHSLD, medicine, surgery or all the nursing units, becomes the norm instead of the exception. You are told you are poorly organized, but elected officials never review their policies and question their decisions!

Last January, thousands of you saw yourselves in Émilie's heartfelt plea. A cry for help? A search for meaning? Émilie expressed her desire to take back power over the practice of her profession by calling out Minister Gaétan Barrette and talking about the stark reality of the health network!

LIKE ÉMILIE, YOU HAVE A SAY.

Reform after reform, budget after budget, the unacceptable remains. This reality is not inevitable. It exists because decisions were taken, the consequences of which come from political choices. Unfortunately, those that govern too often ignore your professional expertise, experience as citizens and a woman's point of view when it comes to taking decisions. However, a myriad of issues concern you.

Should the doctors' method of remuneration be reviewed? How can the skills and work of the healthcare professionals be recognized? Who are

the most qualified to take the best decisions on the nursing units? Québec elected officials or the healthcare professionals in the field? Should the health institutions' budget or the subsidies for Bombardier be a priority? Should Québec pass a law on healthcare professional-to-patient ratios or manage the network's workforce with the methods used in the automobile industry? Should the front-line be organized around the CLSC or private super clinics? Should women in positions of power be fostered? Is violence against women still acceptable in a modern Québec? Should the State's budget be funded on the middle class or by eliminating tax havens?



The good news is that we live in a democracy. An imperfect democracy, but it should be more representative because a consensus is taking shape between the parties on the need to change the Québec voting system to better reflect the choices of the Québec people, regions and diversity.

IT IS TIME TO QUESTION FUTURE ELECTED OFFICIALS

Gaétan Barrette's reform has not been completely introduced yet, and on October 1, 2018, you will have the opportunity to choose people who will set the priorities for the next four years. They will decide if safe ratios should be introduced everywhere in Québec, the amount of your health institutions' budgets, your salaries and working conditions. These elected officials will negotiate your provincial collective agreement! That is why it is a defining moment for the future of the healthcare professionals and all the people of Québec.

Because we defend the healthcare professionals and patients that they care for, it is important that the FIQ members take an informed position. We work to improve the population's health, and see the impact that poverty and socioeconomic inequalities have on health. We want a government

who will act on these factors. Because we defend members who are a majority of women, we want a government who will work to eliminate the indefensible inequalities between men and women once and for all and who will implement concrete measures that promote family-work-study balance.

IF WE ARE 75,000 VOTING!

This electoral tool kit presents a summary of the main political parties' proposals for the next four years and also several issues that concern you and questions we suggest you ask the candidates.

Don't hesitate to use it at every opportunity. Ask your union to hold assemblies and invite the candidates in your region. Question the candidates who ring your doorbell. One thing is for sure, if we don't manage politics, politics will manage us.

You have all been political in 2018, demonstrating your dissatisfaction in the four corners of Québec. The Minister of Health has to listen to you. This mobilization has to continue. Regardless of your choice, I invite you to get out and vote in great numbers because, together, we can make a difference!



Nancy Bédard, President of the FIQ

A BELEAGUED HEALTH NETWORK



In your everyday practice as a healthcare professional, you see that it is increasingly difficult to practice your profession as you learned it and as you dream of doing. You are right and the data proves it.

CUTBACKS, REFORM, COVERT PRIVATIZATION

Between 2014 and 2017, the government cut a little more than 1.3 billion dollars from the health institutions' budgets. Despite what some say, this wave of cutbacks did not happen without consequences on your ability to do your job well. In short, you are being asked to do more with less. The network also underwent one of the most significant reforms since it has existed by creating the CISSSs and CIUSSSs. These huge institutions are now, for most of you, the place you provide care. It is still too soon to evaluate the impacts of this reform, but we can already state that your daily routine has been completely upended. Like it is for the patients at the heart of this reform.

Health services have been covertly privatized for several years now. The Super Clinics and FMGs, mostly doctors' private clinics, offer front-line services to the detriment of the CLSCs.

Doctors still hold a monopoly on access to care, while other models, like nursing clinics, could use the varied knowledge of the healthcare professionals and offer the population accessible and universal health care.

BETTER ACCESS TO CARE GOES THROUGH THE HEALTHCARE PROFESSIONALS

44% of the adult population of Québec has a chronic disease and about 18.5% of the population is over age 65. The health and social services needs will not stop increasing in the years ahead.

Like all the healthcare professionals, the SNPs in front-line care can undeniably guarantee effective access to care and health services. Moreover, a strong majority of the population believe that the healthcare professionals have the capacity and skills to ensure this access to health services.

A Léger survey (2017) revealed that 84% of the population would like to have access to a nursing clinic for their routine health services.

Provincial collective prescriptions are one way for the healthcare professionals to fully carry out their role in access to care. But, because of strong resistance from doctors, there are only 10 collective prescriptions which give only limited powers to the healthcare professionals.

REMUNERATION OF DOCTORS

The remuneration of doctors represents nearly 20% of the total health budget. A percentage that has been constantly increasing for several years now. As seen in the headlines: justifying these outrageous increases, negotiated behind closed doors and coming from the public coffers, becomes increasingly difficult for the government. Therefore, it is critical, out of respect for the entire population, that the process and work surrounding the negotiations with the doctors be more transparent.

You probably want to ask those who aspire to power, to implement sustainable solutions to improve the state of the health network, in order to preserve its public, free-of-charge, universal and accessible nature, and above all how they intend to use the vast knowledge and skills of the healthcare professionals to improve access to care and services.



QUESTIONS TO ASK THE CANDIDATES

- What concrete measures do you intend to take to improve access to care, particularly for front-line care?
 - Train more doctors?
 - Train more healthcare professionals?
 - Reinvest in the CLSCs?
- How do you intend to support the healthcare professionals who want to play a greater role in the delivery of front-line care?
 - Implement measures that encourage interdisciplinarity?
 - Allow licensed practical nurses and respiratory therapists to fully carry out their role?
- What place in the health network would you give to the private sector and why?
- How do you foresee being able to adequately fund the ever growing health needs and preserve the public and universal nature of the health network?
 - By increasing income taxes?
 - By imposing fees?
 - By cutting services?
- What do you think would be the best method of remuneration of doctors?
 - By a fee-for-service?
 - By a salary like the healthcare professionals?
 - Combined?
- What means would you implement to make the negotiating process between the government and the doctors more transparent?

WITHOUT RATIOS, THE QUALITY AND SAFETY OF CARE ARE THREATENED



In your everyday practice as a healthcare professional, you see that it is increasingly difficult to practice your profession as you learned it and as you dream of doing. You are right and the data proves it.

OVERWHELMING AND QUANTITATIVE FINDINGS

Poor working conditions and lack of staff adversely affect the quality of health services. Several scientific studies show this: staff shortages threaten the safety of care!

The number of incidents and accidents in the delivery of health care has increased by 4% compared to the previous year and is now more than 503,000 a year.

Understaffing of healthcare professionals results in adverse events which have significant costs for the healthcare system, like longer stays for the patients and more invasive treatments. For example, pressure sores, secondary to prolonged bedrest result in an average increase of 7.5 days of hospitalization, with a financial impact of \$1,351 a day; medication errors result in an average increase of 4 days of hospitalization, with a financial impact of \$496 a day (Journal of Advanced Nursing, 2017).

A 2002 study in the American Medical Association revealed that every patient added to the average task of a nurse has a higher mortality risk (+7%) in the 30 days following hospitalization.

A LAW ON HEALTHCARE PROFESSIONAL-TO-PATIENT RATIOS

The hope of ending the healthcare professionals' excessive workload and ensuring the quality and safety of care would be to systematically implement teams adapted to patients' needs by ratios written in a law. This solution already installed elsewhere in the world has proven itself and has several advantages.

In California, in comparing pre and post ratio periods, work accidents were reduced by 31.6% for nurses and 38.2% for licensed practical nurses (2015), thus avoiding significant costs.

Ratios have also increased the daily presence of healthcare professionals at the bedside of their patients from 30 to 60 minutes, reduced the

mortality rate after surgery by more than 10 % and avoided the “revolving door” phenomenon of readmissions in the 30 days following discharge (2013). Ratios have also had a positive impact on the workforce by reducing the number of vacant positions by 69%, increasing applications for nursing programs and the number of graduates by 45% (2005-2006).

This data is corroborated by surveys conducted by the FIQ in 2018, ratios would ensure stability of the work teams which would no longer be submitted to the whims of the health network administrators and budget reforms. Thus, ratios would be a convincing argument for encouraging the healthcare professionals not to quit the profession in 86.4% of cases. In addition, ratios are backed by 80% of the Québec population. Because they reduce adverse effects, better ratios of healthcare professionals do not generate additional costs (Martsolf G.R. et al, 2014).

The ratios project began last April 19. A total of 17 projects will be deployed in several regions of Québec for a little more than 6 months each. If the government is given the opportunity to demonstrate the validity of this solution proposed by the FIQ, it is crucial that it is not abandoned by a new government. The candidates must take a position on this structural solution for the Québec health and social services system.

You probably want to ask those who aspire to power to implement sustainable solutions so that you can give quality, safe care.



QUESTIONS TO ASK THE CANDIDATES

- If your party is elected, what short and long-term solutions are they proposing to ensure the quality of care and patient safety?
 - Allow the professionals to fully carry out their scope of practice (Bill 90)?
 - Stable and sufficiently staffed work teams?
 - Clinical and administrative support for the professionals?
 - Use of the therapeutic nursing plan (TNP)?
- How will you commit to ensuring the sustainability of the ratios projects which are already set up?
 - Maintain the ongoing projects?
 - Deploy the ratios projects throughout Québec?
- How will the government for which you will be elected collaborate with the partners currently involved in these projects?
 - Unions?
 - Nursing administrations?
 - Administrators?
- Will your party commit to tabling a law on safe healthcare professional-to-patient ratios?

EQUALITY FOR A BETTER SOCIETY



Women must still fight for equal treatment. Have you ever felt outraged upon noticing how much women are still targeted by all kinds of violence? Well, you're not the only one, as there is still so much to do to achieve gender equality.

SHARING POWER

It is more difficult for women to access elected positions or roles of influence than it is for men, in both public and private organizations in every society. Both statistics and accounts from women who would like to take on decision-making roles prove this and one thing is abundantly clear: women still face inequality and systemic discrimination.

In Quebec, the percentage of women elected at the National Assembly has stagnated at 30%, which is well-below the equality zone between 40% and 60%. Even if equality has progressed in ministerial offices, rising from 30% in 2014 to 43% today, far too often women become ministers of smaller-scale departments.

So, what obstacles do women face? Some people think that women are simply not interested in politics. In reality, studies show that they face many challenges when they decide to apply for positions in power. They are asked to prove their competence more than men. Also, in a context where women still take on the majority of family responsibilities, they have to juggle their family's schedules as well as their own job schedule, which is often overloaded and poorly adapted to them.

Why would women want to be part of decision-making or involved in politics? Because gender equality is also determined in places of decision-making and women need to participate in democracy in order to share their vision.

Because if we don't manage politics, politics manage us. We need only look to history: fights for the right to vote, parental leave, pay equity and publicly-funded childcare centres were all led by women and their allies.

VIOLENCE AGAINST WOMEN

Healthcare professionals, like women in general, are targeted by all sorts of violence (physical, sexual, psychological). And in a context with successive reforms, new management methods and austerity, healthcare professionals' conditions of practice create an environment conducive to violence, whether from patients, other professionals or other organizations. Moreover, the

Commission des normes, de l'équité, de la santé et de la sécurité du travail (CNESST) reported a 16% increase in reports of violence in the health sector between 2010 and 2014.

You probably want to ask those who aspire to take on roles of power to implement sustainable solutions so that gender equality becomes a reality and so that we can all live in a society free of violence.

The #MeToo movement also brought sexual violence against women to the forefront, simultaneously breaking the established order and forcing organizations and elected officials to take a stance.



QUESTIONS TO ASK CANDIDATES

- What is your party's stance on equality?
- What concrete measures do you propose to boost women's participation in the democratic process?
 - Do you have any measures to propose to support women?
 - To change parliamentary rules?
 - To support the work-family balance?
- Will you commit to implementing an electoral reform in order to promote women's participation?
- What does your party propose to eliminate harassment and workplace violence, especially violence against women?
- What concrete measures do you propose to increase women's trust in the legal system, one where authorities don't receive many of victims' reports of sexual violence?
- How will you support organizations that help women who have been victims of violence?

BALANCING FAMILY, WORK AND STUDY



As healthcare professionals, you may notice that it is often difficult to balance all of the areas of your life: family, professional and personal. And you're right, it is difficult, and yet there are solutions.

COLLECTIVE RESPONSIBILITY

Healthcare professionals' conditions of practice do not enable them to lead a peaceful life. Healthcare professionals have to deal with irregular scheduling, mandatory overtime, postponed vacations, denied leaves, excessive workloads and pressure from managers, which all disrupt their family and personal lives. Individuals must shoulder all the responsibility, especially women, even when we know that the government and employers play an important role in the matter and that family-work-study balance is a collective responsibility.

CHILDCARE CENTRES

Childcare services are key to living a balanced life. However, they are still poorly adapted to professionals' schedules, undergo rate increases and the different service models do not all offer the same quality of service. Parents are the first to suffer the consequences when childcare services are modified, leading to rate increases and a constant lack of available spots due to service privatization.

QUÉBEC PARENTAL INSURANCE PLAN (QPIP)

Having children would constitute an additional obstacle to living a balanced life if we didn't have the QPIP. If elected officials periodically revise the coverage rate for leave benefits, the length of leaves and the leaves shared between parents become unstable parts of the plan.

This plan is essential to gender equality and allows parents to share responsibilities more equally. However, there is still room for improvement.

MODES OF TRANSPORTATION

Getting family members where they need to go can really disrupt the work-family-study balance and even isolate parents. Indeed, taking a half-hour, hour or even two hours to travel between home, daycare, school and work can have a major impact on family life and contributes to the mental load. In this way, public transportation options, traffic reduction strategies, road construction planning and proximity of services (schools, childcare, etc.) all play a part in creating life balance.

INVISIBLE WORK

Women are often the ones who take care of family members and loved ones, which also plays a part in work-family-study balance.

You probably want to ask those who aspire to take on roles of power to implement sustainable solutions to promote family-work-study balance.

In 2012, 39.8% of Quebec women between the ages of 45 and 64 were caregivers, according to the Council on the Status of Women, 2017. These additional responsibilities have a major impact on caregivers' daily lives; they often experience exhaustion, impoverishment, job loss, etc.



QUESTIONS TO ASK CANDIDATES

- What concrete measures do you propose to broaden access to childcare centres?
 - Schedules adapted to workers' and families' needs?
 - Lower rates?
 - Increased public funding?
 - More spots?
- What does your party propose to enhance the QPIP and how will it impact the sharing of parental responsibilities?
- What solutions do you propose to improve modes of transportation for families?
- How do you plan to ensure that families have access to all essential services within close proximity?
- What do you propose to improve care for people with a loss of autonomy? What measures will you implement to support their loved ones who have to compensate for unavailable services?
- Is your party ready to commit to proposing a law on family-work-study balance?

DIFFICULT WORKING CONDITIONS



In your everyday practice as a healthcare professional, you see that it is increasingly difficult to practice your profession as you learned it and as you dream of doing. You feel that your working conditions are not conducive for delivering quality, humane and safe care. You are right and the data proves it.

DISCLOSURES

Last January, Émilie Ricard's heartfelt plea revealed the magnitude of the distress that many of you feel and made the difficult conditions in which you have had to provide patient care for several years public. This disclosure confirmed all the information in the book "*We've reached our quota: the black book of care safety*", launched by the FIQ a few weeks earlier.

Since 2016, more than 2,700 online disclosure forms have been filled out by the healthcare professionals. Nearly 40% of them were unable to give all the care required by the patients, affecting the quality of care for the patients.

OVERTIME

The amount of overtime hours worked continues to increase. For 2014-2015, 4.5 million hours were worked solely by nurses while, according to a recent survey (Repère 2018), 94% of the population say they are uncomfortable being cared for by a professional who has been working more than 16 hours. Moreover, several of you feel forced to work this overtime under penalty of threats and sanctions.

UNSTABLE TEAMS AND JOB UNCERTAINTY

Not only is overtime increasing, but there is also a significant problem of stability of the care teams.

Among the causes of this disorganization are, absences are not replaced, a high proportion of part-time positions (51% for nurses and 64% for licensed practical nurses), substitution of one job title for another and use of private employment agencies.

The situation of licensed practical nurses is particularly concerning as many of them have only 2-day a week part-time positions.

HEALTHCARE PROFESSIONALS RUNNING OUT OF STEAM

After reading the most recent statistics provided by the MSSS on the nursing workforce, we see a significant increase of professionals on salary insurance for last year.

Sick leaves for psychological problems is literally exploding over the five years: CISSS de l'Estrie + 47%; MUHC + 35%; CISSS de la Montérégie-Est + 31%.

These difficult working conditions cause an increase in healthcare professionals leaving the health network as well as difficulty keeping those who work there on the job. The recent nursing

workforce portrait (MSSS, 2018) validates this statement and demonstrates an increase in resignations and an average retention rate of 62% over three years.

Budget cutbacks, the huge reform of the network's structures, as well as the lack of interest shown by the government in improving the situation over the last few years have resulted in a sharp decline in your working conditions. You probably want to ask those who aspire to power to implement sustainable solutions so that you can give quality, safe care in better conditions.



QUESTIONS TO ASK THE CANDIDATES

- What measures will be implemented to reduce the excessive workload in order that the professionals can provide all the care the patients need?
 - Hire healthcare professionals?
 - Hire more staff?
 - Respect the healthcare professionals' role based on their scope of practice?
- What measures will you implement to ensure stable work teams and the safety and continuity of care for Quebecers?
- Will you implement measures to ensure the attraction and retention of professionals in the health network?
- What measures will you implement to reduce compulsory overtime?
- Will you allow the specialty nurse practitioners (SNP) to practice their profession in the same way as in the rest of Canada?

By allowing them:

 - To make and communicate a diagnosis?
 - To initiate treatment of chronic diseases and do the follow-up in front-line care, without the patient having to first see a doctor?
 - To practice without a limited medical partnership agreement?



Political party founded in 1968. René Lévesque was the first leader. The Parti Québécois (PQ) is a separatist party and it has held two referendum votes on Québec sovereignty, in 1980 and 1995. This party was in power from 1976 to 1985, 1994 to 2003 and 2012 to 2014. The PQ has formed the official opposition since 2014 and its current leader is Mr. Jean-François Lisée. Here are a few of their proposals taken from the party's program and platform on health, women, family and work issues.

HEALTH

- Give more autonomy to the 200,000 health professionals who are not doctors
- Impose a freeze on the doctors' remuneration. With a strong mandate from the electorate, re-open the agreement with the specialists
- Autonomy of the health institutions' boards of directors and a larger role for citizens on the boards of directors
- Increase the funding of home support by at least \$100 million a year for five years
- Train more specialty nurse practitioners (500 SNPs a year)
- Expand the model of clinics without doctors to all of Québec by allowing specialty nurse practitioners (SNP) to practice in an autonomous manner, based on the SABSA Cooperative model
- Allow professionals other than doctors to refer patients to specialists, under certain conditions
- Reopen the position of Health and Welfare Commissioner
- Guarantee proximity access to a specialized nurse in every CLSC until 9 pm, 7 days a week
- Create nursing and pharmacist teams in CHSLDs
- Table a budget to optimize the healthcare system (go back to covering in vitro fertilization, restore public health and youth protection budgets)

WOMEN

- Implement gender parity at the Council of Ministers, boards of directors of governmental and paragonovernmental bodies
- Tackle systemic discrimination of women by applying gender-based analysis in all their programs, policies, ministries and decision-making bodies
- Conduct a provincial consciousness-raising campaign on the concept of "sexual consent", sexual harassment, gender bias and culture of rape
- Abolish the statute of limitation on civil actions after a sexual assault



FAMILY

- Return to a single rate of \$8.05 for the first child in a CPE and services already subsidized, and \$4.00 for the second child. The third and following children will be free
- Free access for families whose income is less than \$34,000
- Grant all future daycare places in the CPEs
- Increase support of natural caregivers
- Foster the development of daycare services adapted to parents with atypical work schedules
- Amend the Québec Parental Insurance Plan so that adoptive parents have the same rights as biological parents

WORK

- Put the right to unionize and collective bargaining in the Québec Charter of Human Rights and Freedoms
- Raise the minimum wage to \$15.00 an hour by October 2022
- Recognize unionization as one of the preferred means for workers to participate in democratic life, social dialogue and provincial mobilization for full employment and a fair and equitable society
- Reduce the workload of nurses and beneficiary attendants
- An emergency fund will be immediately freed up to lower the number of problem cases identified in every health institution as soon as possible, open additional positions with a lighter workload and eliminate compulsory work



Political party founded in 2006 resulting from the merger of the Union des forces progressistes and Option citoyenne. Françoise David and Amir Khadir were the first spokespersons for this party. Québec solidaire (QS) defines itself as environmental, feminist and sovereignist. The Option nationale party merged with QS on December 10, 2017. Three MNAs from this party sit in the National Assembly. The present spokespersons are Ms. Manon Massé and Mr. Gabriel Nadeau-Dubois. Here are a few of their proposals taken from the party's program on health, women, family and work issues.

HEALTH

- Transform the approach to health for a broader vision (holistic approach)
- Review the doctors' method of remuneration in order to go with another form of remuneration
- Review the training of the stakeholders in health (including doctors) so that it is oriented more towards prevention, interdisciplinary work and an understanding of the impact of the environment on human health
- Expand and enhance home support services
- Implement shared or adapted residences and residential housing, whether they are housing co-ops, non-profit agencies or private adapted residences (e.g.: intergenerational homes, homes for the handicapped, homes for people with mental health problems, etc.)
- Return the role of prevention and education to the CLSCs and reinforce their front-line role in conjunction with community organizations
- Encourage the deployment of specialty nurse practitioners (SNP) in front-line care
- Involve other stakeholders in health, besides doctors
- Promote multidisciplinary, interdisciplinarity and family medicine
- Expand the "patient-partner" approach to the entire network

WOMEN

- Take measures to end over medicalization of women
- The Ministry of Health and Social Services should integrate a feminist analysis of health in conjunction with the feminist movement
- Pass a law making it mandatory to have other mechanisms promoting parity in municipalities without parties, in addition to gender parity in municipal political parties' candidates
- Adopt incentive and access measures to equality to break the job ghettos that trap women in less valued positions or with fewer responsibilities and encourage access to non-traditional jobs
- Implement a systematic gender-based analysis (GBA) in planning at all levels, so that policies and programs integrate the specific needs of women



FAMILY

- Ensure family-work balance, particularly by setting up daycares, a mobile daycare network, flexible schedules, sick leaves and parental leaves
- Develop a framework family law
- Develop a policy with a basic principle of a fundamental right to universal child care services, free-of-charge and physically and geographically accessible
- Gradually increase (within the capacity of public finances) the percentage of income replacement for maternity and paternity leaves
- Modernize family law

WORK

- Recognize the right to organize in unions, collective bargaining and strike in the Charter of Human Rights and Freedoms
- Increase human and financial resources in order to adequately meet the population's needs and avoid an excessive workload for the people who work in the health and education networks
- Distribute the workload of the professionals in the health and education networks in a more balanced manner
- Implement welcoming and integration mechanisms in the workplace, particularly through initial training programs for professionals in the health and education networks
- Ensure easy and constant access to internships or professional improvement programs
- Abolish employment agencies in public services



Political party founded in November 2011 by François Legault and Charles Sirois. The members and MNAs of the Action démocratique du Québec (ADQ), former party of Mario Dumont, joined the ranks of the Coalition Avenir Québec (CAQ) barely a month later. The CAQ is a federalist party. Its current leader is Mr. François Legault. The party has been the second opposition since the last election. Here are a few of their proposals taken from the party's major orientations on health, women, family and work issues. The party's program was not available at the time this document was published.

HEALTH

- Promote the opening of family medicine groups (FMG) in the evening and on weekends and improve access to consultations without an appointment
- Set a standard of two baths a week, double the budget for meals and offer more care for CHSLD patients
- Eliminate the useless obstacles for foreign healthcare professionals to make the evaluation of their skills quicker and more flexible and thus facilitate the recognition of their diplomas
- Review the doctors' remuneration and renegotiate a new agreement with the specialists
- Give back the autonomy and latitude necessary for the health institutions, users committees, administrators and boards of directors to assume their responsibilities
- Re-establish the position of Health and Welfare Commissioner
- Make home support services for the elderly and people with reduced mobility a priority instead of putting them in long-term residential centres
- Continue the deployment of 2,000 new specialty nurse practitioners (SNP)
- Encourage plurality in the providers of health care and services, in particular by creating new agreements with private surgery clinics

WOMEN

- Offer families increased support for the second and third child
- Re-establish the assisted reproduction program
- Abolish the civil term of limitation for victims of sexual assault
- No mention of parity in the party's major orientations



FAMILY

- Increase the number of places, better management of waiting lists and more flexible schedules in daycare centres (CPE)
- Review an Act respecting labour standards in order to adapt it to today's family realities
- Remove child support payments from the calculation of welfare and educational assistance
- Amend an Act respecting labour standards to give natural caregivers more flexibility in work schedules and more days off
- Modernize family law

WORK

- More full-time nurse positions
- Abolish compulsory overtime
- Audit the nurse-patient ratios
- Eliminate the orphan clauses to stop discrimination in workplaces



Political party founded almost 150 years ago. It has been in power over many years since it was created. More recently, the Québec Liberal Party (QLP) was in power from 2003 to 2012 and 2014 to today. The QLP is a federalist party. The current leader of this party and also premier of Québec is Mr. Philippe Couillard. Here are a few of their proposals taken from the party's major orientations or from resolutions from the last Convention in November, 2017 on health, women, family and work issues. The party's program was not available at the time this document was published.

HEALTH

- Allow the triage nurse to refer non-urgent cases to clinics
- Review the doctors' role in pregnancy follow-ups in order to use resources (nurses, midwives) more effectively
- Continue implementing super-clinics
- Increase the training places for specialty nurse practitioners (SNP)
- Encourage the CISSSs and CIUSSSs to use the SNPs in Emergency triages so that they can take over non-urgent cases
- Free up long-term patient beds in the hospitals
- Analyze the short, medium and long-term needs, particularly by calculating the efficiency of home care, intermediate resources, family-type resources and natural caregivers by investing where it is the most appropriate taking into account the identified needs
- Make telemedicine one of the main ways to access care in the regions

WOMEN

- Increase the number of businesses owned by women in Québec
- Carry out promotion and networking activities intended for women who are heads of companies
- Continue the implementation of the "Government Strategy for Gender Equality by 2021"
- Implement a package of legal and social measures to combat the scourge of sexual violence by creating a system of prevention, reporting and support
- Plan an accelerated civil action for victims of sexual assaults and for them to have a lawyer for this type of action free-of-charge
- Aim to reach the parity zone (40 to 60%) at all decision-making bodies and for QLP candidates



FAMILY

- Expand opening hours from 6 am to 9 pm every day for subsidized daycare services in order to adjust to the various work hours of parents
- Relax the QPIP rules (Bill 174)
- That work-family-study balance be a provincial priority by improving the current legal framework in order to introduce accommodation measures (telework, alteration of work hours and days)
- Using appropriate measures, make employers aware of and encourage them regarding the benefits linked to work-family-study balance on the company's productiveness
- Modify, where applicable, the definition of "family" so that it includes individuals with ageing parents

WORK

- Amendment of an Act respecting labour standards (Bill 176)
- Pilot projects on the ratios



Founded in 2001, this party does not have any MNAs in the National Assembly. The Green Party of Québec's principles are inspired from the six common values in the Global Greens Charter, that is, ecological wisdom, nonviolence, social justice, sustainability, participatory democracy and respect for diversity. Its current leader is Mr. Alex Tyrrel. Here are a few of their proposals taken from their 2014 election platform on health, women, family and work issues. The party's program was not available at the time this document was published.

HEALTH

- In favour of a universal and free-of-charge public health plan
- Massively invest in prevention
- In favour of a public drug insurance plan
- Include dental care in the basket of services

FAMILY

- All families should have access to subsidized daycare services
- Reduce the workweek to 35 hours

WOMEN

- Implement a provincial strategy on women's rights, including public awareness-raising campaigns for fighting against sexism, the culture of rape and sexualization of young girls
- Encourage initiatives and programs such as *Chapeau les filles!* or even the École Femmes et Démocratie which offers the programme Mairesse, ça m'intéresse!

WORK

- Stands with the labour movement
- Offer better working conditions to civil servants
- Abolish compulsory overtime
- Do not raise the retirement age



New political party on the provincial scene. The New Democratic Party of Québec (NDPQ) held its first convention last May 6. The NDPQ is a federalist party. Its leader is Mr. Raphaël Fortin. Here are a few of their proposals taken from the party's orientations on health, women, family and work issues.

HEALTH

- Maintain a public health system
- Review the doctors' remuneration and prohibit their incorporation
- Public drug insurance plan for all
- Reinforce the services in CLSCs
- Dental care covered by the public system in the medium term
- Public coverage of assisted reproduction
- Support of natural caregivers

FAMILY

- No proposal

WOMEN

- No proposal

WORK

- The NDPQ is proposing that significant changes be made to the Labour Code, particularly for ensuring pay equity, reducing job insecurity, improving retirement and raising the minimum wage to \$15 an hour
- Hire staff in the CHSLDs
- Eliminate compulsory overtime and hire new nurses

Political party founded in 2009. This party does not have any MNAs in the National Assembly. The Québec Conservative Party has been led by Mr. Adrien Pouliot since 2013. Here are a few of their proposals taken from the party's program on health, women, family and work issues.

HEALTH

- Modify the public health institutions' funding by introducing activity-based funding
- Establish a ranking system of hospitals to stimulate competition
- Agrees with the private management and ownership of hospitals
- Modify the remuneration of doctors who work in hospitals
- Allow doctors to work in the public and private sector
- Allow people who have the means to have health insurance that pays for care in the private sector
- Foster interdisciplinarity

WOMEN

- Abolish all positive discrimination policies that affect women in the Québec civil service

FAMILY

- Payment of an allowance of \$100 a week per child by allowing the parents to choose the type of childcare services that they want to eventually allow the daycares to adjust their fees in order to be competitive
- Review financial assistance to natural caregivers
- Abolish the “*des amis des bébés*” initiative so that mothers can choose the type of feeding that they want

WORK

- Abolish the anti-scab legislation
- Amend the Labour Code on the rules for certification
- Restrict the use of union dues



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