

OPINION

SUBMITTED TO THE COMMISSION DE LA SANTÉ ET DES SERVICES SOCIAUX
May 5, 2026

**Opinion as part of the specific
consultations on Bill 23,
*An Act mainly to provide
better support to persons
whose mental state could
present a risk for their own
safety or that of others***

Presented by the Fédération interprofessionnelle de la santé du Québec—
FIQ



Foreword

The Fédération interprofessionnelle de la santé du Québec-FIQ, founded in 1987, is a labour organization dedicated to the representation and defence of the rights and interests of nearly 90,000 nursing and cardio-respiratory care professionals. It represents the vast majority of nurses, licensed practical nurses, respiratory therapists and clinical perfusionists working in the health and social services institutions across Québec.

The FIQ is a feminist organization composed of nearly 90% women, who are healthcare professionals, public and private network employees, and citizens who use healthcare services. It is actively involved in promoting and defending women's rights, while publicly denouncing injustices.

A staunch defender of social gains, equality and social justice, the FIQ works to improve the working and practice conditions of its members, as well as the quality of care provided to the population. It is also an essential pillar in the protection and promotion of Quebec's public health network.

As first-hand witnesses of how the healthcare system operates on a daily basis, FIQ members bring rich and diverse expertise thanks to their varied experiences with multiple beneficiaries of the health and social services network.

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Introduction

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Representing nearly 90,000 healthcare professionals, the FIQ is particularly interested in draft legislation affecting professional practice, the organization of care, access to services and the protection of users' rights.

The FIQ welcomes the general intent of Bill 23¹, which aims to modernize an *Act respecting the protection of persons whose mental state presents a danger to themselves or others* (Act P-38)². The proposed amendments reflect a commitment to providing better support for people living with mental health conditions, strengthening collaboration between stakeholders, and promoting an approach focused on prevention and respect for personal autonomy.

In this opinion the FIQ would, however, like to draw attention to certain key factors that are essential to ensuring its consistent and safe implementation, while respecting the professional expertise of healthcare professionals. The bill presents a unique opportunity to make full use of the expertise of specialized nurse practitioners in mental health. The role of specialized nurse practitioners³ (SNPs) in other specialist fields must also be fully utilised.

1. ASSEMBLÉE NATIONALE DU QUÉBEC. *Bill 23 — An Act mainly to provide better support to persons whose mental state could present a risk for their own safety or that of others*, [Online], Québec, Assemblée nationale du Québec, [<https://www.assnat.qc.ca/fr/travaux-parlementaires/projets-loi/projet-loi-23-43-2.html>] (Viewed on April 10, 2026).

2. LES PUBLICATIONS DU QUÉBEC. *Act respecting the protection of persons whose mental state presents a danger to themselves or others* (chapter P-38.001), [Online], Québec, Éditeur officiel du Québec (LégisQuébec), [<https://www.legisquebec.gouv.qc.ca/fr/document/lc/P-38.001>] (Viewed on April 10, 2026).

3. In this text, the term SNP includes the following specialties: front line, adult care, neonatology, mental health and pediatric care

Allow the public to fully benefit from the expertise of SNPs in mental health

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Bill 23 is a strategic opportunity to give the public access to advanced expertise in mental health, consolidate the role of SNPs in mental health and foster a genuine interprofessional approach in mental health.

The proposed amendment to section 2 of Act P-38 stipulates that: “The psychiatric examination to which a person is required to submit by law or by a court decision or following a request by a physician or specialized nurse practitioner, must be carried out by a psychiatrist. However, if it is not possible to obtain the services of a psychiatrist in due time, the examination may be carried out by any other physician.”

The FIQ believes that the specialized nurse practitioner in mental health should also be specifically mentioned, in order to provide better patient management.

SNPs in mental health have advanced academic qualifications, specialized clinical expertise and independent practice specifically focused on the assessment, diagnosis, monitoring and management of mental health conditions. They are already required to make complex clinical judgements, assess mental health, provide long-term follow-up and work with vulnerable clients in a variety of healthcare settings.

Furthermore, given that there is a particularly acute shortage of psychiatrists⁴ in several regions of Québec, this amounts to underutilizing expertise that is already available within the system and recognized by the legislative and regulatory framework.

Allowing SNPs in mental health to perform psychiatric assessments set out in the law, subject to respecting the clinical guidelines and having the appropriate education, would:

- ◆ ensure rapid access to essential assessments based on in-depth expertise in the assessment of mental health conditions;
- ◆ reduce delays and service ruptures;
- ◆ better respond to the clinical needs in the field;
- ◆ ensure care continuity for the people being followed;
- ◆ enhance the role and expertise of SNPs in mental health.

4. Florence, MORIN-MARTEL. *Des psychiatres dénoncent le manque de nouveaux postes malgré des besoins criants*, [Online], January 24, 2026, Montréal, Le Devoir, [<https://www.ledevoir.com/actualites/sante/950532/psychiatres-denoncent-manque-nouveaux-postes-malgre-besoins-criants>] (Viewed on April 10, 2026).

Recommendation 1

The FIQ therefore proposes that section 3 of Bill 23 should amend section 2 of Act P-38 by inserting, in the first paragraph, and after “psychiatrist”, “or a specialized nurse practitioner in mental health”, so that it reads as follows:

The psychiatric examination to which a person is required to submit by law or by a court decision must be carried out by a psychiatrist or a specialized nurse practitioner in mental health. However, if it is not possible to obtain the services of a psychiatrist or specialized nurse practitioner in mental health in due time, the examination may be carried out by any other physician.

Consolidate the SNP role

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The FIQ welcomes the fact that Bill 23 recognizes the right of SNPs across all specialist categories to request a psychiatric assessment. They are equipped to assess the mental state of a symptomatic person. This recognition is part of an ongoing effort to enable SNPs to practise to the full extent of their scope of practice and thus to encourage them to contribute fully to the health network.

This measure also helps to improve access to quality care, streamline service pathways and reduce reliance on the availability of doctors or the courts. It also reflects a desire to better align professional roles with the actual skills of SNPs, whether they work in mental health, adult care, paediatric care or on the front line.

However, for this progress to have the desired effects, Santé Québec and its institutions must actively support the SNPs by issuing clear guidelines, granting them organizational recognition, and establishing appropriate and safe working conditions, including a reasonable workload.

Support people in drawing up advance psychiatric directives

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The FIQ welcomes the introduction of advance psychiatric directives. This measure is consistent with a modern approach that respects the participation and independence of people living with mental health disorders, while respecting their rights and dignity.

The FIQ therefore invites the legislator to establish a framework based on clinical competencies recognized by law, enabling qualified nurses who are authorized to diagnose mental health disorders to contribute fully to this process. Such a framework would ensure care continuity and access to support aimed at helping them become more independent.

Consequently, in accordance with Bill 15, which was recently passed, certain SNPs specializing in fields other than mental health, may diagnose mental disorders, subject to, among other things, specific training.

And some nurse clinicians with a certificate from the Ordre des infirmières et infirmiers du Québec have the expertise and skills needed to diagnose mental disorders⁵.

The FIQ considers that these nurses, like SNPs, should be recognized as professionals capable of supporting people in drawing up their advance psychiatric directives. Excluding them from this support would, without good reason, limit access to advance psychiatric directives and the continuity of care.

Recommendation 2

The FQ also recommends that the term “health professional” written in section 10 of Bill 23 include the SNPs and nurse clinicians who can diagnose mental disorders.

5. ORDRE DES INFIRMIÈRES ET INFIRMIERS DU QUÉBEC (OIIQ). *Champ d'exercice et activités réservées des infirmières*, [Online], Québec, Ordre des infirmières et infirmiers du Québec, [<https://www.oiiq.org/pratique-professionnelle/exercice-infirmier/champ-exercice-activites-reservees>] (Viewed on April 10, 2026).

Ensure *de facto* designation by Santé Québec

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The FIQ notes that, too often, legislative advances are not fully reflected in practice due to restrictive interpretations or a lack of organizational commitment. It is therefore essential that Santé Québec take an active role in order to guarantee a consistent application of the law and full recognition of the healthcare professionals concerned by specifically designating the SNPs and other healthcare professionals to act in the context of applying the law. Without a clear and consistent designation, there is a real risk of regional disparities and organizational obstacles to the fulfillment of the responsibilities set out in Bill 23.

Furthermore, section 10 of Bill 23 stipulates that no judicial proceedings may be brought against a designated resource person for an act performed in good faith in the application of section 13.7 of Act P-38. In accordance with this section, the FIQ believes that healthcare professionals involved in implementing measures to order psychiatric assessments or institutional care should also be entitled to this immunity.

To ensure that these principles are respected, the FIQ proposes the following two amendments:

Recommendation 3

In section 10 of Bill 23, which seeks to add section 13.2 to Act P-38, it should be specified that SNPs and nurse clinicians who are eligible to diagnose mental disorders are designated *de facto* by Santé Québec.

Recommendation 4

In section 10 of Bill 23 which seeks to add section 13.7 to Act P-38, replace “no judicial proceedings may be brought against a designated resource person for an act performed in good faith in the application of this section” with: “no judicial proceedings may be brought against a resource person, whether designated or not, for an act performed in good faith in the application of this section”.

This last amendment would have the effect of including non-designated resource people who may be called upon to provide information when the collaborative action process is initiated.

Conclusion

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In conclusion, the FIQ recognizes the good intentions of Bill 23 and welcomes many of the advances that it proposes, in particular personal autonomy, concerted action between actors and the recognition of the SNP role.

However, the FIQ believes that the bill needs to go further in order to fully recognize the expertise of SNPs in mental health, particularly by allowing them to perform psychiatric assessments. Finally, the role of healthcare professionals in the determination of advance psychiatric directives and their designation by Santé Québec for implementing this law are measures that are essential for improving access to quality care, meeting the needs of the public and ensuring optimal use of the skills already in the network.

The legislative proposals contained in Bill 23 may help to improve acute care, but they cannot replace prevention and professional support at an early stage. Since the shift towards ambulatory care, the FIQ has been calling for equitable, free and universal access to mental health care. Strengthening frontline care and services must be at the heart of efforts to resolve the current crisis.

Lastly, the FIQ shares some of the concerns expressed by the community and social groups regarding respecting users' rights, notably in a context where constraint measures may be considered. Because the users' experiences⁶ who have been under court order for care are generally poor, particular attention must be paid to respecting their rights in order to rebuild trust and encourage adherence to treatment. Furthermore, the FIQ is concerned about the significant pressure⁷ faced by families of people with mental health conditions. Psychosocial services should be provided to the family and friends so that they can provide the right support for the patient in the long term.

6. FORENSIA. *Traitement involontaire au Québec : quelles sont les perspectives des différentes parties prenantes sur l'autorisation judiciaire de soins?*, [Online], 2024, Québec, Forensia, [<https://forensia.ca/videos/traitement-involontaire-au-quebec-queelles-sont-les-perspectives-des-differentes-parties-prenantes-sur-lautorisation-judiciaire-de-soins/>] (Viewed on April 10, 2026).

7. INSTITUT QUÉBÉCOIS DE RÉFORME DU DROIT ET DE LA JUSTICE (IQRDJ). *La Loi sur la protection des personnes dont l'état mental présente un danger pour elles-mêmes ou pour autrui – Rapport 5 – Recommandations finales*, [Online], 2025, Québec, Institut québécois de réforme du droit et de la justice, [<https://iqrj.ca/wp-content/uploads/2025/05/Rapport-5-IQRDJ-Recommandations-finales.pdf>] (Viewed on April 10, 2026).