Nidus Personal Planning Resource Centre and Registry

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Personal Planning in BC:
Essentials and Case Law Updates

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Learning Outcomes

- About **Nidus** – how did we develop and what do we do?
- **Purposes** of the Representation Agreement Act (RAA)
- Thinking about **capacity/capability** differently
  - Section 7 vs. Section 9 Representation Agreements (**RA7 vs. RA9**)
  - capability approaches; authorities; safeguards; practice tips
- Legal/Financial Planning – Enduring Powers of Attorney **(EPAs) and RA7s**
- RA7s as an **alternative to committeeship**
- **Powers and duties** of representatives/attorneys and **relief** if acting improperly
- Discussing and documenting **wishes**
- **Case law update**
- *Time permitting: Healthcare **consent** regime, **TSDMs, Advance Directives***
- About the **Nidus Registry**

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Nidus

- Latin for "nest" – symbol of support & safety
- Set up in 1995 by seniors & disability groups after grassroots law reform - 2025 was our 30th Anniversary!
- Non-profit, charitable, public legal education and information (PLEI) organization – expertise in Representation Agreements (RAs)

Our Vision

Adults in BC exercise their right to self-determination* and have access to trusted support through personal planning should they need help with decision-making.

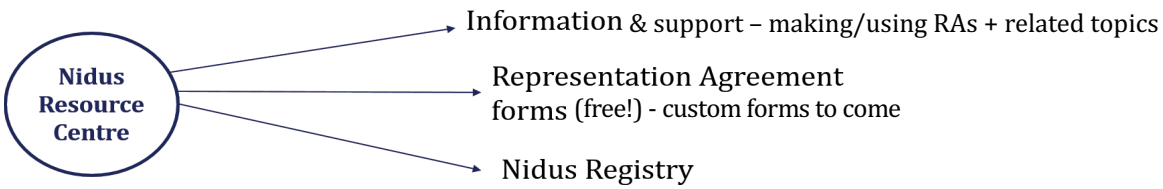
Our Mission

Make personal planning* widely known, actionable, and accessible for adults in BC.

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What do you do all day?



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Representation Agreement Act, RSBC 1996, c 405 (RAA) Purpose

- s. 2 - "The purpose of this Act is to provide a mechanism
  - (a) to allow adults to arrange in advance how, when and by whom, decisions about their health care or personal care, the routine management of their financial affairs, or other matters will be made if they become incapable of making decisions independently, and
  - (b) **to avoid the need for the court to appoint someone*** to help adults make decisions, or someone to make decisions for adults, when they are incapable of making decisions independently."
- Result of **grassroots law reform**; for adults with cognitive difficulties: disabilities from birth/childhood, advanced dementia, stroke
- *Committeeship / Adult guardianship

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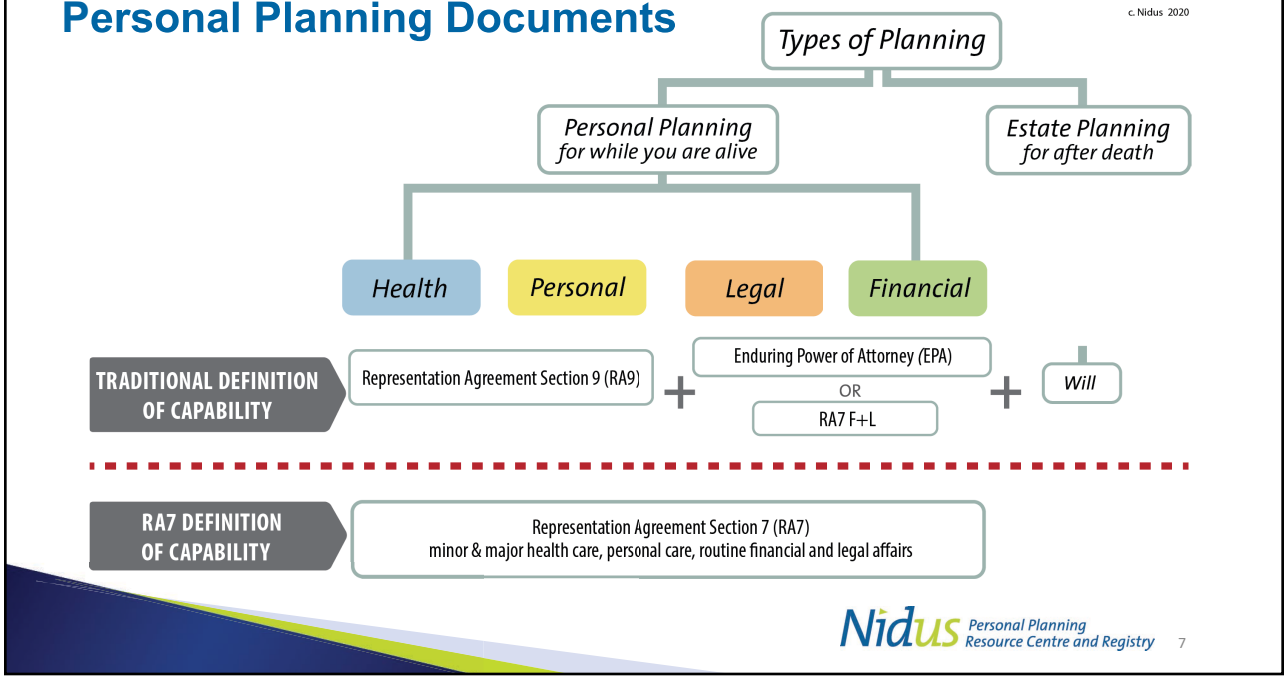
Hansard – 2nd Reading – July 7, 1993

- *"A significant benefit will be derived from this bill. By using representation agreements it will be possible to avoid the costly process of applying to court for the appointment of a person to make decisions on behalf of an adult who has become incapable. Therefore, a critical factor in the success of this new representation agreement scheme will be the number of individuals who choose to plan in advance. To this end, it is the intention of the government to educate as many people as possible regarding this option."*
  - Hon. Colin Gabelmann, NDP Attorney General, MLA for North Island
- *"The objectives of this bill were to confirm the right of adults to self-determination and the ability to remain independent as long as possible, to establish a new system of decision-making and to provide opportunities for pre-planning."*
  - Hon. Clifford Serwa, Social Credit MLA for Okanagan West
- *"...this bill is quite different. It is one that I believe should be taken notice of, and not only by members of this chamber. I would go so far as to say that this bill provides British Columbians with a model of how to go about articulating a policy and bringing that policy into legislation. I'm most impressed with the various communities that have been involved in this particular bill... my colleagues and I would like to support the bill. The proposed legislation is very balanced between protecting and enhancing the rights of individuals and the concerns expressed by the community."*
  - Hon. Allan Warnke, Liberal MLA for Richmond-Steveston

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Personal Planning Documents



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RA9 (Traditional) Approach to Capacity

- **Understand the <u>nature and consequences</u> of the RA9 – cognitive test – s.10 RAA**
- Medical capacity assessment is not required; it is a **legal** test.
- Do they understand:
  - **What the RA9 is?** That they are giving the representative the authority to make certain decisions for them, when needed? That the RA9 can be used when they are no longer able to make those decisions themselves?
  - **What can happen due to making the RA9?** That (depending on what is included), the representative could:
    - physically restrain, move and manage the adult and authorize someone else to do those things, if necessary to provide personal care or health care to the adult, even if the adult objects at the time?
    - decide where the adult lives and with whom, including whether they should live in a care facility?
    - decide who the adult has contact with?
    - give or refuse consent to health care even though the adult refuses at the time?
- Same test for capacity to revoke an RA9

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EPA (Traditional) Approach to Capacity

- Very specific, legislated, cognitive test **– s.12 BC Power of Attorney Act (POAA)**
- Medical capacity assessment is not required; it is still a **legal** test.
- Adult may make EPA unless incapable of understanding the nature and consequences of the EPA, that is, adult cannot **understand <u>all</u> of the following:**
  - (a) the **property** they have and its approximate **value**;
  - (b) the **obligations** the adult owes to the adult's dependants;
  - (c) that the adult's attorney will be able to do on the adult's behalf **anything in respect of the adult's financial affairs** that the adult could do if capable, except make a will, subject to the conditions and restrictions set out in the EPA;
  - (d) that, unless the attorney manages the adult's business and property prudently, their **value may decline;**
  - (e) that the attorney might **misuse** the attorney's authority;
  - (f) that the adult **may, if capable, revoke** the enduring power of attorney;
  - (g) any other prescribed matter *[none at this time]*.
- Same test for capacity to revoke an EPA

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RA7 Approach to Capacity

- Result of **grassroots law reform**; for adults with cognitive difficulties: disabilities from birth/childhood, advanced dementia, stroke
- No bright-line test; medical capacity assessment not required.
- Not based on cognitive ability to understand, unlike the traditional test.
- S. 8 RAA - May make RA7 **even if incapable of**:
  - Making a contract;
  - Managing health care, personal care, legal matters, or routine financial affairs (i.e. <u>even if there is a medical assessment saying they are incapable of managing X and Y, can still sign RA7</u>)
- Therefore, an alternative to adult guardianship/committeeship
- **Inclusive** definition – about retaining dignity & respect
- Same approach to capacity to revoke (and replace) an RA7
  - NB: cannot revoke an RA9 while only capable to make/revoke an RA7

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RA7 Approach to Capacity cont'd

- **Every adult is presumed capable** of making a RA and of making decisions, until the contrary is demonstrated (i.e. in court) – s. 3(1) RAA
- **An adult's way of communicating with others is not grounds for deciding that they are incapable** – s. 3(2) RAA. Some people communicate through their behaviour - gazes, reaching, eye contact, frowns, clamping lips
- In deciding if an adult is incapable of making RA7, **all relevant factors must be considered –** s.8 RAA. **Example factors, not criteria**:
  - Whether the adult communicates a desire to have a representative;
  - Whether the adult demonstrates choices and preferences and can express feelings of approval or disapproval of others;
  - Whether the adult is aware of the effect of making an RA7;
  - Whether the adult has a relationship with the representative that is characterized by trust.

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RA7 Practice Tips

- Capacity to instruct counsel > capacity to make an RA7
  - professional questions about ability to take instructions to prepare and execute an RA7, depending on the person and their circumstances
- **No legal professional required to make an RA** – intentionally low barrier
- Legal professionals can direct families to info and facilitate making an RA7 on their own
  - First RA? Decision Tree and RA Kits at nidus.ca/party
  - OR go straight to forms here: nidus.ca/ra-forms/
  - CLBC eligible? Nidus over-the-phone 1-on-1 support (see later slide)
  - Nidus also answers questions from legal professionals, financial institutions, anyone!
  - **If you are thinking about seeking Committeeship, consider an RA7 too.** Could it work for your client to have legal authority for the decisions needed? RA7 preserves legal personhood. Representatives are obligated to consult and comply with (reasonable) current wishes.

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RA9 vs. RA7 authorities

- **Section 9 Representation Agreement (RA9)**
  - Health care & personal care only (make Enduring Power of Attorney for finances)
  - May authorize:
    - Refusing consent to health care necessary to preserve life (e.g., withdrawal of life-support)
    - Consent to physical restraint despite objection by adult, if nec to provide personal/health care
    - Consent to more specialized/experimental medical procedures listed in s.34(2)(f) of HCCCFA Act
    - Temporary care & education of minor children or others cared for/supported by the adult
  - Some authorizations must be expressly stated in the document - review legislation when drafting

- **Section 7 Representation Agreement (RA7)**
  - Routine management of financial affairs - limited and subject to safeguards - (see next slides)
  - Legal affairs - obtaining legal services, instructing counsel to commence proceedings (except divorce) or to continue, compromise, defend or settle
  - Health care - May **not** authorize those aspects noted above in RA9s
  - Personal care - May **not** authorize those aspects noted above in RA9s

- ***Mental Health Act*** carve out – Rep (whether RA9 or RA7) not involved in mental health treatment decisions if adult is involuntarily admitted - s.11 RAA – at issue per recent case (Council of Canadians with Disabilities - see later

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RA7 Safeguards – "Routine Finances"

- Defined in RA Regulation
- Nidus' Snapshot & Comparison fact sheets for more detail

FINANCIAL AUTHORITIES	RA7 F+L	EPA
RA7 routine finances and EPA cover SAME authorities		
Bank matters - e.g. open/close an account, deposit/withdraw funds.	Yes.	
Renew or make payments on existing loans (like mortgage).		
Obtain financial benefits or entitlements. Pay bills.		
Make investments according to the Trustee Act. Manage and dispose of adult's investments.		
Act as the Account Holder for a Registered Disability Savings Plan.		
Deal with CoOp Housing, renting, mobile housing (not registered with Land Title - is called chattel).		
Cancel credit cards. Deal with utilities (cable, electricity, gas)		
Sell adult's motor vehicle(s).		

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- Nidus' Snapshot & Comparison fact sheets for more detail

FINANCIAL AUTHORITIES	RA7 F+L
	OTHER Financial Authorities
Deal with real estate (Land Title) on adult's behalf. For example, deal with: • Buying and selling real estate property - including Strata, laneway housing • Taking out a NEW mortgage. • Builders' liens. • Mineral and agricultural rights. • Leasing your real estate property for a term of 3 years or more.	**No, cannot buy or sell real estate on adult's behalf** (but could rent real estate - make sure lease is less than 3 years).
Act on adult's behalf as a director or officer of a corporation adult owns or serves on.	**No.**
Take a fee-for-service when carrying out duties.	**No**, unless authorized by Supreme Court of BC
Use adult's money or property for the benefit of themselves or others— such as minor children. This could involve borrowing/ lending adult's money, transferring ownership of adult's vehicle or real estate, or making gifts.	**No.**

Take more risks in making investments than allowed by the Trustee Act.	**No.**
Take out a new loan on adult's behalf, or guarantee a loan for someone else.	**No.**
Apply for and/or manage pension entitlements and benefits held in a jurisdiction outside BC (another province/territory or country).	The RA7 is a type of agency authority (like an EPA) but most jurisdictions outside BC use terms with power of attorney in their legislation and therefore may not accept the RA7.
Deal with real estate property in a jurisdiction outside BC (another province/territory or country).	**No.**
Use adult's credit card.	**No**

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RA7 Safeguards cont'd

Monitors – ss.12 & 20 RAA

- If an RA7 includes authority for routine finances, a monitor must be appointed, unless:
  - only representative is adult's spouse OR
  - 2+ reps who must make unanimous decisions about finances (practical?)
- Obligated to ensure representative(s) doing their job / following duties
  - safeguarding the adult's wishes, preferences, and values,
  - financial oversight if that is one of the authorities
- Powers to require disclosure by representatives
- Concerns can be brought to Monitor – obligated to investigate, and if concerns persist, obligated to report to PGT
- Can be optionally included in RA9s

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RA7 Safeguards con’td

Signing and Execution Procedures

- **Certificates** – s. 5(4) & 12(5) RAA
  - **Each Rep and Alternate and Monitor** signs & completes a Certificate before the RA7 is considered complete & valid
  - Certify they have read and understand the duties and responsibilities applicable to them in the RAA, and the objection sections of the RAA
- **Witnesses** must meet qualifications and restrictions, be present at signing (also applies to RA9s), and complete a Certificate – s.13 RAA

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RA7 Safeguards cont'd

- **Restrictions on Appointment of Representatives** – s.5(1)&(1.1) RAA
  - Persons who are compensated for providing health care or personal care services to the adult (e.g. paid staff) cannot be named as rep or alternate unless they are the spouse, parent, or child of the adult
    - No exception for siblings
    - Conflict of interest concern - Also applies to RA9s
    - NB: re doctors/providers on private retainer!
  - Age requirement – rep must be 19+ at time of appointment
- **Ethical Decision-Making Process** – s. 16 RAA – see "Duties of Representatives" slides - also applies to RA9s
- **PGT Oversight** – s.30 RAA - see "Remedies" slides - also applies to RA9s

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Duties of a Representative – s.16 RAA

- **General duties:** A representative must act honestly and in good faith, exercise the care, diligence and skill of a *reasonably prudent person**, and act within the authority given in the RA.

  *what is reasonable depends on the facts of each case, including the likelihood of a known or foreseeable harm, the gravity of that harm, and the burden or cost which would be incurred to prevent the injury.

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Duties of a Representative cont'd

- **Best Interests is a last resort**
- The representative must:

  (1) consult (to a reasonable extent) with the adult to determine **current wishes**, and comply with those wishes if it is reasonable to do so
  (2) or, depending on the situation, comply with those instructions or wishes **expressed while capable**.
  (3) If these specific instructions or wishes are not known, the representative must act on the basis of **known beliefs and values**
  (4) or if unknown, **best interests**.

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Duties of a Representative cont'd

- **Accounts and Records:** regarding the exercise of their authority, which may be requested by the adult, the monitor, and the PGT.
- **Keep assets separate:** If the rep is authorized for finances, they must not, for example, open a joint account with the adult.
- **Cannot delegate decision-making duty** – except to qualified investment specialists re: investment matters
- **Must not disclose** information more than necessary

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Documenting Wishes – Best Practices

- **Do not include wishes in RA** – Only person with a duty to interpret and apply your wishes is your representative/alternate (knows you best; had discussions, etc.)
- **Discuss wishes, beliefs, values** in advance with your Reps and alternates – allows Q+A; receive instructions from you directly
  - Discussion Tools on Nidus Website
  - Conversation Starters to plan an RA
  - Values and Beliefs Discussion Guide
  - You may use Nidus resources in your practice with credit to us!
- If you wish, **document** wishes in a separate letter/memo addressed to Reps
  - Review and discuss regularly and update as needed
  - Consider documenting communication styles / how adult expresses preferences if this is non-traditional or non-verbal – Nidus example here and further tips here
- Goal: **Dialogue** between medical practitioners and well-informed Representative when a decision needs to be made. The dialogue can focus on the current circumstances and representative can bring forward your wishes as they apply, and as they are known to them.

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EPA - Roles & Restrictions

- **Attorney** – individuals, PGT, certain banks/trust companies may act – s.18 PoAA
  - Persons who are compensated for providing health care or personal care services to the adult (e.g. paid staff) cannot be named as attorney or alternate unless they are the spouse, parent, or child of the adult
    - NB: payment for legal/financial services permitted
  - Age requirement – if atty appointed before adulthood, cannot act until adulthood (19+), but NOTE the Land Title Office requirement of a statutory declaration of the attorney indicating they were at least 19yo at time EPA signed
- **Witnesses** must meet qualifications and restrictions, be present at signing – s.16 PoAA
  - 2 lay witnesses or 1 lawyer/notary witness
  - witness must be an "officer" (usually a BC lawyer or notary) to be effective for Land Title purposes

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Duties of an Attorney – slightly different

- **Power of Attorney Act, s. 19**
  - A representative must act honestly and in good faith, exercise the care, diligence and skill of a reasonably prudent person, and act within the authority given in the EPA.
  - When managing and making decisions about the adult's financial affairs, an attorney must act in the adult's **best interests**, *taking into account* the adult's current wishes, known beliefs and values, and any directions to the attorney set out in the enduring power of attorney.
    - To the extent reasonable, meet adult's personal/health needs
    - Invest only in accordance with Trustee Act (unless EPA says otherwise)
    - To the extent reasonable, foster the independence of the adult and encourage the adult's involvement in any decision-making
    - Not dispose of property in will unless necessary to comply with their duties;
    - To the extent reasonable, keep the adult's personal effects at the disposal of the adult.
  - Attorneys are required to keep prescribed records and produce the prescribed records for inspection and copying at the request of the adult.

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Concerns & Remedies

Concern in relation to RA:

1. Talk to the rep, alternate, adult, then monitor
2. Monitor obligated to investigate (w powers) and if concerns persist/cannot resolve, obligated to report to PGT
3. If speaking with the above has not resolved issues: PGT's office is available for complaints. Have the power to investigate concerns and take emergency actions – see s.30 RAA

Concern re: EPA: very similar approach (minus monitor).

Remedies available to PGT include (ss. 30-34 RAA; ss. 34-37 PoAA):

- an order changing or revoking an RA/EPA
- an order cancelling all or part of an RA/EPA
- appointing a monitor (for RAs only)

OR PGT may recommend that another party seek such orders (e.g. family member, health authority, etc.)

We published two recent articles on these topics:

- Worried About a Representation Agreement or a Representative? - Nidus
- BC Supreme Court releases rare decision about removing and replacing a representative who fails to follow their duties - Nidus

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Cancelling/Revoking

- **RA:**
  - **Same capability requirements as making** (RA9 vs. RA7)
  - Notice of Revocation – sample version by Nidus
  - Must **deliver written Notice** to each person named in the existing RA
    - There are specific ways that the Notice can be delivered – see RA Regulation
- **EPA:**
  - **Same capability requirements as making**
  - Notice of Revocation – sample version by Nidus
  - Must **deliver written Notice** to each person named in the existing EPA
    - Manner of delivery not specified, but consider issues of proof when delivering
- Notices can be registered with the Nidus Registry

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Health Care Consent

- Health care: "anything done for a therapeutic, preventative, palliative, diagnostic, cosmetic or other purpose related to health." – *Health Care Consent and Care Facility Admission Act* (HCCCFAA)

- **Informed Consent** - s. 6(e) - health care provider must give the adult the information a reasonable person would require to understand the proposed health care and to make a decision, including:
  - (i)the condition for which the health care is proposed,
  - (ii)the nature of the proposed health care,
  - (iii)the risks and benefits of the proposed health care that a reasonable person would expect to be told about, and
  - (iv)alternative courses of health care

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Advance Directive (AD)

- a written document where you may give or refuse consent to specific health care matters (speak directly to the healthcare provider)
- requires traditional capacity and are signed like Wills (2 witnesses)

- **must clearly articulate and apply to the specific health care situation that arises at the time consent is sought -** *HCCCFAA*, Part 2.1
  - Thus, can be limited in use - see social science; E. Clough article
  - RA > AD (if the adult has made both)
    - but AD would be considered "instructions or wishes expressed while capable" to be taken into account per s.16 RAA
    - Adult may switch presumption - state in their RA that a health care provider may follow AD without consent of representative
  - **If client wants AD, Nidus recommends AD + RA9**

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Health Care Decision Hierarchy

No determination of capability by healthcare provider

1. **Committee (of Person)** – patient already determined to be incapable by Court
2. **Patient/Representative** appointed in **Representation Agreement**

If health care provider finds you incapable of informed consent:

3. **Representative** appointed in **Representation Agreement** (was not already in effect)
4. **Advance Directive** – if it applies to the specific situation at hand
5. **Temporary Substitute Decision Maker (TSDM)** – temporary and determined by statute: Spouse > Adult Child > Parent > Sibling > Grandparent… etc.
   - Must be an adult, have been in contact within past 12 months, and have no "dispute"
   - No authority for personal care decisions, no authority in emergency situations
   - No general authority to refuse life-supporting health care

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Case Law Update

Vancouver Island Health Authority v T.W., 2025 BCSC 2505

- Nidus article on the case
- 'death plan' case
- Court applied "Stockall factors" (committeeship case law) when decided to remove and replace Representative (patient's husband) for not following duties
- also included remedies under the *Adult Guardianship Act* available to a health authority – good review of the intersecting (and sometimes confusing) legislation available to help vulnerable clients

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Case Law Update cont'd

Dwyer v Interior Health Authority, 2026 BCSC 567

- Procedural decision, but significant
- IHA applied to strike (novel) negligence and other claims brought by self-represented husband and Representative of patient – brought on behalf of patient's estate (she had died since) and on his behalf in Representative capacity
- Patient spoon-fed lumpy porridge/puree by facility despite refusal by Representative - patient would choke on and sometimes refuse this diet herself - Representative consented to a palliative diet only. Representative went away for a respite break, and returned to find instructions were not followed.
- Patient had documented very specific wishes while capable in an Advance Directive
- Justice Sharma did not strike all claims. Struck those brought on behalf of patient's estate, but allowed plaintiff (Rep husband) to revise NOCC in respect of negligence and damages against him as Representative
- One to watch.

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Case Law Update cont'd

Council of Canadians with Disabilities v British Columbia (Attorney General), 2026 BCSC 1416

- Nidus article on the case
- ruled that BC's practice of forcibly treating involuntary psychiatric patients is unconstitutional
- deprives these individuals of their fundamental health care consent and decision-making rights - s. 7 – life, liberty, security; s.15 - equality
  - *Mental Health Act* – involuntarily admitted patients' treated without assessing their capacity to consent to proposed treatment
  - if not capable to consent, regime does not allow any say to validly appointed, available representatives or other default decision-makers (TSDMs)
  - treatment could proceed despite refusal in a valid Advance Directive made when the patient was capable
  - those with mental health condition treated differently from those without (or with only physical health conditions) to the former's detriment
- judgment suspended for 6 months to give legislature time to respond
- Court commented that BC's regime was an outlier in Canada

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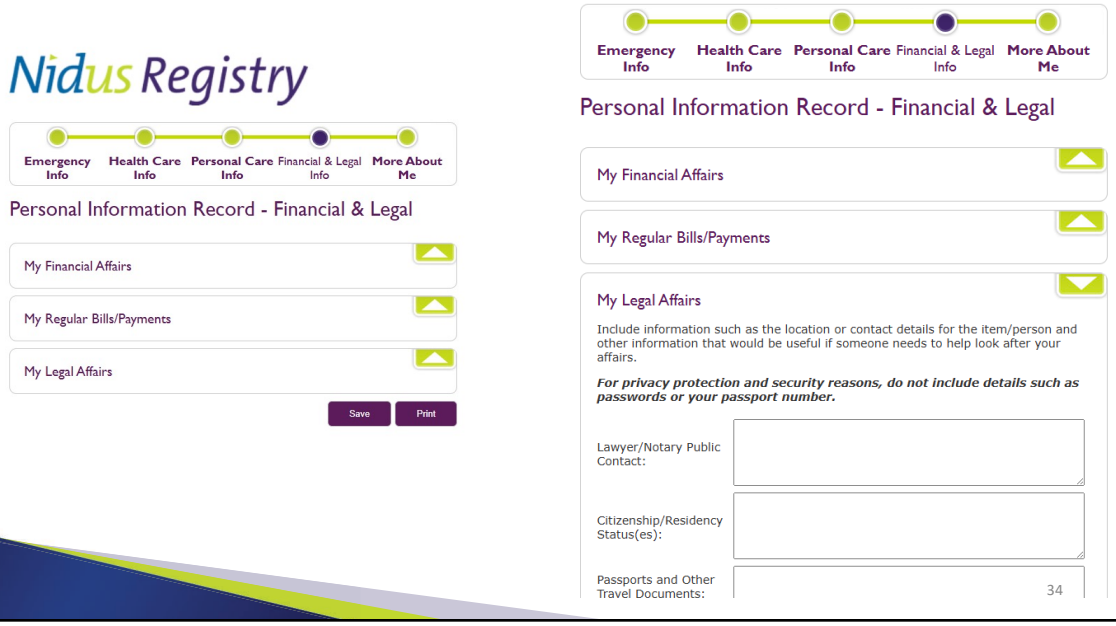
Nidus Registry - Online Repository

- The Nidus Registry helps with **communication** (registering is optional, but useful)
- **Register more than just RAs!**
  - Register info, location and PDF copies of many documents! EPAs, Wills, Trusts, Insurance documents, medicine lists, among others
  - Personal Information Record – can be updated without additional fee
- Arrange **access**
  - share on a document-by-document basis with family or professionals
  - choose to permit access to health agencies and financial institutions

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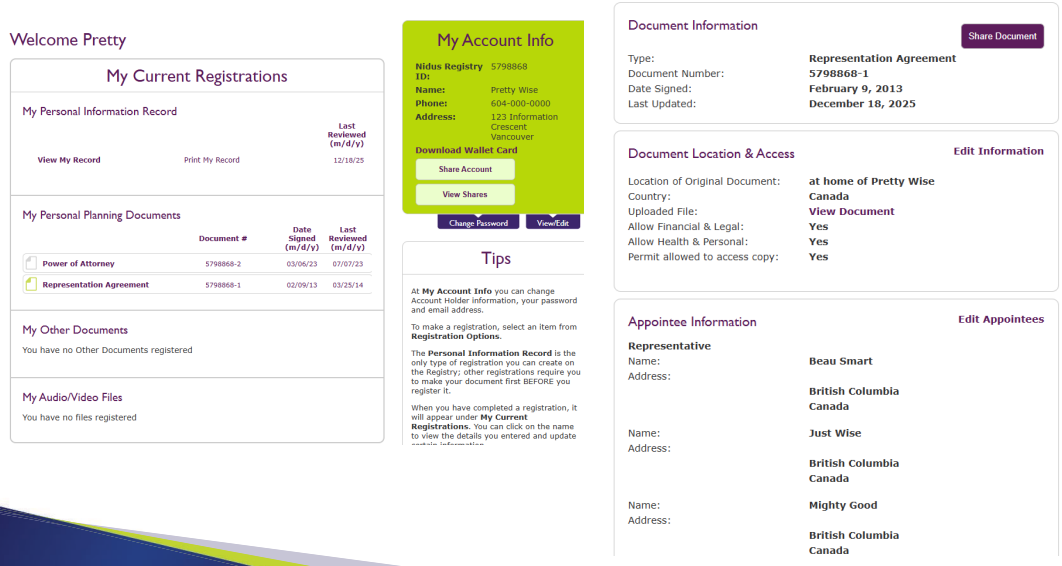
Nidus Registry - Personal Information Record



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Nidus Registry – Registering / Sharing Docs



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Nidus Registry - Online Repository cont'd

- **Like a Client Data Room** you don't have to host/maintain
- **Affordable** one-time fees
  - $25 to create an account (includes 1 doc registration)
  - $10 each proceeding document or revocation registration
- Become a Nidus **"Registration Agent"** - lawyers/notaries can register documents on behalf of their clients
  - 20% discount on fees
  - Request an account here or email registry@nidus.ca for more info on becoming a Reg. Agent
- Want to **try it out first**? Email us and we can provide you access to a test account to explore it as a user (your client)

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More help from Nidus



- E-mail support – info@nidus.ca
- In-Person support with volunteers (Interior BC, with more locations coming soon)
- Video appointments with volunteers
- Phone support for Community Living BC (CLBC) service-eligible individuals and their supporters

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RA7 example – One of the very first



- Frances was a woman with no family and very limited ability to communicate – she was supported by the Community Living Society. She lived in a home with two other women. **This is the story of her Representation Agreement, one of the first in the province.**
- Frances was ill with cancer when Lynn, a community services broker, met her.
- Already had a serious health crisis because no one was available to consent.
  She had difficulty understanding the doctors and they did not understand her way of communicating either.
- Without family or close friends, her group home staff (who knew her well) had no legal authority.
- After learning about Representation Agreements and the different roles in them and the decision-making framework, the group started by identifying everyone involved in Frances' life and considering each person's role in supporting her. They used a worksheet like the Planning Circle Exercise. Based on that discussion, Frances' RA was drafted and signed.
- Lynn had found two people who had known Frances for many years and were willing to become her personal supporters – a childhood friend and the mother of another person in Frances' home who had always looked out for her – they would be her joint representatives. Lynn would be the monitor.
- To ensure Frances was directing the care decisions, Lynn contacted someone with experience in nonverbal methods of communication who helped develop an album. The album included photos of Frances' personal and staff supporters including the other residents of the group home. A picture script enabled discussion with Frances about the issues involved.
- If a decision needed to be made, the representatives and the home staff worked together to determine what Frances wanted. Asked themselves: "If Frances could communicate verbally, what would she tell us to do?" "How would Frances want to spend her last days? How can she be supported with dignity and respect?"

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RA7 example



- "It helps to anticipate situations and cover as many bases as possible ahead of time," said Lynn. These included palliative care, pain management, dying at home, and a 'Do Not Resuscitate' order. Frances made it clear that she was most comfortable in her own home. "We needed to think ahead how we could honour that. We had to think of how this might affect the other residents."
- Good communication was vital. "There has to be a clear flow of information… not just about big things, but about little details too," said Lynn. As the monitor in the RA, she took it upon herself to help with communication. Lynn gathered information, passed it on, and made sure that everyone was carrying out their role and duties according to the Agreement. Nidus believes that having so many people involved is a great advantage, and is what keeps us safe. The larger group acts as a safety net, and the representatives don't feel alone or burdened by the responsibility.
- On September 1, 1995, Frances died peacefully in her home surrounded by people who cared about her. The RA7 had ensured that her last wishes were carried out.
- A few weeks after Frances's memorial service, her representatives and the other supporters who assisted them came together to reflect on their experience. The process of making and living the RA7 with Frances had been a powerful one. "It kept us so focused on Fran," everyone agreed, "and it gave us the confidence and the credibility to speak up for her. The Representation Agreement will be her legacy."

This story is about one of the first Representation Agreements (RAs) made in British Columbia. The RAA was passed in July 1993 but was not yet in effect. With the support of the Representation Agreement Task Group of the Community Coalition, citizens tried out RAs based on the new legislation. Their experiences provided invaluable knowledge that has shaped the law and practice of RAs. We are grateful to these leaders. Find other stories and videos here.

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Nidus is a non-profit and charitable organization that provides information and resources on BC legislation and has expertise in Representation Agreements. Our mailing office is located on the traditional and unceded territory of the Semá:th First Nation and Mathekwi First Nation, part of the Stó:lō Nation.

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