Bill 56
(2020, chapter 22)

An Act to recognize and support caregivers and to amend various legislative provisions

Introduced 11 June 2020
Passed in principle 6 October 2020
Passed 28 October 2020
Assented to 28 October 2020
EXPLAINATORY NOTES

The purpose of this Act is to guide the Government in planning and carrying out actions aimed at fostering awareness and recognition of the contribution of caregivers and to support them in their role.

To that end, the Act provides that the Government is to adopt a national policy for caregivers. It sets out the guiding principles of the policy and establishes the key areas its policy directions are to focus on. Under the Act, a government action plan setting out the measures and actions proposed to implement the national policy is to be adopted every five years.

The Act specifies the responsibilities of the various government actors with respect to caregiving. To that end, it designates the Minister as the Government’s adviser on all issues relating to caregivers, and obliges ministers and government bodies to take into account the national policy’s guiding principles and policy directions when developing, implementing and evaluating their programs, services or other measures. The Act provides for the creation, by the Minister, of the Comité de suivi de l’action gouvernementale pour le soutien aux personnes proches aidantes, to support the Minister in the exercise of his or her responsibilities.

The Act establishes the Comité de partenaires concernés par le soutien aux personnes proches aidantes, one of whose functions is to make any recommendation to the Minister that it considers necessary regarding the national policy, the government action plan or any other matter concerning caregivers. The Act also establishes the Observatoire québécois de la proche aidance, whose purpose is to provide reliable and objective information regarding caregiving.

The Act proclaims the first week of November as National Caregivers Week.

Furthermore, the Act respecting health services and social services is amended to give the Minister of Health and Social Services a power to inspect private seniors’ residences and other resources offering lodging to vulnerable clienteles determined by regulation. The Act also creates, in that Act, a reserved name for seniors homes and alternative homes.

Lastly, the Act includes transitional provisions.
LEGISLATION AMENDED BY THIS ACT:

– Act respecting health services and social services (chapter S-4.2).
Bill 56

AN ACT TO RECOGNIZE AND SUPPORT CAREGIVERS AND TO AMEND VARIOUS LEGISLATIVE PROVISIONS

AS it is fundamental to recognize the considerable contribution of caregivers to Québec society and the crucial nature of their engagement;

AS the responsibilities inherent in the role of caregivers may entail significant repercussions for their quality of life during and after their period of caregiving;

AS it is essential for caregivers to recognize themselves and be recognized in the diversity of the realities they experience, of their life paths and of the contexts in which they assume their role;

AS it is appropriate to affirm the desire of the Gouvernement du Québec and of Québec society as a whole to act in a coordinated manner and pursue a common course of action designed to foster awareness and recognition of the contribution of caregivers and to support them in their role;

THE PARLIAMENT OF QUÉBEC ENACTS AS FOLLOWS:

CHAPTER I

OBJECT AND DEFINITION

1. The purpose of this Act is to guide the Government in planning and implementing actions to foster awareness and recognition of the contribution of caregivers and to support them in their role.

To that end, the Act provides in particular that the Government must adopt a national policy for caregivers, as well as an action plan to implement it.

The Act also provides for the establishment of the Comité de partenaires concernés par le soutien aux personnes proches aidantes and the Observatoire québécois de la proche aidance.

2. For the purposes of this Act, “caregiver” means any person who provides support to one or more members of his or her immediate circle who has or have a temporary or permanent physical, psychological, psychosocial or other incapacity, regardless of their age or living environment, and with whom the person shares an emotional bond as a family member or otherwise.
The support is continuous or occasional, and short- or long-term, and is provided on a non-professional basis and in a free, enlightened and revocable manner in order, among other things, to promote the care receiver’s recovery and the preservation and improvement of his or her quality of life at home or in other living environments. It may take various forms, such as transportation, assistance with personal care and housekeeping, emotional support, or coordination of care and services. The support may also entail financial repercussions for caregivers or limit their capacity to take care of their own physical and mental health or fulfil their other social and family responsibilities.

CHAPTER II
NATIONAL POLICY FOR CAREGIVERS

3. After consultation with caregivers, researchers, bodies or groups representing caregivers, as well as with the government departments and bodies concerned, the Government adopts a national policy for caregivers.

4. The national policy’s guiding principles are as follows:

(1) recognize that all caregivers are persons in their own right who must be treated with dignity and care, and whose well-treatment must be promoted;

(2) recognize the considerable contribution of caregivers to Québec society and the importance of supporting them;

(3) promote preservation of the health and well-being of caregivers, including as concerns financial precarization, and help them maintain a balanced life;

(4) consider the diversity of caregiver realities and of caregivers’ relationships with care receivers in the response to their specific needs, at every stage in their caregiving journey, from their self-recognition to their grieving process in relation to both the care receiver and to their role in his or her life;

(5) recognize the experience and knowledge of caregivers and of the care receiver, and consider such experience and knowledge in a partnership-based approach;

(6) respect the wishes and capacities of caregivers as to the nature and scope of their engagement; and

(7) facilitate and consolidate partnerships between government departments and bodies and non-government bodies at the national, regional and local levels, and involve caregivers so as to promote responses adapted to their specific needs.
5. The policy directions set out in the national policy focus on the following key areas:

   (1) recognition and self-recognition of caregivers, as well as mobilization of the Québec society stakeholders concerned by caregiving;

   (2) information sharing, the promotion of resources made available to caregivers and the development of knowledge and skills;

   (3) the development of health and social services intended for caregivers, in a partnership-based approach; and

   (4) the development of accommodating environments that support and promote the preservation and improvement of caregivers’ living conditions, including to prevent their financial precarization.

6. The policy directions related to recognition and self-recognition of caregivers and to mobilization of the stakeholders concerned must, in particular, be aimed at raising awareness within Québec society of the role and undeniable contribution of caregivers, of the diversity of their realities and of the importance of supporting them through coordinated actions relating to various spheres of their life.

7. The policy directions related to information sharing, the promotion of resources and the development of knowledge and skills must, in particular, be aimed at meeting the information and training needs of caregivers and of the various stakeholders concerned, and at supporting research and the transfer of knowledge regarding caregivers.

8. The policy directions related to the development of health and social services must aim to support the health and well-being of caregivers as users, taking into account their knowledge, wishes and engagement capacity and promoting a partnership-based approach.

9. The policy directions related to the development of accommodating environments that support and promote the preservation and improvement of caregivers’ living conditions must, in particular, be aimed at promoting balance between the caregiver role and the other spheres of caregivers’ lives.

CHAPTER III
GOVERNMENT ACTION PLAN

10. Every five years, the Government adopts and makes public a government action plan setting out measures and actions to implement the national policy for caregivers.
The action plan describes the objectives to be attained, the means to be used to attain them and the available resources. It also determines the conditions, terms and schedule for implementing the actions set out in the plan, which involves identifying the stakeholders concerned and their responsibilities.

11. The Comité de suivi de l’action gouvernementale pour le soutien aux personnes proches aidantes, the Comité de partenaires concernés par le soutien aux personnes proches aidantes, the Observatoire québécois de la proche aidance and caregivers are consulted in the development and follow-up stages of the action plan.

Those committees and the observatory must meet at least twice a year to discuss the follow-up to the action plan.

12. As an incentive for collective mobilization, the action plan must provide for the making of agreements between the ministers concerned and the national, regional and local partners, and for mechanisms for coordinating and periodically following up on the actions carried out within the scope of those agreements.

13. The Minister is responsible for the implementation of the action plan and coordinates its application.

The Minister submits an annual report to the Government on the activities carried out within the scope of the action plan for the preceding fiscal year. The Minister may, for that purpose, request from the other ministers concerned specific reports concerning the activities carried out in their fields of jurisdiction.

The Minister makes the report public within 60 days after it is submitted to the Government.

CHAPTER IV
RESPONSIBILITIES OF VARIOUS GOVERNMENT ACTORS

14. The Minister is, by virtue of office, the Government’s adviser on all issues relating to caregivers, in particular in the development of the national policy for caregivers and the related government action plan. In that capacity, the Minister gives other ministers any opinion the Minister considers advisable to ensure implementation of the policy and the action plan, and takes part in the development of measures, policy directions and actions that could have a significant impact on caregivers. The Minister also monitors implementation of the national policy and the action plan.

It is incumbent on government departments and bodies to communicate to the Minister any information necessary for the carrying out of those responsibilities.
15. The Minister establishes a committee to monitor government action for caregiver support, called the “Comité de suivi de l’action gouvernementale pour le soutien aux personnes proches aidantes” (monitoring committee), to support the Minister in the exercise of his or her responsibilities.

The Minister designates the committee members from among the representatives of the departments, government bodies or persons appointed by the Government to hold office that are concerned by caregiver support.

16. Ministers and government bodies must, in keeping with their respective missions and the Government’s budgetary and fiscal policies, take into account the guiding principles of the national policy for caregivers and its policy directions when developing, implementing and evaluating any program or any other service or measure concerning caregivers.

17. If a minister considers that proposals of a legislative or regulatory nature could have direct and significant impacts on caregivers, the minister must report on the impacts he or she anticipates when presenting the proposals to the Government.

CHAPTER V
COMITÉ DE PARTENAIRES CONCERNÉS PAR LE SOUTIEN AUX PERSONNES PROCHES AIDANTES

DIVISION I
ESTABLISHMENT AND ORGANIZATION

18. A committee of partners concerned by caregiver support, called the “Comité de partenaires concernés par le soutien aux personnes proches aidantes” (partners committee), is established.

19. The partners committee is composed of at least 11 and not more than 17 members appointed by the Minister, as follows:

   (1) at least three persons from non-government bodies concerned by caregiver support, appointed after a public call for applications;

   (2) at least four caregivers providing support to care receivers who have different profiles, appointed after a public call for applications;

   (3) at least two researchers appointed after consultation with the integrated university health network coordination panel established under section 436.8 of the Act respecting health services and social services (chapter S-4.2); and

   (4) one member from the Observatoire québécois de la proche aidance, appointed after consultation with the latter.
The partners committee must be composed of an equal number of women and men. An equal number is presumed if the difference is not more than two.

The partners committee must include at least one member from a rural area and at least one member from an Aboriginal community or organization.

The Minister designates a member of the monitoring committee as an observer within the partners committee. The observer participates in committee meetings, but is not entitled to vote.

20. The members are appointed for a term of not more than five years, which may not be renewed consecutively more than once.

On the expiry of their terms, the members remain in office until reappointed or replaced.

21. Any vacancy among the members of the partners committee is filled in accordance with the rules of appointment to the committee.

22. The members of the partners committee receive no remuneration, except in the cases, on the conditions and to the extent that may be determined by the Government. They are, however, entitled to the reimbursement of expenses incurred in the exercise of their functions, on the conditions and to the extent determined by the Government.

23. The Minister designates the chair and the vice-chair from among the members of the partners committee.

DIVISION II
FUNCTIONS AND POWERS

24. The partners committee’s functions are

   (1) to make any recommendation or give any opinion to the Minister that it considers necessary regarding the national policy for caregivers, the government action plan or any other matter relating to caregivers;

   (2) to support the Minister and the monitoring committee in implementing the national policy for caregivers and the government action plan; and

   (3) to give the Minister its opinion on any matter referred to it by the Minister regarding caregiving.

25. The partners committee must make its recommendations and opinions public within 30 days after sending them to the Minister.
26. In the exercise of its functions, the partners committee may recommend to the Minister to consult with, solicit opinions from, or receive or hear requests and suggestions from persons, bodies or associations regarding caregiving. The partners committee may also seek the contribution of the Observatoire québécois de la proche aidance.

DIVISION III
REPORT

27. The partners committee must, within six months after the end of the fiscal year, send the Minister a report on its activities for that year.

The Minister must table the report in the National Assembly within 30 days of receiving it or, if the Assembly is not sitting, within 30 days of resumption.

CHAPTER VI
OBSERVATOIRE QUÉBÉCOIS DE LA PROCHE AIDANCE

DIVISION I
ESTABLISHMENT AND ORGANIZATION

28. An observatory on caregiving, called the “Observatoire québécois de la proche aidance” (observatory), is established.

29. The observatory is managed by a managing committee composed of the following 13 members, appointed by the Minister:

(1) two members representing the departments concerned by caregiver support, including one member representing the Ministère de la Santé et des Services sociaux, appointed after consultation with the ministers concerned;

(2) the observatory’s scientific director;

(3) one member representing the institution or body responsible for the observatory’s organization and administrative support;

(4) four researchers appointed after consultation with the integrated university health network coordination panel;

(5) three members from non-government bodies concerned by caregiver support, appointed after a public call for applications; and

(6) two caregivers providing support to care receivers who have different profiles, appointed after a public call for applications.

The Minister designates the chair and the vice-chair from among the members of the managing committee.
The managing committee must be composed of an equal number of women and men. An equal number is presumed if the difference is not more than two.

The managing committee must include at least one member from a rural area and at least one member from an Aboriginal community or organization.

30. The observatory’s managing committee determines the observatory’s scientific directions, general objectives and policies, as well as the annual activities it intends to carry out, and sends that information to the Minister.

It also evaluates the relevance, priority status and scientific quality of the observatory’s programs and activities.

31. The members of the observatory’s managing committee are appointed for a term of not more than five years, which may not be renewed consecutively more than once.

On the expiry of their terms, the members remain in office until reappointed or replaced.

32. Any vacancy among the members of the managing committee is filled in accordance with the rules of appointment to the committee.

33. The members of the observatory’s managing committee receive no remuneration, except in the cases, on the conditions and to the extent that may be determined by the Government. They are, however, entitled to the reimbursement of expenses incurred in the exercise of their functions, on the conditions and to the extent determined by the Government.

34. The Minister entrusts, by agreement, the observatory’s organization and administrative support to an institution within the meaning of the Act respecting health services and social services or to any other body.

DIVISION II
FUNCTIONS AND POWERS

35. The purpose of the observatory is to provide reliable and objective information regarding caregiving through observation, monitoring, analysis and knowledge sharing.

More specifically, the observatory’s functions are

(1) to collect, integrate, compile, analyze and disseminate information, in particular of a statistical nature, on caregiving;

(2) to monitor the evolution of caregivers’ needs as well as effective and innovative practices, measures and actions, at the national and international levels, to support caregivers;
(3) to facilitate the transfer of knowledge for the benefit of the various actors involved in caregiving; and

(4) to facilitate collaborations regarding caregiving, in particular with university institutions, research centres, other observatories or the government bodies participating in research activities or activities to promote clinical excellence and efficient use of resources in health and social services.

In the exercise of its functions, the observatory may consult experts or other actors from the caregiving sector and entrust them with any mandate it deems necessary.

36. The observatory enlightens the Minister by finding and reporting on current knowledge and trends, or those to be developed, concerning evaluation approaches and indicators to measure the quality of life, health and well-being of caregivers, and to measure the impact of the policy directions, measures and actions set out in the national policy for caregivers and the government action plan. To that end, the observatory enhances the value of existing information and data and promotes knowledge transfer and sharing.

37. Within the scope of its work, the observatory must cooperate with the monitoring committee and the partners committee.

DIVISION III
REPORT

38. The observatory’s managing committee must, within six months after the end of the fiscal year, send the Minister a report on its activities for that year.

CHAPTER VII
NATIONAL CAREGIVERS WEEK

39. The first week of November is proclaimed National Caregivers Week.

CHAPTER VIII
REPORT

40. The Minister must, not later than 28 October 2025, report to the Government on the implementation of this Act.

After that, the Minister must report to the Government on the carrying out of this Act every five years. The report is prepared in coordination with the other ministers concerned. It must take into account the opinions received from the partners committee as well as the evaluation approaches and indicators proposed by the observatory that have been selected by the Minister. The report
must also state the results obtained in implementing the national policy for caregivers and include a status report on the progress of Québec society toward achieving the goals pursued by the policy.

Any report referred to in this section is tabled by the Minister in the National Assembly within 30 days after it is presented to the Government or, if the Assembly is not sitting, within 30 days of resumption.

CHAPTER IX
AMENDING PROVISIONS

ACT RESPECTING HEALTH SERVICES AND SOCIAL SERVICES

41. Section 438 of the Act respecting health services and social services (chapter S-4.2) is amended

(1) by inserting “‘seniors home’, ‘alternative home’,” after “‘health and social services centre’,’” in the first paragraph;

(2) in the second paragraph,

(a) by replacing “Nothing in the first paragraph shall” by “The first paragraph does not”;

(b) by adding the following sentence at the end: “Nor does it prevent the use of the words listed in it in the name of a person or partnership whose activities are not likely to be confused with the activities inherent in the mission of a centre operated by an institution, provided that the Minister’s authorization has been obtained.”

42. The Act is amended by inserting the following section after section 489:

“489.0.1. The Minister has the inspection power provided for in section 346.0.8 in respect of a private seniors’ residence and any other resource or category of resource offering lodging determined by government regulation under the first paragraph of section 346.0.21. The provisions of section 346.0.9 apply to a person authorized by the Minister to carry out such an inspection.”

CHAPTER X
TRANSITIONAL AND FINAL PROVISIONS

43. The Government must adopt a national policy for caregivers not later than 28 April 2021.

The Government must adopt and make public the first government action plan not later than six months after the adoption of the national policy.
44. The first government action plan must, in particular, contain measures and actions concerning

(1) the conduct, by the health and social services institutions, of an assessment of caregivers’ needs and the preparation of a support plan for the planning and delivery of services provided to caregivers, in keeping with the objectives of the policy directions of the national policy for caregivers referred to in section 8;

(2) the assessment of the pertinence and feasibility of recognizing certain rights of caregivers and the related obligations;

(3) a review of the components of the mission of L’Appui national, a non-profit legal person constituted under Part III of the Companies Act (chapter C-38), and the continuation of its financing, in keeping with the national policy for caregivers; and

(4) the assessment of the pertinence and feasibility of establishing and maintaining a public register of caregivers intended, in particular, to promote the recognition of their role.

45. The Minister must, before 28 April 2021, appoint the members of the observatory’s managing committee.

46. Section 438 of the Act respecting health services and social services (chapter S-4.2), as amended by section 41, does not prevent persons or partnerships that, on 11 June 2020, carry on their activities under a name that includes the words “seniors home” or “alternative home” and appears in the registration declaration filed under the Act respecting the legal publicity of enterprises (chapter P-44.1) from continuing to use those words in their name.

47. The Minister Responsible for Seniors is responsible for the administration of this Act.

48. This Act comes into force on 28 October 2020.