
NEWS RELEASE

For Immediate Release
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March 12, 2025

Ministry of Health

B.C. improving care for people with mental-health, substance-use challenges

VICTORIA – The Province is taking action to improve care for people who suffer from severe, overlapping mental-health and substance-use challenges, including brain injuries from toxic-drug poisonings, ensuring they have the right care to meet their needs.

“The Mental Health Act is designed to ensure people suffering from severe mental illness get the care and protection they need,” said Josie Osborne, Minister of Health. “The needs of this vulnerable population have become more complex and further support is needed through involuntary care facilities and continued work with partners. We are also clarifying the act’s application to ensure consistency and to support a seamless system of mental-health and substance-use care that works for everyone, while keeping our communities safe.”

On March 12, 2025, Dr. Daniel Vigo issued a guidance document to the clinical community, including doctors and psychiatrists across all health authorities, to provide clarification on how the Mental Health Act can be used to provide involuntary care for adults when they are unable to seek it themselves. Vigo is B.C.’s chief scientific adviser for psychiatry, toxic drugs and concurrent disorders.

“Involuntary treatment can be a tool to preserve life and treat the source of impairment in people with combinations of mental disorders, substance use and acquired brain injuries from toxic-drug poisonings,” Vigo said. “Dispelling misconceptions about the use of the act is a first step to support this population, in addition to creating new services, including mental-health units in corrections, approved homes, in-patient beds and community teams supporting the most complex patients and under-served areas.”

The guidance provides information to help clinicians and providers determine when involuntary admission and treatment may be appropriate for people with concurrent mental-health and substance-use disorders when their substance use is worsening their overall mental-health condition.

“The BC Schizophrenia Society continues to see an increasing number of families affected by both mental illness and addiction challenges around the province,” said Faydra Aldridge, chief executive officer, BC Schizophrenia Society. “The Mental Health Act is necessary to protect people and used as a last resort when individuals can’t make decisions themselves. This guidance will improve care for this incredibly vulnerable population, so they can receive help for their unique needs.”

In June 2024, Premier David Eby appointed Vigo as B.C.’s first chief scientific adviser for psychiatry, toxic drugs and concurrent disorders. He was tasked with working with the health authorities, Indigenous partners and people with lived experience to analyze existing mental-

health and addictions treatment services in B.C., review data and best practices, and look to other jurisdictions for proven solutions that can be implemented in B.C.

Since then, his focus has been on working with stakeholders, partners and clinicians to determine options to support people with concurrent mental-health and substance-use challenges, and brain injuries from toxic-drug poisonings through the existing act.

The initial new involuntary care beds at Surrey Pretrial Services Centre will open this month and Alouette Homes in Maple Ridge will open later in spring 2025. Government is working to identify sites in other parts of the province as part of the overall response to addressing the toxic-drug crisis.

This work will build on the actions government is taking on building a voluntary, seamless system of care. This includes more than 3,700 treatment and recovery beds of which 700 are new since 2017, launching the Opioid Treatment Access Line, expanding Road to Recovery, opening Foundry youth centres, First Nations healing facilities and building thousands of supportive housing units.

Learn More:

Read the full memo: <https://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health-substance-use/mental-health-act>

Learn about mental health and substance use supports in B.C.: <https://helpstartshere.gov.bc.ca/>

A backgrounder follows.

Contact:

Ministry of Health
Communications
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BACKGROUND

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Voluntary and involuntary care in B.C.

When people are in crisis, they must be met with compassion and care. That's why the Province has made significant investments to build a comprehensive system of mental-health and substance-use care, including for child and youth mental health, harm reduction, acute and community treatment, and recovery services.

Voluntary care

- Foundry Centres and Integrated Child and Youth Mental Health Teams that address mental-health and substance-use issues early to prevent more complex challenges in adulthood;
- bed-based treatment and recovery beds so that people seeking treatment can access these services when they are ready to take that step in their healing journey;
- the Red Fish Healing Centre, a 105-bed site that provides specialized care to support people who live with the most severe, complex substance-use and mental-health issues;
- Road to Recovery, a made-in-B.C. model of addictions care that establishes a seamless continuum of care through a full continuum of substance-use services from assessment to withdrawal management (detox), treatment and aftercare services for clients with moderate to severe substance-use disorders;
- First Nations treatment centres to support a range of Indigenous-led mental-health and substance-use services that are culturally appropriate;
- recovery community centres, which provide low-barrier, community-based recovery supports that help people maintain their recovery;
- peer-assisted care teams, which pair mental-health professionals with peer workers to respond to crisis calls and connect people to mental-health and substance-use supports, are available in New Westminster, Victoria, the North Shore of Vancouver, and Prince George with plans to expand to 10 more communities throughout B.C., including up to three Indigenous-led teams;
- assertive community treatment teams, which are multidisciplinary teams that operate 24/7 and provide services to people who have a history of severe mental illness and/or substance use, many of whom have had difficulty maintaining access to traditional community mental-health and substance-use services; and
- mobile integrated crisis response programs, which pair a police officer with a mental-health professional to respond to mental-health-related crisis call, with more to come.

Involuntary care

The Mental Health Act currently states that a patient can only be involuntarily admitted if all of the following four criteria are met:

- the person suffers from a mental disorder that seriously impairs their ability to react appropriately to their environment, or to associate with others;
- the person requires psychiatric treatment in or through a designated facility;
- the person requires care, supervision and control in or through a designated facility to prevent their substantial mental or physical deterioration, or for their own protection or the protection of others; and
- the person is not suitable as a voluntary patient.

Physicians and nurse practitioners apply their clinical assessment to determine the appropriateness of involuntary admission. The vast majority of people with mental-health conditions access care voluntarily and are effectively treated on an outpatient basis. The Mental Health Act ensures access to care in situations where the person is unable to seek care for themselves due to a state of severe mental impairment.

Mental Health Act admissions occur at 75 designated facilities, including:

- 37 hospitals, which are designated as psychiatric units;
- 13 hospitals as observation units (which allow shorter-term admissions); and
- 25 provincial mental-health facilities (inpatient).

The total number of beds, which can be used for voluntary or involuntary admissions, within these facilities is 2,000.

In addition, the involuntary care beds at the Alouette Homes in Maple Ridge and the Surrey Pretrial Services Centre will open in spring 2025.

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