

Evolution of Services in Quebec Province

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2nd International Recovery & Citizenship Conference
May 14, 2015
Lawn Club, New Haven, CT, USA

Université 
de Montréal

 Institut universitaire
en santé mentale
de Montréal

 Yale

PIRAP
Programme international
de recherche-action participative
... pour un regard différent

Equity and Justice in Recovery
 IRCC
International Recovery & Citizenship Council
dmhas May 13 - 14, 2015

Plan of presentation

- A. Province of Québec
- B. Services
- C. Evolution

Province of Québec

- Canada is a constitutional monarchy
- Québec is the largest Canadian province
- ± 80% French speaking
- Québec City is the capital
- Montréal is the largest city - metropole

Services in Québec Province

- In accordance with the Canadian Constitution, Education and Health are of provincial jurisdiction
- Education = $\pm 40\%$ of Québec budget
- Health = $\pm 40\%$ of Québec budget
 - Health **AND** Social Services (MHSS)
 - Dr Delorme : dir. of the MHSS Mental Health Directorate

Evolution of Services in Québec Province

- Spring 2014
 - Election of a new government in Québec = zero deficit
- Law 10
 - Quebec government tables major overhaul of the health and social services network

Evolution of Services in Québec Province

- An Act to modify the organization and governance of the health and social services network, in particular by abolishing the regional agencies.
- Reduces the number of administrative levels in the health network, particularly the number of officers and boards of directors.

Evolution of Services in Québec Province

- To amalgamate the province's **18** health and social services agencies and **182** health institutions into just **28** institutions for the stated purpose of optimizing network efficiency: one regional institution for each of the 24 regions of Quebec plus 4 supraregional institutions for the Montreal region.

Evolution of Services in Québec Province

- Integration of physical and mental health under the authority of a single local health authority : the Integrated Health and Social Services Centre of East-End Montreal:
 - Montreal Mental Health University Institute + 3 former Local Health Centres + Youth Centre
 - Pinel Institute remains on its own

East-End Montreal Integrated Health and Social Services Centre - CIUSSS

Organigramme de la haute direction

CIUSSS de l'Est-de-l'Île-de-Montréal

15/04/2015

Original signé par:
Yvan Gendron
Président-directeur général

Modèle A2
PDG tout profil - PDGA profil social - 2 DGA

Conseils professionnels au CA:
• CMDP
• CE
• CM

Conseil d'administration

Autres conseils du CA

PDG

Commissaire aux plaintes et à la qualité

Commissaire adj. aux plaintes et à la qualité

Commissaire adj. aux plaintes et à la qualité

Commissaire adj. aux plaintes et à la qualité

PDG adjoint programmes sociaux et de réadaptation

Services inclus dans la direction

DGA-DSM programme santé physique générale et spécialisée

DGA-DRF finances, soutien, administration et performance

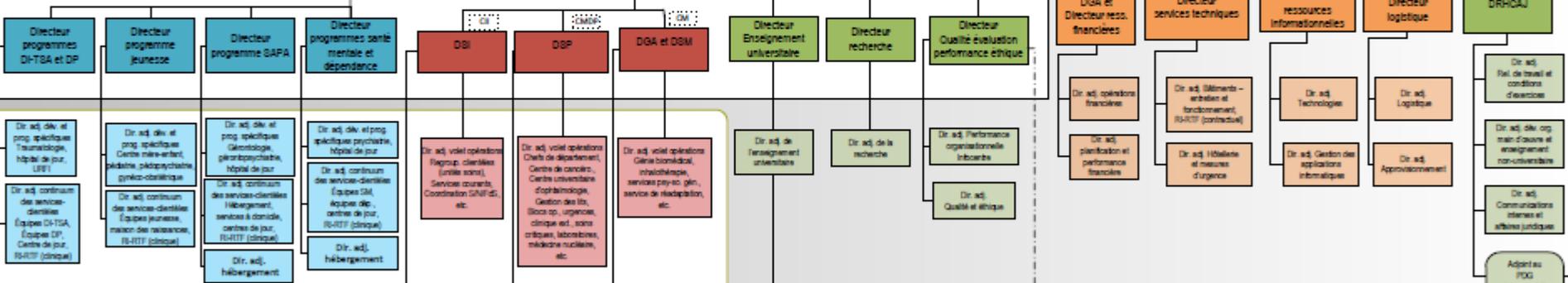
NOTES

Pour chaque site de l'établissement, il est à prévoir qu'un cadre supérieur dont le port d'attache est situé à la même adresse civique sera désigné comme responsable de site. Cette fonction est ajoutée aux responsabilités prévues pour ce cadre.

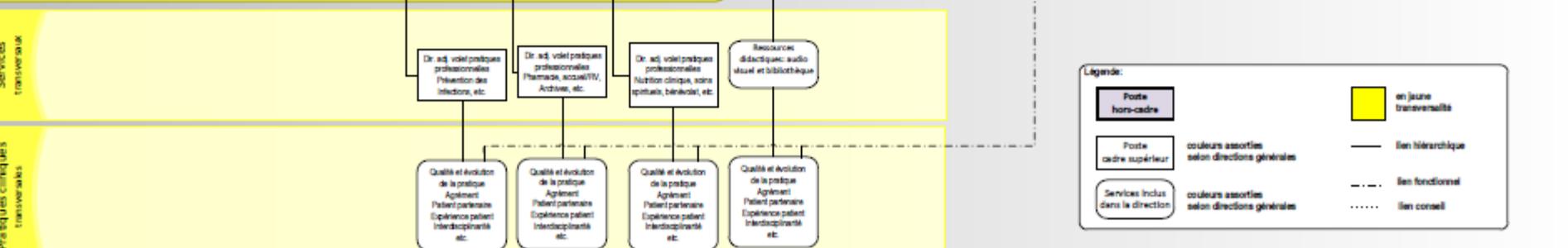
La liste des services inscrits sous les directeurs adjoints est préliminaire et doit être complétée et validée. Le tout sera discuté avec les directeurs à la suite de leurs nominations.

Dossier de participation citoyenne, concertation des acteurs territoriaux, socio-sanitaires et économiques, application des programmes provinciaux et mobilisation des organismes communautaires.

Comité de coordination clinique



Gestion clinico-administrative et médicale



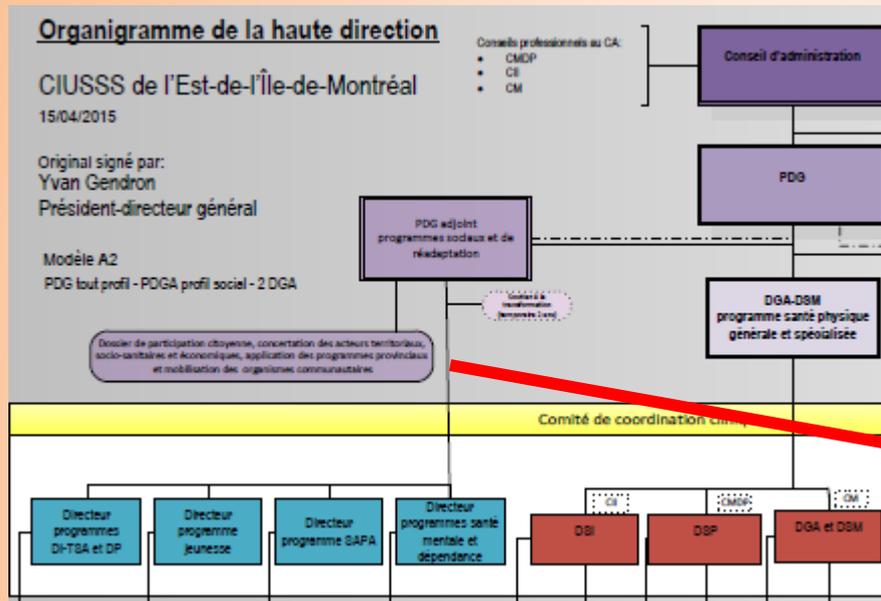
Légende:

- Poste hor-cadre
- Poste cadre supérieur
- Services inclus dans la direction
- en jaune transversale
- couleurs assorties selon directions générales
- couleurs assorties selon directions générales
- lien hiérarchique
- lien fonctionnel
- lien conseil

East-End Montreal Integrated Health and Social Services Centre - CIUSSS

- CEO:
 - Yvan Gendron
- Adjunct CEO:
 - Denise Fortin
 - Former CEO of Montreal Mental Health University Institute
 - Sold to citizenship

East-End Montreal Integrated Health and Social Services Centre - CIUSSS



Dossier de participation citoyenne, concertation des acteurs territoriaux, socio-sanitaires et économiques, application des programmes provinciaux et mobilisation des organismes communautaires

Translation: Civic participation, concertation with field actors, social-sanitary and economic, mobilisation of community organizations.

- See upcoming Panel A *Call to Action: Creating Systemic Change*, at 11:10.

Mental Health Action Plan 2005-2010 – recovery

- In 2005, the Ministère de la santé et des services sociaux du Québec (MHSS) released the Mental Health Action Plan 2005-2010 (MHAP).
- The MHAP was calling for a recovery-oriented transformed system.
- Dr Larry Davidson, from the Yale Program for Recovery & Community Health was invited in Quebec to introduce recovery.

Mental Health Action Plan 2015-2020 – recovery

- In 2014, the MSSS held a National Forum in preparation of the MHAP 2014-2020.
- The first chapter of the consultation document proposed by the MSSS is dedicated to the full exercise of citizenship.

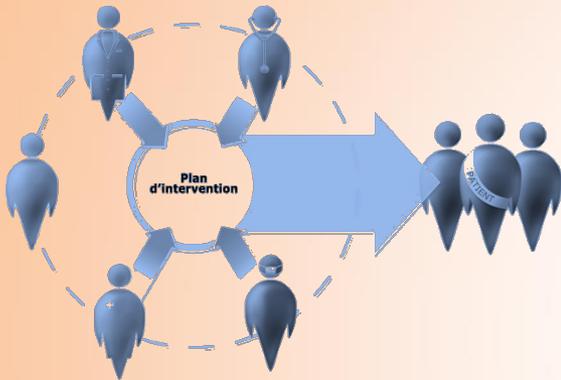
Denise Fortin and patient partners: on citizenship



Meanwhile...: Patient Partnership

- In 2013, the British Medical Journal launched a special issue on **Patient Partnership**.
- The editorial was titled:
 - *Let the Patient Revolution Begin*
- At University of Montreal:
 - Collaboration and Patient Partnership Direction
 - Patient partnership as **THE** trademark of the whole Faculty of Medicine

The "Montreal Model"



PATERNALISM



PERSON CENTERED



PARTENERSHIP CENTERED

Montreal Mental Health University Institute

- Patient Partner Committee
- International Program for Participatory Action Research
- Reprendre Pouvoir:
 - Richard Breton as a research patient partner (peer research assistant) for an innovative project :
- the **Avatar Therapy**

The Avatar Therapy

- The hostile, frightening voices that often take command of people suffering from schizophrenia evoke feelings of **frustration and helplessness**.
- They erode the ability to concentrate, study, work and sustain social **relationships**, and they can lead to tragedy.

The Avatar Therapy

- Standard treatment for hallucinations consists of antipsychotic medication and/or cognitive behavioral therapy.
- Patients are often advised to ignore the voices or use distraction as a coping skill.
- Studies have shown that patients who have a dialogue with their hallucinated voices feel a **greater sense of control**, but it's difficult to talk to an invisible entity, especially one that's persistently abusive.

The Avatar Therapy

- Would it be possible to virtually include the persecutor in the patient partnership?
- Would it be possible for the therapist to have an influence on the patient's self-perception of the omnipotence and the malevolent intentions of his persecutor?
- Can the therapist support the patient in better coping with his verbal hallucinations and to better self-regulate his emotional responses to their persecutors?

The Avatar Therapy

- Virtual Reality (VR), sometimes referred to as immersive multimedia, is a computer-simulated environment that can simulate physical presence in places in the real world or imagined worlds.
- VR can recreate sensory experiences, which include virtual taste, sight, smell, sound, and touch.

Virtual Reality

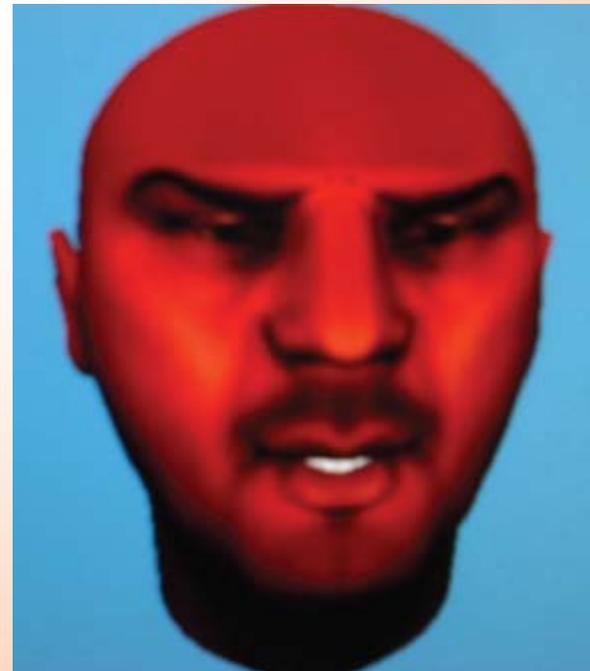


The Avatar Therapy

- Leff J, Williams G, Huckvale MA, Arbuthnot M, Leff AP. Computer-assisted therapy for medication-resistant auditory hallucinations: proof-of-concept study. *Brit J Psychiatry* 2013 Jun; 202: 428-33.
- We are replicating this experiment with a Participatory Strategy for Patient-Oriented Research at the Philippe-Pinel Institute of Montreal.

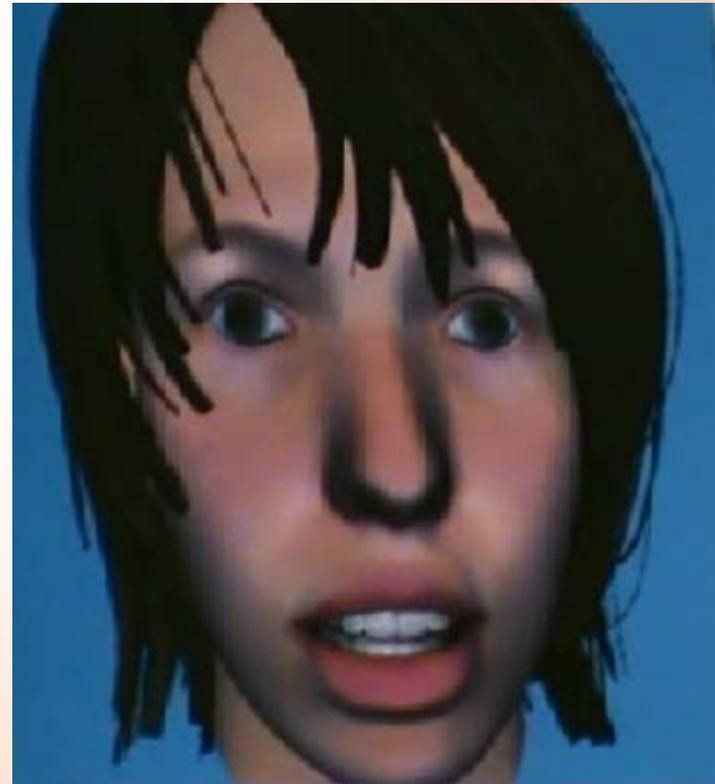
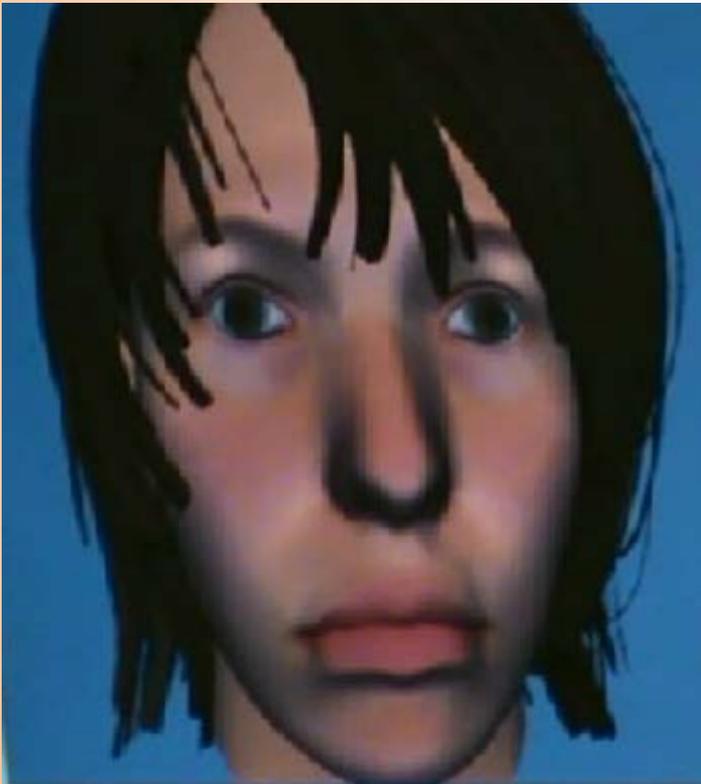
The Avatar Therapy

“Patients interact with the avatar as if it were a real person, but it’s their creation, so they know it can’t harm them” (Dr Leff).



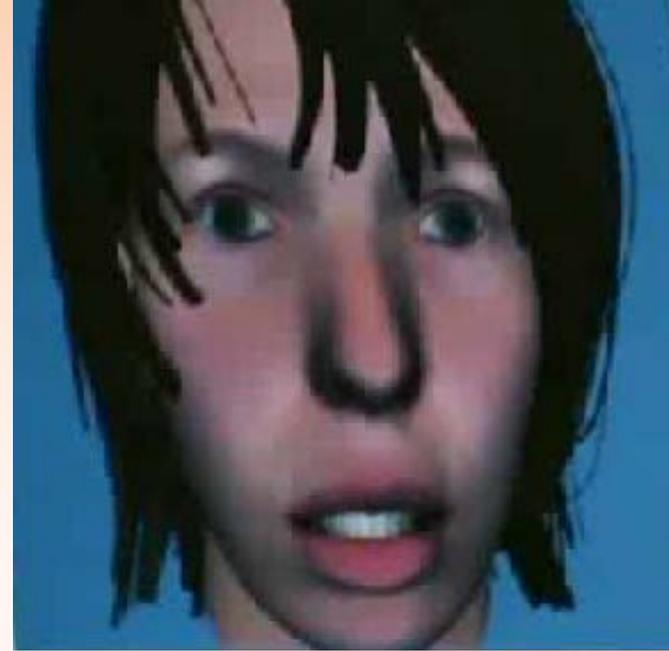
The Avatar Therapy

- Avatars designed by participants



Talking to the persecutor

- Therapist: *Defend yourself. Tell her you don't want to hear this non-sense.*
- Participant: *I don't want to hear this nonsense.*
- Persecutor: *Why do you say it's nonsense?*
- Participant: *Because it's not true.*
- Persecutor: *What do you think about yourself then? (...)*
- Therapist: *Tell her that you can work very well with your mind.*



Role of the peer research assistant (PRA)

- The PRA is involved in team meetings to share his thoughts and reflect on the process.
- To anticipate and prevent possible unnecessary and unpleasant situations.
- Will accompany study participants from one step of the process to the other.
- Like a family member or like a friend, he will be awaiting the participant while in therapy, for him to come back from his immersion in the VR vault.

Role of the peer research assistant (PRA)

- The team will verify that the PRA has access to professional psychiatric and psychological expertise in any case of emotional distress that could be attributable to the experiment.
- In addition to professional expertise, he is supported by his colleagues of the *International Program for Participatory Action Research*.
 - For a future Citizens Project at Pinel Institute.

Plan of presentation

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- C. Evolution = Revolution?
 - Consumers as agent of change
 - ✓ Across all boundaries

