

STANDING COMMITTEE ON HUMAN SERVICES

Hansard Verbatim Report

No. 32 – April 15, 2014



Legislative Assembly of Saskatchewan

Twenty-Seventh Legislature

STANDING COMMITTEE ON HUMAN SERVICES

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Mr. David Forbes, Deputy Chair Saskatoon Centre

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Mr. Paul Merriman Saskatoon Sutherland

Ms. Laura Ross Regina Qu'Appelle Valley

> Ms. Nadine Wilson Saskatchewan Rivers

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[The committee met at 15:05.]

The Chair: — Good afternoon, ladies and gentlemen. Welcome to the Standing Committee on Human Services. My name is Delbert Kirsch, and I'm Chair of this committee. And with us today is Mr. Buckley Belanger and Ms. Danielle Chartier and Mr. Doyle Vermette and Mr. Mark Docherty and Mr. Greg Lawrence, Mr. Paul Merriman, Ms. Laura Ross, and Ms. Nadine Wilson.

This afternoon we will resume our consideration of vote 36, Social Services, subvote (SS01). Minister Draude is here with officials. Madam Minister, please introduce your officials and make your opening comments.

General Revenue Fund Social Services Vote 36

Subvote (SS01)

Hon. Ms. Draude: — Thank you very much, Mr. Chair, and to the committee. I'd like to introduce the Social Services officials with me. I have the deputy minister, Ken Acton, as well as the officials from the child and family services and corporate services with me today. They are Andrea Brittin, who is the assistant deputy minister of child and family services; Bob Neufeldt, director of community services; Garry Prediger, executive director of service delivery; Tobie Eberhardt, who is the director of program effectiveness; Lorne Brown, executive director of the enterprise projects and risk management; Pat Faulconbridge, the executive director of the executive director of the function of the status of Women office; and Miriam Myers, who is the executive director of finance.

I am very pleased to be here this afternoon to talk about the Ministry of Social Services child and family services division as well as the corporate services and the Status of Women office. The Status of Women will continue its work across government on issues of gender equity, women in leadership roles on boards and the workplace, and public education about violence against women and girls.

The corporate services division will continue to work closely with the child and family services on automated case management systems, Linkin, which is now used by the ministry's child and family services staff. Linkin is a critical component of the province's commitment to child welfare transformation. It's greatly improved the ability to track children in care and is providing many enhanced decision-making supports.

The system was initially implemented in 2012, but this past December we added support for the structured decision-making tools being used by the child and family services. Linkin continues to enhance our delivery of child welfare services in numerous ways, including electronic assessment tools that improve access to comprehensive family information. It enhances understanding of family needs in improved planning and assessment and appropriate services response.

It also includes the availability of current case information to

improve decision making and safety planning by our front-line workers to reduce risks to children. It's improved access to client information, including a pilot of mobile devices by front-line staff that gives them instant access to information when visiting children, youth, parents, and caregivers when they're away from the office, and it improves consistency in casework and adheres to best practices.

During 2014 and '15 we're going to continue work on the financial components of Linkin to ensure we can continue to make timely and accurate payments to foster parents, families, and service providers.

I've already mentioned child welfare transformation and one of the most important pieces of work my ministry will focus on in the next year as part of the child and family agenda. In 2014 and '15 our government is investing an additional \$8.7 million for a total investment of nearly \$6.2 million since the child and family agenda was launched in 2011.

The work of the child and family agenda is focused on four goals. The first one is children getting a good start through school readiness, literacy, and parenting. The second one, that youth are prepared for the future with improved educational attainment amongst Aboriginal groups. The third, that families are strong through improvements to supports for mental health, addictions, and parenting. And the fourth one, that communities are safe through building partnerships to reduce crime.

We are continuing to see very positive results from the child and family services division. The number of children coming into care is still declining. In December of 2013 there were 4,492 children out of home care, compared to 4,797 in December of 2009. During the same period, the number of homes with more than four children dropped from 96 to 48. Further, the number of children in these homes decreased from 596 to 282. It's a tremendous achievement and a credit to the hard-working front-line staff in the child and family services division.

While I'm on the topic, I'd like to stress again that the ministry has not decreased the number of front-line staff in this division. Since 2007 there are 90 new FTEs [full-time equivalent] added to the child and family services for the provision of front-line services. For this fiscal year, seven new FTEs have been added to child and family services. These FTEs are being reallocated from other areas of the ministry.

There will be three front-line workers who will address the increase in persons of significant interest or PSI [person of sufficient interest] caseloads. There will be two additional quality assurance analysts. They will support enhancements to the quality assurance function through increased file audits of the First Nations child and family agencies, and two additional First Nations and Métis consultants will be hired to provide enhanced oversight and support of our First Nations agencies.

Supporting and working with our First Nations agencies is another vital piece of work for the ministry, and it's critical to truly transforming our child welfare system. We are continuing our partnership with the Lac La Ronge, Athabasca, and Meadow Lake child and family service agencies to deliver off-reserve mandated services including after-hours services for families residing off-reserve.

The structured decision-making model has been implemented across the province and in four First Nations child and family service agencies. Several more First Nations agencies are interested in implementing the structured decision making in the coming year. We're going to be continuing with a flexible response pilot in Saskatoon, and this pilot is showing some very positive preliminary results. Mobile crisis along with Métis Nation-Saskatchewan, Sturgeon Lake child and family agencies, and Saskatoon Tribal Council are engaged with the ministry in implementing this approach.

Between October 2013 and March 2014, 939 cases were brought forward under the flexible response approach. The number of families referred for ongoing child protection services decreased by 47 per cent. An evaluation of the flexible response pilot is underway and will be in former... next steps.

In 2014-15, we are going to further expand our intensive family support programs. Three new CBOs [community based organization] — 601 Outreach in Saskatoon, Society for the Involvement of Good Neighbors in Yorkton, and the FoxValley Counseling Services in Regina — have been contracted to provide intensive family supports and after-hours services to families. We're planning further expansions in Prince Albert and another location still to be determined.

We'll also be expanding our positive parenting program or PPP. PPP gives parents the skills and the confidence they need to parent well and to address common child and adolescent social, emotional, and behavioural problems. Since 2012 two First Nations child and family agencies, Lac La Ronge and Peter Ballantyne, have been delivering PPP off-reserve. In 2013-14, we worked with the community partners in Regina, Yorkton, and Sandy Bay to train CBO staff in PPP so they can begin delivering services this fiscal year.

We recognize that foster families continue to play a very important role in a child welfare system and in the lives of the children who are welcomed into their homes. Kaine is one such child, and here's his story:

I'm living with the best foster parents there are. I feel blessed that I get to live with all of my siblings. We've been here for over four years, and great things have happened. My foster dad, Tony, and foster mom, Elaine, wanted to get me into sports to keep me busy. I started out playing basketball, and Tony was there to cheer me on.

At the end of grade 8, I won the Male Athlete of the Year Award, and the Humility, Principal, and Community Involvement awards. At the beginning of grade 9, when I was 13, I won the top player overall through the whole league, and I also won the MVP Award for my team.

Kaine went on to attend Notre Dame on a full football scholarship.

To support the valuable contributions of foster parents like Tony and Elaine, we will be increasing foster care, therapeutic foster care, and extended family care basic maintenance rates by 2 per cent.

Finally we'll begin in the engagement phase of the legislative review this spring with general, public, and key stakeholders, including those identified by the FSIN [Federation of Saskatchewan Indian Nations] and Métis Nation-Saskatchewan. In fact engagement sessions are beginning this week with Social Services staff, to be followed by sessions with a number of key stakeholder groups and the general public. Reviewing *The Child and Family Services Act* and *The Adoption Act* and making necessary changes to legislation is another important step towards transforming our child welfare system.

All of the initiatives I've talked about are meant to strengthen the programs and the services we provide with the ultimate goal of protecting and ensuring the well-being of children in care. Tragedies have occurred involving children in care, and my heartbreak goes out to their families and to their communities. We must do everything we can to try and understand what happened and what we can do to prevent tragedies from happening again.

[15:15]

As I said at the start of my remarks, the works of the child and family services division is amongst the most important in the ministry, in fact all of government. I believe our front-line child protection workers have one of the most difficult jobs there is, and at the same time it's very rewarding. I'm grateful to each and every one of them for the work they do every day.

I'd like to read a part of a letter one of our front-line workers received from a former child in care that shows just how important and what an impact our workers have on young lives.

You listened. You supported. You comforted, assessed, advocated, educated, and cared for the lives and the hearts of a very scared little girl and her family. When my life lay in pieces around me, you were the one adult I felt I could always trust.

Our front-line staff really do make a difference in the lives of our most vulnerable citizens, and I am proud to be their minister. Thank you, Mr. Chair. And I just wanted to comment that I believe this is ... We had agreed to six hours, and I believe that we have two hours, and few minutes late, so probably you'll want another maybe 10 minutes or so after. So we will complete all of the Social Services estimates for this year.

The Chair: — Thank you very much, Ms. Minister. The time was clocked in at 3:05, so yes we have the time, and Ms. Chartier has the floor.

Ms. Chartier: — Thank you to the officials and to the minister for your time here today. I just have a couple of brief questions actually around Status of Women, so I don't know if Ms. Faulconbridge needs to join you.

I think it's been about a year since we've talked about the member from Fairview's work on women on boards and increasing that number. And I know part of the work that she had done was to reach out to stakeholders to find out and generate a list of names of potential board members to put a bug in their ear to encourage them to take on participation on boards. I'm wondering what work has happened since the member had done that work to maintain that list or to ensure that we're always working on improving the number of women who are serving on our boards.

Hon. Ms. Draude: — Thank you to the member. There's 35 per cent of the people on public sector boards are women. Women on CIC [Crown Investments Corporation of Saskatchewan] boards increased from 19 per cent to 30 per cent over the last year.

And you're correct, the MLA [Member of the Legislative Assembly] from Saskatoon Fairview has been very active on this issue. She's held workshops in Saskatoon last June with the president of Board Dynamics and met with professional and business women's groups.

We provided funding to Equal Voice Saskatchewan with the goal of increasing the number of women running for public office. We had another meeting in Saskatoon not too long ago where we met with a number of women who are on boards to talk about their concerns and issues and to determine how we can better have women representing the province on boards.

The university boards, we have 41 per cent of the Saskatchewan university board members are women, and both university presidents are women.

Ms. Chartier: — Okay. Just to find out about the work though, you've made a gain from you said 19 per cent to 30 per cent on ... I'm not the fastest note taker.

Hon. Ms. Draude: — CIC boards.

Ms. Chartier: — CIC boards. And over what period of time was that from?

Hon. Ms. Draude: — In two years.

Ms. Chartier: — In two years. So do we measure fiscal year to fiscal year? Is that . . . so from April 1st, 2012 to March 31st, 2014.

Ms. Faulconbridge: — Right. And the percentage is actually at 35 per cent for the CIC subsidiary boards.

Ms. Chartier: — It's at 35 per cent.

Ms. Faulconbridge: — Yes.

Ms. Chartier: — And increased from April 1st, 2012 to March 31st, 2014.

Ms. Faulconbridge: — That's correct.

Ms. Chartier: — Okay. And some of the work that, I just want to correct, or not correct, but confirm. So, Madam Minister, you said last year, June, the member from Fairview . . . Or was that in 2012, June, that the member from Fairview had done some of that work?

Hon. Ms. Draude: — It was June 2012.

Ms. Chartier: — June 2012. Okay, I just wanted to double check. So CIC right now is at 35 per cent, and went from the starting place on April 1st, 2012, it was at 19 per cent on CIC boards. Did I hear that correctly? I just want to make sure. And I can go back through *Hansard* to make sure, but . . . So 19 per cent on April 1st, 2012 and 35 per cent as of a few weeks ago?

Okay, obviously that's a good trajectory, but ensuring ... So there were some initial contacts made in 2012 and some outreach. How do you keep ... Obviously names are always changing and people's interests are always changing. There's new people who are graduating from university who are completing different work in their lives. How do you continue to build on that initial work that she'd done to ensure that those people are included in the process? I've had a conversation in the last few months with someone who said, how do I make it known that I'd be interested in doing something like sitting on a government board?

Hon. Ms. Draude: — That was one of the discussions we had at our meeting this winter in Saskatoon. There was a number of women that were at the meetings and discussed not even knowing that there was opportunities. One of the comments that they made is, by the next meeting everybody should be contacting one or two of your friends to let them know. It's not the type of thing that we determined. And a group of women in the room didn't know whether advertising in the newspaper was the right thing to do. How do you actually know that there's even opportunities?

So probably, yes in lots of cases, word of mouth is probably a good part of it, ensuring that not just women but men are also seeking out opportunities for women to be represented on a board.

Ms. Chartier: — So how do you ensure then ... So when a new board appointment is open or available, how do you ensure that you are looking ... I'm curious how it works, how that process works. So a board opens up and you know that you need to increase the representation of more women to make it more equitable and have good decisions, balanced decisions. So how does that process work?

Hon. Ms. Draude: — We try and keep a list of names of potential people for boards, and when there is opportunities on boards, then we meet qualifications. We look at the professional background and the qualifications of the women whose names — women or men — but women whose names have been brought forward and ask them if they're interested. I've asked that very same question and found that some women are not interested in some boards. Some are, time commitment or travel is an issue. So we have to make sure that we can balance the work life and the family life with the women who have very good . . . They would have a lot to offer to the boards and to the people of the province, but they are balancing that between the family life that they have.

So we're moving in the right direction. There's still always work to do. But ensuring that we keep names and keeping the people that are on boards right now involved and letting them know that it's an important issue is one of my goals. **Ms. Chartier**: — Is there one master list? I just want a better sense of how this all works. So for each board is there a list or is there one master list? And how do you keep that fresh and updated?

Hon. Ms. Draude: — I know that in some places like the Crown Investments would have lists of names, and there is the various ministries. I know that we put names forward through the executive government and to other ministers. Some of the MLAs will come to me and say, I have people that I know would be good in various areas. So we do that as well as challenging the board members that are sitting on the very huge number of boards that we have in the province and asking them who would be interested in a situation as well.

Ms. Chartier: — Okay. Thank you for that. I think that that's all my questions for now.

The Chair: — Mr. Vermette is going to question now. You have the floor.

Mr. Vermette: — Thank you, Mr. Chair. To the minister, your officials, I've just got a couple of questions I'd like some clarification on. I know you moved to ... And this is with housing, and as the Minister Responsible for Sask Housing, I have a community that has raised quite a bit of concern in the area of a lease agreement, I guess, they signed, previously they signed. They're being asked to sign a new lease agreement. And we're talking about seniors.

The concern that they had, is there any option? And who did you consult with, and why were they not consulted with? A group of seniors, and I guess their concern is if they're being asked to sign a new lease agreement that says their rents are going up to 30 per cent from 25 per cent, and they have to sign the new lease agreements, what happens if they're totally opposed to signing this new lease? And I realize it's, you know, the government's prerogative to bring that forward. How would you handle that, and how are you going to handle that, just to see? And have you heard of those concerns yet?

Hon. Ms. Draude: — To the member, I think your colleague, the member from Saskatoon Centre, had agreed that we'd be asking questions on housing on our first session. So I didn't bring the officials along today for housing. But I will answer as best as I can, but then we will take the opportunity to meet and have the discussion as well.

So I'll ask Ken if you can give some information. And if you require further information, I'll meet with you.

Mr. Acton: — Ken Acton, deputy minister. Well in general when there was, if there's changes to the lease agreement, in every case people were given at least 12 month's notice. And if they were ... felt that they didn't want to sign a new agreement, they in fact don't have to do that. We find it good practice to go out and say we've given you notice about a change in the agreement as it relates to rent, which is part of kind of the existing agreement. But we try to keep things current. And as a result, we said, here's actually a new agreement that lays out all the new terms. And in general, we haven't had a lot of concerns about that.

Mr. Vermette: — Well in light of that, and I realize timing with your officials from housing would have been here to answer this, but if you can get me the information later, or there's another way, I'll talk to David in a way we can bring it up to get that information. Because I know, for instance, there's quite a few of them that were very . . . that I met with seniors, I met with a group of them. Probably about 50 seniors in a certain community were very concerned about signing a new lease agreement that raised their rent to 30 per cent because of affordability. They really feel they can't afford it.

Their concern was why weren't we given an option or why didn't Sask Housing look at doing a grandfather clause where they were protected as seniors for a while. You know to ... And new ones coming on understand the new agreement that goes 30 per cent, and that was their concern, why wasn't that given consideration. Nobody approached them, and they're very frustrated about that. So they're not comfortable with it. So I know letters were sent out to Sask Housing explaining that.

A large group of the residents, and I guess it's Creighton area, were very frustrated and are, you know, meeting and doing all they can to bring the attention to the minister and the ministry responsible for Housing.

So I guess at the end of the day, you can answer these questions if you can get me the information, or a better way that we find how we get the answers for these seniors. Because they've asked me to raise this, and I said I would raise it. That's why I'm bringing it up today. So if you can answer it, great; if not, we'll find another way to get those answers from the ministry and of course with your officials from Housing because they're not here.

Hon. Ms. Draude: — Thank you to the member, and we will get you additional information. I think that the member probably knows the policies for social housing hadn't changed since sometime in the '50s. And we had to make sure that we were targeting the people that were in the homes that were most in need. So we had, with our review of the policy, we had... 15 tenants had incomes of over \$100,000 a year. And we also had about 800 spaces that were created because of removal of what was actually a rent cap at that time. So there was no change for the very lowest income tenants, and everybody was given a year's notice. There was no evictions due to the program changes.

We know that overall there's only 5 per cent of tenants that actually pay the maximum unit rent in an area. And of course whenever there's a change, it's going to have an impact on individuals. But we always will take the opportunity to meet with individuals and find out what we can do. But at the same time, we know that we're working to ensure that we can provide a rent to those that are most in need.

I know that rents were raised in the past. In fact I believe they were raised every year. Between 2002 and 2007, there was rent increases. So it's continuing to ensure that we're providing spaces for people who need it the most.

[15:30]

Mr. Vermette: - Well thank you for the information. And I

guess at the end of the day, the seniors that are feeling it, that was the frustration. And the concern was the cost of living and where they decide to ... That's where their families are and they want to stay in the community where their families are.

So they're saying they're struggling with the cost of living, and the 30 per cent has created a lot of challenges for them. It wasn't something that they feel that they were consulted on. And you can say you sent out a letter or not, at the end of the day, if the response from yourself as a minister is not seen as understanding the challenges that those seniors are facing when it comes to medicines, travel in certain areas.

And the area that they're situated in Creighton, these seniors are looking at affordability whether, you know ... food is, you know, you look at the cost of food, the goods. Utilities are going up. Their medications are going up, travelling for medical appointments. They're having challenges. And I've seen the frustration, talking to those seniors — very, very angry, frustrated, and wondering ...

So when I share that information with the minister to understand those challenges, I know the Seniors Mechanism, I've asked them to come and meet with them. So they're going to come up and find a way to meet with them to raise their issues. And I know a lot of them do not, and I don't believe to my knowledge, have signed a new lease agreement and are asking government to have a clause. And you should have consulted with them to say maybe there would have been a provision to grandfather them in at the rate that they were at for whatever reason. They're very frustrated, and they're trying to show a good, good cause and good reason why their rents are creating challenges for many of them.

Yes, there are some that are doing okay. They have good pensions. They work hard. They saved. They understand that. The ones that are out there, they understand that. But there are many that are struggling to make ends meet. So that's the frustration that I heard from a lot of them.

So I said I would raise it today. I've done that for them; I will go back. I know we're going to continue to work. They are not happy. I know they're trying to do all they can too. But at the end of the day, I guess, you know, and some of them took a stand saying, we're not signing it, and we'll take whatever the Sask Housing wants to throw at us. Well I guess that's up to the government. You're going to treat our seniors the way they are. That's up to the government.

So we'll find other ways to get the information, but I think you've clarified some of it. But we'll have access I guess, in a written question or however, to get that information. I'll talk to my colleagues. So at this point, I have no further questions. If you want to follow up on anything I've said, that's fine. To the minister and your officials, thank you for trying to answer the questions without your officials here.

The Chair: — Ms. Chartier has the floor again.

Ms. Chartier: — Thank you. And I recognize your CLSD [community living service division] officials aren't here today. I do have a couple of questions pertaining to the community living service division. And I know that we've talked ... Or

I've had the opportunity in several speeches to talk about individuals who are living in mental health in-patient facilities. And I know there are several CLSD clients living in these facilities. And I'd asked some written questions as of October 2013, but I'm wondering if you've got an updated number on how many individuals are living in in-patient, mental health in-patient facilities.

Hon. Ms. Draude: — I'll see if the officials have the answers. I know that the agreement that we've made with the critic was that we were going to have one of our estimates on housing, one on disabilities, and one on child and family. So I'll see if I can find this. Otherwise we'll meet again, and we'll have a discussion.

We didn't bring the individuals along to answer these questions, but if you would like, we can make the arrangement.

The Chair: — Mr. Forbes has a comment.

Mr. Forbes: — I just want to clarify, Minister, that while you're more or less correct, but the last session today is our cleanup one. So this is our last chance to meet with you for a year. So the agreement was that, while we appreciate all of these ... We assume that even with your officials here, that they could run upstairs, get an answer quickly, do something. But it is our last opportunity to ask questions, so I'm encouraging members to ask questions to get them on the record. And we hope we get your best answer because ... And that will always be how I approach estimates is the last little bit is always cleanup. We are going to be focusing on child and family services, but I do think this is an important issue that we can't wait another year to hear the answer.

Hon. Ms. Draude: — To the member, I take the member at his word. And I know the member knows we had a discussion. We were going to have two hours on housing. We were going to . . . And then the next session was going to be on community living and disability, and this session was going to be on corporate services, child and family services, and women's issues.

I can't run up the stairs because the officials that would be having those answers are not in the room with us right now. I will endeavour to get the information for you. But I know that we also had the discussion about having individuals here and the amount of the good work that they do, and that they are doing their jobs in the other places. So I took you at your gentleman's agreement word that this is what we were going to do today.

Mr. Forbes: — Well then it's good to have this very public discussion because the alternative is, Ms. Minister, is that you will have to bring all your officials to all the meetings all the time, because you should be prepared to answer any question in estimates. It's only a courtesy that we've organized it this way.

And on the last one particularly, your deputy minister I'm sure would be able to provide some stuff. You have assistants here. You have still quite a few people here who could go outside and make a phone call and say... And we are here for over an hour and a half to get people here or a simple answer.

Hon. Ms. Draude: — We will endeavour to get the information

for you, and I will know for next year that this is what you want. And I will ensure that ... We know the cost of having people here, and I'll make sure that you're aware of that.

The Chair: — Mr. Forbes, I believe that was the agreement. The committees, we were meeting in sections just so \dots I mean also it's a case of where you're going to put everybody. So that was the agreement made, and that was \dots

Mr. Forbes: — It was never in agreement with me, because the last session was . . .

The Chair: — Well the House leaders made the agreement, so talk to your House Leader. And your House Leader and our House Leader can debate it out. But here and now, this is what we're on. Yes, Ms. Chartier has the floor.

Ms. Chartier: — So, Madam Minister, you don't have the specific answers around the updated numbers, but I just would like to put these out there, that as of October 1st, 2013 in Saskatoon, we had five, in community living service division, clients living in the Dubé Centre. In Prince Albert we had ... Well in Saskatoon the longest stay had been since March 6th, 2012. I understand that individual is still there, so has passed their two-year point living in the Dubé Centre, which is a hospital facility. In Prince Albert, there were two individuals as of October 31st. In Regina there was one. There are a few here and there as well.

But first of all I'm sure ... I would like your perspective on, particularly in light of Valley View and some of the challenges, the reality is Valley View is closing and many individuals with complex needs, much like these individuals who are living in acute psychiatric facilities ... They too have complex needs and there is no place for them to go right now. So I'm wondering your thoughts around that, how we resolve that issue.

Hon. Ms. Draude: — Well thank you to the member. And that's basically what we thought when we became government in 2007 and started looking at not one, two, three, four, five people that we can count around the province, but the 400 that were on a wait-list and the emergent needs people and the people that had significant enduring disabilities that needed something separate. And so we've been working very hard to address these. Even the fact that Valley View had not had any admissions for over 12 years but there was still no plan.

What we are doing is person-centred planning. And always there's going to be somebody that has needs. Every day there is because this is a province of people and everybody is unique. So yes, I appreciate the fact that there are five people in various institutions, and I love them dearly and so do the people in my ministry and in the Ministry of Health. And we work across ministry to see what we can do.

But we will continue to do . . . We do have a mental health and addictions strategy now that was never talked about before. We have a disability strategy. We have a housing strategy. We are working on initiatives to support the people and the individuals in this province. I'm here today to talk to you about what I had understood from the word of a member that we were going to be talking about this issue. And I will gladly get the information for you on other issues. But right now I talk to you about child and family. I'll give you the information that I've got, but for your direct response, yes, I care about every individual and I'm hoping that we can provide the services that are needed for everybody as quickly as possible.

Ms. Chartier: — Do you think that . . . It's 2014 and I'm sure I recognize that there's been challenges of different kinds over the years, but it's not just five individuals. There's five living in the Dubé Centre, which doesn't only put pressure on those five individuals — who are living in a hospital, who eat the same food on Monday, who are surrounded or in an environment where people have suicidal ideation or who have psychotic episodes. It's a hospital setting and incredibly challenging but it also places challenges on those who have mental health and addictions issues because those beds . . . The Dubé Centre's always over capacity, so it places some challenges there. Where are you at in terms of trying to find places for these individuals?

Hon. Ms. Draude: — To the member, we are at the same place we were at when we come to looking at the other individuals that needed support, all of them — the 440 and the 330 and the 189 that we have in Valley View and every individual in the province. We are looking at them.

I think that the member opposite, I'm hoping, would recognize that some of our plans like the hot-spotting plan, the hubs that we have initiated across the province where we can talk about individuals across ministries, the child and family agenda where we can talk about individuals again, that's the type of work that we are doing also with the mental health and addiction strategy and the disability strategy. Every one of those people are important to us and we'll continue to work to develop programs and policies that'll work for them.

So to the member, yes, I care about them ... [inaudible] ... And I think that this is the type of work that as government, we're working very hard on across ministries.

Mr. Forbes: — Mr. Chair.

The Chair: — Yes, Mr. Forbes?

Mr. Forbes: — I move that we have a brief adjournment here. There's some issues that we need to sort out. Thank you.

The Chair: — Yes, and not an adjournment, but a brief five-minute recess.

Mr. Forbes: — Yes.

The Chair: — A recess it is for five minutes.

[The committee recessed for a period of time.]

The Chair: — All right, our committee is back and I think we have an agreement, and Mr. Forbes, you have the floor.

Mr. Forbes: — Thank you very much, Mr. Chair, for that. And so I have a series of child and family services questions. And then I know that there's another member who may come in, has a general casework question that we'll see if the minister will take. But right off the bat I do want to ask about the Linkin

system and how is that going. And if the minister could fill us in on that.

Hon. Ms. Draude: — Thank you to the member. I'm going to ask Ken to give you an update on it. I think you probably want some detail, so I'll make sure that Ken can give you details.

Mr. Acton: — Thanks. Ken Acton, deputy minister. The system in general is going well. As you know, we rolled it out on child and family services side last year. And then in December we included the structured decision-making process as part of that. So that was a second rollout that included that. Prior to that we were using the structured decision-making tool but again it was paper-based. So now we've got it all in one system on the child and family side and we're starting to see some real positive things. And I can probably let Andrea Brittin talk more about that in terms of the benefits there.

The other piece I would just say is we're also in the process of building the financial component to that now. We're well on the way there. And that's our target for this year, to build the financial piece, and we're building that in a way that it'll be a foundation for all our programs, not just child and family. What we'll use at first of course is the financial payments each month on the child and family services side to foster families, service providers, all of those things. But we're building it so that in fact it can handle payments on the income assistance side as well. But the front piece is focused all on child and family.

So just in terms of some of the benefits and some of the pieces that are working, maybe Andrea, if you wouldn't mind.

Ms. Brittin: — Sure. Andrea Brittin. So I think probably one of the biggest benefits to the system is that information is available for caseworkers, supervisors, managers, right at their fingertips. And so in the old world when information was paper-based, that wasn't the case. And so what it allows for is it allows for caseworkers to make better decisions because all the information pertaining to that family is in one place.

It also has benefited in terms of our after-hours work because after hours now, caseworkers have access to information about extended family or other family who may be able to take children in the middle of the night rather than placing them in foster care with strangers and then having to find places for them. So just having the information accessible is a huge benefit.

That also benefits in terms of file transfer. So if a family moves from one part of the province to another, the caseworker has ready access to all the risk information, all the other information pertaining to the family.

Approvals are done for case decisions online, so that expedites the processes around approvals. So that's just a few examples of how the system is helping out.

Mr. Forbes: — Okay. In December when we were in supplementary estimates, deputy minister, you had said there was \$37.6 million cost. That's the estimated total cost of Linkin. Is that still the case?

Mr. Acton: — I believe that was the spend to date on that. In

terms of our total investment to date, it is \$51.4 million. About 32, 33 million is directly related to the child and family side. Other investments are really, as I say, building that foundational piece for all of our programs, so when you break it out. But in total we're about \$51.4 million.

Mr. Forbes: — And have you got an estimate of what it will at the end cost?

Mr. Acton: — We don't have on the income assistance side. There's \$8.1 million in this budget year which will go towards primarily the financial component to finish that piece and then we'll have a look at it and see where we are there before we make any further decisions.

Part of this is really around ... There's lots of change management that goes with this. It's not just about building the system, but of course on the child and family side, we moved from a completely paper-based system to one using technology. Now we're moving forward with improving or building the financial piece. So I just want to make sure that that's all stabilized and all working well, and then based on what we've learned we can do another estimate on what we think it's going to cost us on the income side before we move forward there.

Mr. Forbes: — You know, when I look back at the news release, October 6, 2009, that this was the announcement in terms of the Linkin system, and it was \$15 million. And that was going to be, I assume, the child and youth side. But that's at least double from what you're saying, that it's actually 31, \$32 million for the child family side and then another almost \$20 million. So have you done a cost-benefit analysis of the overruns, and saying this ... what happened here? And this isn't a long history. This is the end of October 2009, October. So really what we can be saying is three and a half years that this has gone from 15 million to 51 million.

Mr. Acton: — There's a number of factors that led into that. The initial estimate was certainly very preliminary as you can see now by the results, but also was a change in terms of the scope of the project because once we started to move forward, we recognized that we needed to think a little broader than that than in terms of just building a system solely for child and family, that we needed to look at all of the income support systems that we provide and think of building one foundation that'll support all of that. And so that was part of what drove it.

Our technical resource costs of course were also a challenge. As the economy boomed, some of our folks doing the technical build, the costs for those were higher than we had originally estimated. So those built into the system too. But in general the business we're in is around human services, and there's lots of tools and processes that we're using, we're trying to build in, to make ourselves better. And that makes it complex.

And our system needs to integrate with hundreds of users and other systems across the piece. And all of that adds complexity to it, and we need to make sure we get it built right. So all of those things come into play. A big part of it was simply the change in scope of saying, we need to build this in a manner that we can ... we've got a foundation we can build on as opposed to a stand-alone. **Mr. Forbes**: — So when you talk of hundreds of users, you're really talking about the staff that will be using it. I assume that's what you mean by that because it's not a public . . . It's a very private . . . The security is huge on it. What is the number of cases or records on it right now?

Ms. Brittin: — Well every open child protection file, every open child in care file, every open foster home resource case, and then any that had been opened and closed from the time that we implemented the system forward. So it basically is keeping track of every record since we turned it on.

Mr. Forbes: — How many would that be?

Ms. Brittin: — I don't have that number with me.

[16:00]

Mr. Forbes: — Because I mean, I would guesstimate somewhere between 10 and 20,000, just because I know that there's about 5,000 children who have connections with child and family services, from your own stats. So when you say the past history, others that might be ... So that's what I'm guesstimating.

Ms. Brittin: — I would say that or higher. Yes.

Mr. Forbes: — Or higher. How much higher?

Ms. Brittin: — I'm not sure.

Mr. Forbes: — I guess what I'm trying to say is, you know, like I'm trying to think of ... You know, I come from the Saskatoon Public School system and we have I don't know how many thousands of kids in our records. It didn't cost us \$51 million to create a new system, and it's very secure. Obviously you have different things. You're talking about financial records now. But I'm trying to think of how, when you're trying to focus on 10, 20, even 50,000 records ... I mean, I know that we talked about how many children are on social assistance. There's about 12,000 now. How many families we know, there's about 6,000 there. So we can't be talking 100,000. Well it can't be hypothetical. I mean how can it be hypothetical? You folks would be the ones who would know this number.

Hon. Ms. Draude: — Mr. Chair, I'm not sure if the member ... I can't give him an exact number. And I know that we have, depending on which way you look at it, we have about eight different programs in Social Services. And the goal was to see if we couldn't become more centred so that if a child is in care, is their foster family on the same system? Some day I was hoping that we would know if people on social assistance were ... if they could be, if we could be integrated into the same system.

We definitely underestimated it, but at the same time when I talk to ministers in other jurisdictions and talk about what we're trying to do, their goal is the same. And I'm not sure what kind of a dollar figure we're supposed to be putting on it. I mean every dollar is looked at, is scrutinized when it comes to how ... especially in IT [information technology] because it's, every ministry talks about the needs in IT. And so do I. But our government has said, okay, if we're looking at a project that's

important for our children or our vulnerable people, how do we do it right? It's not something ... I've even suggested, is it something that if we set it up, is it something that's a saleable item? Every province is different as well.

So my goal and our government's goal is to see if we could get a system that would be able to help us know where our children are, know what their needs are, know who's been contacting them, know ... you know, keep the information together. So yes, it's a lot of money. But it's also about children.

Mr. Forbes: — But when you undertook this project, Minister, we were the last province to have an electronic system like this. And the debate at the time was, is it something that we could have got from another province? And the decision was to make our own.

Hon. Ms. Draude: — That's right.

Mr. Forbes: — And fair enough. But the question is, at some point do you say like, \$51 million, what is the work that it's doing? Because you're saying, you know, the project, but at some point you say ... You know, and we've seen this with other IT companies where they say, it's just not working. Maybe we should try something new. It's gone too far. You know, there is a point where you do have to because money is not limitless. And we've seen the American experience with their medical system where they have to say, so we have to find out what's going on here. How many records? Do you have an answer?

Ms. Brittin: — Thank you. I do have an answer. We currently have between 70,000 and 80,000 client records in the system at this point, and I'll just maybe give some context. So in child and family services we receive approximately 2,000 reports a month of children who may be in need of protection. So these are intake reports that we get.

When we receive one of those, every one of those is recorded into the system. Those result in between 4 and 500 investigations every month in the province. So every one of those investigation records is recorded into the system. Any child that's brought into care as a result of those investigations, those records are also put into the system as well as all the reports associated with those children and those families. And so over time the number of records is just going to continue to grow. We believe that we'll likely have around 25,000 new clients entered into the system every year.

Mr. Forbes: — And that is a helpful answer because, you know, for me I might just think it's 5,000. It's the kids who are actually in care, and I need to have a bigger sense of what are you really talking about. How big is this thing? And so I appreciate the answer there.

So with that, and I know Buckley has a couple of questions, but I want to finish this up in terms of . . . But there is staffing. You have a Linkin team, and can you tell us a bit about that?

Mr. Acton: — Yes, we have a team that's involved in the build side doing the financial side that's working right now, about 15 ministry staff that are working on this. And depending on the particular time or piece of work that they're doing, we could

have as many as 20 technical folks actually working on the program as well to build it.

Mr. Forbes: — Fifteen plus 20.

Mr. Acton: — Yes, yes.

Mr. Forbes: — So for 35, okay.

Mr. Acton: — And just in terms of numbers again on the financial side, we spend, you know, \$200 million a year on the child welfare programming and over 650 million a year on income assistance and disability. So when you kind of add those together and say that's the kind of magnitude of finances that we're handling, and we've got ... You know, every client's unique, every family, in terms of how we process those payments on a monthly basis and make sure that they're accurate and they're going to the right folks at the right time in a prompt way. It's a challenge. And we're just trying to build something that has that capacity to handle it.

Mr. Forbes: — Now when you had started this, it was an Irish company that you were working with I believe, but now it's been sold to IBM [International Business Machines Corporation].

Mr. Acton: — That's correct.

Mr. Forbes: — And it's retained its name, Linkin, but your dealing with the licensing with IBM, or what's the relationship with IBM?

Mr. Acton: — Yes. Linkin is the name that we have adopted inside the ministry to refer to this program. It was originally Cúram, and IBM bought them. And yes, we pay licensing fees on a regular, on an annual basis to license the product.

Mr. Forbes: — And that license fee would be?

Mr. Acton: — I knew you were going to ask that.

Mr. Forbes: — While you're looking at that, is it the goal then of Social Services that this would be the only, really the only software or program that would be tracking all of Social Services programming and clients?

Ms. Brittin: — Yes, that's the eventual goal.

Mr. Forbes: — And what would be the timeline for that? What are you thinking now?

Ms. Brittin: — That is yet to be determined because, as Ken has indicated, our plan is to move forward to replace the current payment system on the child and family services side. So that's the work under way right now, and then we will make a stop there and determine when we move forward on the income assistance side of the world.

Mr. Forbes: — And where would I find the number? I think it was ... was it 6 million, 8 million, for this year, 8.1 million? That's for ... And where would that be in the budget lines, the 8.1?

Ms. Brittin: — Yes, it is 8.1.

Mr. Acton: — In terms of the licensing, we have a maintenance fee that is just under \$780,000.

Mr. Forbes: — Okay. Good.

Hon. Ms. Draude: — And to the member, you will find that the cost is 8.126, and it's on page 117. And it's under client support allocations, and it says case management project. So that's 8.126.

Mr. Forbes: — Oh, this is what it was right here.

Hon. Ms. Draude: — That's correct.

Mr. Forbes: — Right. I think you may have answered that last week because I have Linkin under it. So good work. Thank you. Okay. Then with that SDM [structured decision making], now — and I know that my colleague has asked about this before — but SDM now is fully implemented. It's part of the Linkin system, so this can be provincial. And is there a cost involved as well with SDM? Because it is a copyrighted program, is it not?

Ms. Brittin: — Yes. There is a licensing fee to use structured decision making. And that cost in 2013 was \$2 million essentially.

Mr. Forbes: — So in 2013, it was \$2 million.

Ms. Brittin: — Right. And the annual cost going forward would be 403,819.

Mr. Forbes: — So are there benefits? What are the benefits of using SDM? And what are the concerns about using SDM?

Ms. Brittin: — So the structured decision-making model is essentially a suite of tools that allows our caseworkers to better assess risk. And so they're used every day in the investigations of child abuse and neglect. So they assess the immediate safety, and then on what they've determined to be the ongoing risk factors associated with the family. And so the tools really allow for better decision making.

By having the SDM tools embedded in Linkin, it really allows, again, information to be right at the fingertips of the workers. So if a family moves from Regina to Saskatoon, that Saskatoon worker knows immediately what the risk factors are related to that family and is better able to provide case management services in a much more cohesive way. So having the information in Linkin is critical.

It also allows supervisors to better assign cases. So obviously a case doesn't equal a case. So SDM allows you to determine whether it's a high-risk, moderate risk, or low-risk case. And so a supervisor would be able to see how many of those cases each one of their workers has and better able to assign work based on level of risk.

Mr. Forbes: — Okay. And is this program, is it a Canadian, a Canadian or American program? What is the history of this program?

Ms. Brittin: — Yes, I will get you that answer. It is used in other jurisdictions. I just don't have the other jurisdictions at my fingertips at this point. The structured decision-making model is used in Manitoba, British Columbia, New Brunswick, and Newfoundland are all at various stages of using the structured decision making tools.

Mr. Forbes: — Now, and you had said earlier, if I've got this right that ... Or when did we start using SDM? I should probably phrase it that way.

Ms. Brittin: — We finished the rollout in last year, in 2013.

Mr. Forbes: — And has it been in the province before that in other variations or forms?

Ms. Brittin: - No.

Mr. Forbes: — No. Okay.

Ms. Brittin: — Before structured decision making, we had a risk assessment tool that we had been using for quite some time. Yes.

Mr. Forbes: — Thank you, all right. Then I want to ask . . . and the minister and this has been a contentious issue between the two of us, the salaries, the salary line going from 39.8 million to 34.2. And you've said that at the end . . . And we can see that actually overall child and family services has gone up by 9 million, but salaries has gone down by about 5 million, a little less than five, maybe four and a half. What has happened there?

[16:15]

Hon. Ms. Draude: — I'll ask Andrea to go into the details, but I think we discussed this earlier. And last year we talked about the closure of Red Willow and Dales House, and so that is the difference in the staff wages. And I'm going to ask Andrea to give an idea of the staff in those areas.

Ms. Brittin: — Okay. So you will note that, while there was a decrease of \$6.1 million and that was due, as the minister has indicated, to the FTEs that were reduced as a result of Red Willow and Dales House closing, there was a increase of 12.356 million in the community-based organization line, as well as a increase of 2.3 million in the program maintenance and support line. And so the funding . . .

Mr. Forbes: — You're going a little fast for me there.

Ms. Brittin: — Oh, sorry.

Mr. Forbes: — So when you said there was an increase in community-based organizations, are you then referring to over on page 117?

Hon. Ms. Draude: — No, you're looking at page 116 still under child and family services, under allocation . . .

Mr. Forbes: — Oh right there, okay.

Hon. Ms. Draude: — There we are, child and family community-based organizations. Last year it was 76.092 and

this year it's 88.448. So that's an increase of about \$12 million there. And then above it on the child and family program maintenance support last year it was 87,328, this year it's 89,631.

Mr. Forbes: — So are we saying then the 5.6 million is completely Red Willow and Dales House?

Ms. Brittin: — 6.1 million?

Mr. Forbes: — Well maybe my math's not right, but going from 39.8 to 34.26 is five point something, I think.

Ms. Brittin: — Yes. That is Red Willow and Dales House.

Mr. Forbes: — Completely.

Ms. Brittin: — Yes.

Mr. Forbes: — And how much would Dales House be of that? Do you have that broken down?

Ms. Brittin: — [Inaudible] . . . what portion is Dales House.

Mr. Forbes: — Then I can get that through a written question if I can.

Ms. Brittin: — What portion is Dales House and what portion is Red Willow.

Mr. Forbes: — Oh, here comes something.

Mr. Acton: — I believe there's an economic wage adjustment in there a little bit that ... So we'll just sort it out, but that's why the numbers aren't just exact.

Ms. Brittin: — So approximately half of that is Red Willow and half of that is Dales House.

Mr. Forbes: — And I may end up writing a question just to make sure I get that and how many FTEs that is. Now in the 12 million that is now going to community-based organizations, what organizations are we talking about that will see an increase to make up that amount?

Ms. Brittin: — So we increased to community-based organizations. About 300,000 is going to expand our intensive family supports, another 200,000 is going to the Triple P [positive parenting program] expansion. So intensive family supports, Triple P expansion. There's funding in there to annualize existing contracts with Triple P and the intensive family supports, 400,000 to annualize the flexible response funding that was in place last year. There is the general CBO lift of \$773,000.

There's also funding that is available to address the issues in the community, the gaps in the community to address those where Red Willow and Dales House have closed. So we're in conversations right now with the community around expanding our emergency receiving capacity in Regina.

But we've done a lot of work with the existing resource continuum, and that has been through some really focused

efforts in working with youth on their case plans and moving them through to either step-down services or back home if that is their wish and if it's safe to do so. So we've been doing some really intensive work with youth to really free up the whole resource continuum of group homes that we have currently in place right now.

Mr. Forbes: — So why was Red Willow and Dales house closed down?

Hon. Ms. Draude: — I think the member knows that out of all the spaces that we had for group homes, those were the only two left that were actually operated by government. We knew that the other ones were working very well. It was a decision that we could provide the services in the same way for individuals, and Red Willow and Dales House weren't remarkably different when it came to providing services. I'm going to just check and make sure that I'm not saying that out of place. But we believe that the children that were being provided services in some of the other organizations were looked after in the same manner as they were in Red Willow and Dales House. So if you will, please.

Ms. Brittin: — No, that's absolutely correct. And I would just add that we have 900 spaces in the province that are delivered by community-based organizations, and then we had these few spaces that were delivered by government. And community-based organizations are doing a very good job of providing those services. That's not to say that Red Willow and Dales house staff weren't, because they were doing an exceptional job.

But our goal is really to take fewer children into care, and so we've been working very diligently at looking at the front end of our service. So that's when there are allegations of abuse and neglect, to really do whatever we can to support the families. That's why we've been increasing our funding to the intensive family support organizations and those community-based organizations. So really looking at the front end of our system and making sure that the supports for families are in place.

And the second thing that we've really been doing is looking at the children and youth who have been in care for some time. We have long-term and permanent wards who really, their personal goals are to be returned back home and to their community. So really working in a wraparound way with those youth to successfully transition them back to their home communities.

Some kids come to Saskatoon and Regina from northern parts of the provinces. We want to have spaces available in the youth's home communities wherever possible. And so those are some of the things that we're really working hard on, is getting those youth who — it's safe for them to return home and that's their wish to return home — get some supports built around them so that they can do that.

Hon. Ms. Draude: — I'd also like to . . . I think I mentioned in my opening remarks about the three CBOs that are actually working to support children to ensure that we can work with the families. And I failed to mention when I mentioned 601 Outreach and SIGN [Society for the Involvement of Good Neighbors] in Yorkton, and FoxValley here in Regina, we also work with Prairie Spirit Connections here in Regina as well for the good work that they're doing to support families.

Mr. Forbes: — Okay. Thank you very much. I know my colleague has some questions he'd ask. And I'll ask the minister...

The Chair: — Mr. Belanger, you have the floor.

Mr. Belanger: — Thank you very much. First of all, I just want to thank my associate, the critic, for allowing me the 15, 20 minutes I have at max in terms of presenting some of the issues that I have.

We obviously spoke about this at great lengths, but I want to make a statement first of all. And of course I've got two particular issues that I want to bring out as it relates to housing. But I want to say... There's two or three things that I think is really important for the minister to hear.

The first one of course is on the seniors' housing rents. I've got seniors from a number of communities in northern Saskatchewan and most recently La Loche. And Buffalo Narrows has a number of seniors, have also spoke to me about the rising rents, Beauval as well where people are calling me and saying what is happening with Sask Housing. And as a minister, I want you to know exactly what the elders are saying. You should know, directly from me as their MLA, what is happening with their rents.

Now the seniors in northern Saskatchewan, a lot of them don't have the luxury of having a pension plan when they're younger. Many of the seniors I'm speaking about raised their families and they lived a traditional lifestyle. Many of them either lived off the land or were fishermen or hunters or gatherers and they never had the luxury of working for a government nor the luxury of building up a pension plan. Some of them, of course, many of them worked in the traditional industries of, as I mentioned, commercial fishing, logging, and so on and so forth, so they didn't build up a pension plan.

So now as they get older they live on a very limited income. I think they have the old age security of 550, which is the base allowance, and then of course you have the supplementary allowance that brings them up to roughly 1,100. And many, many of them maybe get an extra few dollars for CPP [Canada Pension Plan] but not much beyond the 11 or 12 or \$1,300 range. I know a lot of the seniors in some of the communities that I represent have very, very low levels of income.

Now you look at what the senior citizens have to pay for on their own. Of course they've got their food and, you know, many of the senior citizens in our communities like many other communities, they share their food. They often have their grandchildren or children in the neighbourhood that eat at their homes, and elders are very gracious throughout the whole province, but it's more so evident in some of my communities because you see it every day that they really cook for a lot of people and they share what they have.

And then of course they've got to make sure they have proper supplies. Then they've got to make sure that they have their medicines. And then you've got to make sure you have enough to pay for your power, your telephone, and some of the . . . what people may call the luxury, but cable television is also another thing that many of them enjoy having and of course they pay as well. And you see the power rates, the telephone rates, the other rates going up. So between medical travel that they have to do because they live so far from the major centres of Saskatoon or Prince Albert, you look at the supplies, the food, the prescriptions, the medical travel, the increasing power or telephone rates — all this really puts a lot of strain on elders living on a very limited income.

Now we're seeing that your government is increasing their rents from 25 per cent to 30 per cent and I want to say, Madam Minister, that is not the correct thing to do. These elders simply cannot afford increased rents whatsoever. They simply do not have the means to pay an increased amount in rents because they're being pressured in all the other areas. And they want you to know that first-hand. They want you to know, the senior citizens that I talk to want you to know that they cannot afford any more rent. It is simply not a thing that they take lightly. Many of the seniors that I speak to, they know the value of having a roof over their head and they're doing their very best to make ends meet. But when you see the government arbitrarily and callously raising their rents, they get so discouraged and they get so angry.

So the senior citizens in northern Saskatchewan — whether it's Creighton, whether it's La Loche, whether it's Buffalo, or whether it's Beauval — have one quick message to you, Madam Minister, when it comes to raising rents in their units, is that they know it's the government increasing their rents. Don't try and blame the local housing authorities. They're simply primarily following the government's direction. They understand that.

But they're telling you that they cannot afford an increase in rents, and they're asking you to withdraw those increases because the affordability issue is something that's so dramatic for them and they simply can't afford the increased rents. Now I don't know how more plain and straightforward and bluntly I can share the message with you, but they do not want to see their rents increased — full stop, period.

The other two issues I would raise with you while I have the opportunity is that on March 10th, we wrote you a letter in relation to a constituent of mine in which she needed some emergency shelter in Saskatoon because her son had gone through a very, very serious medical problem. His appendix was very, very infected — I think that's the proper phrase for it — and they could not get an aircraft into La Loche.

[16:30]

I don't want to mention this lady's name, because obviously this is a public forum and you can't speak about her particular name. But when we spoke to her, she told us that on Thursday evening before March 10th which was a Monday, on Thursday evening her son was admitted to the La Loche hospital and he was complaining of major pain, and the hospital basically sent him home.

So she went back on Saturday and this time it was a lot more serious. The hospital admitted her there, called Saskatoon,

apprised Saskatoon of the problem and that they had to get this child to the emergency, in an emergency basis, get this child to Saskatoon.

Now because of the weather the plane couldn't land. So this mother, along with her mother and a friend of hers decided, we can't wait for the aircraft. We've got to take my son in. So they drove that Sunday. They drove that Sunday to Saskatoon out of the goodness of her friend and her vehicle, drove this young man to the hospital in Saskatoon. I've got a letter here from the Saskatoon Health Region. And I'm not going to mention this gentleman's name or this young child's name. But the letter is from a lady by the name of Keri Whitehead. And the letter says:

To the minister: This letter is to verify [this young man's name is here] was admitted to the Royal University Hospital on March 9, 2014. He underwent emergency surgery, appendectomy, and will likely be in the hospital for a few days to recover. An actual discharge date is unknown at this time. [This young man's mother, I can't mention her name] was present as a support and is requiring assistant needs and accommodation while here in Saskatoon. Your support in regard to this would be much appreciated.

And that is the medical social worker out of the University of Saskatoon.

Now that letter obviously was sent to support this mother's plea to your department to help her find emergency accommodation that night. Despite us on the following Monday morning going to your office and hand-delivering this letter, I understand that the ministry didn't do anything to help this young lady, and that there was some question as to the authenticity of the trip. There was general mistrust and distrust as to what the purpose of the trip was. And this is why I went back to this young mother and I said, I need a letter from you showing that your son did indeed receive emergency surgery that day. That letter is here. And I want to share it with you and give you a copy of that because your office said they would take care of this young lady, or this young mother, because they had no choice.

Well I understood that this young lady didn't receive help. And I understood that they were questioning, your ministry was questioning more of her need to be in Saskatoon at that time. Now I took the word of this mother, and she had forwarded me this information. So after the emergency surgery on Sunday, I wrote you a letter the following Monday after I heard about this. And you assured me, your office assured me, that they would get help. They did not receive that help.

And this is exactly my point of being compassionate, flexible, and reactive to situations. Because this young mother was on PTA [provincial training allowance], she never had the resources to get her son to hospital. And as a result of that, I think it is the kindness of some other individual that helped them cover some of the costs of the hotel room because your department did not deliver.

Now the third point that I would raise in my 15 minutes here with you is another constituent of mine out of La Loche. Both constituents had given me permission to speak on their file. But this lady in La Loche, I'm going to just call her Ms. Herman. Ms. Herman occupied one of the rental units since 1992. Now Ms. Herman was evicted and she talks about the challenges, the challenges of not being notified of her eviction. Her eviction was based on the complaints from her neighbour. The process wasn't properly followed. But nonetheless, Ms. Herman was evicted.

Now what happened, Ms. Herman had to leave the Sask Housing unit in La Loche. And her brother-in-law called me and said to me, Mr. Belanger, you've got to find a resolution here to this problem. Because where Ms. Herman relocated was 7 kilometres out of La Loche into a cabin that is heated by a wood stove. There is no water and sewer or plumbing. But it's a cabin where Ms. Herman now lives in a one bedroom or one room cabin heated by a wood stove with five grandchildren. With five grandchildren.

So once again we brought up that issue to your office. And the call I got a few days later was that your office offered to move Ms. Herman and her five grandchildren back into the community but into a motel that is run down, into a motel where they have a lot of people living in there that have a lot of different challenges. And I'm not going to get into that. But you don't put a grandmother with five kids into an environment that is dangerous, that is crowded, and of course unhealthy.

Now these five grandkids, they all attend school. Some of them are small but the majority of them are in school. And I'll share with you a picture of the house that they live in. I will show you a picture of the wood stove that they use to heat their home. And I'll show you a picture where there's a mattress on the floor with a young child sleeping on it, and you times that young child by five, because that's how many in this housing unit.

Now once again, I asked you at the time, can you find emergency housing for them? And you put them in a dilapidated hotel-motel that has all kinds of problems around it. All kinds of problems. You could not work with the housing authority that are forcing them to give this young, this grandmother, Ms. Herman, a place to live.

Now I'll share these pictures with you. I've got a lot of other pictures, but I'll share them with you and I'll ask my colleague to hand them to you. But the situation that I see is that whether it's senior citizens that are facing increasing rents, rising, increasing rents, because you're government, that's not fair at all. That isn't fair at all. When you see young mothers that are forced to live on the charity of others to get her son to a major operation in Saskatoon, well that's not fair at all. And now when you see Ms. Herman being forced to relocate 70 kilometres out of La Loche to a one-bedroom home with five grandchildren in tow, to live in a one-bedroom cabin heated by a wood stove, well that's not fair at all either.

So I'm sitting there as the MLA and I'm trying to make sure that we work with your office to bring forward these concerns. And on all three fronts, there has been no progress made whatsoever. So you tell us in the Assembly, why don't you bring this forward to my office? We'll try and deal with it. Well I've tried that process and it didn't work. So I think this, to be succinct, you can rattle off the figures that you want in terms of what you think ... I said one time they told me elders make enough money. You explained to me how they're getting supplements and getting this and that, and yet the elders don't see that back home.

So I'm sitting there thinking to myself — whether it's senior citizens paying an increase in rent which is unfair, unwarranted, and unnecessary, because your government talks about record revenues all the time and yet you're trying to balance the books of Saskatchewan on the backs of seniors' rents — I don't think that's fair at all. And people are angry. They're upset and they're hurt by that kind of action by your government.

And the second thing is when you talk about a young mother desperately trying to get her son medical attention, your office said they'd help her, and I find out that they were not helped. That they were not helped. In fact they were questioned time and time again as to the legitimacy of their trip to Saskatoon.

Now I want to share with the minister a copy of the letter from the lady I made reference to, the social worker at the Royal University Hospital. Now the question that I have today is, why is it on one hand you ask us to work with your office as MLAs? And we try. No response. We are pleading with you today to not increase the rents for seniors because they can't afford any more rent increases. No response today.

In northern Saskatchewan you can expect to pay a lot more for food, utilities, and other costs. They don't have the luxury of natural gas. They don't have the luxury of going to five different stores that are competing, you know, by lowering grocery prices. Many communities often have two or three stores. And now you see the whole argument that senior citizens make is they don't want to see any rent increases at all. They think it's unfair. They think it's unwarranted, and they want you to stop increasing their rents, period. That's what they want. They're tired of it, and they want you to know it.

And the second thing is, on both the young lady with her mother, you have all the information in front of you. I think you owe her an apology because she reached out to your office. And I said, let's work with her office and let's see if they're able to accommodate some of the things that you wanted done. And we tried it your way. We tried it your way and it didn't work.

And the same goes with Ms. Herman from La Loche with her five grandkids in tow. We tried it your way. You relocated her to an even worse place, a place that's not safe. So now Ms. Herman's confused as to how she's going to take care of her five grandchildren. So these are children in crisis. These are senior citizens in crisis.

It's all got to do with housing, compassion, and response. And on all three fronts, I think you've failed them and failed them miserably, I might add. So I'm not going to ... I tell these senior citizens, don't blame the housing authorities because all the manager there is doing is following the direction of Sask Housing, which is following the direction of you as a minister and of course your government.

So my concluding comments is (1) do not raise the rents for seniors. They've had enough of this. They've had enough of it. They've done their work. They've raised their families. They helped build this province, and they helped build the North, and And on the two cases that I brought forward to your attention, you have the pictures. You have the information. You have the letters. And I want you to know that we have completely advised you of the situation regarding Ms. Herman. We completely advised you of the situation regarding the young mother who had to haul her son to Saskatoon for major surgery. We completely advised you of the situation and the affordability of senior citizens when you increased their rent. You know all these facts.

And I want to close with this final statement, Madam Minister. We need you to do action on all these three files, especially the grandmother with five kids living in a one-room cabin, 7 miles out of a community, heated by a wood stove. I should point out that these kids are getting sick because of the crowded conditions and the harsh conditions that they live under. These kids are missing school because of the crowded conditions and the harsh conditions that they live under. And all this lady wants is to have her unit back so her kids can be in a warm, safe place — her grandkids, not her kids — her grandkids in a warm, safe place where they are able to thrive, attend school, and become productive citizens.

[16:45]

Now on all three counts, I'm going to ask my colleague critic to watch what happens. And as the MLA, I'm going to watch how your department responds to these three issues. Because as sure as I'm sitting here, we're going to follow up with the families after this to see how you respond. And if the response is not favourable, as you'd like to boast about it now and then, then I'm going to be up in question period. I'm going to be up in the media. I'm going to be up in every event and every opportunity I have to tell you that nothing was done on these files.

To recap: mother with a sick child, grandmother with five kids, and seniors' rent — three issues I asked you to address today.

Hon. Ms. Draude: — Thank you to the member of Athabasca for his comments. I know that this was the information that he wanted me to receive, and he will probably ensure that the people he represents sees that he brought this forward.

There are specific cases that I am not sure how much further I can go when it comes to information. I'm going to ask Andrea if there's anything they can add to it. But I need you to know that when you bring something to my office, it isn't ignored. We have people that are working in the office, and they care very much about the people, whether in the South or in the North. These issues are important to all of us. And I know when it comes to the separate cases, even though I can't speak about them — there's usually other information that I can't share, and it's not possible to do that — but at the end of the day, our goal is to make sure that our children, our seniors, and our people that are vulnerable are supported.

I'm going to ask Andrea if there's anything we can add or if I'll just contact the member separately.

Ms. Brittin: — The only thing that I can add is that with respect to the grandmother with the five children, I'm not able to share any information related to that except to say that we do have a caseworker who is working with that grandmother to address the issues that she's facing.

The Chair: — Back to you, Mr. Forbes.

Mr. Forbes: — Thank you very much. And I appreciate the minister taking the question and going from there. Thank you.

The question I have next is really around case management. And I know that my colleague at last year had written a question about the average caseload for front-line child welfare staff, the 16.7 per FTE position. Can you expand on what the current caseload is?

Ms. Brittin: — Caseloads, I think it's fair to say, vary from location to location, also vary depending on a number of factors: whether they're urban or rural cases, whether they're specialized or generalized caseloads, and what the risk factors are associated with those cases. And so it isn't easy just to say this is what the caseload number is because it really does vary from office to office, unit to unit, and location to location. I can give you some examples of ranges of caseloads if you just give me a second to find that.

So as an example, for those caseworkers who are carrying child care files, in the South it ranges from I guess the highest caseload in the South would be 25. The highest caseload in the centre would be 28, and the highest caseload in the North would be 27. So we do have many caseloads that are between 10 and 20 cases, okay? So in the South, 36 staff would have a caseload somewhere between 10 and 20 cases.

In child protection, those numbers are a bit lower. So this is where these workers are responsible for investigations. So in the South, the highest would be 22; the centre, the highest would be 17; and the North, the highest would be 23. So those are some examples.

Mr. Forbes: — Would you say the average has gone up from last year, or has it gone down? And does this concern you? I mean because it does concern others, and I'm thinking the Children's Advocate is concerned about the ability to do appropriate case management.

Ms. Brittin: — So between the winter of 2012 and February of 2014, just the general average has gone down slightly. The whole area of caseloads is something that is on the minds of our supervisors and our managers. It requires that our supervisors and managers are vigilant about each and every caseworker and really pay attention to things like the capacity of the caseworker, the experience level of the caseworker, and some of the complexity of the cases.

So those things are all paid attention to when cases are being assigned to somebody within the unit to address. And you know, so there's a number of factors that our supervisors would be looking at when they're assigning cases.

Mr. Forbes: — Within SDM, are there standards around caseload, case management, and are you meeting those

standards?

Ms. Brittin: — So we have completed an audit since we've implemented the SDM tools. And I do have a clarification to make around when that happened, so maybe I'll make that now. So you had asked when we had implemented SDM, and we actually implemented province-wide by June of 2012. We implemented SDM in Linkin by December of 2013. So just to be clear on that.

But in terms of the standards, we are just completing our first audit of files since we rolled out SDM, and we haven't compiled the provincial tally of that yet. But what we do know is that there are pockets where we're doing very, very well. Examples of those would be all the standards related to completing our risk assessments and the tools associated with SDM, completing them appropriately, timely, in the correct way.

And then there's other areas of the rollout where we'll still have some more work to do. And so we're just compiling those results now. We'll have a look at them, and those will inform our next steps in terms of moving forward. I think it's fair to say that we are in a place of transition at this point, so while we rolled out SDM in 2012, we are still getting workers accustomed to the SDM tools online, so in Linkin. So that has been a transition for our case workers. So there's some work that we have yet to do on some of the standards.

Mr. Forbes: — You know, I appreciate the comment about transition but, you know, I know this issue has been going on for many years, and breach of trust is probably the lowest point, I would think. But continuing, we still have and we anticipate a few reports in the next while. I think the report on Lee Bonneau — I've got that right — is due out in the next few weeks I think. We should be hearing about that. So I'm concerned about how long will this transition take because it has been five years.

Hon. Ms. Draude: — I thank the member, and we're also concerned about it. I think it's important when we talk about caseloads — and the member knows this, but I think there will be others that maybe didn't know that — the caseload information from February of 2007 show that the caseloads were about 20.89 cases per worker, and in February of 2014 we are about 16.08 cases per worker. So it is going in the right direction. And part of it is thanking ... I'm pleased that the SDM tool has allowed us to be able to assign cases in a way where we have low-, moderate-, and high-risk involved so that workers will have ... The numbers may be smaller for some worker, but it'll depend on the risk of the child that's involved and also, as Andrea had talked about, the experience of the case worker as well.

So we're moving. Maybe it's too slowly, but we are moving in the right direction when it comes to being able to ensure that we have . . . that the caseloads are down, that there's time for them. And also the other part of it is the intensive support that we can be providing to families and the workers and the children that are in homes.

Mr. Forbes: — Thank you. Now I have a question about the agreements with the First Nations in terms of child welfare. And how is that going? Have you concluded, I understand

you've concluded some. Or have you? Can you give us an update on how that is going?

Hon. Ms. Draude: — The work that we've been doing, the letter of understanding with the First Nations, we signed the agreement, the letter in August of 2011. Pardon me, maybe I'm wrong. Are you talking about delegation agreements?

Mr. Forbes: — I could be. I'd be curious to know . . . I'm just talking about agreements. I don't know all the language but . . .

Hon. Ms. Draude: — Okay. Well I'm sorry, you're probably talking about the delegation agreements with the 17 agencies. So I know that I'm pleased that two years ago we were able to work with Lac La Ronge First Nations to look at their accreditation and the work they're doing. And this year Peter Ballantyne also has the CARF [Commission on Accreditation of Rehabilitation Facilities] accreditation as well. So that work is moving forward, and the expertise and professionalism that they have is showing itself well when it comes to being able to meet and exceed standards that are in place.

And I know that there's all ... most of the First Nation child and family services are working hard on their professionalism and the input that they have, making sure that they have workers that have expertise. So some First Nations agencies are moving, I don't want to say faster. But they were having more success than others at the time. But I think everybody has the same goal.

Mr. Forbes: — So are there seven delegated agreements or 17?

Hon. Ms. Draude: — 17.

Mr. Forbes: — Seventeen, and you've concluded two of them?

Hon. Ms. Draude: — No, there's two that, Saskatoon Tribal Council and \ldots There's 15 that have signed delegated agreements.

Mr. Forbes: — Okay, signed on. And are they like annually renewed or how do they work? How do you, because as minister you have responsibility here, how do you ensure that the standards are being met? And how do you have those conversations?

Hon. Ms. Draude: — Thank you very much, and I am well aware that I have responsibility there. And the discussions we have with the First Nations, ensuring that we can look at the files and do the audits, is something that's always a concern for me and for the ministry, for our government, making sure that we're attentive to all the needs. And when we have tragedies like we've had and there's . . . Whenever we lose a child, it's a tragedy. Then we always review what we're doing to see if there is something that we can be doing within our agreements if it's a child that we have a delegated agreement with.

So there is work that's going on at this time to ensure that we can review and make changes if need be. And I'm really pleased that in all cases there is a co-operation and that there's a desire to ensure that we can move forward together when it comes to looking after our children and the responsibility that's involved. **Mr. Forbes**: — Now are they using the Linkin system? Are they part of the 15?

Ms. Brittin: — So the La Ronge First Nation agency is using Linkin for their off-reserve cases at this point. But the agencies are not using Linkin for their on-reserve cases, no.

Mr. Forbes: — Is there a reason for that?

Ms. Brittin: — Well we just haven't moved that far along in the process.

[17:00]

Mr. Forbes: — Now are these agreements . . . I just want to go back because how do you renew them? Are they annual agreements or . . .

Ms. Brittin: — So the delegation agreements, they do contain clear accountabilities in reporting, and so there is some reporting that is required on an annual basis. There is some reporting that's required monthly from the agencies. And then we also do file audits with the agencies. And currently we're doing file audits, our quality assurance unit is doing file audits every three years. We're moving to a place where we're going to be doing those annually.

So in previous comments you heard that we have seven staff that were moved from other areas of our ministry to child and family services. Two of those staff are going to go into our quality assurance unit to allow for more regular file audits, and two are going into our First Nations and Métis unit to ensure that the oversight of the agencies around the agreements and the reporting requirements are better met.

Mr. Forbes: — And I'm wondering is there ... There should be a high degree of collaboration and respect. I mean this is a very important part of this process, I would assume.

Ms. Brittin: — Absolutely. One of the goals of adding additional staff to that unit, the First Nations and Métis unit, those are staff people who work directly with the agency. They have an ongoing working relationship with the agency. And so just as when the file audits for ministry staff are completed and there are areas that require, you know, improvements, these staff go out and work with the agencies to ensure that either training is in place or processes are in place to help them improve in areas where there's current gaps.

Mr. Forbes: — Good. At this point, I'll turn over to my colleague here for her question. I think, is there, are there staff here now? Okay, good. Thanks.

The Chair: — All right, we turn the floor over to Ms. Chartier.

Ms. Chartier: — Thank you. Thank you very much again. Just going to my earlier questions around the numbers of individuals who are clients of community living service division who are living in in-patient facilities awaiting a placement. My original written questions were around mental health in-patient facilities, but I understand that in fact there are people in places like St. Paul's Hospital in Saskatoon. So I'm wondering if my original written questions in fact captured all the CLSD clients.

So the question is, how many CLSD clients are living in in-patient facilities while awaiting a placement in community?

The Chair: — Excuse me, before you answer the question, could you give your name so that they've got record of it with Hansard. Thank you.

Mr. Wihlidal: — Bob Wihlidal, assistant deputy minister, disability programs. So the information I have in front of me is that we have 14 individuals in various circumstances like that. So five at the Sask Hospital at North Battleford, three in Dubé, one in the hospital in North Battleford, three in the hospital in Prince Albert, and two more in the hospital in Regina. So 14 in total.

Ms. Chartier: — Okay. sorry. So five in the Sask Hospital, three in Dubé, three in P.A. [Prince Albert].

Mr. Wihlidal: — Three in P.A., P.A. Hospital.

Ms. Chartier: — P.A. Hospital.

Mr. Wihlidal: — One in North Battleford Hospital and two in Regina hospital.

Ms. Chartier: — And what is the longest stay of any of those individuals?

Mr. Wihlidal: — Sorry, I don't have that data with me right now, but I'll undertake to get you that.

Ms. Chartier: — I would just put on the record here that if the individual who is still there on . . . One of the individuals in the Dubé Centre from my written questions had been there since March 6th, 2012. And I understand that individual is still there. So more than two years has passed. I'm wondering what some of the barriers or challenges are in finding these individuals places in community or appropriate . . . It might not be community. It might be long-term care for some of these individuals.

Mr. Wihlidal: — So just a few comments, I think, to clarify these services, right? So I think it's important to understand that Dubé provides a necessary and good service. It's not a bad thing that people are there at times.

I would also mention that the Valley View Centre recommendations that were brought forward in the summer and adopted by government specifically spoke to the need for a safety net service. They specifically requested that that safety net service or crisis response be developed in terms of government-operated services. So we are actively developing that right now. Even with that capacity developed, there will be a need at times for placements at Dubé or other facilities like that. It provides a necessary service around psychiatric assessment and medication adjustment, things like that.

The prevalence of mental illness amongst people with intellectual disabilities is slightly higher than it is in the general population. So when we talk about complex cases as you were referencing, often they are these dual-diagnosis cases, individuals with an intellectual disability but also a mental illness of sorts, which can be difficult to diagnose and more difficult to treat as well and can result in longer stays than perhaps the general population in places like Dubé. Not a preferred situation certainly, but a necessary one at times. The complexity of the cases certainly is part of the reason it takes effort, sometimes more money, and certainly some more time to develop the solutions in the community that can respond to their needs.

So in terms of the safety net development — and I think this is a key part to lessening the frequency or the number of stays at these institutions — we are currently in the development of probably about 15 spaces across the province, depending upon how we use the spaces, some of which will be about crisis response. So if a particular individual has a need to not be in their community placement on a Friday afternoon, where do they go? We need that instant response. We'll have probably about six dedicated spaces within the next year to that service.

We'll have an additional nine spaces that'll be dedicated to transition types of resources. So think of it in terms of a step-down resource. If you're at Dubé but not ready for community placement, can we go to a different government-operated service — small group-home-type setting but government operated that can provide the same level or less than the Dubé would be able to provide — and transition back to that community placement perhaps? Did I answer your question?

Ms. Chartier: — With respect to the step-down beds, so these are sort of conversations going on at the same time obviously under Health. Some of the discussions have been . . . Well a few years ago there was a paper put out on the Saskatchewan Hospital but also about residential spaces. And there's been a recommendation, I believe it's 140 spaces across the province, 120 or 140. I'm sorry, I don't have that number off the top of my head.

But are these nine spaces to be ... You used the term step-down and that's exactly again the terminology used in that. Are these nine spaces for people who have complex issues or complex cases, or are they sort of across the board for people dealing with, I don't know if you can ever say run-of-the-mill mental health challenges, but are these nine spaces dedicated to people with cognitive impairments and mental health challenges?

Mr. Wihlidal: — They would be dedicated to people with intellectual disabilities in the community living mandate, and they would be similar to the kind of service that you're describing in the mental health world except these would be government operated. I think those might have been community-based services that were being referenced. So these would be transitional beds dedicated to community living clients who may, and more likely have more complex needs because that's how they ended up in needing the more in-depth services, but not necessarily dual diagnosis.

Ms. Chartier: — Are all the individuals in these various facilities, are some of them more aged, and is long-term care a possibility for some of them? I'm speaking of the ones who are currently awaiting placement somewhere. Are they long-term care possibilities, or are they people who'd be in group homes in community?

Mr. Wihlidal: — Of these 14 people you mean?

Ms. Chartier: — Yes.

Mr. Wihlidal: — Just let me check. No, we don't think any of them are elderly, mainly probably young adults or adults at any rate with mental health challenges and intellectual disabilities.

Ms. Chartier: — Okay. And you said these 15 spaces you're anticipating being operational, this safety net being operational within the year?

Mr. Wihlidal: — Well most of it within the year. It depends in part on our timelines and deliverability of the Brigham Road property in Saskatoon. That'll be the . . . I'm sorry, in Moose Jaw. That'll be the longest piece of work and maybe as much as 18 months, but it's a build right from the ground up. The other pieces are getting close to operational, and we should have some in operation as early as this summer.

Ms. Chartier: — Okay. So the six dedicated . . . So the nine spaces would be in Moose Jaw?

Mr. Wihlidal: — They in some cases coexist with the crisis beds. So you might have a duplex for example that has two crisis response beds on one side of the duplex and three transitional beds on the other side of the duplex. And we would have the ability to respond as we need to. If we need five crisis beds and the three are empty, we'll use them as they need to be used.

Ms. Chartier: — I'm just curious about those 15 and where they'll be located.

Mr. Wihlidal: — So there's the Brigham Road property that we're building in Moose Jaw that was announced in the summer. That will house five folks. The McCallum road property that we're looking into in Saskatoon, another five. And the Athabasca property in Moose Jaw, another three. In addition to that, we have South View Home that will close with the closure of Valley View Centre, which currently houses three people that we'll transition out at the end of that. And two further crisis response beds in P.A. in North View Home.

Ms. Chartier: — Okay. So these folks who are, say, in Dubé for example, and you said, recognizing that those with intellectual or cognitive disabilities coupled with mental health diagnoses sometimes take a little bit longer, but the Dubé Centre is a hospital facility. It is not a residential facility. And two years is an awful long time to spend, to be living in an acute psychiatric facility.

Mr. Wihlidal: — I don't have specific case material on that two-year case that I can respond to other than the generalities I've provided so far, that complexity takes time and money and a little bit more planning with families. And they tend to be a little bit more tenuous situations at times. So although you might create a viable and good community placement, it's complex. And people's lives are dynamic and change, and their mental stability changes from day to day, which is one of the reasons we talk about needing a safety net and crisis response space.

One of the things that I've learned in the last number of years that not only do the needs of the client or the patient change but the support system around them might. Some parent may have a child with them that they've determined they would like to keep for a number of years, and something might change in that parent's life which would mean that they can't keep the family together as long as they had hoped. So though there is again . . . As I've said, we are watching every one of them personally. We still know that that number can change, and we will continue to watch it.

[17:15]

Ms. Chartier: — Just to be clear though, so we are talking about crisis or those dedicated spaces to deal with transition, but the problem isn't transition here. They've been transitioning some of them for a very long time. And Dubé are waiting to transition or that crisis has been happening for a very long time. So I think that the piece that's missing is permanent community living spaces for these individuals. You've talked about those when a situation falls apart or they're in a group home and something happens. So these are short-term stays, but these individuals who are in places like Dubé are looking for a home. So this piece doesn't really address the fact that we don't have group homes or facilities for the long haul. This is addressing that crisis piece, but this isn't about crisis. This is about residential spaces.

Mr. Wihlidal: — I think that's part of the solution that we've been developing over the past number of years as well is that there is the ability to develop capacity in the community to serve more complex people. It takes a little more time, and you need to find willing partners. Saskatchewan Alternative Initiatives is one of those examples where we've invested in a community-based organization that is able to provide a little bit more complex service, a lot more complex services to these sort of folks. We need to invest in more of that so we can avoid having too much government-operated or placement in mental health wards certainly.

Ms. Chartier: — Is it correct that SAI [Saskatchewan Alternative Initiatives] hasn't been able to take all of these people for ... [inaudible] ... because they require additional supports than SAI can provide?

Mr. Wihlidal: — It takes time. It takes a dedicated development in each of these organizations. So it's a new area of development for us in terms of the intense, complex needs, case management or rather residential management in a community-based service. We're dealing with the closure of Valley View Centre which stopped admissions in 2002, and since that time we've really not had that safety response. Valley View provided that response prior to 2002.

Now we've been trying to develop community-based responses, and we're also going to build a government-operated response for crisis and assessment stabilization. But I think you're correct that investment in community-based organizations that are able to deal with more complex residential placements is necessary.

Ms. Chartier: — And I'm wondering where we're at. I know our time is just about up here. But the reality is Valley View is closing. We still have people who are living in inappropriate settings and where are we at with developing, not just a crisis response, which is critical, but the residential spaces for the people transitioning out of Valley View who need a home and those who aren't having their complex needs addressed?

Mr. Wihlidal: — So a couple of comments. First, I just now received a little bit of information about the individual from 2012 living at Dubé. And your question is timely because the individual moved out today.

Ms. Chartier: — Well that is very good to hear.

Mr. Wihlidal: — It's wonderful news.

Ms. Chartier: — More than two years. I'm glad he's found a home.

Mr. Wihlidal: — Exactly. So it's good news.

More specific to your question about, you know, what are we doing with Valley View and planning, some good things, I think. First of all, safety net development that we've been talking about is one of our primary pieces of work right out of the gate. We've been doing a lot of case planning with the Valley View residents and their families to understand what their needs are and plan for them. So we've been creating person-centred plans for each of those 187 residents. At this time, we have 160 of those 187 plans developed or well in progress.

We've been working, of course, with the city of Moose Jaw and meeting with them in terms of helping them to understand what developments we expect in Moose Jaw. And I think SACL, the Saskatchewan Association of Community Living, is planning some awareness campaigns within the city of Moose Jaw to help residents understand what this may mean in terms of supporting people in the community.

We've also initiated a request for information process around the province that has been designed to generate a basket of options, I would describe. We're trying to invite possibilities from the community, whether it's family members or private sector or community-based organizations to say, we are prepared to create an innovative option or a standard option that would be used for years around group homes, and we are prepared to do it in various communities.

So we are just closing off the first effort around request for information. I think it closes on April 25th or thereabouts. Good, I got it right. April 25th is the closing date for the first RFI [request for information] but we will probably do that iteratively. Probably in six months time, we will redo that request for information process to again generate ideas, generate options, and select from those options ones that we can invest in and develop new spaces. **Ms. Chartier**: — Okay, thank you. I understand our time is up here. So thank you to the officials, Mr. Wihlidal, and to the minister and everybody else.

Mr. Forbes: — Thank you.

The Chair: — Do you have some comment?

Mr. Forbes: - Sure.

The Chair: — Mr. Forbes has a few comments.

Mr. Forbes: — I'd like to thank the minister for her time here. And as we conclude estimates for Social Services, I'd like to thank all the officials for their answers, and we really appreciate it. Thank you so much.

The Chair: — And, Madam Minister, if you have some closing comments.

Hon. Ms. Draude: — Thank you. I thank the members for their questions. I thank my colleagues for being here, and for their attentiveness as well. I especially want to thank the staff that are here today. We've done a lot of work when it comes to not only preparing for the estimates, but every day the work that they're doing. And I think you can hear by their comments that they care very much about what they're doing. And there's a lot of thought put into not only the work they're doing, but the dollars that are spent and the plans as we go forward. So I'm very grateful, and I know our government is very grateful for their work. So I want to thank everyone tonight, and I appreciate the opportunity to discuss Social Services.

The Chair: — Thank you, Madam Minister. Thank you, one and all. And seeing all the business is done, I would ask a member to move a motion of adjournment.

Mr. Merriman: — I so move.

The Chair: - Mr. Merriman so moves. All agreed?

Some Hon. Members: — Agreed.

The Chair: — Carried. The time now being 5:21, the committee stands adjourned until April 16th at 7 p.m. Thank you, one and all.

[The committee adjourned at 17:21.]