



COMMUNITY SERVICES COMMITTEE MEETING AGENDA

Healthy Communities without Poverty

Date: Wednesday, June 23, 2021

Time: 12:00 PM

Location: By video conference while pandemic protocols are in place

<https://zoom.us/j/96051779689?pwd=anpnWVNudS90dk9iTIVkK1hEellyZz09>

Meeting ID: 960 5177 9689

Passcode: 639788

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Members: Councillor Dan Roveda (Chair), Councillor Dave Mendicino (Vice Chair), Mayor Dean Backer, Councillor Mac Bain, Mayor Jane Dumas, Councillor Terry Kelly, Councillor Mark King Councillor Chris Mayne, , Mayor Dan O'Mara, Councillor Scott Robertson, Representative Amanda Smith, Councillor Bill Vrebosch.

Item	Topic
1.0	1.1 Call to Order at 1:04 PM 1.2 Declaration of Conflict of Interest

Item	Topic
2.0	Opening remarks by the Chair
3.0	Approval of the Agenda for June 23, 2021 MOTION #CSC25-2021 THAT the Community Services Committee accepts the Agenda as presented.
4.0	4.1 DELEGATIONS – Program Data Update (for information) - David Plumstead, Manager Planning, Outcomes & Analytics
5.0	<p>CONSENT AGENDA – <i>All items in the consent agenda are voted on collectively. The Chair will call out each item for consideration of discussion. Any item can be singled out for separate vote; then, only the remaining items will be voted on collectively.</i></p> <p>MOTION: #CSC26-2021</p> <p>THAT the Committee receives Consent Agenda items 5.1 to 5.5.</p> <p>5.1 CS06-21 Child Care Policy Update: Provisional, Suspended or Revoked Licence THAT the Community Services Committee accept and endorse the updated policy related to Provisional, Suspended or Revoked Licence as described in briefing note CS06-21 and attached as Appendix A.</p> <p>5.2 HS32-21 COCHI/OPHI Year End – details on the “Canada-Ontario Community Housing Initiative (COCHI) & Ontario Priorities Housing Initiative (OPHI) – 2020-21 Year End” for information purposes.</p> <p>5.3 SSE06-21 ODSP Discretionary Benefits Local Policy THAT the District of Nipissing Social Services Administration Board approve the Ontario Works/Ontario Disability Support Program Discretionary Benefits local policy as presented.</p> <p>5.4 SSE07-21 AMO Response to Modernization provides information on the Association of Municipalities Ontario’s response to the Ministry of Children, Community and Social Services (MCCSS) Social Assistance Recovery and Renewal Plan.</p> <p>5.5 EMS06-21 OAPC Ombudsman’s Report – information on the findings of the Ontario Ombudsman Investigation into how the Ministry of Health oversees patient complaints and incident reports about ambulance services.</p>
6.0	MANAGERS REPORTS – none at this time

Item	Topic
7.0	OTHER BUSINESS
8.0	NEXT MEETING DATE Wednesday, September 22, 2021
9.0	ADJOURNMENT MOTION: #CSC27-21 <i>Resolved</i> THAT the Community Services Committee meeting be adjourned at 12:55 PM.

BRIEFING NOTE CS06-21

For information For Approval

Date: June 23, 2021

Purpose: **Child Care Policy Update: Provisional, Suspended or Revoked Licence**

Prepared by: Lynn Démoré-Pitre, Director Children's Services

Reviewed by: Catherine Matheson, CAO

RECOMMENDATION:

THAT the Community Services Committee accept and endorse the updated policy related to Provisional, Suspended or Revoked Licence as described in briefing note CS06-21 and attached as Appendix A.

BACKGROUND:

DNSSAB is the designated child care and early years service system manager responsible for planning and managing of licenced child care services and EarlyON Child and Family Centres throughout the District of Nipissing.

DNSSAB's policies and practices are planned and implemented to reflect legislation, regulations, directives and best practices, which include the *Ontario Child Care and EarlyON Child and Family Service Management Funding Guideline for Consolidated Municipal Managers and District Social Service Administration Boards*.

Licensed child care programs must meet and maintain specific provincial standards set out in the *Child Care and Early Years Act, 2014* (Act). These standards provide for the health, safety, well-being and developmental needs of the children.

Service providers who do not follow the rules under the Act and its regulations may face administrative penalties, convictions that could include fines, or both. The agency could also

be faced with a provisional, suspended or revoked licence depending on the circumstances at hand.

The Ministry of Education issues a provisional licence when a licenced child care program is deemed non-compliant and does not meet licencing requirements of the Act. The child care program will be given a timeframe, stipulated by the Ministry, to meet the licencing requirements.

The Ministry of Education can suspend the licence of a child care program if the service provider is not competent to operate a licenced child care program in accordance with the Act and/or the program is not being operated in accordance to the Act and/or there is a threat to the health, safety or well-being of the children for whom the care is provided. The child care program must remain closed and cannot operate until the service provider has met all requirements stipulated by the Ministry.

If a licenced child care service provider continually fails to comply with the Act, the Ministry of Education can revoke a child care program's licence.

On May 7, 2014, the Board received Briefing Note SS20-14 related to the revised Provisional, Suspended or Revoked Licence to Operate a Day Nursery Policy and endorsed the policy in accordance to Resolution No. 2014-120.

CURRENT STATUS/STEPS TAKEN TO DATE:

DNSSAB's Provisional, Suspended or Revoked Licence policy has been updated to reflect current legislation, practices and local priorities.

The policy also was updated to provide further clarity and flexibility by allowing DNSSAB staff to work closely with service providers and personalize each approach based on individual program circumstances.

FINANCIAL IMPLICATIONS:

The cost of implementing this policy has been factored into the Children's Services annual budget process and will continue to be considered during the annual budgeting process.

RISK IDENTIFICATION AND MITIGATION:

DNSSAB has concerns regarding any service provider who fails to meet the minimum requirements established in the Act, as failing to meet these requirements can at times affect the quality of services delivered to the children and families.

The established policy helps to mitigate potential risks by ensuring further alignment with best practices and local priorities. Furthermore, it is intended to support a fair, equitable, accountable and transparent decision-making process.

COMMUNICATION PLAN:

DNSSAB will ensure that ongoing communication and messaging regarding policies is handled in a proficient manner through various methods (i.e. website, Facebook, guidelines, memorandums, etc.) which in turn will ensure that the necessary information reaches service providers and families throughout the district.

Upon Board approval, a copy of the updated policies will be shared with all licenced child care service providers.

DNSSAB staff will continue to plan and collaborate with partners, service providers, and ministry staff to sustain a high quality, viable, sustainable child care and early years sector in the Nipissing District.

District of Nipissing Social Services Administration Board			
Department	Children's Services	Policy Number	5CS-ADM-01
Policy	Provisional, Suspended or Revoked Licence		
Effective Date	June 2014	Annual Review	June 2021
Revision Date	June 2021	Board Approval	

1. Policy Statement

The District of Nipissing Social Services Administration Board (DNSSAB) is the designated child care and early years services system manager responsible for planning and managing licenced child care services and EarlyON Child and Family Centre throughout the district of Nipissing.

DNSSAB is committed to ensuring that services purchased by DNSSAB are of quality and meet the growing needs of children in their families throughout the District of Nipissing.

2. Goals, Objectives and Purpose

- To define DNSSAB’s standards with respect to provisional, suspended or revoked licence to operate a licenced child care program;
- To establish procedures to be followed when a service provider’s program has failed to comply with the Ministry’s licencing requirements and the *Child Care and Early Years Act, 2014 (Act)*;
- To establish procedures to be followed when a service provider’s program continues to be deemed as non-compliant and has failed to achieve compliance in accordance the Ministry’s requirements or has demonstrated repeated non-compliance with the Ministry’s licencing requirements and the Act;
- To establish procedures for families in receipt of fee subsidy enrolled in an licenced child care program who has failed to comply with the Ministry’s licencing requirements and Act and has been issued a provisional licence or the service provider’s licence has been suspended or revoked.

3. Persons or Groups Affected

- Parents residing in the District Nipissing;
- Children younger than thirteen (13) years of age and under special circumstances up to 18 years of age residing in the District of Nipissing;

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- Licenced Child Care Service Providers.

4. Restrictions

- Service providers holding a current purchase of service agreement with DNSSAB are required to ensure that programs and services meet and maintain the minimum licencing standards as set out in the Act.

5. Policy

- The DNSSAB has developed a standard to ensure that services purchased by DNSSAB are of quality and meet the Ministry's requirement as outlined in the Act.
- Where a licenced child care program fails to meet the Ministry's requirement as outlined in the Act and the service provider is deemed non-compliant according to such expectations and is issued a provisional licence, an action plan to address all non-compliant areas must be completed by the service provider and submitted to DNSSAB within 15 working days.
- The DNSSAB will review the action plan to ensure that it meets and addresses the said requirements in a timely manner and to provide ongoing support to the service provider in an effort to ensure compliance within the stipulated timeframe.
- Where a program fails to meet the Ministry's requirement as outlined in the Act and the Service Provider is deemed non-compliant according to such expectations and is issued a provisional licence, DNSSAB may limit the number of fee-subsidized spaces to children currently enrolled in the program contingent upon the program's circumstances.
- The Children's Services Division will accommodate families who wish to transfer their child(ren) to an alternate licenced child care program.

6. Repeated Provisional, Suspended or Revoked Licence

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- Where the Service Provider continues to be deemed as non-compliant and has repeatedly failed to meet the Ministry's requirement as outlined in the Act and is issued a provisional licence for a second time or has failed to meet the requirement in accordance to the action plan in the stipulated timeframe, DNSSAB may act to terminate its agreement with the service provider.
- The DNSSAB will notify the affected service provider in writing of its intent to limit, suspend or terminate support with fee subsidy or its intent to terminate its legal agreement with the agency.
- Where the service provider has received notice of limitation, suspension or termination of fee subsidy or termination of its purchase of service agreement with the DNSSAB, the DNSSAB will immediately suspend funding 'new' applicant families for fee subsidy who wish to access the affected program.
- Children's Services Division will provide affected families with notification of limitations, suspension or termination of its purchase of service agreement with the service provider.
- As required, the Children's Services Division will assist families in receipt of fee subsidy with the transfer of their child(ren) from the affected site to an alternate licenced child care program based on parental choice as spaces become available.
- Where a program fails to meet the Ministry's requirement as outlined in the Act and the service provider is deemed non-compliant according to such expectations and the service provider's licence is suspended or revoked, DNSSAB will act to terminate its agreement with the service provider.

7. Definitions

The words and phrases listed below when used in this policy shall have the following meaning ascribed to them:

District of Nipissing Social Services Administration Board			
Department	Children's Services	Policy Number	5CS-ADM-01
Policy	Provisional, Suspended or Revoked Licence		
Effective Date	June 2014	Annual Review	June 2021
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- “Act” means the *Child Care and Early Years Act, 2014, R.S.O. 1990, C.D.2*;
- “Board” means the Board of Directors of the Nipissing District Social Services Administration Board;
- “Child(ren)” means a person who is younger than thirteen (13) years of age and in special circumstances up to eighteen (18) years of age in accordance with the Act.
- “DNSSAB Policies and Guidelines” means the policies and guidelines of DNSSAB, as amended or replaced from time to time;
- “DNSSAB” means the District of Nipissing Social Services Administration Board;
- “Fee Subsidy” means financial provisions for eligible Parents to support the daily costs of licenced child care.
- “Licenced Child Care” means an agency who provides child care for one or more children and has a licence issued by the Ministry of Education under the Act.
- “Ministry” means Ministry of Education for the Province of Ontario or any successor ministry, department or government body;
- “Parents” or “Guardians” or “Families” means a person or persons who has(have) been deemed eligible to receive fee subsidy;
- “Provisional Licence” means a licence to operate a child care centre that is issued by the Ministry of Education when a service provider has failed to meet all the licencing requirements of the *Child Care and Early Years Act, 2014*;
- “Purchase of Service Agreement” means a service agreement between the DNSSAB and Child Care Service Provider for the delivery of licenced child care services;

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- “Revoked Licence” means that the Ministry of Education has cancelled a service provider’s licence to operate a child care centre as the Services Provider continually failed to comply with the licencing requirements of the Act;
- “Service Provider” means an independent agency providing licenced child care services;
- “Suspended Licence” means that a service provider may not be competent to operate a licenced child care program in accordance with the Act and/or the program is not being operated in accordance to the Act and/or there is a threat to the health, safety or well-being of the children for whom the care is provided. The child care program must remain closed and cannot operate until the service provider it has met all requirements stipulated by the Ministry.

8. Reference and Related Statements of Policy and Procedures

- Ontario Child Care and EarlyON Child and Family Centre Service Management Funding Guideline for Consolidated Municipal Managers and District Social Service Administration Boards (Ministry of Education, updated annually)
- *Child Care and Early Years Act, 2014;*
- Policy No. 5CS-FS-01 Principles of Service Delivery
- Policy No. 5CS-FS-16 Fee Subsidy Parental Choice

BRIEFING NOTE HS32-21

For Information or For Approval

Date: June 23, 2021

Purpose: **Canada-Ontario Community Housing Initiative (COCHI) & Ontario Priorities Housing Initiative (OPHI) – 2020-21 Year End**

Prepared by: Stacey Cyopeck, Director, Housing Programs

Reviewed by: Catherine Matheson, Chief Administrative Officer

Report HS32-21 provides details on the “Canada-Ontario Community Housing Initiative (COCHI) & Ontario Priorities Housing Initiative (OPHI) – 2020-21 Year End” for information purposes.

BACKGROUND:

- Announced in April 2019, the Canada-Ontario Community Housing Initiative (COCHI) & Ontario Priorities Housing Initiative (OPHI) are joint initiatives between the federal and provincial government for the delivery of affordable and social housing.
- COCHI funding represents a re-investment of federal funding that has been declining under the Canada-Ontario Social Housing Agreement. OPHI, in turn, is closely modelled after the previous Investment in Affordable Housing Program, 2014 Extension (IAH-E). Comparable to IAH-E, OPHI is designed to address local housing priorities that include affordability, repair and new construction.
- As per report HS16-19, the Board has approved the COCHI & OPHI Initial Investment Plan for the first three fiscal years of the program up to March 31, 2022.
- Amendments were made to the Initial Investment Plan in OPHI Year 2 (2020-21) to factor in the needed investment for the future transitional housing project at 590 Chippewa Street West in North Bay under the Rental Housing Component.
- It is important to note, amendments were only made to the OPHI Investment Plan. The COCHI allocations remained the same.

CURRENT STATUS/STEPS TAKEN TO DATE:

- In the 2020/21 COCHI/OPHI Investment Plan, the DNSSAB allocated its annual funding towards three main service categories, Transitional Operating Funding (COCHI), Rental Housing – Capital Component (OPHI) and Housing Allowance – Operating Component (OPHI).

COCHI	COCHI Planned Financial Commitment - \$\$			TOTAL
	YEAR 1	YEAR 2	YEAR 3	
	2019-20	2020-21	2021-22	
SM allocation for each fiscal year	\$ 14,345.00	\$ 76,686.00	\$ 845,663.00	\$ 936,694.00
Capital Components				
New Build	\$ -	\$ -	\$ 507,740	\$ 507,740.00
Repair	\$ -	\$ -	\$ -	\$ -
Operating Components				
Rent Supplement	\$ -	\$ -	\$ 51,000	\$ 51,000.00
Transitional Operating Funding	\$ 13,628	\$ 72,852	\$ 244,640	\$ 331,119.85
SM Administration Fees	% of Allocation			
SM Administration Fees	5%	\$ 717	\$ 3,834	\$ 42,283
Total COCHI		\$ 14,345	\$ 76,686	\$ 845,663
OPHI				
SM allocation for each fiscal year	\$ 782,900	\$ 405,600	\$ 631,400	\$ 1,819,900
Capital Components				
Rental Housing	\$ -	\$ 355,320	\$ 233,826	\$ 589,146
Homeownership	\$ 50,800	\$ -	\$ 90,000	\$ 140,800
Ontario Renovates	\$ 675,455	\$ -	\$ 155,009	\$ 830,464
Operating Components				
Rental Assistance				
Rent Supplement	\$ -	\$ -	\$ -	\$ -
Housing Allowance - Direct Delivery	\$ 17,500	\$ 30,000	\$ 30,000	\$ 77,500
Housing Allowance - Shared Delivery	\$ -	\$ -	\$ -	\$ -
Housing Support Services	\$ -	\$ -	\$ 90,995	\$ 90,995
SM Administration Fees	% of Allocation			
SM Administration Fees	5%	\$ 39,145	\$ 20,280	\$ 31,570
Total OPHI		\$ 782,900	\$ 405,600	\$ 631,400
TOTAL PROGRAM ALLOCATION		\$ 797,245	\$ 482,286	\$ 1,477,063

- Eligible use of COCHI funding is as follows:
 - Be used solely in social housing and community housing;
 - Protecting rent-geared-to-income tenants in non-profit and co-operative housing projects with expiring operating agreements/mortgages;
 - Protect, regenerate and expand social housing and to reduce housing need in social housing;
 - Preserving social housing supply through repairs and renovations; and/or
 - Supporting social housing providers that can demonstrate their potential for long-term sustainability through transitional operating funding.
 - Preserve Urban Native housing units – no net loss of units; retained units improved through repair/capital replacement; and adequate affordability support
- The funds from the Transitional Operating Fund (COCHI) in 2020/21 were allocated to the following Social Housing providers:
 - Native People of Nipissing (NPON) assisting a total of 20 units
 - Nipissing District Housing Corporation (NDHC) assisting a total number of 50 units.
- Also, in the 2020/21 COCHI/OPHI Investment Plan, the DNSSAB shows an allocation to the OPHI - Rental Housing Capital Component of \$355,320 which has been committed to 4 units of the Gateway Phase II (20 unit-modular). This project received the construction permit on June 2, 2021.
- Further, in the 2020/21 COCHI/OPHI Investment Plan, the DNSSAB shows an allocation to the OPHI - Rental Assistance (Housing Allowance) Operational Component of \$30,000.
 - The objective of the Rental Assistance component is to address affordability issues of households in rental units within the District and where a Housing Allowance subsidy is paid directly to a household in need of rental assistance or may be made directly to landlords where the recipient has chosen this approach and provided written direction and consent.
- The Housing Allowance – Direct component assisted 10 individuals per month who each received \$250.00. This program assists with affordability while the households wait for an RGI unit.

RISK IDENTIFICATION AND MITIGATION:

COCHI and OPHI funding allocations are provided on a 'use it or lose it' basis, therefore, funds that are not committed by the required timelines may be reallocated to other Service Manager areas. The DNSSAB does have the flexibility to move funds to certain other program components to ensure that funds are fully committed.

CONCLUSION:

In summary, all allocations have been committed and expensed for the 2020-21 fiscal year. The past amendments further supported the additional capital funding for the future housing with supports project on Chippewa Street and the need for additional affordable rental housing in the District. The Transitional Operating allocation assisted housing providers with expiring operating agreements as well as helped to preserve several Urban Native units. In summary, the investment into the District's social housing portfolio as well as developments at the Chippewa location represents a highly important investment for District of Nipissing. The continued COCHI - OPHI allocations will be crucial in assisting housing providers to complete projects that will improve and preserve housing stock in addition to enhancing essential services that have been identified in the District's housing continuum.

BRIEFING NOTE SSE06-21

For Information or For Approval

Date: June 23, 2021

Purpose: ODSP Discretionary Benefits Local Policy

Prepared by: Michelle Glabb, Director of Employment and Social Services

Reviewed by: Catherine Matheson, Chief Administrative Officer

RECOMMENDATION:

That the District of Nipissing Social Services Administration Board (DNSSAB) approve the Ontario Works/Ontario Disability Support Program Discretionary Benefits local policy as presented.

BACKGROUND:

The DNSSAB, through the Ontario Works program, is mandated to administer discretionary benefits on a case-by-case basis to:

- persons in receipt of assistance under the **Ontario Works Act, 1997**, including children on whose behalf Temporary Care Assistance (TCA) is being paid;
- persons in receipt of income support under the **Ontario Disability Support Program Act, 1997**; or
- a member of a prescribed class, such as a person in receipt of Assistance for Children with Severe Disabilities (ACSD).¹

The amount provided for discretionary benefits is determined by the Administrator.

Discretionary Benefits

The following discretionary benefits may be provided to eligible recipients:

- Health-related:
 - dental care for adults
 - vision care for adults
 - prosthetic appliances
 - funerals and burials

¹ Ministry of Children, Community and Social Services, Summary of Benefits, Policy Directive 7.1, Social Assistance Extranet, https://www.mcscs.gov.on.ca/en/mcscs/programs/social/directives/ow/7_1_OW_Directives.aspx

- heating payments and payments for low-cost heating energy conservation measures
- Non-health-related:
 - vocational training and retraining
 - travel and transportation that is not for health-related purposes
 - moving expenses
 - any other special service, item or payment authorized by the Director

CURRENT STATUS/STEPS TAKEN TO DATE:

Determining the appropriate level of discretionary benefits for recipients of the Ontario Disability Support Program (ODSP) or members of a prescribed class, has been challenging as clients’ needs are not the only consideration. Due to discretionary benefits being capped by the Ministry of Children, Community and Social Services (MCCSS), over the years Ontario Works has had to be cautious when setting the budget.

Through the OW/ODSP Joint Protocols Committee, a commitment was made to review ODSP benefit requests, denials and approvals to determine if revisions to the OW/ODSP Discretionary Benefits Policy were required. Through this review and based on the availability of cost shared funding, it has been determined that an increase from the existing \$300.00 maximum per case per year is required in order to better meet the needs of this population. For this reason, the proposed policy amendment is to increase the maximum allowable to an amount **up to** \$500.00 per case per year. Other minor changes were also made to the policy to increase transparency, provide clarity and promote consistency in decision making.

FINANCIAL IMPLICATIONS

Effective April 1, 2013, the maximum amount of discretionary benefit expenditures eligible for provincial cost-sharing, for municipal delivery partners, is determined by the following formula:

- the greater of \$10 per case per month (caseload equals the sum of the average monthly Ontario Works caseload and the average monthly Ontario Disability Support Program caseload within the delivery partner’s geographic area); or
- \$2,500 per month.²

The benefits administered by Ontario Works (OW) for recipients of ODSP fall under the broader OW discretionary budget. Each year, through the DNSSAB budget process, an amount is set to establish the benchmark for discretionary benefit expenditures. As noted above, as this benefit is capped by the MCCSS, the estimated budget is set at or below the cap based on the formula noted above. To date, Ontario Works has effectively managed discretionary benefit expenditures and remained within the cap avoiding any impact on the municipal levy.

RISK IDENTIFICATION AND MITIGATION

² Ministry of Children, Community and Social Services, Cost Sharing, Policy Directive 11.3, Social Assistance Extranet, https://www.mcscs.gov.on.ca/en/mcscs/programs/social/directives/ow/7_1_OW_Directives.aspx

In order to mitigate any potential risk or impact on the municipal levy, it is imperative that controls are in place to monitor discretionary benefit expenditures. With the assistance of DNSSAB's finance department, Ontario Works will continue to monitor that discretionary benefits remain on budget and within the MCCSS cap. In order to further mitigate risk, language that confirms that the local Policy is subject to and contingent upon the availability of cost shared funding has been incorporated.

COMMUNICATION

With the approval of the Board, the updated local policy will be shared with OW/ODSP Joint Protocols Committee and local processes will be updated accordingly.

CONCLUSION

While ODSP rates are significantly higher than OW, ODSP recipients continue to live in poverty. For this reason, the availability of discretionary benefits to assist recipients with the cost of items and services covered through this policy is essential to preventing hardship, improving outcomes and promoting health and wellness.

Title: ODSP Discretionary Benefits	Department: Social Services and Employment
Date: April 1, 2019	Policy #: 12
Resolution #:	Revised: May 25, 2021

Policy Statement

Discretionary Benefits under the Ontario Works program are provided on a case-by-case basis to recipients of the Ontario Disability Support Program or a member of a prescribed class, such as a person in receipt of Assistance for Children with Severe Disabilities (ACSD) at the discretion of the Administrator. The Administrator determines what items and services are covered by this local policy and the maximum amount provided. Discretionary funding is not intended to cover costs associated with ongoing payments (e.g. rental or income supplements).

Intent

- to ensure consistency and transparency in decision making
- to provide guidance in determining whether or not an ODSP recipient or member of a prescribed class is eligible for discretionary benefits under the Ontario Works Program and in what amount
- to comply with the requirements and minimum standards as established in Ministry Directives 7.1 – Summary of Benefits, 7.2 – Health Benefits, and 7.7 – Other Benefits
- to establish DNSSAB Ontario Works standards

Persons or Groups Affected

- Recipients of income support under the Ontario Disability Support Program Act, 1997; or a member of a prescribed class, such as a person in receipt of Assistance for Children with Severe Disabilities (ACSD).

Eligibility Criteria

ODSP recipients or a member of a prescribed class not eligible for benefits through the ODSP program can apply for discretionary benefits through the Ontario Works Program under the following circumstances:

1. Health-related purposes where the Administrator has made a determination of need based on verifiable documentation;

Or

Non-health related purposes where the circumstances are deemed reasonable and appropriate by the Administrator and;

2. It has been verified that the item or service is not eligible under any ODSP benefit and a note and / or a no provision letter has been completed by ODSP in SAMS to confirm that there is no provision for the item(s) or service(s) being requested and;
3. The status of the recipients file was active for the month that the benefit is being requested and;
4. The cost of the item(s) or service(s) being requested is greater than \$100.00 and;
5. The recipient has not exceeded the \$500.00 threshold (not including discretionary dental or vision care for dependent adults) in the past 12 months and;
6. The recipient has verification that the balance for any item or service being requested that has a cost of greater than \$500.00 has been, or will be paid and;
7. The item(s) or service(s) have not been purchased prior to the request being submitted for consideration and;
8. An application for any item or service related to the prevention of homelessness such as a service disconnection for hydro or gas arrears, an eviction notice for rent arrears has been applied for under the Community Homelessness Prevention Initiative (CHPI) and;
9. Has submitted a minimum of 2 estimates, when required, for any item(s) or service(s) being requested and;
10. The item being requested is not on the "items not covered" list below.

NOTE: The maximum allowable is **up to** \$500.00 and is at the discretion of the Administrator.

NOTE: In exceptional circumstances, and on a case-by-case basis, recipient requests that do not meet all of the above criteria may be considered with supervisor approval.

As a quality assurance measure, OW Staff will endeavor to also review all applicable ODSP policy directives to ensure that the item or service is not covered under any mandatory ODSP benefit. If it is discovered that an error may have been made and the item or service may be covered under ODSP, the OW Case Manager will contact the appropriate ODSP staff to review.

This local Policy and the associated levels of financial support are subject to change and are conditional upon the availability of cost shared funding.

Items Not Covered

- ✘ Any item or service that is covered by the ODSP program or by any other program such as the Assistive Devices Program
- ✘ Associated expenses relating to employment enhancing activities such as bus passes for ODSP non-participating recipients
- ✘ Counselling
- ✘ Dentures (repairs, realignments and relines will be considered)
- ✘ Reissuance of any payments approved by ODSP
- ✘ Top ups to ODSP food and shelter allowances
- ✘ Prescription Drugs
- ✘ Over the counter medications
- ✘ Orthotic Shoes (inserts will be considered with medical note)
- ✘ Reimbursements for item(s) or service(s) already purchased or services already delivered.
- ✘ Winter clothing / back to school
- ✘ Household items that are not related to a health related issue or emergency (Examples of items that may be considered health/emergency related are: fridge, stove, bed etc)
- ✘ **On-going** payments for items such as rent, mortgage payments, utilities etc.

NOTE: Expenses associated to participation in the Ontario Works Program may be considered under Local Policy # 5 if the recipient has an active Outcome Plan and mandatory ODSP work related benefits are not available. Assistance under Employment Related Expenses (ERE) are not included in the \$500.00 ODSP Discretionary Benefits maximum.

OW Discretionary Dental for ODSP Dependent Adults

ODSP Participating and Non-Participating Dependent Adults may qualify for emergency dental benefits. The dependent adult or ODSP Applicant (on behalf of the ODSP dependent adult) can request dental benefits by completing and submitting an ODSP Discretionary Dental Form to the OW office for consideration. A copy of the Health Card will be required. If eligible, a manual dental card will be issued to the citizen or faxed directly to the dental office. All payments for emergency dental services are to be paid directly to the dentist office after the work has been completed. The \$500 cap does not apply to discretionary dental for ODSP dependent adults. In addition, the amount issued for dental care for ODSP dependent adults is not considered when reviewing other discretionary requests for the recipient.

OW Discretionary Vision Care for ODSP Dependent Adults

Vision care benefits can be issued to ODSP Non-Participating and Participating Dependent Adults. Requests can be submitted by the dependent adult or the ODSP applicant on behalf of the ODSP dependent adult by completing and submitting a Discretionary Vision Care Request form including 2 estimates and a copy of the prescription. If eligible, a maximum of \$250.00 can be issued under Discretionary Vision every 3 years unless there is a significant change in the recipient's prescription. The amount issued for vision care for ODSP dependent adults is not considered when reviewing other discretionary requests for the recipient.

Funeral Benefit for ODSP Recipients

Recipients who pass away while in receipt of ODSP may qualify for funeral benefits in situations where the deceased does not have a prepaid funeral or available resources in their estate to cover the cost. OW will complete the assessment for funeral benefits and will verify if there is eligibility for assistance with these costs under the Ontario Works program. Further details regarding funerals and burials can be found in Local Policy # 3.

Internal Review

If an applicant or recipient disagrees with a decision, he/she must request an Internal Review within 30 calendar days from the day the decision is received or deemed to be received. The request must be made in writing and will be forwarded to the Ontario Works Supervisor for review. Following the Internal Review, a written decision will be provided within 30 calendar days. Discretionary Benefits are not appealable to the Social Benefits Tribunal (SBT).

Written requests for internal reviews may be submitted using the **Request for Internal Review** (Form 2880), or by letter/note signed by the applicant or recipient.

In cases where the **Request for Internal Review** form is not used, the letter/note should include:

- a statement indicating that the applicant or recipient wishes to have the decision reviewed;
- the reason he/she disagrees with the decision; and
- the name, case identification and signature of the applicant or recipient requesting the review.

Local Audit Requirements

- Adhere to all legislation, regulations and directives governing the provision of discretionary benefits under the Ontario Works Act.
- Documentation is on file to support decisions made.
- All information is recorded in the appropriate systems.
- Random file reviews to ensure that maximum payables are not exceeded.
- Random file reviews to ensure that recoveries are maximized where applicable.

Reference Material

Ministry Directive 4.9	Prepaid Funerals
Ministry Directive 5.2	Assignments
Ministry Directive 7.1	Summary of Benefits
Ministry Directive 7.2	Health Benefits
Ministry Directive 7.4	Employment and Participation Benefits
Ministry Directive 7.7	Other Benefits
SAMO Communication Update 73-18	Reimbursements for Funeral and Burials
Local Joint Protocol:	ODSP Joint Protocol
Local Job Aids	MSN Items Covered under ODSP
	MSN Items Not Covered under ODSP
DNSSAB Local Policy # 3	Funerals and Burials
DNSSAB Local Policy # 5	Participation Expenses

BRIEFING NOTE SSE07-21

For Information or For Approval

Date: June 23, 2021

Purpose: **Association of Municipalities Ontario Response to the MCCSS Recovery and Renewal Plan**

Prepared by: Michelle Glabb, Director of Employment and Social Services

Reviewed by: Catherine Matheson, Chief Administrative Officer

Briefing note SSE07-21 provides information on the Association of Municipalities Ontario's response to the Ministry of Children, Community and Social Services (MCCSS) Social Assistance Recovery and Renewal Plan.

BACKGROUND:

As previously reported to the Board, the provincial government in partnership with municipal governments continues to move forward with their Social Assistance Recovery and Renewal Plan. On May 14, 2021, the Association of Municipalities Ontario (AMO) released its response to the Province's new direction in a briefing note entitled "Social Assistance: Change to the Municipal Delivery Role".¹

In their briefing note, AMO acknowledges the significance of the Province's proposed functional realignment of the provincial and municipal delivery roles. Overall, AMO appears supportive of the proposed transformation and states that with the right conditions in place, it is committed to working with the province on the co-design of a new social assistance program.

The following summarizes the key points highlighted in the briefing note:

- Legislative and regulatory changes are required to enable implementation primarily by designating a new service delivery role for the Province and municipal service managers.
- With the realignment of roles, a new funding formula for Ontario Works program administration will be developed. However, changes to the current 50/50 program administration cost-sharing formula are not proposed.
- The Province will continue to pay 100% for the cost of income support benefits.

¹ Association of Municipalities Ontario, *Social Assistance: Change to the Municipal Delivery Role*, May 14, 2021, <https://www.amo.on.ca/sites/default/files/assets/DOCUMENTS/Briefing-Notes/2021/SocialAssistanceChangeToMunicipal%20DeliveryRoleBriefingNote20210514BNV2.pdf>

- Bill 276 “Supporting Recovery and Competitiveness Act, 2021 Schedule 21”, introduces the legislative framework introduced by the Province to support their new vision. AMO provided a submission to the Standing Committee and did not propose any further amendments. Current status of the Bill: Royal Assent received. Statutes of Ontario 2021, chapter 25.²
- AMO suggests that the Province should decrease the 800+ rules governing social assistance to make it easier for people to stabilize their lives and focus on employment.
- AMO encourages the government to adopt a social determinants of health approach across government and support the non-profit community sector to provide health and social services that are essential for life stabilization, including supportive housing, mental health and addiction services.

FINANCIAL IMPLICATIONS:

In the briefing note, AMO clearly states that it supports the Province’s Social Assistance Recovery and Renewal Plan if the vision protects municipal governments from increased social assistance costs. Further, AMO suggests that some of the realized program savings “could be reinvested into raising benefit rates and indexing to inflation on an annual basis”³.

From a DNSSAB perspective it is important to note that although the Province has not proposed changes to the 50/50 program administration cost sharing formula, the impact that COVID-19 will have on Nipissing’s caseload, following the expiration of the federal benefits, remains to be seen. If the increase in the caseload is substantial, the associated administrative costs to municipal budgets, although cost shared, will increase accordingly. Further, while the Province will continue to pay 100% of the cost of income support benefits, other Ontario Works cost shared benefits such as discretionary and employment related benefits will also increase as the caseload rises, placing additional pressure on the municipal levy.

CONCLUSION:

AMO has been actively engaged in “advocacy with successive provincial governments about social assistance transformation for decades”.⁴ Their continued involvement is essential to ensuring that the needs of municipalities at the local level are represented. AMO is also well positioned to bring the issues of northern communities to the forefront to ensure the unique needs of these regions are considered in the provinces decisions. As the Province moves forward with their Recovery and Renewal journey, AMO will need to continue to monitor the roll out of the various stages included in the plan. This will ensure that unexpected impacts on municipalities are identified and avoided throughout the co-design process.

² Legislative Assembly of Ontario, <https://www.ola.org/en/legislative-business/bills/parliament-42/session-1/bill-276>

³ Association of Municipalities Ontario, *Social Assistance: Change to the Municipal Delivery Role*, <https://www.amo.on.ca/sites/default/files/assets/DOCUMENTS/Briefing-Notes/2021/SocialAssistanceChangeToMunicipal%20DeliveryRoleBriefingNote20210514BNV2.pdf>, May 14, 2021

⁴ Association of Municipalities Ontario, *AMO Policy Update-New Social Assistance Vision with Municipal Role Changes*, February 11, 2021, https://egenda.middlesex.ca/files/agendas/318/5062_C_16_CW_Info_March_9_AMO_Update_February_11.pdf



BRIEFING NOTE EMS06-21

For Information or For Approval

Date: June 23, 2021

Purpose: OAPC Ombudsman Investigation Report

Prepared by: Robert Smith, EMS Chief

Reviewed by: Catherine Matheson, CAO

Report EMS06-21 provides information on the findings of the Ontario Ombudsman Investigation into how the Ministry of Health oversees patient complaints and incident reports about ambulance services.

EXECUTIVE SUMMARY

The Ombudsman's office investigates issues related to provincial activities of public interest to enhance governance and for such things as accountability and transparency.

In 2018, the Ombudsman's office launched a systemic investigation into the methods and means by which the Ministry of Health oversees and investigates complaints about ambulance services, and how mandatory incident reporting from paramedic services is managed.

In May 2021, the Ombudsman's final investigation report was released publicly. The investigation concluded that the Ministry of Health (MOH) processes for managing and investigating complaints, and for overseeing the review of mandatory incident reports was not compliant with the Ombudsman Act.

The resulting findings and 53 recommendations include serious issues with oversight, ineffective policy and procedure design, delayed investigation timelines, quality of report writing written work, ineffective communication with complainants, and lack of staff training and retention.

The Deputy Minister accepted each of the recommendations and has committed to both implementing all recommendations, and to increased transparency/accountability for ambulance oversight.

BACKGROUND

The Ministry of Health (MOH) holds regulatory responsibility for the \$1.5-billion emergency medical services system in Ontario. Within its purview, the MOH is specifically responsible to monitor, inspect and evaluate paramedic services, and to investigate complaints through robust system oversight and proper investigations.

Management of requests for paramedic service assistance are facilitated in one of the 22 communications centres, of which half are contracted out under performance agreements. North Bay Regional Health Centre (NBRHC) operates Nipissing District's Ambulance Communication Centre.

Response to requests for service are facilitated by one of the 61 paramedic services who deploy more than 8,000 Paramedics in Ontario. Upper Tier Municipalities (UTMS) and Direct Delivery Agents (DDA), inclusive of District Social Services Administration Boards (DDSABs) who are responsible for the provision of these services within their boundaries, while the province is responsible within certain First Nations communities and remote areas.

The quality of medical care and the delegation of controlled medical acts is currently managed by a group of Ministry designated base hospitals (BH). Ontario paramedics must be certified by one of these BHs. Unlike the vast majority of medical professionals in Ontario, paramedics are not part of a Professional Regulatory College.

Three regionally based Field Offices facilitate Ministry oversight, including assessment of mandatory documentation submission. More than 250,000 of these reports are submitted annually. Incident Report submission to the MOH is set out in Regulation. The Paramedic Services in Nipissing District submitted 301 incident reports to the North Field Office in 2020.

The Investigation Services Unit, a part of the Emergency Health Regulatory and Accountability Branch, is responsible for the investigation of complaints about the provision of paramedic services, and monitors investigations undertaken by paramedic services and dispatch centres.

OMBUDSMAN INVESTIGATION

On May 1, 2018, members of the Special Ombudsman Response Team, Legal Team, Investigations Team, and Early Resolution Team reviewed more than 200 of the Ministry's investigation files and thousands of incident reports, as well as policies and procedures, internal communications, and other information requested from the Ministry. They also reviewed documents provided by complainants and community stakeholders. Interviews were conducted with 60 different complainants, Ministry staff, and other stakeholders. During the course of the three year investigation, there were an additional 72 complaints related to the oversight of Ontario paramedic services.

During the period of the Ombudsman investigation, a coroner's inquest also reviewed aspects of Ontario's 911 system. In November 2018, the coroner's jury made 27 recommendations to improve emergency services in Ontario, including one that recommended the government create an independent body to provide oversight to all 911 operations, investigating, and complaint resolution.

FINDINGS

Overview

The Ombudsman investigation identified serious gaps in the Ministry's investigative process. Areas of concern included lack of a clear mandate, inconsistent investigation and reporting processes, delayed report completion/issuance, absence of any meaningful data collection capacity to allow report retention/tracking, and a lack of current policies and procedures.

Limited Investigative Mandate

The MOH was noted to interpret their mandate for investigating complaints in a very restrictive manner, specifically regulatory compliance. In short, the MOH Investigations Unit focuses only on whether there was a proven breach in legislation. The Ombudsman identified that customer service violation as the root cause for many complaints. With interpersonal professionalism not deemed by the MOH to be legislated, the ability to substantiate in Legislation is impossible. Despite specifically identified sections of Standards that speak to professionalism, the MOH has taken the position that these challenges are an HR employer/employee issues.

Absence of a Data Retention/Data Analytics System

The Ministry's Investigation Services Unit does not have a centralized case management system, meaning that investigators must develop their own system for

records retention. The Ombudsman Team discovered that the Ministry's notebook system for data entry was discontinued in early 2018 and was not replaced. The overarching lack of any data analytics around investigations, meant that the Ministry is unable to track trends or systemic issues, or any historically relevant investigations

Investigation Design, Timeliness and Report Outcomes

The Ministry's investigation reports contain no details surrounding the investigative process, such as documents reviewed or interviews completed, leading to concern regarding process accuracy. This, with the lack of a standardized report format, results in a question of process credibility. Additionally, investigation reports do not make recommendations for resolution, leaving such efforts to the paramedic service or communication centre.

The Ombudsman reported finding that many of the nearly 200 annual investigations took over a year to complete and report, apparently due to internal bureaucracy, including staffing shortages. The delay in the release of investigative reports has a negative impact on Ministry credibility, and impacts the ability of a paramedic service or communication centre to address issues when timeliness is not achieved.

Under the Ministry's process, the subject organization/personnel may have little to no involvement in the investigation process prior to a report being finalized, with no opportunity to provide input and assess the factual foundation. It was determined that if an organization were provided time to review and respond to an investigation prior to it becoming final, conflicts and challenges to the reports could be avoided.

Tracking of Paramedic Contraventions

The Ministry does not track offense findings to be substantiated, where a paramedic has contravened Legislation, and that employers have no obligation to communicate discipline with the Ministry. While the Ministry acknowledged that they have capacity to track such detail, almost exclusively, they allow for misconduct by paramedics to be managed by the employer.

The Ministry has the option to pursue charges under the *Ambulance Act*, but such an action is extraordinary, and has only happened twice.

Efficient Policies and Procedures.

There are no active policies, procedures, or protocols defining how the Investigation Services Unit reviews complaints pertaining to paramedic services. The lack of any formal direction for adherence resulted in uninformed and inconsistent processes. The

Ministry reported being aware of the challenges to an effect protocol, but asserted that competing priorities and staffing challenges preempted the development of such a tool.

Incident Reporting Processes

There were significant challenges around the entire incident reporting process. Unclear inclusion criteria and inconsistent compliance of timelines were identified as paramedic service challenges, while a lack of timely auditing by Ministry Field Office personnel subverts the efficacy of the system. Additionally, the investigation found that the methods of submitting incident reports were inconsistent, leading to difficulty in defining relevant information.

There is no methodology for Field Offices to triage and assess incident reports for consideration of further follow up, and there is no method to sufficiently detail assessments in a manner to determine issue severity. Beyond that, the Investigation Services Unit has no method to track Field Office compliance with workload and timelines.

RECOMENDATIONS

The Ombudsman's investigation recommends the Ministry's Investigation Services Unit should seek to interview every complainant, paramedic, communications officer, a relevant third party, in every instance where such a person may have material information related to a complaint, regardless of the availability of documentary evidence.

It recommends that the Ministry should:

- invest in a robust case management system that would permit the Ministry monitor data analytics, to facilitate any prosecutorial efforts and to ensure practices can withstand scrutiny.
- develop and deploy a fulsome investigation protocol able to detail complaint handling and investigation processes, and investigation inclusion criteria, and all personnel should be fully educated in the protocols.
- adopt a clear, standardized format for investigative reports that includes information about the investigative process and the specific evidence reviewed. The reports published by the Ministry's Investigation Services Unit should make specific recommendations to resolve any issues that are identified.
- ensure that all organizations under investigation are permitted the opportunity to review and respond to draft reports, and that their submission be considered by the Ministry prior to any issued final report.

- ensure that their Investigations Unit is properly resourced to ensure success.
- require that paramedic services, and base hospitals report discipline resulting from any investigation, and the Ministry should be required to track such information, and be required to make such data available to potential employers
- take steps to ensure that all organizations obligated to submit incident reports understand and accurately interpret and comply with such requirements and that the Ministry audit organizational compliance with the incident reporting obligations. The Ministry should standardize the incident reporting template should work with relevant stakeholders to develop a method for submitting incident reports electronically.

RISK CONSIDERATIONS

While the Ombudsman's investigation into the Ministry Investigation Unit was detailed, and captured a number of important factors, the Paramedic Chiefs from Northern Ontario confirmed that no service north of Simcoe County had been engaged in the process. This finding does not negate the investigative findings, but confirms that Northern Paramedic Services were not involved in it. A representative of the Ministry's North Field Office confirmed that they had been engaged.

The investigation set out 53 recommendations from their findings. Many of these recommendations are reasonable; however, they will impact on UTM/DDA workload. Other recommendations will present organizations with potential labour management challenges, as issues such as discipline would become the purview of the Ministry.

Finally, implementation of a number of recommendations, without the necessary Regulatory amendments could lead to unilateral decision making by the Investigations Unit that impact on the delivery agencies' ability to operate in an evidence-based best practice model.

COMMUNICATION:

As the Ministry has accepted each of the Ombudsman's findings and recommendations, and the issuance of the report has only recently been released publicly, a considerable effort by Paramedic Services would be required to monitor rapid changes to process, engage with staff to ensure they are kept current of changes, develop strategies for success with the North Field Office of the Ministry, and establish methods for continuous quality compliance with changes.

CONCLUSION:

In early 2018, the Ontario Ombudsman initiated an investigation into how the Ministry of Health oversees patient complaints and incident reports about ambulance services. The final, detailed report released in May 2021, included 53 recommendations, all of which were accepted by the Ministry of Health.

Many of the investigative findings related to a lack of existing mandates, processes, system designs, authority, and data analytics/solutions. The recommendations addressed these findings, but in doing so, suggested significant system design changes that will affect all partner agencies, including UTMs and DDAs.

Over a number of years, Paramedic Services have evolved their role to be holistic health care partners. The Ombudsman Investigation has identified a number of challenges related to the Ministry Investigation Unit, providing recommendations intended to address those challenges. Implementation of these changes must be considered cautiously in a manner that considers evolutionary system changes, and should be considered within the reality that Paramedics have become health professionals.