



## ● Presentation on protective regimes

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## What is it?

A legal process when person declared:

**Inapt** - unable to make decisions in one's own best interests.

Only **Doctor or Psychiatrist** can evaluate inaptitude of client\*

\* **medical evaluation** - See forms on site of Public Curator

**In need of protection** – a person who is isolated, in danger of physical, emotional or financial abuse.

Only **Social Worker** or professional with reserved act can evaluate need for protection\*

\***psychosocial evaluation** -see forms on site of Public Curator

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## ► What is Need for Protection

- A designated person to represent:

**person** - medical needs, care, where they will live, supervision and services they need

**and/or**

**property** - business, owned or rented property, bills, expenses, banking. etc.

- Medical professional and social worker attempt to come to consensus regarding level of inaptitude and need of protection for both person and property;
- Must agree whether needs are partial or total -if not, Public Curator decides.

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## ► What type of person can be followed under a protective regime?

A person over 18 in need of protection due to one or combination of :

- altered developmental capacities;
- deficiencies;
- significant mental health issues;
- physical health problems;
- situation that impacts their security and well being.

Majority of cases involve elderly people with loss of autonomy.

Numerous cases involve people with important levels of intellectual handicaps or mental health difficulties.

At any time, the CIUSSS-ODIM has as many as 1000 clients under a protective regime, although, those under **homologation** may no longer be followed by a social worker.

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## ► What type of protective regimes are there?

- **Private Curatorship** - inaptitude and need for protection are total for both person and property - relative or close friend manages these needs in the person's best interests;
- **Private Tutorship** inaptitude and need for protection are partial for either or both person and property (the client retains some decisional capacities) relative or close friend manages needs in client's best interests;  
(report to the public curator, annually rendering of accounts and steps taken for client.)
- **Public curatorship or tutorship** - in addition to above - no significant close friends or relatives in position to fulfill one of above roles, or not in client's best interest to name such person- therefore Public Curator or Public Tutor is designated.
- In all cases regimes become valid only when presented to Court and protection Order granted by Judge.

## ► What type of protective regimes are there?

### Homologation of mandate:

- A legal contract drawn up by client when apt;
  - Expresses wishes for care, living arrangements, how and by whom finances and property to be managed and other expressed wishes.
  - Can designate multiple parties to each carry out or share specific roles of **mandatary** (person who carries out contracted role).
  - A mandate not in effect until client declared inapt and in need of protection for either or both person and property.
- +
- A Court procedure carried out to homologate (officially confirm by Court) that mandate is valid and can be carried out.

(May never come into effect if client remains apt or  
all needs are met throughout their lives)

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## ► What type of protective regimes are there?

- In all cases, client may still retain certain legal rights and maintains right to refuse care, medication, medical procedure or placement in a care facility.

(Separate clinical and Court process required if person's refusal puts their well being or health at grave risk.)

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## ► How is the Curatorship process carried out in the CIUSSS?

- Each clinical Direction establishes modalities of collaboration with their doctors to proceed to evaluation when family does not have a doctor.
- Each clinical Direction prioritises for its social workers in its annual training plan : Évaluation psychosociale en rapport avec les régimes de protection du majeur inapte.
- Family member, someone in the community or professional recognizes client is partially or totally inapt. Person can be inapt, but not need protection if support and services in place to protect needs.
- A request is made, usually to CIUSSS, (but can also be made through a family Doctor and/or private social worker) to complete medical and psychosocial evaluations to propose one of the protective regimes.



## ► How is the Curatorship process carried out in the CIUSSS?

- All requests forwarded to administrative assistant of **Director of professional services**(DPS) at St Mary Hospital.
- Requests are reviewed by **conseiller cadre designated to support Curatorship process** and then forwarded to social worker who ensures both evaluations are completed, verified by the **pivot** and returned to DPS office for review by conseiller cadre and final review and **DPS signature\***
  - \*requests for **Public** Curatorship or contested cases
- **Administrative assistant of DPS** enters all completed requests and **reviews** in a **register** to keep track of protective regimes in our CIUSSS

## ► How is the Curatorship process carried out in the CIUSSS?

- Curatorships reviewed every five years;
- Tutorships reviewed every three years;
- Homologations not reviewed unless mandatary desists from or is reported to not be fulfilling role;
- Administrative assistant forwards documents to requesting parties by courier in cases of homologation or private processes.\*

\*Families usually have legal representatives, therefore original documents sent to them.

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## ► How is the Curatorship process carried out in the CIUSSS?

Documents sent to Public Curator by courier when:

- Recommendations is for **Public** regime
- **Reviews** conclude more comprehensive protective measures are required  
(partial protection now requiring Curatorship or total protection)
- Social workers supported to participate in training in psychosocial assessments and to seek support from managers, pivot, conseiller cadre and CPQ when completing process.

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## ► It's not always simple

- Family members may have varied opinions about aptitude or choice of designated person;
- Client may not accept need for protection;
- Worker required to make conclusions that are non-judgemental and respect code of ethics;
- Complex situation regarding emergency need for placement, protection of person or property;
- Wait lists when no social worker or doctor involved;
- Waiting period for cases to be heard in Court;
- Challenges to assemble family members –distance, commitment, strained relations.
- Evaluations from several hundred social workers from more than forty different points of service

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**Questions?**

**Thank you**

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