# **HANSARD**

## **NOVA SCOTIA HOUSE OF ASSEMBLY**

### **COMMITTEE**

ON

## **PUBLIC ACCOUNTS**

Wednesday, March 23, 2016

LEGISLATIVE CHAMBER

**Department of Community Services Service Delivery Funding** 

### **Public Accounts Committee**

Mr. Allan MacMaster, Chairman Mr. Iain Rankin, Vice-Chairman Ms. Margaret Miller Ms. Suzanne Lohnes-Croft Mr. Brendan Maguire Mr. Joachim Stroink Mr. Tim Houston Hon. Maureen MacDonald Hon. David Wilson

[Mr. Terry Farrell replaced Ms. Margaret Miller] [Ms. Marian Mancini replaced Hon. Maureen MacDonald]

In Attendance:

Ms. Kim Langille Legislative Committee Clerk

> Mr. Gordon Hebb Chief Legislative Counsel

Ms. Nicole Arsenault Assistant Clerk, Office of the Speaker

Mr. Terry Spicer Deputy Auditor General

#### **WITNESSES**

#### **Department of Community Services**

Ms. Lynn Hartwell, Deputy Minister
Ms. Nancy MacLellan, Associate Deputy Minister
Ms. Dale MacLennan, Executive Director, Finance and Administration



#### HALIFAX, WEDNESDAY, MARCH 23, 2016

#### STANDING COMMITTEE ON PUBLIC ACCOUNTS

9:00 A.M.

#### CHAIRMAN Mr. Allan MacMaster

#### VICE-CHAIRMAN Mr. Iain Rankin

MR. CHAIRMAN: Order, I call this meeting of the Public Accounts Committee to order. We have with us today the Department of Community Services to discuss service delivery funding.

I would ask members to ensure that their phones are on silent. We will begin with introductions, starting with Mr. Maguire.

[The committee members introduced themselves.]

- MR. CHAIRMAN: Ms. Hartwell, would you like to begin with some opening comments, and also introduce your colleagues.
- MS. LYNN HARTWELL: To my right I have Nancy MacLellan who is the Associate Deputy Minister of Community Services, and to my left I have Dale MacLennan who is our Chief Financial Officer, Executive Director of Finance for the Department of Community Services.

Thank you so much for the opportunity to be here. We are always pleased, I am always pleased to be able to talk about the work we do at Community Services, particularly to be able to talk about some of the transformative work we have underway. We are also looking forward to answering your questions about service delivery funding.

We did wonder exactly what the focus of service delivery funding was so we've prepared ourselves for a broad range of questions with particular emphasis, we think, on outcomes and accountability which is one of the pieces that is a significant focus for us right now.

The work going on at Community Services, it is not overstating it to say that we are really at an exciting time and we have an incredible opportunity to change lives and to change outcomes for Nova Scotians. As you know, the department has a wide reach. We serve Nova Scotians who are often the most vulnerable, who need support, and who really need a system that can help them change their lives and be safe.

We are at a place where a redesign of that social safety net is one that is profound. We are looking at all our programs, and it's not an overstatement to say that it's probably the largest redesign of that social service safety net since 1967 when the Canada Assistance Plan came in. This is the first time that we're looking at all our services and really designing purposefully what that social service safety net needs to look like.

I think the system we have now, as people know, is one that has been a bit piecemeal, inherited through various municipal transfers, various pieces of legislation tweaked at different times. We really are embarking on a period of several years where we're looking at all the programs and services working together across all areas, so it's a really exciting opportunity.

The reason we're doing that is pretty simple, it's to better serve Nova Scotians who need the support of the department. We are focused entirely on moving to an outcomesdriven model of both program design and service delivery. We have spent some time on being clear on what the outcomes are that we're looking for clients so I'll just very briefly name the five outcomes that we've identified: we want clients to have control over their own lives, we want clients to have the ability to meet their basic needs, we want clients to be safe from abuse and violence, we want clients to be included in the community, and we want clients to be able to participate in the workplace.

In order to achieve that we've adopted some principles about how the department needs to work. We know that we need to have a sustainable, consistent service; we have to have administrative simplicity; we have to have streamlined and integrated service offerings so people can navigate our system; and we need to have both transparency in how we work and empowerment. I use the word "empowerment" very carefully; we currently have a system that is not really always an empowering system and we want a system that is empowering both to clients, and to staff and service providers who are working so hard to make a difference in the lives of Nova Scotians.

I will say that just to touch on staff, we are the largest service delivery department, direct service delivery department in government. We have offices across the province, close to 1,800 staff. They are really quite incredibly dedicated to improving the outcomes for Nova Scotians, to making a difference. Most of them came into this work because they

had a calling and wanted to be making a difference in people's lives. With all of the transformation and change and pieces of work that we have underway, it's really gratifying to hear that we have staff who are with us on the journey, who want to be part of it, who know that doing things the same way is not necessarily going to get the outcomes that we want and who are up for the challenge. It is really quite gratifying to have the conversations with staff about that.

I would take that further to the service providers that we work with. We fund well over 400 organizations, some of which are - a phrase that we use in the department - carrying the mail for us. They are doing core legislated work on our behalf. Without them, the department would not be able to get some of the outcomes that we're looking for. So we do have a broad service delivery network that we want to improve our relations with, and we want to make sure that we're all working and striving towards the same outcomes.

With the indulgence of the Chair, I would like to just take a quick moment to point out that we have in the gallery our Director of Policy and Planning - her name is Brenda Murray. Brenda is going to retire after 29 years of service with the Department of Community Services at the end of April - she has her hand in front of her face because she's upset that I've mentioned her. I want to say that Brenda to me epitomizes sometimes the behind-the-scenes public servant who is not doing front-line work, but Brenda has been the holder of the vision for social equality, better outcomes for children, youth and families. Through the 29 years, she has often been the conscience of the department and reminding us of what's important and how we need to focus on doing the right thing. So her leaving the department will be a tremendous loss for us. We obviously wish her the best, but you will see a lot of the work of Brenda Murray for 29 years. You'll get to hear a little bit about that today.

As I said, we are the largest service delivery department. We have an operating budget of just around \$915 million - 85 per cent of which goes out the door directly to either clients or to service providers. We're happy to answer any questions you have on that.

We have, as I've said, the network of staff across the province largely divided into three program areas. We have Employment Support and Income Assistance; our Disability Support Program; and our Child, Youth and Family Supports. We also have Housing Nova Scotia, which is linked to our department. I'm the deputy for housing and our minister is the minister for housing as well.

So happy and looking forward to answering your questions on service delivery funding, whatever those might be, and also happy to explain and expand more on the transformation that we're undergoing and share some of the successes that we have. Thank you.

MR. CHAIRMAN: Thank you very much. Mr. Houston.

MR. TIM HOUSTON: Thank you for the introductory comments. I was looking at the strategic outcomes of the department and one of them is to "improve the educational, justice, health, social and economic outcomes of children in care and children of income assistance recipients".

It's the "in care" part that I would like to focus on this morning. I think I would extend that from past just children in care to people in care. I think some of those might fall under your Disability Support Program arm that you talked about. So that's where I'll kind of be focusing.

How many people are in the care of the province? Do you have a number?

MS. HARTWELL: There is a legislated differentiation between children in care where we have apprehended those children and they're in the care of the minister - so we stand in a parental relationship - compared to people with disabilities who are in our residential facilities who we provide care for, but we're not standing as the parent or the guardian to those folks, so just to make that differentiation.

We have roughly 1,500 in care and I can get you the breakdown of how many are in permanent care and how many are in temporary care. Similarly, we have just over 3,000 people who receive support through our Disability Support Program. The majority of those folks, though, live in the community and so may not be receiving 24/7 care, they would be receiving - the rest of the family could be receiving respite or they could be living in their own apartment. I can get you a breakdown on those numbers.

MR. HOUSTON: No, I think that's fine, I appreciate that distinction. So there would be 3,000 people who you would say the province is providing care for - I think that's the way you described it. So the 3,000 is what I want to talk a little bit about.

If the number is 3,000, do you know how many people are on a waiting list to receive care from the province?

MS. HARTWELL: I've got the right sheet so I can tell you the exact numbers. We have 3,689 people who are in community-based options and 1,606 people who are in residential placements. Then there are a further 1,990 who are in day programs. They aren't in residential placement but they are served by that program so I don't want to leave them out.

We currently have a wait-list of around 1,100 and of those, 380 of them are receiving no service. The rest are receiving a service but it may not be the service that they would choose so they've asked to be on a wait-list for a different type of service.

MR. HOUSTON: Okay, I'm trying to jot down the numbers. There were 3,689, I think, in community-based options?

MS. HARTWELL: That's right.

MR. HOUSTON: And what was the 1,600?

MS. HARTWELL: Who are in what we call residential placement. They are in a place where they are probably receiving care 24 hours a day, seven days a week.

MR. HOUSTON: Okay, so that's 5,200 people and 1,900 under day programs. So of the 5,200, those people would be in small options homes and group homes for the most part. Is that fair to say?

MS. HARTWELL: We have a continuum so of the 3,600, the majority of those people would actually be living with a family member and that family member would be receiving respite. The next group of people would be living in apartments on their own and they are receiving support in their own apartment.

We also have a program which is alternative family support, where they could be living with another family who is providing them with care. Then also in that would be small options that you've mentioned. Small options would be included in a community-based care model.

In the group homes, depending on the size, largely we count group homes in the residential side because usually they're a bit more structured.

MR. HOUSTON: Would it be fair to say that there would be 1,600 Nova Scotians in the group home-type thing, plus a portion of the 3,600, to maybe 2,000 altogether. I'm just trying to make sure I understand exactly where the province is providing care and how that kind of lays out.

I guess what I would say and what I'm trying to understand is, if the number is 1,600 or if it's 2,000, how many service providers are providing those spaces? How many group homes, how many small options homes?

MS. HARTWELL: I'll give you a bit more of a breakdown. In the community-based options we have 40 per cent of the people with their own families, as I mentioned; 14 per cent are living independently; 13 per cent are with small options and that is provided with an external service provider and then only 3 per cent are with the alternative family support I mentioned.

For the residential, in the group home and developmental residence, which is a bit of a fine distinction but group homes around 8 to 12 people, 11 per cent; 7 per cent are in adult residential centres - examples would be Sunset in Pugwash; 8 per cent in residential care facilities; and 4 per cent are in regional rehabilitation centres, which would be Breton Ability in Cape Breton or Kings Rehab in the Valley or Quest here in Halifax.

Of those who are not with a family or living in their own apartment and they're receiving service from a service provider, we have 332 service providers who provide services, some small options. There are some that provide just small options. There are some that provide small options and a group home, so there's a bit of a mix.

MR. HOUSTON: So of those 332, would all of those be providing care for more than one Nova Scotian?

MS. HARTWELL: Yes.

MR. HOUSTON: So some might be three people and some might be 100 people, is that kind of what we're talking about in that group?

MS. HARTWELL: Yes.

MR. HOUSTON: So let's talk about that subset of 332 service providers. What's the relationship between the province and those service providers? So the province is paying each of those service providers a per diem per day, is that how that works?

MS. HARTWELL: Yes and no. We don't have one uniform funding model. It's part of our transformation that we are working towards. There are some service providers who receive block funding for some of their core activity and then we provide per diem or per bed costs on top of that. Then there are others that the per diem funding is the core of their funding. There are other service providers that we are providing funding to families and they're choosing to purchase respite. So it's a little bit of a mix.

I just want to clarify, we do have service providers where they are caring for one individual, but they are usually - I'm thinking of an example, like in Halifax we have RRSS, Regional Residential Services Society. They support people who live on their own, but they would have many contracts with us to do so. It really is a bit of a patchwork.

MR. HOUSTON: So those contracts that you just referred as people having many contracts, so when the province is paying a service provider a per diem, that per diem is attached to an individual. Is there an agreement between the province and the service provider for that individual that says the province will pay you this amount per day, here are your responsibilities in return to help that person meet the outcomes that you referred to in your opening comments? Is there an agreement for each of those situations?

MS. HARTWELL: Not at present. The current way that we fund is not an individual funding basis, which is one of the things that was recommended and discussed in the road map document, which was the document that was worked on between government and community.

Our current funding is very much based on the facility and the types of people - and I really don't like using types or classifications but that's the historical relationship - the

expected needs of the people that they're going to serve. So we do, unfortunately, fund according to beds. So if you have 12 beds, we would fund you for those beds. The needs of the clients going into those beds may change and so it's not unusual for a service provider to request additional staffing or additional money for whatever the needs are of that particular client.

Part of our transformation is to have a more robust, contractual relationship with service providers. We just went through a process - we call it our interim rate review. We're not in the transform state yet, but we're getting there. We had a group with a number of service providers to come in and work with us on how we could have a more transparent funding relationship with them so that their expectations are clear and our obligations are also clear. So we've entered into that for this year, which is a first step for us.

- MR. HOUSTON: You referred to more robust contractual, but is it true that there are many instances where the funding comes based on the number of beds, but there's no contract in place? Are there instances where there is no contract, where the province just sends the money?
- MS. HARTWELL: There are instances where we have an historical arrangement and we fund on the basis of that historical arrangement. So year to year we would fund based on the number of clients that they are licensed to have and we would provide funding on that basis. There's an exchange of letters, but there is not what we would call a formal agreement.
- MR. HOUSTON: You talked about meeting the outcomes of Nova Scotians and accountability for those, so I think those types of things would come from agreements and contracts, as opposed to just the number of beds you have here's the number of beds you have, so times that. What is the per diem, by the way?
- MS. HARTWELL: It varies, it's almost down to the individual client. Say if an individual client comes in with higher needs, we adjust the per diem.
- MR. HOUSTON: So you're working to get kind of agreements and understandings in place as to because the service providers are the ones who are really helping the people meet their outcomes, right? They're the people who are there every day with these Nova Scotians. So you're working to get those agreements in place, how far along would you say you're in like if there are 332 service providers providing care for 3,000 Nova Scotians, how many agreements would you say are in place today, as we sit here?
- MS. HARTWELL: What we've been doing, as I said, is we have developed with the service-provider community an interim funding arrangement which we call the interim rate review, which we've all agreed will form the foundation of funding until we have what we call a corporate agreement management in place, which we don't have. For this coming year that's our focus.

I wouldn't want to leave you with the impression though that there's not a significant amount of oversight because there is, not only of the facility's licence, with twice yearly visits and more if there's any need to, we also review financial statements and review them against the outcomes as we have them.

What we're missing, the piece we're missing - I don't want to oversimplify it and make it all about IT but there is a component of being able to pull reports and measure whether or not people have actually moved forward towards the outcomes that we're looking for so we're looking for a bit of a platform to do that and we want to have crystal clear outcome statements for all the service providers, many of whom have been providing services with the department in some way for decades, some of whom have been engaged in our transformation piece.

Our hope is that as we're entering into this coming fiscal year that we will be able to ramp up and build the platform that we need to have more robust agreements. We do have a number of service providers where there have been some funding issues so they've needed some capital investment, or they needed things, so we've put some of those things in place and we would have written agreements there. But what we're looking for is a much more robust, transparent, understandable contracting situation.

MR. HOUSTON: I would assume the service providers would welcome this type of clarity as to who is responsible for what. That seems to be a key missing piece I'm really interested in. I can see how these things develop over time. It's unfortunate that that's the situation today, that 3,000 Nova Scotians are in the care of service providers and it's not really well documented as to who is responsible for what. That's an unfortunate situation that we're in today, and not just the funding part of it, the outcomes part of it. You've acknowledged that that's key.

I'm interested in when you expect to get there, where we can get to a place where we say we are providing the care for 3,000 Nova Scotians, and will it be each one of them? The outcomes for each one of them is clearly understood by the service provider what their responsibilities are. How close to that are we now? Would you be able to give me a percentage of well, if there's 3,000, we have agreements that cover 10 per cent of them or zero per cent of them? The second part of that question is, when do we have 100 per cent coverage?

MS. HARTWELL: I would put the percentage of agreements in the sense that we want them to be complete, formal agreements, probably closer to 5 or 6 per cent. I would not in any way want to leave you with the idea that we do not have a lot of documentation. Documentation is not our issue, we receive significant reports from the organizations and we have staff around the province that are with them on a regular basis.

Our issue is that they are not consistently documented and we're not able to pull reports and not able to pull people to measure the system as a whole, from what they're reporting. If we want to find out how clients in residential care facilities are doing, for

example, how many of them have moved towards more independence, how many of them have social inclusion - we don't currently have systems that we can pull that information from. We would have to contact every provider, and frankly, probably every worker to have a conversation with their client. So what we're trying to do is to create an information system to bring to life all of the administrative data that we currently collect, which is a considerable amount.

We also have in the province, as you know, a Protection for Persons in Care Act, and so we do have a level of oversight. It's based on complaints, if people raise a concern, and referrals. Through that, over the past few years we've been able to really identify some - whether it's an individual issue, whether it's a training issue and I'm happy to say that the numbers of complaints under that have dropped dramatically, probably by about 70 per cent, in part because we have staff that are constantly going into facilities and checking.

MR. HOUSTON: So if a person in care has a set of outcomes that have been determined with their family and with their individual requirements and with an employee at Community Services - would you call that a caseworker at the Department of Community Services? Who is responsible for making sure that Nova Scotians are moving towards their outcomes? Because it's not documented. So at the moment, for the most part - maybe in 5 per cent of the cases it is. Is it the service provider who should be providing reports about individuals or does it then become the department's employee to go out and actively solicit feedback as to how people are doing? Whose responsibility is it?

MS. HARTWELL: The core responsibility for the outcomes for the client rests with a care coordinator in the disability program. That person has a caseload of a number of clients and would have worked with that client, their family, an advocate, and the service provider to develop a plan for that individual. So while there may not be a corporate agreement management between a service provider and government - that's our work in progress that we're working on over the next two years - there is a documented plan for every client that is receiving care under the disability services program, and so their outcomes are measured against their own individual plan. That plan, as I say, the owner of that is a care coordinator - the person responsible for doing it. The owner ultimately, of course, is the client.

MR. HOUSTON: Have there been instances where people have been in, let's say, a group home setting and they're just not advancing in that group home setting towards their outcomes so the department has said, well this person needs more, needs something different, whatever, and we're going to move this person to another - has that happened?

MS. HARTWELL: Yes, if the client wishes that. That is actually a really important point. We're in the process of a culture change, I think, in society and is certainly one of the reasons why we need to transform our policies and our systems. We need to find ways for the clients that we serve and support to have a voice in what is happening in their lives - where they want to go and what they want to have happen to them. Sometimes their families have a very large voice in that. Sometimes they're the legal guardian. Sometimes

families are just very involved and have had to be really strong advocates on behalf of their family member.

In other cases, we have some folks who have lived in a residence and the staff at the residence have become their family and they've lived there for 20, 30, 40 years.

MR. CHAIRMAN: Order, please. I apologize, I have to cut the time off there. We'll move to the NDP caucus and Ms. Mancini.

MS. MARIAN MANCINI: Good morning everyone, I thank you very much for being here. I've had the opportunity to look at the RFPs that you've submitted and you have a lot of work on your plate. I congratulate you on that and moving that forward.

I am going to have some questions for you, particularly about the RFP for the ESIA aspect, but right now I wanted to focus on one sort of particular thing within the ESIA program, which is employment supports. I think employment supports - the goal is to enable clients to meaningfully attach to the labour market, and hopefully for the long term.

Outlined in the ESIA RFP, we're seeing that 70 per cent of the ESIA caseload are single individuals with no children - would it be fair to say primarily males under age 34? Is that consistent with your . . . .

MS. HARTWELL: We have experienced in the last year a growing number of younger people but my experience with those who are on the system for the longest period of time are actually men 45 years-plus, who often have mental health issues, other disability issues, whether it be addictions and who I would say have a chronic need of our services.

We do have about one-third who have been on the system for a little bit less and that's where some of the younger people are - issues in their lives, issues get dealt with and they moved on.

MS. MANCINI: Within that group we know, I would suggest to you, that the work that needs to be done is to ensure that those who are able to work are assisted in doing so. Part of that would be through post-secondary education so you probably know where I'm going with this. Currently the only means to attend a post-secondary program and still receive benefits in Nova Scotia is through the Career Seek program.

In your view, does the Career Seek program do a good job in assisting the cases where recipients on social assistance need to complete some sort of degree from college or university so they can attach to the labour market?

MS. HARTWELL: In my view, the Career Seek program has had some success. Part of our transformation is looking at being able to identify and support people to move to employment when that's a good option for them and also to explore post-secondary or

further training. It doesn't have to necessarily be at a post-secondary institution, but further training is really the right path.

I wouldn't want to say I think we're doing everything right there. In the resources that we have it is always a balancing act or a judgment on how we align the resources so that we have people who are able to move forward and we're using them wisely. One of the things we've been learning is that some of the post-secondary interventions that we've had haven't resulted in people having employment, either because the field is not the field where they can be successful or sometimes there are other conditions that have impacted.

I'll give you an example. We've had some very successful training programs for clients who have an interest in being a continuing care assistant or to work in the care field - a personal care assistant, et cetera. However, a lot of that work, as you know, can be shift work. So if they're looking to transition from being on income assistance to that field, we need to make sure the supports are in place for them to be able to do shift work, which might mean a different child care arrangement, which might mean additional transportation, so sometimes the education itself is not the only piece.

What we're trying to look at is the whole suite of supports that are required for people to be able to attach to the labour market when that's something they can do and that's something we can support them with. That would include post-secondary, and then what the supports are that were needed. There certainly is work to be done there.

We've had some tremendous successes of people who have done incredible things with the support offered. We've also had people who have gone through the training and have gone through additional interventions and have come back on the system. The incredible demoralization that is accompanied with that is important.

MS. MANCINI: Thank you for that. I do have here a table. It was provided to the NDP caucus; we obtained it through a FOIPOP request. I can table that and I do have copies for my colleagues here this morning.

This document shows that in the past two years only six individuals have been approved for Career Seek, and that the only individual chosen in 2015-16 withdrew from the university. What I found odd is that none of the recipients attended a post-secondary program at the college level, and the chart reflects that. We checked back to the department on this and your department confirmed that, in fact, no one in the Career Seek program attended college in the past two years.

I think it's important to point out that the career program doesn't actually pay for school. It's just providing the client with some benefits. They're still responsible for their tuition and books and all of that sort of stuff. It's just to provide a living allowance.

Do you have the chart now?

MS. HARTWELL: Yes, we do.

- MS. MANCINI: Okay, thank you. How many people applied to the career program in the last two years?
- MS. HARTWELL: I don't have that number with me, but we'll try to get it while I'm sitting here.
- MS. MANCINI: Thank you. It would appear that only four people were accepted in 2014-15, and just one in 2015-16. I'm looking at the chart, so it does seem to be a very small amount or very underutilized program. Is there an explanation for that, do you think?
- MS. HARTWELL: There are a couple of things. The Career Seek program is available only when a client has that in their career, in their own plan. So if that's not something that they're aspiring to, that would limit the number.

I would say that the changing demographics, as I mentioned, of single individuals that we have, while we do have a revolving number of younger individuals, in my experience there are many of them that are experiencing life issues that they aren't putting forward going forward to post-secondary. I don't want to minimize that at all, but I do think that we have fewer single parents on income assistance than we had. So we have fewer people that are at a point in life where they're looking to make some big change. Some of the single younger people that we have, as I say, are in the middle of some crises and so post-secondary isn't necessarily the option.

Part of why we are looking at our post-secondary supports is because of these numbers. We know that having post-secondary and higher levels of education are often a factor that lead to better economic outcomes so we're aware of that. We have other programs that we've put in place - whether it's the Strait to Work program. We recently worked with some youth service providers to put in place some guaranteed spots for them at community colleges for some of the youth that are at risk. We continue to provide post-secondary for any youth that are in the care of the minister.

But certainly these low numbers are telling us that either we are not putting in place robust career planning and people don't see it as an option and they aren't coming forward, or we have to look at the steps that we need to put in place so that people can consider it.

- MS. MANCINI: Thank you. Just back on the chart again, when reviewing the chart we can see in the column "cost/client and associated costs" some are zero, one is \$17.50, and another is \$900. Can you explain what these costs are?
- MS. HARTWELL: I'm not familiar with the specifics of these costs, but some of them could be as varied as transportation. There have been times when we've had clients that needed work boots, child care any of those things. So they really are dependent on whatever the person needs.

As I said, one of the things that we are discovering is that sometimes the lack of supports aren't necessarily a lack of support to attend post-secondary or to attend training or attend work. It's the supports that are required for the person's life so they can do those things so any of those costs could be there.

MS. MANCINI: I just want to move on from the careers program and just talk to you about the ESIA program and Phase 3 of a three-part transformation. On January 22, 2016, the consulting firm Davis Pier was awarded almost \$900,000 to undertake the work associated with Phase 2. It's my understanding that Davis Pier will be implementing the outcomes laid out in your request for proposal, pursuant to the ESIA.

How long is this Phase 2, the one that's costing \$900,000, how long is that expected to last?

MS. HARTWELL: Phase 2, or what we call Gate 2 of our transformation, is expected to last to the end of next year.

MS. MANCINI: And how many individuals are overseeing the project from Davis Pier?

MS. HARTWELL: From within the consultant?

MS. MANCINI: Yes.

MS. HARTWELL: I'm going to turn to ADM MacLellan to see if she has that number on the top of her head.

MS. NANCY MACLELLAN: The Davis Pier bid is a consortium bid with Gardner Pinfold, the Social Research and Demonstration Corporation, and Caledon Institute of Social Policy. It's a fixed price contract so they bid for and were awarded a contract to do a fixed piece of work for a fixed price. The team - both on the consortium side and our side - will grow larger and grow smaller, based on the demand for the work and the expertise required in different phases of this phase.

MS. MANCINI: The minister has suggested that the recipients on income assistance should not expect an increase in their benefits while the transformation is being completed. That happened in a media scrum in July 2015, she said that in terms of money, nothing for 2016-2017. Is this still the case, that income recipients will not receive any increase in their rates for 2016-2017?

MS. HARTWELL: As you know, I'm not able to anticipate what is likely to be in the budget but I'd like to say two things: the first is that we certainly have heard loud and clear from clients that they are struggling without even a modest increase and that while they are appreciative and, more than anyone, want to see the system transformed and changed, they would like something different. All I can say at this point is that has been heard loud and clear.

I would say that the second thing is that, as you know, we have been holding sessions with clients around the province and we've also had a survey. We've had an incredible response to the survey and to the focus groups. What people said in those sessions was a mix of concerns but certainly very high on the list was around some of the costs for food and things they need right now, we certainly heard that. They also had a lot to say about what they expected from their caseworker and how they wanted to be treated so I'm happy to talk about those things as well.

MS. MANCINI: Thank you and your comment about the increasing cost of food is a good lead into my next question. I do have a chart from Statistics Canada that I'd like to table; I have an extra copy for the witness. This is probably something that you are fairly familiar with but it does show that the cost of food has gone up 4.7 per cent. That's from January 2015 to January 2016 so within one year.

On the second page of that document there's an actual breakdown, for example, showing that fresh or frozen meat has gone up 8.6 per cent, fresh fruit has gone up by 18.9 per cent, fresh vegetables by 13.2 per cent. I suppose that's reflected in - it supports the comments that you probably heard during your consultations that there's a really significant increase.

Is the department considering these factors when determining what measures you're going to use to decide what is adequate for recipients? I know that there's the low income measure, there's the Market Basket Measure. I'm just wondering, what is the premise that the department is focusing on in determining that rate for clients?

MS. HARTWELL: Yes, absolutely, this information as well as the food security information we receive from the Mount and other places is taken into consideration. Nancy mentioned the Caledon Institute as one of the partners, and we're quite pleased with that. As you know, they're the leading social policy think tank in Canada and have a focus on welfare reform. So they will, along with all of this information, be helping us look at how we - I guess in medium to longer term - develop a benefit system that is responsive to these changes so that we're not over-administering the benefit and not supporting people to be able to make choices about what they want to spend money on.

So overall we're trying to have a system that is less administrative and much more empowering for clients. In the short term though, the information on the rising cost of food and concerns about other costs is absolutely being considered on what we can put forward for the short term. Again, I can't say much more than that, but I can say that we have heard and we're quite aware that there is a need to look at short-term as well as medium- and long-term transformation.

MS. MANCINI: My time is running out fast. I wanted to ask you some questions, because the Ontario model - they produced a document called *Brighter Prospects: Transforming Social Assistance in Ontario* in 2012. It's mentioned several times in the ESIA transformation. When I read it I was struck by - it seems to me that many of the implementation priorities in ours in Nova Scotia are very similar to Ontario. Was that intentional?

MS. HARTWELL: I would say it wasn't necessarily intentional in the sense that we didn't look to Ontario solely as a model. We did a significant jurisdictional scan of not just jurisdictions in Canada, but also throughout the Commonwealth, around the world really. I sit at the table, of course, with deputies from across the country and none of the challenges are unique. So we can describe the issues in different words, but ultimately we are talking about core issues around poverty, core issues around social inequality, and core issues around inclusion. So we may use different language, but if we sound like we're like another province, it's probably because we're facing some of the same issues.

MS. MANCINI: I was just wondering quickly . . .

MR. CHAIRMAN: Order, please - I do apologize, I have to cut you off there. We'll move to Mr. Rankin.

MR. IAIN RANKIN: I just noticed when you were talking about the over-administration in the programming for income assistance, I'm just wondering if that type of analysis has been done. My interest is more in the disabilities cohort. How does that transformation that's being evaluated right now relate to the support for disabilities? Do you actually have a breakdown of the percentage of funds that go to administering the program and what actually is disbursed out to the clients that are applying for the numerous grants that are available in terms of the housing grants and all those? Maybe you can just speak to how the transformation relates to disabilities as well.

MS. HARTWELL: I'll start off with the high-level question first, where does the money go, and then I'll talk about our vision for disability supports programming.

When we look at funding for 2015-16 - as I say it was \$915,410,000 for the department overall - 83.5 per cent of that went directly to citizens and providers. The citizen direct is usually through our income assistance program and the providers are often in our child welfare, the largest would be our Disability Support Program. We can provide you with a breakdown of where things went.

What I would say is that the rest of the money, the other 15 per cent or so - 13.7 per cent is staff salaries and benefits. Our operating costs of the department, the administration, is about 2.8 per cent. We have continually done everything we can to try to keep that as lean as possible. The staffing number, though, is not something that I count in as administration because they are delivering the services and the supports that are needed.

We have incredible staff and we also need to have staff to maintain the caseloads that we have.

On the Disability Support Program, I have to say that if there's one program that - all our programs need revamping, but if there's a program that is hard to explain because it was never a designed program it's the Disability Support Program. Some of them we received through municipal transfers, as I mentioned, and some of them frankly were designed for a society of 25 or 30 years ago where there was a custodial model for people in care, for people with disabilities. For some of the more complex disabilities that exist now, there simply weren't models for them to receive care.

I would say that while expectations from citizens have changed a lot, they've probably changed most dramatically in this area. The parents of young people who are graduating from school now, who have had a quite inclusive experience in the school, are looking for more support than they've been getting and how they can actually transition, help their young person transition from childhood to adulthood. Also, when we look at the demographics of Nova Scotia, we know we have an aging population and some of that aging population have been caring for people with disabilities.

The change in the Disability Support Program is one that has to be profound. The road map document that I referred to, the jointly created document - while it is an aspirational document, it truly is a road map. There's where you are and there's a destination where you want to go to. A road map document is meant to tell you different ways that you can get there. It is asking Nova Scotians to significantly change our current programming that is really decades old, into a new way of programming but one that is safe, has strong outcomes for clients, and one that we can sustain. We've had a lot of one-offs because we don't have the right system. We've created a lot of one-offs that have some tremendous costs associated with them and they're not getting great outcomes.

This program is really about designing a client-centred, person-directed, much more inclusive system so it is a profound change.

MR. RANKIN: Does that include an ability to streamline some of the programming? As an MLA we have people coming in who need assistance navigating the various programs and there are a lot. There's respite care, there's a housing component. I think streamlining is important so I'd like to know if that's going to be part of it.

Also, to the point that my colleague was raising in terms of utilization, because costs have gone up for people and salaries haven't necessarily been aligned with that, for say parents of people who have disabilities, is there any review of those thresholds of income levels? I'm thinking of housing for that particular example because I think it's \$40,000 or \$50,000 or less that has to be the family income, so I'm wondering how it's possible that a family income could even afford to have a house and a mortgage if they're not making that much.

I guess I'd like to know, are those thresholds for income being reviewed to improve utilization? You might not have a breakdown of the participants in that program but I'd be interested to know if the participant level within those programs has gone down over the last 25 years. As you said, it's a pretty archaic system so I think it is important to zero in on improving utilization of those various programs and make it easier for them to navigate.

MS. HARTWELL: We do have, as you mentioned, income testing for our Disability Support Program for children and so we income test the family, and for many families, of course, the cost of disability may not be reflected in their level of income and so it's a bit of a Catch-22. They wouldn't meet an income threshold, but because they have a child with a disability they have significant costs of disability.

So we are certainly, as part of our transformation, looking at how we can create a fair and transparent funding formula that would take into account some of the costs of disability as well.

I would say though, we also have the situation where once the child becomes an adult, the income test is no longer on their family; the income test is only on them as an individual. So we have a lot of individuals who we know - because of the nature of the complexity of their needs - are going to age into our system and so we are exploring how we can provide some supports to that family because we know that child will become an adult in our system. If we can actually help that transition before, it will be better for everyone - a much more proactive, preventive piece. So we are definitely looking at that.

On the housing piece, I would say that while some of our federal programming does come with housing income limits that are set by the federal government, there are others where we are looking at how we can - certainly we can look at the disability and the housing issues as one. Currently the programs are operated quite separately, but we want to be able to explore how we can have more affordable housing options. That would include supported housing available to people with disabilities.

At its core, if we move our model to have less of a reliance and ultimately no reliance on some of the larger facilities in the province, those folks need a place to live and they need things to do during the day and they need all of those things. So our housing system, our day programming system, all of those things need to ramp up to fill that void.

#### MR. CHAIRMAN: Mr. Stroink.

MR. JOACHIM STROINK: I just had a real quick question. I want to touch on unfortunately in society a lot of women end up looking for help through DCS. It's a very unfortunate situation that occurs. I'm just trying to understand - it's my understanding there has been some great work from DCS to support women in our community and I'm just wondering if you could touch on that briefly and explain what we're trying to do there.

MS. HARTWELL: DCS is a department run by women and many of the staff are women. We probably have the highest proportion in government, so supports for women are always something near and dear. It's interesting, the client profile has shifted so we do have more women getting support from some of our programs than others. The income assistance, of course, is fascinating. There is still the stereotypical idea that there is a single mother who is the client on income assistance and that is no longer the case.

Our focus has really been on supporting women - not just women in crisis or trying to have preventive work for women, and so we've been investing in families first. We've been investing in some preventive family supports through our family resource centres. We have an intensive program coming to support families. So that is all about women in their role as a mother.

Of course, we also have the Nova Scotia Advisory Council on the Status of Women, which I am the deputy and the minister is the minster. They've been working very hard, in concert with our department, to develop their policy capacity in the hopes of having a gender lens that we can apply to make sure that the implications of policy legislation and regulation on women are clearly understood. For us, not only have we been investing in programs that we know disproportionately support women, we also want to make sure that we're keeping women first and foremost in the development of policy.

#### MR. CHAIRMAN: Ms. Lohnes-Croft.

MS. SUZANNE LOHNES-CROFT: Last Fall we passed Bill No. 112, which was amendments to Chapter 5. Those were changes to the child protection laws. I understand it is not proclaimed yet and you're working on the regulations. I'm really interested in the age change to 19 years. I call it a loophole or whatever but anyway, being inclusive of children to the age of 19. I'll tell you, I'm very forward in that thinking, I think it's important and it's a long time coming.

How is that rolling out? What are the plans to - I understand people can't act on that right now. But what do you see these benefits - I know they have to request it, it's not automatically given, so where does that lie in the department?

MS. HARTWELL: Thank you for that question. We are, in fact, working on, as you say, the regulations and a policy. I would say the most important piece, or one of the most important pieces, is the training of staff so that staff are ready and able and know what menu of supports are available for young people. We certainly are doing that, if you want to think of that as the backbone of the skeleton, we're making sure we have the rules and the training and those things in place.

On top of that we are working with youth-serving organizations to really fully understand what the needs are of youth and to make sure we have ways to have their voices heard. One of the pieces will be understanding what some of the barriers have been for 16-to 19-year-olds in the past. We know there have been barriers in their income assistance

system and we know that the whole amendment in the Act was to allow us to offer them services and supports and have it funded so they could actually have access to those services.

We want to make sure - in government, we're here to help you is not necessarily what a teenager in crisis wants to hear. We want to make sure that we have the partners in the community who are able to reach out and make those offers on our behalf so there will be a huge piece of education with those partners as well.

MS. LOHNES-CROFT: When you say training of staff, what kind of training would they need further to what they already have?

MS. HARTWELL: We have over 800 staff who work in the child, youth and family supports area, incredibly trained social workers by and large, but they need to have information on what the services and supports are. Up until now, when there was a youth 16 to 19 years, unless that youth was brought into the care of the minister, unless there was a crisis, they weren't necessarily able to offer interventions. We want to make sure that they now know what the full menu is and that they're ready and that they are also developing the relations with the youth-serving organizations so that we have a proactive reach-out. So it's not necessarily training for a new skill but it's certainly information that they need so they can do their jobs.

MS. LOHNES-CROFT: How do they get this communication out to these people who will now qualify? Will you be hitting shelters for youth and whatnot to let them know? They may not even know that they benefit now or will be benefiting from another program.

MS. HARTWELL: We certainly do have broad networks in regions all around the province of our staff that will be reaching out. We have youth outreach workers who will use all their connections. We also have child welfare specialists who have connections and we most recently, through some of our restructuring last year, we've developed service-provider relationship managers whose job it is to know the organizations in their region and to make sure that they have the information on what's going on.

We're going to be tapping every network we have to make sure that people get that information. There are some very strong . . .

MS. LOHNES-CROFT: Schools?

MS. HARTWELL: And schools, we're part of SchoolsPlus where there are SchoolsPlus locations around the province. All of our networks, we want to make sure that once we have the regulations in place that people understand what that means.

MS. LOHNES-CROFT: Any projected timeline?

MS. HARTWELL: We are projected to this Fall. We're in 2016 so this Fall is when we're expecting a rollout. Fall is until December 21<sup>st</sup>.

MS. LOHNES-CROFT: Great, thank you.

MR. CHAIRMAN: Mr. Maguire.

MR. BRENDAN MAGUIRE: I represent an area that has a lot of low income people and I just want to go back to some of the questions that were asked earlier in particular around Career Seek.

We have a lot of people in my riding that are part of income assistance. One of the things that we hear continuously is that it's not an easy program to get into and I think the numbers show six people out of thousands and thousands of individuals on income assistance. Do you think that six people taking part in Career Seek is a successful program?

MS. HARTWELL: As I said earlier, no, we have to do something different with Career Seek. I do have the numbers, by the way, just to finish the loop. In 2014, five people applied for Career Seek and five people were approved. In 2015, one person applied and one person was approved. So the issue obviously is - you can read into that - why are people not applying? It may be - one of the things we're working on is if it's not in their career plan, why isn't it in a career plan and how is it that road has been closed off for them?

MR. MAGUIRE: Just a couple of quick questions. Is the department actively promoting this? You talked about the five outcomes - is it more about direct employment outcomes or is it about education outcomes? Breaking the cycle isn't working a minimum wage job - it's really getting an education that helps you get a career. So is the department pushing back to work or are they pushing education, and who decides whether they go the employment route or the education route? If they go the education route, who decides what they're going to take for education?

MS. HARTWELL: There are a lot of questions in there; I hope I'll get them all. At the very heart of the issue with Career Seek now, as been identified by the numbers, is that there are people who don't have that in their plan forward. So in terms of what is in the plan - the plan is developed between the client and their worker. My belief would be that the workers are interpreting our current rules and regulations to make that an option for very few people.

So we want to look at that and make sure that we are promoting it better. We do promote it, but the numbers would tell us that we're not doing a particularly effective job at that. If people know about it, they may not either see themselves or supported to see themselves in it. So we need to get at that, absolutely.

The other piece is that we know that for some people a work-first approach is great, and for a lot of people it's not. There can't be one. The department can't stress employment

above all else for all people, nor can it stress training for everyone above all else. It has to be dependent on what the person sitting across the desk needs - their life, their expectations. I always shudder when I see the outcome is employment because the qualifying words that are there is, it's not necessarily employment for everyone at this time.

- MR. MAGUIRE: So in the new transformation that we'll see in 2018, do you hope to see an increased emphasis on education?
- MS. HARTWELL: In our transformed system, I hope to see an increased emphasis on education and training, and an increased emphasis on employment when that makes sense for those people.
  - MR. CHAIRMAN: Order, please. We'll move to Mr. Houston for 12 minutes.
- MR. HOUSTON: I only have 12 minutes but I have a couple of quick questions to wrap up my questions from before and then I'd like to move to another topic. The 332 organizations how much would have been paid to them?

Maybe while one of the staff might be able to look that up - you mentioned 5 to 6 per cent of those payments would have agreements in place. Would you be able to share one of those agreements with us?

MS. HARTWELL: Yes, certainly. I know that, for example, in our Independent Living Support program - most everyone in that program has an agreement, so I can certainly undertake to provide a copy.

This is the breakdown from last year's budget, the estimate for 2015-16. In our Disability Support Program, \$144,600,000 went to our long-term care residential facilities and \$158,393,000 went to those community-based programs with \$7 million going to our field staff - staff in regional offices - and then \$1.5 million to our head office staff, so the policy developers, et cetera.

- MR. HOUSTON: Maybe we can get a copy of that, too.
- MS. HARTWELL: This is in estimates.
- MR. HOUSTON: Yes, that's fine if we can get a copy of that. What's your timeline for moving from the 5 per cent to 6 per cent that have agreements in place to the 100 per cent? Would the 100 per cent mean 332 agreements or would it mean 3,000 agreements? In other words, would there be agreements for everyone or for every organization?
- MS. HARTWELL: My hope is that by 2018-19, so in the next phase, that we'll be somewhere between 75 per cent and 90 per cent of organizations having in place that corporate agreement that we need. My hope would be that every organization that provides

services on our behalf that we have an agreement with them, so it's just working towards that.

MR. HOUSTON: Now I do want to switch topics here. We had a tragic situation where a young lady in care passed away. I did read the Hansard from the Community Services Committee meeting but it wasn't clear to me. Has a child death review committee been struck in this instance to review the circumstances of this tragedy?

MS. HARTWELL: In the situation that you are speaking of, there has not been a committee struck under the child death review policy because there is no allegation or suspicion that the child died as a result of abuse or neglect whilst in the care of the minister. That said, we have immediately struck a review committee, involving the Ombudsman's Office as well, to immediately look at the details, as we would of any other review.

There is, of course - speaking generally - if there is ever a case when a child dies and there is a criminal investigation, we tend to try to not do anything that would get ahead of that. We work in concert with that.

MR. HOUSTON: Okay, so there is a review happening.

MS. HARTWELL: Yes.

MR. HOUSTON: How long would that review take? Would that be a couple of years, would that be months? What would you expect - what would your expectation be there?

MS. HARTWELL: We do critical incident reviews on a regular basis when there is any injury or, the worst case scenario, a death. Depending on the complexity and depending on the police investigation if that's happening, it can be anywhere from several weeks to several months. It shouldn't be in the years or even a year.

MR. HOUSTON: You mentioned that these types of reviews happen - that's kind of an ongoing part of the department's work, I guess, is it? How frequent would they be?

MS. HARTWELL: Any time there is what we call a critical incident - when there has been an issue of someone being injured - if that happens at a facility by a service provider, they are required to provide us with a critical incident review. In some cases that's the end of it because it's clear what has happened. In other cases there may be some questions around policy or some questions about what happened. Then our department, in addition to the organization, would undertake a review on our own.

There are 16 residential facilities around the province for children in care. We do receive critical incident complaints from them or reports from them and we do investigate them. It's important to note that the vast majority of children who are in the care of the

minister - permanent or temporary - aren't in residential facilities, they are with foster parents. So then if there's any concern, that would normally go through their worker.

- MR. HOUSTON: How many critical incident reports would the department be involved in preparing or reviewing in the course of a year? Is there a ballpark number, just for perspective? I'm just trying to get perspective on frequency.
- MS. HARTWELL: I don't have the number. I do know that I'm usually made aware of most of them and so I could probably count on my hand the number, but we can get that number for you. Again, there's a differentiation between a critical incident that a third party might report to us and then one that on the receipt of that, we might undertake one ourselves. I can get you information on both.
- MR. HOUSTON: That would be great. Do you have a committee internally that whenever a critical incident report what's your process? You mentioned you personally receive a lot of them, but is there a committee that kind of reviews them?
- MS. HARTWELL: Our structure is that we actually have staff whose job it is to investigate. They are trained investigators, and so they would be received by a staff person and if it's received by a local office they would still refer it to us and then that trained investigative staff would pull on whoever it is that they need. They may pull in on someone from the division that provides the supports to children while they're in care. They may pull on someone from the more preventive side and then they would assemble a group that would be charged with reviewing whatever it is that the person finds through their investigation.
- MR. HOUSTON: I assume these reports, just by their nature, cover a wide spectrum of types of incidents, but under what circumstances would the findings be made public? Would it be public that there was a review done and everything was just a tragedy, or would it be a review has been done and we are going to make some changes to process? I'm just wondering, of the ones you've seen, can you recall any in recent memory where it became public?
- MS. HARTWELL: Thankfully, we have not had many of a nature that would get to that level. For example, a more routine critical incident report from a facility might be that two children who are in care of the minister were playing outside, one of them fell, hit their head and was taken to the hospital. So that would be a critical incident because the child is injured. They would have to determine whether or not there had been appropriate supervision, for example, and sometimes they might find it's just things that happen when children are playing outside. That would be the end of that and so that would probably never be public, and frankly, it really is in the role of all of us caring for children. Things like that might happen.

Another incident might be that there was an argument between two children and one child injured another child. That critical incident might be one that would prompt the

department to say, okay in this case, let's check to make sure that there was not just appropriate supervision, but are the care plans for both of those children appropriate then, if one of them has escalating violence? So it may be then there would be a group that would look and say...

- MR. HOUSTON: Thank you. So there is a wide spectrum, but in the case of a tragedy like a death would you expect that the results of the review might be made public?
- MS. HARTWELL: I do expect that the results would be made public, always protecting the identity of a child. It is a very difficult thing to do, but once there's a if there's certainly any suspicious death where it's not a natural a child dies because of a medical condition or others, if there is police involvement, certainly we would expect that it would be made public.
- MR. HOUSTON: Just before we sign off for the day, can you tell me what the average caseload is for a staff member?
- MS. HARTWELL: It varies, obviously, by program and it varies even within that. In the Disability Support Program, the average number of cases per worker is 87.7.
- MR. HOUSTON: That's the one I was concerned with. Eighty-eight cases is a tremendous amount of cases. I think in Newfoundland and Labrador it's kind of the law there that it can't be more than 20 cases per social worker. I don't know if you can speak to that.
- MS. HARTWELL: I can. I'm not aware of the law in Newfoundland and Labrador; however, care coordinators are not social workers and so care coordinators in the Disability Support Program are people who would have a caseload usually based on geography. There are 61 of them around the province and some of the people on their caseload would be people who are living with their family and their intervention with the care coordinator would be quite limited. There would be others who would be in a group home and who might be in crisis and so their interventions and their need would be quite significant so we don't have a standard of 20.

In child welfare, however - and that might be what you are referring to - we also have a standard of 20.

- MR. HOUSTON: And what is the average in child welfare?
- MS. HARTWELL: I know we're under the standard but I can provide you with that number 18.
- MR. HOUSTON: Okay, just quickly, does the 88 strike you as a lot or not? It strikes me as a lot.

MS. HARTWELL: It doesn't me because I know the nature of some of the supports that they provide . . .

MR. CHAIRMAN: Order, I do apologize, I have to cut things off there. We'll move back to Ms. Mancini.

MS. MANCINI: I wanted to ask you, in the RFP that I referred to earlier, again I mentioned that the Lankin-Sheikh report from Ontario, which is the one I referred to earlier, *Brighter Prospects*, is mentioned in the report. In the Lankin-Sheikh report they talk about a new IT system in Ontario being implemented to streamline the administrative processes. That is picked up on in the ESIA RFP - at 2.3.1.1, it says that Davis Pier will "implement IT capabilities foundational to the future state direction of ESIA and the department's new Operating Model."

Is the Nova Scotia operating model going to be similar to the Ontario model?

MS. HARTWELL: If you're talking about the IT system, I don't know because I don't know what the Ontario system is. What I do know is that in Nova Scotia we already have an integrated case management system which was sufficient to meet our needs 10 years ago, but is not going to give us the robust reporting and the outcomes focus that we need going forward. How much it will resemble the Ontario operating system, I don't know but I imagine we are all interested in the same thing so if there's an opportunity to learn from other jurisdictions, we'll always take it.

MS. MANCINI: Okay, because there is a very strong emphasis on the importance of the new IT system in the report; it seems to me it's referenced on many occasions. Are you indicating that at this point you don't know if your department is going to develop an IT system or will there be a purchase, maybe of software that currently exists, that will be purchased?

MS. HARTWELL: Generally our approach is to build on what we have and build on what the province has. Because we don't know the transformation is about developing a different benefit menu and how that will be administered, we can't at this point judge what the IT system would look like. As I say, my expectation would be that we would use our existing system as much as possible.

The integrated case management system which was developed by Community Services about 10 years ago has actually been adopted in some other jurisdictions. They've taken it and tweaked it - we plan on using their tweaks, if possible. It has also been used and adapted in the province in other departments, so we would look at all of that and we would look at the SAP system and other systems that the province already uses. So to the extent to which there's going to be an off-the-shelf solution, I don't know, but we certainly wouldn't be starting from scratch in the ESIA system.

MS. MANCINI: Okay, it just seems that there's a very strong focus on the IT being crucial to certainly streamlining the program but also reducing the amount of work that caseworkers have to spend on administrative and get them into doing direct case work. Again I just raise that it is referred to the report, the Ontario approach has been referred to considerably in the RFP.

You're probably familiar with a report that came out of Ontario in 2015 from the Auditor General. They conducted an audit of the IT system which is mentioned in their 2012 report and again that we've referenced, and the audit is very concerning. They indicated that there's over \$140 million in benefit miscalculations: \$89 million in overpayments; \$51 million in underpayments. Some of the stories - I do have it here. It's referred to the SAMS system, and I'll be happy to table that for you to have a look at because it is absolutely alarming, the colossal problems that they had in the system.

Where I'm going to and my concern is, is whether the program that you do intend to introduce will be test-piloted. Do you have strategies in place? From what I'm hearing from you, it doesn't sound like there has been too much thought given to that at this point.

MS. HARTWELL: I'm happy to answer that. Where we are now in our process is right now our focus is on what we need our system to do and the outcomes that we're looking for, and therefore build back from that. The next phase will be how we do it.

I appreciate the caution about the Ontario system and we'll try to learn from that. Again, I expect that what Ontario was looking for would be similar to what we were looking for, which is robust reporting on an individual and caseload level; to be able to make sure that we're making the difference that we need to make. As I say, our current system would always be our starting place and we have not had concerns of the type that you've referenced.

MS. MANCINI: I guess the idea is that you are moving toward a whole new system that will likely require you to put safeguards in place.

MS. HARTWELL: In our past, when we've introduced any kind of new IT system, we go through a quite robust testing process, including the inclusion of front-line staff as testers. So I have no reason to think that we would vary from our quite rigorous approach to our IT system.

I would say that one of the things that may not have shown up as much in the material, but is something that has become quite a foundation for our department, is that we are spending a lot of time understanding what the risks are involved in our business, including in our IT system, so we have developed a risk management framework. So any new IT system would also go through an analysis of the risks and certainly we'll be looking to make sure that we've taken care of or at least mitigated any risk to clients in terms of benefit calculation or other things.

MS. MANCINI: I want to quickly follow up on some questions that my friend, Mr. Houston, had asked you about this internal reporting system if a child is harmed or dies in care. I refer you - I'm sure you're familiar with the 2014 Ombudsman's report covering the unfortunate death of a child back in 2010. The report was very specific and I think I can summarize it to say that first of all the internal report that was done automatically by the department wasn't made available - never mind the public, it wasn't even made available to other caseworkers. That was something that they took exception to and felt that it should be corrected, I believe, in the recommendations that they made.

The overall theme, I think, was that a non-arm's-length system needs to be put in place to conduct these types of reviews. I think they were pretty clear recommendations. Can you tell me if there has been any advancement in the department in relation to that issue?

MS. HARTWELL: Yes, I can, thank you. We currently have, as I referenced, some effort to improve the relationship with the Ombudsman and we have been quite successful in that. The Ombudsman remains the youth Ombudsman for the province, and has direct access to children in care and travels the province to meet with them in facilities around the province. So to that extent we've put in place a working safeguard, but certainly it would remain that the Ombudsman has the ability to conduct an investigation into any incident involving a child, so that remains.

To that extent, we want to make sure that we increase the access of the Ombudsman to all our staff and to all our facilities so we'll continue to do that.

MS. MANCINI: The Ombudsman would not be an automatic review though and I think that's maybe what was being suggested, that when that happens, an automatic, arm's-length review is immediately conducted, so we're looking on that basis I think is where he's going.

MS. HARTWELL: Yes, so we would, in our own internal staff review, involve the Ombudsman. That is something we've put in place since the 2014 report. We would notify the Ombudsman and they would be involved right from the beginning.

I do want to make a point on the communication that you raised. I can't speak certainly to what happened in 2010 but our expectation - in part, one of the reasons why we did some the restructuring that we did is that we are expecting that the child welfare staff around the province are very much linked and the information is being coordinated so they would be made aware if there was a finding or if there was something they should be made aware of, whether a practice change or anything, or even an incident, we would be looking to make sure that they have the information on that, so I would hope that that wouldn't happen.

MS. MANCINI: I have, hopefully, a quick budget question for you, just in the interests of time. When I looked at the budget, under Child, Youth and Family Supports,

the Intervention Programs, it looks like \$6.46 million got pushed out of that and went to the Nova Scotia Advisory Council on the Status of Women because their budget went from - I don't know, they got an \$8.3 million increase in their budget. Is that correct?

MS. HARTWELL: Yes. What you're probably seeing is that the responsibility for oversight of transition houses and women's centres, which would have been included in the interventions, are now with the Status of Women, so there wasn't any change in the level of funding to those organizations or really any change in the relationship, except we hope by working with the Status of Women that we'll be able to have a focus on those issues, but there was no reduction in funding. It didn't reduce the amount of interventions, it's just being done with a different organization.

MS. MANCINI: Thank you for that.

MR. CHAIRMAN: Okay, we'll move to the Liberal caucus, Mr. Maguire.

MR. MAGUIRE: I have just two quick questions and then I'll pass it on. Has the department reached out to other partners - businesses, municipalities, things like that - for reduced rates for programs for people on income assistance? I think of maybe the municipality with bus passes. I look at some of the things that some of the private industry is doing with apartments, they're bulk-buying Internet so that everybody in the apartment gets Internet. Has the department looked into doing this and seeing if they can get a reduced rate?

MS. HARTWELL: Yes, we have in some cases been successful in doing that. For example, we have some reduced rates for cable and telephone in some of our public housing as a result of those conversations. We also have had conversations with a number of municipalities around bus passes. I know that recently the HRM Council passed a motion to explore the idea of reduced-cost bus passes. We're really appreciative of that and we'll continue to follow up on it.

MR. MAGUIRE: So that's a positive - I think that is a positive direction that the department is taking.

The last question I had is that the department speaks a lot on outcomes and the service providers are expected to provide short-term and long-term outcomes, those that are receiving finance from the department, is the department doing that internally? What happens when a child ages out of Community Services? Are we tracking to see if these kids end up back on income assistance as adults? Are they ending up in shelters, jails - substance abuse? Are they breaking the cycle?

Are we making sure that what we're doing is working? The only way we're going to find out if this is working is to find out what happens to these children when they age out. If we don't know, then we have no clue what's working and what's not working.

MS. HARTWELL: You are exactly hitting on our desire in our outcomes framework, because we currently don't have the capacity to do that and we have not done that. Anecdotally, there are social workers that will tell you that they've taken into care children whose parents they took into care. In small communities sometimes they're able to see the links.

So we know that in some cases our interventions have not been successful and families are cycling through our programs, but we don't necessarily have the set-up to be able to do that monitoring and that's one of the things that we're looking at.

In the absolutely beautiful charts that we sent you on our outcomes framework - I'm very proud of them and they're definitely a work in progress - but certainly our desire is that when we say that clients are empowered to make a difference in their own lives, in order for us to be able to answer that eventually we're going to need to be able to find out what the outcomes are for them in the longer term. So as we start to build our system to be able to find that out, yes, we want to be able to track and make sure that when we say clients have control over their own lives that we're able to find out what some of the outcomes are.

MR. MAGUIRE: So why now? We have service providers at this department who have been working for decades that could easily have provided that information to the department. You could be working with service providers that are dealing with youth directly and now they're dealing with them as adults at Metro Turning Point, at the kitchens - Hope Cottage and all that stuff. Why have we not gone back 20 years ago and said, listen, what's happening to these people?

I would think if we're spending \$900 million a year we would want to know if we're successful.

MS. HARTWELL: I can't answer why action wasn't taken 20 years ago, but I can give you what I suspect. Our resources have been directed at providing the intervention. There's never enough. There hasn't been enough for decades and so we are trying to make the best use of resources and so that has tended to go towards front-line delivery.

What we've learned is exactly what you've pointed to. It's that without knowing the outcomes we actually don't know with certainty which interventions are the ones that are getting us the best results and which ones are the ones that people need.

As challenging as it is, we have, through this process, hived resources to build the systems to gather that. We don't lack for anecdotal reports - not at all. We don't lack from reports from our service providers who are able to say, here are the 10 people we served this year and this is what happened to them. What we don't have is a way to capture and collate that with the service that person is providing from another service provider and that person is getting provided from Health. The technology may not have existed earlier; now it does. We still don't have the system set up, but that's part of the transformation.

It seems like an asinine thing to be talking about reports when you're dealing with people who are in crisis and are quite vulnerable, but that reporting capacity will allow us to make sure that we're putting the resources exactly where they need to be.

MR. MAGUIRE: I'll leave it at this. Maybe it would be something that you would include with funding to service providers that they start capturing that information. So if you're going down to Hope Cottage - obviously this is all volunteer. People don't have to do this if they don't want to do it. But if you're going to Hope Cottage, maybe there could be something that they fill out to say, listen, I spent 15 years as a foster child and two years of substance abuse and on the system, and this is where I am today.

MS. HARTWELL: Agreed, we have to explore those and certainly our expectation from agreements with service providers is that we would build in an accountability for them to help us report back, and also work with some of the academic institutions that we have. We have some strong research in Nova Scotia on social outcomes; we need to build on that and have some of the researchers help us. We are having those conversations as well.

MR. MAGUIRE: Good luck.

MR. CHAIRMAN: Ms. Lohnes-Croft.

MS. LOHNES-CROFT: I would like to talk about men - particularly single men, divorced, widowed. I've really been surprised by the lack of services for men, especially in rural Nova Scotia. Even in my office, helping them to navigate the system has sometimes been a learning experience for my staff and me.

I was really pleased to see this "first voice" consultation come around and I really urged people in my constituency who were having issues, especially navigating - the men - to take part in that. Was there good participation by men in that process?

MS. HARTWELL: I can answer that. We had in a survey over 1,700 people respond, which for our department is a monumental response; we've never had anything like that. Interestingly, 60 per cent of those were online and 40 per cent by phone, really interesting information so we wouldn't necessarily know how many of them were men.

In the focus groups, however, we have had over 100 people and 38 per cent of them were men. It varied region to region. There were some places where it was about half and half and others where women vastly outnumbered the men. I would say that the concerns they brought forward - in some cases there wasn't necessarily a difference by gender but some of the supports that they were expressing they wanted may have been different. So there's definitely a lot for us to learn from those sessions.

Different people, senior management - we've not wanted to intrude in those sessions but we wanted to attend to hear and so we've tried to have an unobtrusive presence

in some. There is definitely a group of people who are - I'd say over 45, 50 - who don't necessarily see changes in their employment status coming, have significant increasing health issues and who are quite hopeless, so I would conclude that they are in that group of men. They may not necessarily be comfortable reaching out, for a whole bunch of societal reasons, so part of our learning is how we can design services that we're reaching out to them. There is actually a lot for us to learn from the clients.

MS. LOHNES-CROFT: Okay, thank you.

MR. CHAIRMAN: Are there no further questions? I'd like to thank Ms. Hartwell and also Ms. MacLellan and Ms. MacLennan - I should know those names, I feel like I'm in Inverness. That you for being with us today. Our questions have concluded. We would like to give you a little time for some closing comments. Ms. Hartwell.

MS. HARTWELL: Thank you very much for your questions and your interest in the work. I would say that the questions you've posed really underscore the need for the department to be doing what it's doing, which is transforming. While I feel the impatience that we all have with the pace of change, our system was designed over decades and our absolute commitment is to design a new system, one with clients at the heart and at the forefront so we really look forward to your support and your leadership.

As always, I invite each of you, if you have any questions or concerns, whether it is from a constituency level or wherever, if you just are interested in what we're doing, we are always open to take a phone call and more than happy to provide you with whatever information we can. We're really challenged by this work but incredibly proud of it as well, so thank you.

MR. CHAIRMAN: Thank you very much. You are free to leave us - we do have a little bit of committee business.

We have correspondence from CSAP that was in response to information requested at our November 18<sup>th</sup> meeting, also from Service Nova Scotia, a request from a February 10<sup>th</sup> meeting, and from the Department of Health and Wellness, requested from a February 17<sup>th</sup> meeting. I believe everyone has a copy of that correspondence. It's pretty straightforward. If there are no questions - and I do not see any - we'll move on from that.

We had correspondence from the Department of Energy. This was in response to a request from Ms. MacDonald of the NDP caucus, requesting information about the abandonment costs for the Sable Offshore Energy Project. We've received correspondence back from the department which essentially says that they are concerned that the estimation of the decommissioning costs, if it were to ever become public could impact the bids made by contractors to do that work, which would in turn affect the royalties that the province would receive, and also the cost to the oil and gas companies involved in having to complete that decommissioning work.

So the matter before our committee is do we want this information, given that it is important that it be kept confidential? If we do maintain that we wish to have the information, we have to come to agreement on how it will be kept confidential or if it is going to be released to the public - well, in this case, the Department of Energy is not going to want that to happen. That's clear from the letter. Does anyone have any comments on this matter? Ms. Lohnes-Croft.

MS. LOHNES-CROFT: What are the consequences if something is leaked? Are there consequences?

MR. CHAIRMAN: As I understand, the consequences would be - from reading this, my own feeling on it is that it is critical that the information would be kept confidential; that it would be information that if we wish to discuss would have to be in camera. It's something that could not be distributed from beyond this room because if that information became public, potential contractors who would be involved with the decommissioning work would have some insight in what the budgeted costs are for the decommissioning, which might affect how they would bid on those contracts. They might bid them up higher if they see that the oil and gas companies are willing to pay more for that work, which would in turn affect the royalties that the province would receive.

So I certainly appreciate the Department of Energy's response and their interest to keep the information confidential, but we as a committee have an opinion from our legal counsel, and I will try to cut to the chase with this one as well, that ultimately it is for the committee to decide whether the document must be provided, or if it is provided whether it is made public or if it may be redacted before being made public.

As I understood - and Ms. MacDonald is not with us - the interest was to see the information. It wasn't necessarily to make it public. I'll further mention from our legal opinion that the decision is for the committee, not the executive branch of government. A committee's powers are not limited by law, but traditionally have been limited by its collective common sense.

I believe what that means is that if we are to request this information, we are to acknowledge the responsibility to keep it confidential and within the confines of the committee, but that is up to the committee members. Ms. Lohnes-Croft.

MS. LOHNES-CROFT: That's my concern. We all know that leaks get out to the media and no one has done it, so what would be the consequences from this committee should confidential information like this be leaked to the media or the public? Will there be consequences? How do we find out who the member is who leaked it and will there be consequences - and I mean firm consequences because it's a breach of the committee for that person should there be a leak? It happens all the time. We all know.

MR. CHAIRMAN: Mr. Wilson, do you have a comment?

HON. DAVID WILSON: I appreciate the concern of members of the committee. It has been the practice in the committee to look at sensitive information and recognize the importance of keeping information confidential. In the past we have gone in camera. We've seen information provided to the committee, to all members, and as a committee made a decision to hold that confidential information within the committee.

In the past, I believe information wasn't kept by committee members. Any documents were given back to the chairman, and it has been the practice of the committee. I think all of us here would not want to see any advantage or disadvantage either from a company or the public and taxpayers as a whole.

It has been done quite often in the past and I think it was an appropriate request, as a committee. We still, as a caucus, would like to see if we can get that information, meet in camera to see it and make a decision as a committee if we feel that that information should be kept confidential. You have my commitment, as House Leader and as a member of this committee and our caucus, to live up to the decision of the committee as a whole.

MR. CHAIRMAN: Thank you. Mr. Houston and then Ms. Lohnes-Croft.

MR. HOUSTON: I would just say basically that if you had an in camera meeting you would have it for that specific purpose and if members didn't feel comfortable, they didn't have to show up.

MR. CHAIRMAN: Ms. Lohnes-Croft.

MS. LOHNES-CROFT: Mr. Wilson mentioned for the information of his caucus. Right there, I thought it was for the people in the room only, so right there he said that it would go back for his caucus use.

MR. CHAIRMAN: Just to clarify, Ms. Lohnes-Croft, I think he intended to say, as he has just expressed to me, that he would respect the matters that go on here at this committee and it would not be caucused or anything like that, it would only stay here in the room.

I think, if I may offer a comment, this is a matter that comes down to this committee's ability to look at information, to respect the information, to keep it confidential. We are the eyes and ears of the public, as elected representatives on this committee. The option exists before us to have the information but it does certainly require the responsibility to keep it confidential.

I think that ultimately this has to be put to a motion and members can vote freely on that. Would anybody like to put this to a motion? Mr. Wilson.

MR. DAVID WILSON: I would ask that we do seek that information and, as asked by the deputy minister, that we look at that information in camera and make an appropriate decision at that time, as a committee, on how do we move forward with that.

As I said, in the past the committee has done this and I think all members here respect the process that we have here. I wouldn't want to see the ability of this committee undermined in any way, as we move forward. I do request that we ask for that information and that it be provided to you, as chairman, and that we do go in camera to look at it and then act appropriately.

MR. CHAIRMAN: The motion is to continue to request the information, to have an in camera meeting to look at the information, to keep it confidential.

Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is defeated.

I may need your permission to go beyond 11:00 a.m., I don't think it's going to go much beyond that. Do we have agreement? Okay.

The next item we had was correspondence from the Canadian Council of Public Accounts Committees. I just wanted to bring that to everyone's attention because that is happening in the Northwest Territories, from August 21<sup>st</sup> to 23<sup>rd</sup>. Typically, myself, the vice-chairman and a member of the NDP caucus attends that conference. I wanted to bring that to your attention.

Also there is a survey that has been issued by the Auditor General's Office on the effectiveness of their office for members - not just members of the committee but also from your caucuses. I'd like to encourage everyone to reply to that survey by filling that out.

We have a change in date requested by the Auditor General for the Spring report. This was scheduled for a May 25<sup>th</sup> in camera for the committee, followed up by a June 1<sup>st</sup> public meeting. The Auditor General's request is to change that date to having the in camera on June 8<sup>th</sup>, followed by the public meeting on June 15<sup>th</sup>. Is there agreement on that?

There is agreement. Our clerk will take note of that.

There is another item, with the indulgence of the committee, our next meeting date is March 30<sup>th</sup> with the Department of Transportation and Infrastructure Renewal, to discuss the Yarmouth ferry. That begins at 9:00 a.m. Following that there is an in camera briefing on Chapter 6 of the Fall 2015 Auditor General's Report on forest management and protection. So on March 30<sup>th</sup>, we would have the 9:00 a.m. to 11:00 a.m. meeting and then followed by the 11:00 a.m. briefing.

I would like to propose that we have one more in camera meeting before that meeting from 8:30 a.m. to 9:00 a.m. that morning. We had another item on the agenda here that I think is relevant for discussion because it is a good example for us to discuss, and that was on the Department of Internal Services' response to information that was requested from their office about lease spaces.

With the indulgence of the committee I would like to ask that that topic be carried forward and discussed as part of our in camera meeting on March 30<sup>th</sup>. Is there agreement?

There is agreement. Thank you. Our clerk has made note of that.

Mr. Houston.

MR. HOUSTON: In the interest of the discussion about allowing witnesses more time to answer questions more fully and the whole discussion about time requirements that are on committee members and witnesses, I would like to make a motion that this committee take the necessary steps to extend the committee hours, which are currently 9:00 a.m. to 11:00 a.m. - to extend those committee hours from, say, 9:00 a.m. until noon just to allow everyone a little more time to have a more full discussion on the topics and the questions that come up.

So I make a motion that this committee go forward with the steps to extend the regular committee hours - and I'm not exactly sure of what that requires, but I would like this committee to go forward and say, well, we do want to be more respectful of committee members and witnesses and allow everyone more time to have a more full discussion on these important matters and that be evidenced by the unanimous support of this committee to extend the hours from 9:00 a.m. to 11:00 a.m., which they currently are, to 9:00 a.m. to noon.

MR. CHAIRMAN: That would be a significant departure from the conventions of the committee. That is something I would like to confer with our legal counsel before even responding to that - again, because it would be such a significant change in the practice of the committee. Are there any other comments from members? Mr. Rankin.

MR. RANKIN: I don't know for sure, but I would say that has to be sent to Assembly Matters any time that committees are restructured or anything like that. It was the last time we had any change within committees in terms of topic suggestions. That was approved by Assembly Matters.

MR. CHAIRMAN: Point taken. Mr. Wilson.

MR. DAVID WILSON: I am wondering if the chairman could just come back at the next meeting on what would be allowed, what the procedures are, and then maybe we could make a decision at that time. If a decision is made, maybe we'll go to the subcommittee to have a more in-depth conversation about it and then we could bring it back to the full committee.

Definitely I would like to bring that back to caucus, but first find out what the rules are around extending committee business. I believe you can do it on a motion, but over a longer period of time I'm not sure if it takes a different kind of motion or change. Definitely if you could come back to the committee with that information and then we could make a decision maybe at the next meeting.

MR. HOUSTON: I respect the comments from both Mr. Rankin and Mr. Wilson that speak to the "how" - as to how the change would actually be implemented. I guess kind of a more general question is the "what". We have had concerns from members - particularly I know Mr. Farrell expressed some concern that witnesses don't exactly have enough time to answer, and I agree with him. We could use more time on this committee.

So my motion would be that the committee say that the "what" - and the "what" being that this committee agrees that more time is necessary to conduct the business. Then the "how", that's the mechanics of how it's done, but the first thing today I was looking for was whether we had consensus on that, yes, witnesses deserve a little more time and so do committee members.

So the motion would be that the committee go forward with the unanimous consent to say we as a committee would like the hours extended to allow more time. Then the "how" is just the details, but it's the spirit that I'm trying to get to right now and I suspect that spirit may have changed over the last couple of hours.

The motion would be that the committee would like to see the hours extended and is then willing to work through the procedure to do that. That would be the motion.

MR. CHAIRMAN: Here we have a comment from Mr. Farrell.

MR. TERRY FARRELL: I was going to refrain from speaking to this but since it appears that it does relate back to something I said earlier, I want to clarify what I said earlier. That is simply that the witnesses who come before this committee deserve a fundamental level of respect from the members of the committee in their questioning and that they should be allowed to answer the questions that are posed to them, without interruption.

I made some colour commentary around that, if you will, with respect to some things that I had observed during my time on the committee. I don't think that the issue of respect requires more time, it just requires more attention. Thank you.

MR. CHAIRMAN: So there is a motion before our committee. Mr. Houston, you've made the motion, we certainly can have a vote on that. Do you wish to have a vote

on it at this time or do you wish for it to be discussed further, with some input perhaps from our legal counsel, before the motion is voted upon? Mr. Houston.

MR. HOUSTON: I think it's worth voting on the intentions of the committee. If the intentions are to extend the hours, they can work through the details later. It would certainly be my intention to allow for more time, just an hour in the scheme of things. When you have an entire department here an hour is not too much to ask of the deputy minister, I don't think. They could stay for one more hour and it's certainly not a lot to ask from the members of this committee to invest one more hour, so I would vote on the intent of the committee.

MR. CHAIRMAN: The motion before the committee is to extend our meetings by an hour, to give witnesses further time to answer questions. Would all those in favour of the motion please say Aye. Contrary minded, Nay.

The motion is defeated.

If there is no further business - seeing none, this meeting is adjourned.

[The committee adjourned at 11:07 a.m.]