



British Columbia's
Office of the Human Rights
Commissioner

Inquiry into detentions under the *Adult Guardianship Act*

Progress update on recommendations
1a, 1b, 2a, 2b and 8



April 2026



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This publication can be found in electronic format on the website of British Columbia's Office of the Human Rights Commissioner: bchumanrights.ca/were-still-here

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**To the Indigenous
peoples of this place we
now call British Columbia:**

**Today we turn our minds to
you and to your ancestors.
You have kept your lands
strong. We are grateful to
live and work here.**



April 15, 2026

The Honorable Raj Chouhan
Speaker of the Legislative Assembly
Parliament Buildings
Victoria, BC V8V 1X4

Dear Mr. Speaker,

It is my pleasure to present the Human Rights Commissioner's report, *Inquiry into Detentions under the Adult Guardianship Act: Progress Update*, to the Legislative Assembly. It has been prepared in accordance with section 47.20 of the *Human Rights Code*.

Sincerely,



Kasari Govender
Human Rights Commissioner

cc: Kate Ryan-Lloyd
Clerk of the Legislative Assembly

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If you are unsure about terminology used in this report, we invite you to visit our Human Rights Glossary at: bchumanrights.ca/glossary



Background

In November 2023, B.C.'s Human Rights Commissioner launched an inquiry into detentions under the *Adult Guardianship Act* (AGA). In April 2025, her final report, "[We're Still Here](#)" was released, detailing Commissioner Govender's findings and recommendations.

This Inquiry was intended to shine a light on whether and to what extent vulnerable adults were being detained under the emergency assistance provisions of the AGA and whether such detentions accord with the Province of British Columbia's human rights obligations. Adults who are detained under the AGA are often in highly vulnerable positions; while protecting them against abuse and neglect is an important goal, respecting their human rights is an important component of treating vulnerable adults with dignity and protecting their well-being.

The Commissioner found that detentions under the AGA impacted a significant number¹ of adults, who were held against their will sometimes for significant periods of time, that transparency and oversight over detention are lacking and adults' rights to fair process have not been adequately respected. The Commissioner also found that there was insufficient legal authority to authorize these detentions, and that harms of detention were disproportionately experienced by seniors, people who are unhoused and people with disabilities.

In short, the Inquiry revealed a need for significant changes to how we treat, protect and respect the rights of vulnerable adults. "We're Still Here" lays out 10 recommendations for the Ministry of Attorney General, the Ministry of Health and the designated agencies² to bring law, policy and practice into compliance with human rights standards, including that they:

- immediately stop detaining adults for longer than the duration of an emergency and ensure all detained adults receive written reasons for being detained;
- provide legal advice and representation to all adults who are detained;
- introduce amendments to the AGA to clarify whether detention is allowed in emergency situations;
- develop provincial regulations, policies or guidelines to support implementation of legislative changes to ensure rights are respected;
- make data reporting mandatory, develop provincial data standards, and require annual public reporting;
- develop mandatory provincial training;

¹ According to the data received, there were 340 reported detentions of 300 individuals in B.C. between January 2018 and September 2023 (5.75 year span); BC's Office of the Human Rights Commissioner, "[We're still here](#)": report of the Inquiry into detentions under the *Adult Guardianship Act*, (BCOHRC, April 8, 2025), 47, Table 3, https://bchumanrights.ca/wp-content/uploads/BCOHRC_Were-still-here_Apr2025.pdf.

² Designated agencies include Community Living BC, Providence Health Care, Vancouver Island Health Authority, Fraser Health Authority, Vancouver Coastal Health Authority, Northern Health Authority and Interior Health Authority.

- consult on the role of police under Part 3 of the AGA;
- assess and report publicly on the community health resources that are required to reduce the number and length of detentions of adults under the AGA;
- create an independent mechanism for detained adults to challenge their detentions and their conditions; and
- create an independent officer of the Legislature with oversight of detentions in health care facilities.

Pursuant to s. 47(20) of the *Human Rights Code*, the Commissioner has the ability to require duty holders to notify her about the steps taken to address her recommendations.³ To measure progress and assess the impact of all the Commissioner’s recommendations, BC’s Office of the Human Rights Commissioner (BCOHRC) periodically sets out to confirm which recommendations have been acted on and which have yet to be implemented.

In May 2025, BCOHRC released [Where We Stand](#), our first monitoring report that takes stock of which of the Commissioner’s recommendations made to the Province from 2019 to 2024 have led to change and where we must continue to push for progress. *Where We Stand* assessed 159 recommendations and found that 58 per cent had seen some level of implementation.

This progress update regarding the “We’re Still Here” report recommendations is the first in a series of four progress reports that will assess the implementation of recommendations made to duty holders in relation to detentions under the AGA. Appendix B includes details on future progress updates and the associated recommendations.

³ B.C.’s Human Rights Code. 47.20

⁽¹⁾ At the conclusion of an inquiry under section 47.15, the commissioner may make a written report containing any recommendations the commissioner considers appropriate.

⁽²⁾ The commissioner may publish a report referred to in subsection (1) and provide the report to the Speaker of the Legislative Assembly.

⁽³⁾ If a report referred to in subsection (1) of this section or section 47.14 contains a recommendation made to a person, the commissioner may require the person to notify the commissioner, within a specified period of time, of steps taken, or intended to be taken, to address the recommendation.

⁽⁴⁾ On request by a person who is subject to a notification requirement under subsection (3), the commissioner may extend the period of time for the notification, either before or after that period of time has expired.

⁽⁵⁾ If the commissioner considers that a person has not, within the original or extended period of time, adequately addressed a recommendation, the commissioner may make a written report about the person’s failure to adequately address the recommendation.

⁽⁶⁾ The commissioner may publish a report referred to in subsection (5) and provide the report to the Speaker of the Legislative Assembly.

⁽⁷⁾ If the commissioner provides a report to the Speaker under subsection (2) or (6), the Speaker must lay the report before the Legislative Assembly as soon as practicable.



Recommendations monitored

The 10 recommendations laid out in “We’re Still Here” include timeframes that span from April 2025 to December 2028. In order to assess progress in a timely manner, we intend to follow up on these recommendations via four progress reports between 2026 and 2029. This is the first of these reports and assesses recommendations 1a, 1b, 2a, 2b and 8:

Recommendations 1a and 1b were directed at the seven designated agencies.

1. The designated agencies immediately:
 - a. desist from detaining adults under s. 59(2) of the AGA for longer than is required to address the immediate risk of death or serious harm unless a support and assistance order has been obtained that authorizes the detention; and
 - b. ensure all adults detained under s. 59(2) promptly receive written reasons for being detained. Written reasons must:
 - i. be accessible and trauma informed;
 - ii. include all less intrusive options that were explored before deciding to detain the adult;
 - iii. include both the factual and legal basis for the detention; and
 - iv. include information on how to challenge the detention itself as well as the conditions of the detention.

Recommendations 2a and 2b were directed at the Ministry of Attorney General.

2. To ensure that adults detained under the *Adult Guardianship Act* have access to counsel, the Commissioner recommends that:
 - a. The Ministry of Attorney General take immediate steps to extend the *Mental Health Act* rights information service to adults detained under the *Adult Guardianship Act* including through the provision of adequate funding, until the following recommendation is implemented; and
 - b. By August 31, 2025, the Ministry of Attorney General ensures that the rights information service described above is extended to provide legal advice (by lawyers) or otherwise ensure that adults have immediate access to legal advice as needed.

Recommendation 8 was directed at the Ministry of Health.

8. The Ministry of Health in collaboration with the designated agencies assess which community-based resources are required to reduce the number and length of detentions of adults under s. 59(2). Community-based resources are publicly funded health services other than acute care services, including respite care, home support, assisted living, residential care, staffed residential resources and community-based mental health supports among others. Once determined, these services must be adequately funded to ensure that detention is only used as a last resort.

The process for determining whether and to what extent under-resourcing of community-based services leads to more or longer detentions must be developed by Sept. 30, 2025, and the assessment process must be completed annually. Results are to be publicly reported on an annual basis, starting by April 30, 2027.

The timeframe for these specific recommendations was from April (noted as “immediately” within the report) to Sept. 30, 2025. In October 2025, we sent duty holders requests for progress updates and asked them to identify actions that had been taken towards implementing the recommendations. Duty holders were asked to indicate whether a recommendation has been fully implemented, partially implemented, not implemented or is in progress, and to include evidence that supports the reported implementation status, for example, data about detentions, policy changes, practice directives or training materials.

The Commissioner notes the limitations inherent in analyzing data that represent only six months, with relatively few detentions among designated agencies for comparison. The Commissioner is also not in a position to conduct a health care assessment of each file; this is the task of the health care providers treating the adult in question. A comprehensive, case-by-case review of detentions is therefore beyond the scope of these reviews, although the Commissioner’s ability to analyze the data and assess ongoing compliance with this recommendation will grow with the passage of time and an increase in available data for future progress reports.



Progress update

Summary of findings

The three recommendations assessed in this report have multiple parts and were made to a number of duty holders. Between April and September 2025, recommendation 1a, requiring an immediate end to detentions that are longer than is required to address the immediate risk to life or health, has been fully implemented by five of the designated agencies and partially implemented by two of the designated agencies.

Recommendation 1b, regarding the provision of written reasons for detention, has been fully implemented by three of the designated agencies and partially implemented by two of the

designated agencies. Two of the designated agencies did not detain anyone in this timeframe, therefore this recommendation is not applicable.

Regarding access to counsel, the Ministry of Attorney General has not implemented recommendation 2a, and recommendation 2b is in progress based on information provided by the Ministry of Attorney General.

The Ministry of Health has not implemented recommendation 8, which requires monitoring whether and to what extent under-resourcing of community-based services leads to more or longer detentions.

Appendix A provides full details of the implementation status for each recommendation by duty holder.

Compliance of duty holders

Recommendation 1a requires the immediate end of detentions that are longer than is required to address the immediate risks. Since the Inquiry report’s release date, April 8, 2025, Vancouver Coastal Health Authority (VCHA) detained 13 individuals a total of 16 times, Interior Health Authority (IHA) detained eight individuals, Fraser Health Authority (FHA) detained four individuals, Providence Health Care (PHC) detained two individuals, Vancouver Island Health Authority (VIHA) detained one individual, and Community Living BC (CLBC) and Northern Health Authority (NHA) did not detain anyone under the AGA.

Table 1. Number and length of detentions under the AGA by designated agency

DESIGNATED AGENCY	NUMBER OF INDIVIDUALS DETAINED, APR. 8–SEPT. 30, 2025	MEDIAN LENGTH ⁴ OF DETENTION IN DAYS, ⁵ APR. 8–SEPT. 30, 2025	LONGEST DETENTION IN DAYS, APR. 8–SEPT. 30, 2025	MEDIAN LENGTH OF DETENTION IN DAYS, JAN. 2018–SEPT. 2023
VCHA	13	5.5	25	6
IHA	8	2	8	6
FHA	4	16.5	20	6
PHC	2	2	2	5
VIHA	1	3	3	1
NHA	0	N/A	N/A	N/A
CLBC	0	N/A	N/A	10

⁴ The median is calculated based on the length of detention. Some individuals are reported to have experienced multiple detentions. The use of median, instead of average, is intended to account for outlier detentions.

⁵ The length of a detention is calculated from the initiation date to the end date of a Section 59 detention, inclusive of both dates. If a detention consists of multiple Section 59 uses, the length is measured from the initiation date of the first use to the end date of the final use.

Table 2 shows the number of individuals detained by each designated agency and compares annualized detention rates before and after “We’re Still Here” was released.

Table 2: Number of individuals detained under the AGA and annualized rate by designated agency

DESIGNATED AGENCY	NUMBER OF INDIVIDUALS DETAINED, JAN. 2018–SEPT. 2023 ⁶	ANNUALIZED RATE, 2018–2023 ⁷	NUMBER OF INDIVIDUALS DETAINED, APRIL–SEPT. 2025	ANNUALIZED RATE, 2025 ⁸
VCHA	68	11.8	13	27.0
IHA	37	6.4	8	16.6
FHA	146	25.4	4	8.3
PHC	27	4.7	2	4.1
VIHA	4	0.7	1	2.1
NHA	0	0.0	0	0.0
CLBC	18	3.1	0	0.0

Table 1 and Table 2 show that:

- **VCHA** detentions more than doubled since the report was released. However, the median length of detentions has decreased.
- **IHA** detentions more than doubled but median length of detention is short compared to other designated agencies.
- **FHA** detentions decreased significantly in number since the report was released, compared to the annual detention rate prior to report release, but FHA has the highest median length of detentions compared to other designated agencies.
- **PHC** detentions remained similar.
- **VIHA** detentions remained low.
- **NHA** detentions remained the same. It did not detain anyone.
- **CLBC** detentions decreased. It did not detain anyone.

⁶ BC’s Office of the Human Rights Commissioner, “We’re still here”: report of the Inquiry into detentions under the Adult Guardianship Act, (BCOHRC, April 8, 2025), 47, Table 3, https://bchumanrights.ca/wp-content/uploads/BCOHRC_Were-still-here_Apr2025.pdf.

⁷ The annualized rate is calculated as follows: (number of individuals detained, Jan. 1, 2018 – Sept. 30, 2023) multiplied by 365 divided by (number of days from Jan. 1, 2018 – Sept. 30, 2023 equals 2,099 days)

⁸ The annualized rate is calculated as follows: (number of individuals detained, April 8 – Sept. 30, 2025) multiplied by 365 divided by (number of days, April 8 – Sept. 30, 2025 equals 176 days)

On recommendation 1b, for the detentions described above:

- **VCHA** provided all 13 individuals (three of whom were detained more than once for a total of 16 detentions) with written reasons for detention. This was provided on the first day for 80 per cent of detentions, on the second day for 12 per cent of detentions and on the fourth day for eight per cent of detentions;⁹
- **IHA** provided five out of the eight adults detained with written and verbal reasons for their detention. Of the five, these reasons were provided to three individuals on the first day of detention and two individuals on the second day;¹⁰
- **FHA** provided all four adults with written reasons for their detention on the first day of detention. Written reasons were also provided again each time that emergency assistance was required for up to five more days;
- **PHC** provided both individuals with written and verbal reasons for their detention on the first day of detention; and
- **VIHA** provided the individual with verbal and written reasons for the detention on the first day.

Designated agencies provided examples of updates to their Notification of Rights forms and brochures related to patients' rights. All designated agencies, except for NHA who did not detain anyone during this period, indicated that new practice directives and trainings had been implemented to reflect the Commissioner's recommendations and to ensure all designated responders were aware of changes, particularly to how and when individuals should be receiving notification of their detention and rights information.¹¹

Overall, from the information provided by designated agencies as part of the Commissioner's request for progress updates, it is apparent that all the designated agencies took some action to address recommendations 1a and 1b. Designated agencies have largely updated their training materials and practice directives to ensure that reasons for detention and notification of adults' rights are provided as soon as possible and contain the information set out by recommendation 1b.¹² The data provided also shows a demonstrable improvement in the length of detentions for most¹³ designated agencies and in the number of adults receiving written reasons for detention and rights notification, except for IHA where the median length of detention has increased and the rate of notification has not changed in a significant way.

However, the Commissioner is concerned that, in the six-month timeframe since the report's release, some designated agencies are still detaining adults for significant periods of time and

⁹ VCHA has noted that providing reasons for detention on days two, three and four of detention was most aligned with patient well-being and more trauma-informed.

¹⁰ IHA has noted that providing reasons for detention on day two of detention in two cases was aligned with patient well-being and was trauma-informed.

¹¹ Most of the designated agencies have identified staff to conduct AGA investigations into reports of abuse and neglect. These staff are often referred to as "designated responders" by the health authorities and designated agencies and "facilitators" by CLBC, although this is not a role identified or delegated in the AGA.

¹² The personal information of adults detained was not requested for this progress update, so a comprehensive review of written reasons provided to adults is not possible.

¹³ The median length of detention for VIHA from Jan. 2018–Sept. 2023 was one, whereas the only detention in VIHA between Apr.–Sept. 2025 was three days.

many without applying for or obtaining a court order. For example, VCHA detained two adults for 25 days and FHA detained two adults for 20 days.

While the Commissioner recognizes that emergencies requiring an adult's detention can be serious and even life-threatening, her concern lies with these lengthier detentions where a court order for support and assistance is not sought promptly, or a person is being held beyond the time that reasonably should be required for the emergency or for care planning purposes. As noted in "We're Still Here," section 59(2)(e) of the AGA does not provide designated agencies with authority to detain adults on an indefinite or long-term basis, or any longer than is required for emergency assistance during a genuine emergency, or any longer than is required for a prompt application for a court order. In *A.H. v. Fraser Health Authority*, the B.C. Supreme Court found there was no authority to detain for indefinite periods and no authority to detain in the absence of a pending application to Provincial Court. Where a detention exceeds the time required to respond to an emergency, especially for a lengthy period of time, the Court in *A.H.* found it to be a "flagrant overstepping" of the authority granted by the AGA.¹⁴

In determining the scope of the emergency assistance provisions of the AGA, the B.C. Supreme Court said:

"In summary, an involuntary detention for a period longer than is reasonably required to apply for a s. 56 support and assistance order is not an 'emergency measure' as those words are used in s. 59(2)(e). This conclusion reflects the ordinary meaning of the words used in s. 59(2)(e) read in context and harmoniously with the AGA's purpose of prioritizing self-determination and autonomy for adults with disabilities and imposing involuntary measures only as a last resort, in a manner as minimally intrusive as possible, and by court order."¹⁵

Given the Supreme Court's findings, although the Commissioner recognizes the improvement in median length of detentions for most designated agencies, the Commissioner has determined that VCHA and FHA have only partially implemented recommendation 1a due to lengthier detentions of 20 days and longer. Based on the information available to the Commissioner, this appears to be longer than is reasonably necessary to either deal with the emergency circumstances giving rise to the detentions or apply for a court order on an urgent or expedited basis to authorize further detention.

Likewise, for recommendation 1b, the Commissioner has determined that VCHA has partially implemented the recommendation because some adults who were detained did not receive written reasons for their detention until the fourth day. It is understandable that it may take up to 24 hours to draft and present reasons to an adult who has been detained, and it may

¹⁴ BC's Office of the Human Rights Commissioner, "We're still here": report of the Inquiry into detentions under the Adult Guardianship Act, (BCOHRC, April 8, 2025), 39, https://bchumanrights.ca/wp-content/uploads/BCOHRC_Were-still-here_Apr2025.pdf.

¹⁵ *A.H. v Fraser Health Authority*, 2019 BCSC 227 (CanLII), <https://canlii.ca/t/hxpcx>.

similarly take that amount of time to ensure reasons are provided in a trauma-informed manner when the adult is deemed capable of understanding the reasons. However, there's no reason that this information cannot be communicated at multiple times, such as within the first 24 hours and then again if a person's clinical situation changes. This context is not unique to the AGA; reasons for detention must be provided in every context in which the state detains adults against their will, and timing is not left indefinitely to the discretion of the state in these circumstances.

The Commissioner has also determined that IHA has partially implemented recommendation 1b because only five of eight adults who were detained received reasons for their detention. The other designated agencies provided reasons for detention to all adults on the first or second day of their detention and have fully implemented this recommendation.

Recommendations 2a and 2b required the immediate extension of the *Mental Health Act* rights information service to AGA detainees and that government establish a system to give adults immediate access to legal advice. The Ministries of Attorney General and Health reported that to advance work in support of the Commissioner's recommendations they are working with the *Adult Guardianship Act* Working Group (Working Group), comprised of representatives from the Ministries and designated agencies. The Working Group's mandate is to inform the development of provincial guidance materials which will address aspects of the recommendations. These materials will focus on "strengthening province-wide consistency and enhancing effectiveness, including through provision of resources for both public reference and staff application." This work is in progress and no completion date has been set.

On recommendation 2a, the Ministry of Attorney General notes that the recommendation hasn't been implemented. The Ministry has been focused on implementing an Independent Rights Advice Service (IRAS) for people detained under the *Mental Health Act*, which became fully effective Dec. 3, 2025 (and was partially implemented before that). This service focuses on providing legal information rather than legal advice. The Ministry notes "numerous barriers to immediately extending the existing IRAS to adults detained under the AGA" before implementing recommendation 2b. The Ministry also notes that introducing legislative amendments to support this service requires additional steps and cites ongoing fiscal constraints. The Ministry has indicated their focus will be on implementing recommendation 2b.

On recommendation 2b, the Ministry of Attorney General notes that implementation of the recommendation is in progress. The Ministry described the challenging fiscal situation that the provincial government is facing and noted that the Commissioner's recommendation "will be considered in the context of continued justice system investment." Policy options to provide adults who have been detained under the AGA with legal counsel are currently being explored. Legal Aid BC is providing some services but is not being provided with additional provincial funding to do so. For example, the Ministry shared information about a new Legal Aid BC resource, the [Legal Aid Mental Health Assistance Line](#), which is available to people seeking legal assistance who are held in a hospital or other facility against their will because of their mental health, health or disability, or who are experiencing a serious restriction on their rights or freedoms in the health care system.

Recommendation 2 also has a third part, 2c, which will be assessed in the fall 2026 progress update.¹⁶

On recommendation 8 regarding research on the lack of community-based services driving the need for detentions, the Ministry of Health notes that the recommendation has not been implemented. While Government recognizes the intent to ensure gaps in community-based services do not contribute to additional detentions under the AGA, they continue to voice concern about their ability to implement recommendation 8 given the current fiscal situation. The Ministry describes prioritizing investment in the health care system, including over \$3.5 billion since 2018/19 “to expand and improve care for seniors in BC, including investments in primary care, community-based services, home health, long-term care, assisted living and respite services.”



Conclusion and next steps

While the Commissioner recognizes the challenging fiscal situation facing government and public agencies in the province, an individual’s ability to exercise their rights should not be limited by budgetary constraints. Access to legal counsel and rights information is a basic right and service that must be accessible and available to all individuals who have been detained (recommendations 2a and 2b). These are non-negotiable rights meant to safeguard liberty and self-determination. Likewise, this type of detention should only be used as a last resort, not as a substitute measure for insufficient community care (recommendations 1a and 8). Understanding that six months of data is a relatively small data set to evaluate, it is nonetheless very concerning that since “We’re Still Here” was released some designated agencies are reporting increased detentions and detaining people for significant lengths of time. The Commissioner will request details on detentions under the AGA in future progress reports to review how recommendation 1a continues to be implemented.

The Commissioner will continue to monitor the status of implementation through regular engagements with duty holders and the three subsequently planned progress reports. The next progress report anticipated in fall 2026 will assess recommendations 2c, 3, 5a, progress on 5b, and 6.

¹⁶ Recommendation 2c: By April 30, 2026, the Ministry of Attorney General ensures sufficient funding for full legal representation to all adults who are detained under the *Adult Guardianship Act*.

Appendix A: Progress of implementation of AGA recommendations

	RECOMMENDATION	DUTY HOLDER	IMPLEMENTATION STATUS
1a	<p>1. The designated agencies immediately:</p> <p>a. desist from detaining adults under s. 59(2) of the AGA for longer than is required to address the immediate risk of death or serious harm unless a support and assistance order has been obtained that authorizes the detention.</p>	<ul style="list-style-type: none"> • FHA • IHA • NHA • VCHA • VIHA • PHC • CLBC 	<p>FHA: Partially implemented</p> <p>IHA: Fully implemented</p> <p>NHA: Fully implemented</p> <p>VCHA: Partially implemented</p> <p>VIHA: Fully implemented</p> <p>PHC: Fully implemented</p> <p>CLBC: Fully implemented</p>
1b	<p>1. The designated agencies immediately:</p> <p>b. ensure all adults detained under s. 59(2) promptly receive written reasons for being detained. Written reasons must:</p> <p>i. be accessible and trauma informed;</p> <p>ii. include all less intrusive options that were explored before deciding to detain the adult;</p> <p>iii. include both the factual and legal basis for the detention; and</p> <p>iv. include information on how to challenge the detention itself as well as the conditions of the detention.¹⁷</p>	<ul style="list-style-type: none"> • FHA • IHA • NHA • VCHA • VIHA • PHC • CLBC 	<p>FHA: Fully implemented</p> <p>IHA: Partially implemented</p> <p>NHA: N/A</p> <p>VCHA: Partially implemented</p> <p>VIHA: Fully implemented</p> <p>PHC: Fully implemented</p> <p>CLBC: N/A</p>
2a	<p>2. To ensure that adults detained under the <i>Adult Guardianship Act</i> have access to counsel, the Commissioner recommends that:</p> <p>a. The Ministry of Attorney General take immediate steps to extend the <i>Mental Health Act</i> rights information service to adults detained under the <i>Adult Guardianship Act</i> including through the provision of adequate funding, until the following recommendation is implemented.</p>	<p>Ministry of Attorney General</p>	<p>Not implemented</p>

¹⁷ In addition to the number of adults receiving written reasons for their detention, and when those reasons were received, this recommendation has been assessed by reviewing updated training materials and policies that guide designated responders in completing the appropriate forms.

RECOMMENDATION	DUTY HOLDER	IMPLEMENTATION STATUS
<p>2b 2. To ensure that adults detained under the <i>Adult Guardianship Act</i> have access to counsel, the Commissioner recommends that:</p> <p>b. By August 31, 2025, the Ministry of Attorney General ensures that the rights information service described above is extended to provide legal advice (by lawyers) or otherwise ensure that adults have immediate access to legal advice as needed.</p>	<p>Ministry of Attorney General</p>	<p>In progress</p>
<p>8 8. The Ministry of Health in collaboration with the designated agencies assess which community-based resources are required to reduce the number and length of detentions of adults under s. 59(2). Community-based resources are publicly funded health services other than acute care services, including respite care, home support, assisted living, residential care, staffed residential resources and community-based mental health supports among others. Once determined, these services must be adequately funded to ensure that detention is only used as a last resort.</p> <p>The process for determining whether and to what extent under-resourcing of community-based services leads to more or longer detentions must be developed by September 30, 2025, and the assessment process must be completed annually. Results are to be publicly reported on an annual basis, starting by April 30, 2027.</p>	<p>Ministry of Health</p>	<p>Not implemented</p>

Appendix B: Timelines for AGA recommendation progress reporting

PROGRESS REPORT	RECOMMENDATIONS	PROGRESS REQUEST	PROGRESS UPDATE DUE	PROGRESS REPORT
1	1a, 1b, 2a, 2b, 8	Oct. 1, 2025	Nov. 3, 2025	April 2026
2	2c, 3 (all), 5a, progress on 5b, 6 (all)	July 2026	July 2026	Fall 2026
3	4 (all), 5b, 7, 9, progress on 10	February 2027	February 2027	Spring 2027
4	8 (public reporting requirement), 10, all outstanding updates.	January 2029	January 2029	Spring 2029



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