

Mental health : « We live in general uncertainty »

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Hoping that 2017 will be better than 2016, Mr Réjean Simoneau, president of the Coalition of Residential Adult Resources of Quebec (**RESSAQ**), wishes to strengthen the partnership with the authorities of the health and social services network.

This project in closing places by 2020 in the wake of the 2015-2020 Plan of Action tabled by Minister Barrette creates insecurity and general anxiety in these residences that foster a clientele in mental health says Mr. Simoneau. « We live in general uncertainty. This causes a disabling effect », the perspectives seem rather bleak as to the future of these resources, underlines the President of the **RESSAQ**.

The « 15-20 Plan », as he calls it, aims to reduce the number of places and to distribute everything else on the territory of the (NIR) non-institutional resources taking into account only mathematical targets, sums Mr. Simoneau. « My biggest fear, is that by closing down these places, resources will disappear and clients will have to be moved in other places where they will not be at home or feel secure anymore. Some which have been in their foster homes for more than twenty (20) years, this is their home, this is where they feel safe with family members that accept them as their own. The Plan does not respect the clients; these people are not just numbers ! I think that the system is seriously 'not well », states the president of the **RESSAQ**.

There are some non-institutional resources (RNI), that are already closing, force of circumstances, notes Mr. Simoneau, the age average of the resource owners is about 58. He adds that the bureaucracy is becoming more and more burdensome for the owners while the valorization of their services offered is decreasing.

« There is no justification in opening new places when we already have resources that are doing the job. »

-Réjean Simoneau

« Sometimes, we ask ourselves if the government still wants to maintain the (NIR) ? » Residence himself in East-Broughton, he has been president of the **RESSAQ** for a year and a half, Mr. Simoneau takes the trouble to specify that he doesn't want to act out loud and he voluntarily adopts a non-aggressive tone to show his openness to the discussion.



ACTUALITÉS

Santé mentale : «On vit dans l'incertitude générale»

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Nouvelles/ANGELIC

Et cela provoque aussi un désabonnement, les perspectives étant plutôt sombres quant à l'avenir de ces ressources, souligne le président de RESSAQ.

SERVICES. Espérant que 2017 soit meilleure que 2016, Réjean Simoneau, président du Regroupement des ressources résidentielles adultes du Québec (RESSAQ), souhaite que se renforce le « partenariat » avec les autorités du réseau de la santé et des services sociaux.

Ce projet de fermer des places d'ici 2020 dans la foulée du Plan d'action 2015-2020 déposé par le ministre Barrette crée de l'insécurité et de l'inquiétude dans ces résidences abritant une clientèle en santé mentale, soutient M. Simoneau. « On vit dans l'incertitude générale. »

« Il n'y a aucune justification d'ouvrir de nouvelles places alors qu'on dispose déjà de ressources. »

— Réjean Simoneau

Le « Plan 15-20 », comme il l'appelle familièrement, vise à réduire le nombre de places et à répartir tout autrement sur le territoire les ressources non institutionnelles (RNI) en ne tenant compte que de cibles mathématiques, résume M. Simoneau. « Ma crainte, c'est qu'en fermant des places, forcément, des ressources disparaissent et des clients devront être délogés. Certains habitent sous le même toit depuis vingt ans. Le Plan ne respecte pas les clients; ce ne sont pas des numéros! Je pense que le système devient malade », souligne le président du RESSAQ.

Des ressources non institutionnelles (RNI), il s'en ferme déjà, par la force des choses, note M. Simoneau, la moyenne d'âge des propriétaires tournant autour de 58 ans. Il ajoute que la bureaucratie devient de plus en plus lourde pour les propriétaires alors que la valorisation de leurs services decline.

« Parfois, on se demande si le gouvernement veut toujours des RNI? Résident à East-Broughton, président du RESSAQ depuis un an et demi, M. Simoneau prend la peine de spécifier qu'il ne veut pas créer pour rien ce qu'il admette volontiers un bon non agressif pour marquer son ouverture à la discussion.

« Nous sommes la seule association à avoir rencontré le ministre Charlebois » s'il dit encore que les gens des RNI sont des gens de cœur qui, à leur table, servent encore de vraies patates aux gens qu'ils hébergent et auprès de qui ils sont présents 24 heures sur 24.

Réjean Simoneau espère qu'il y aura le moins de fermetures possible et que le ministre recule avec son projet de créer 446 nouvelles places en santé mentale au Québec.

Réjean Simoneau, président du RESSAQ (non photographié)

« Il n'y a aucune justification d'ouvrir de nouvelles places alors qu'on dispose déjà de ressources. Ce dont on a besoin, c'est d'assurer la stabilité de celles qui existent. Le budget qu'il a annoncé pourrait servir à cela. »

Disaffiliated from the union to which it belonged, the **RESSAQ** regroups 1120 resources housing 9000 residents in Québec.

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« We are the only association that has met with the Minister Charlebois. » He says that the people who are NIR are people of heart and that still today they serve at their tables « real potatoes » to the people they take care of whom which are present with them 24/24.

Réjean Simoneau hopes that there will be as few closures as possible and that the Minister changes his mind for the project of creating 446 new places in mental health in Québec.

« There is no justification in opening new places when we already have resources that are doing the job. What is needed is to ensure the stability of those that already exist. The budget that he announced could serve that purpose. » Disaffiliated from the union to which it belonged, the **RESSAQ** regroups 1120 resources housing 9000 residents in Québec.

Application of the trailer clause

Increase in remuneration

As you already know, as of April 1st, 2016, under the renewed collective agreements and national agreement, a 1.5 % indexation has been applied to the retribution scale for support services or assistance, as well as the method of calculating this remuneration. Briefly, here are the modifications that may concern you:

Scale of remuneration applied to the support or assistance :

Common support or assistance services provided in the instrument for the determination and classification of support and assistance services.

DAILY RATE PER USER ACCORDING TO THE LEVEL OF SERVICES	REFERENCE PERIOD	
	BEGINNING 2016-04-01	BEGINNING 2015-03-31
<i>Non represented resources and those represented by the FFARIQ, the FSSS-CSN, the RARA, the RESSAQ and the SCFP-FTQ</i>		
Level of services 1	\$ 35.39	\$ 34.88
Level of services 2	\$ 44.24	\$ 43.60
Level of services 3	\$ 53.09	\$ 52.31
Level of services 4	\$ 61.94	\$ 61.03
Level of services 5	\$ 70.78	\$ 69.74
Level of services 6	\$ 79.63	\$ 78.47
<i>Resources represented by the ADRAQ-CSD and the ADREQ-CSD</i>		
Level of services 1		\$ 34.88
Level of services 2		\$ 43.60
Level of services 3		\$ 52.31
Level of services 4		\$ 61.03
Level of services 5		\$ 69.74
Level of services 6		\$ 78.47

Daily rate for the first 60 days following the arrival of the new user :

DAILY RATE PER USER FOR THE FIRST 60 DAYS	REFERENCE PERIOD	
	BEGINNING 2016-04-01	BEGINNING 2015-03-31
<i>Non represented resources and those represented by the FFARIQ, the FSSS-CSN, the RARA, the RESSAQ and the SCFP-FTQ</i>	\$ 48.59	\$ 47.88
<i>Resources represented by the ADRAQ-CSD and the ADREQ-CSD</i>		\$ 47.88

Reasonable operating expenses:

Daily allowance for reasonable operating expenses incurred in the course of providing the service.

YEAR OF REFERENCE	YEAR OF REFERENCE	
	FROM JANUARY 1 ST , 2017	FROM JANUARY 1 ST , 2016
Daily allowance per user	\$ 26.39	\$ 26.03

Monthly availability premium:

Monthly premium paid to a resource who is available to receive placements without notice.

MONTHLY RATE PER RESOURCE FOR ALL RESERVED PLACES	REFERENCE PERIOD	
	BEGINNING 2016-04-01	BEGINNING 2015-03-31
<i>Non represented resources and those represented by the FFARIQ, the FSSS-CSN, the RARA, the RESSAQ and the SCFP-FTQ</i>		
Monthly available premium	\$ 221.38	\$ 218.11

Daily rate associated with operating costs :

Rate associated with the operating costs, including those related to the building, for a resource operating in its principal place of residence (nine users or less)

DAILY RATE PER RECOGNIZED PLACE	YEAR OF REFERENCE	
	FROM JANUARY 1 ST , 2017	FROM JANUARY 1 ST , 2016
Residence (9 users or less)	\$ 26.39	\$ 26.03

*** We invite you to take notice of Annex 1 of the circular 2016-033 published on www.ressaq.com for any additional information. ***



Do you suffer from an adjustment disorder ?

As human beings, we're constantly adjusting to the changes that happen regularly in our lives, not to mention new and unfamiliar situations that come along all the time.

You may have noticed that some people adjust better than others when faced with the same situation. The ability to adjust varies from one person to the next, depending on several factors such as our sensitivity to stress, past experiences, values, assessment of the situation, and other stressful events that are happening at the same time in our lives.

Stressful living conditions

Our lifestyles have become more hectic than ever, and our busy days don't end once we get home from work, there are emails to answer, appointments to get to, obligations to meet, finances to manage. Time simply flies by.

On top of it, companies have become increasingly competitive and result-driven, and communications are advancing at the speed of light, adding to the frenzied pace of our lives. It's no surprise, then, that work-related stress is one of the leading causes of adjustment disorder.

Sometimes, even seemingly harmless events can be damaging when they begin to pile up, forcing us to constantly reassess and readjust something that can become too much for a person to bear.

An adjustment disorder happens when our strategies for coping with these stressful situations stop working.

Usually, the symptoms set in during the month following a difficult experience, in the form of major disturbances in the ability to function in social situations or at work.

One disorder, many types

An adjustment disorder can present in different ways, depending on the person. There are six different types of adjustment disorder, each

with its own specific symptoms (see table on next page).

Five diagnostic criteria

Adjustment disorder is listed in the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders, better known as the DSM-5. Adjustment disorder is diagnosed when the symptoms in question cannot be attributed to another disorder, such as depression, anxiety, acute stress disorder, or posttraumatic stress disorder. Before concluding on an adjustment disorder, health professionals need to make sure the five diagnostic criteria in the DSM-5 are met. These criteria are:

1. The development of emotional or behavioral symptoms in response to an identifiable stressor(s) occurring within three months of the onset of the stressor(s).
2. These symptoms or behaviours are clinically significant, i.e., they generate either marked distress or significant impairment in social or occupational functioning.
3. The stress-related disturbance does not meet the criteria for another mental disorder.
4. The symptoms do not represent normal bereavement.
5. Once the stressor or its consequences have terminated, the symptoms do not persist for

more than an additional six months.

Treatment and prevention

Treatment for an adjustment disorder does not usually require medication. However, if it is accompanied by a depressed mood, antidepressants could be prescribed temporarily to help the person better manage his or her stress and develop better coping strategies. If the disorder causes a very high level of anxiety, it could actually be an anxiety disorder that needs to be treated with prescription drugs.

A few psychotherapy sessions generally yield good results. The therapist will provide counselling to help the person get back on an even keel and begin functioning normally again. Alongside psychotherapy, alternative methods such as relaxation techniques, meditation, visualization, or controlled breathing can also be helpful. Once the therapy is completed and the symptoms have disappeared, it's a good idea to consider a relapse prevention program.

If you think you might have an adjustment disorder, or if you're feeling overwhelmed by an extremely stressful situation, you would be advised to consult a health professional as important as your physical health.

Get help quickly by calling this toll free number

1-888-687-9197

Or by visiting the following website

VOTRECONSEILLERVIRTUEL.CA