PUBLIC ACCOUNTS APPEARANCE OCTOBER 15, 2025

Chapter 31, Social Services, 2024 Report Volume 2 – Monitoring Quality of Care in Homes Supporting Adults with Intellectual Disabilities

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
Outstanding: 3.1 Improved Tracking and Monitoring of Licensing Information We recommended the Ministry of Social Services use a central system to track key information about group and approved private service homes. (2021 Report-Volume 2, p. 155, Recommendation 4; Public Accounts Committee agreement February 27, 2023) Status – Partially Implemented	**269**	Implemented	• The ministry has modified its current licensing databases to better track key information related to licensed group homes and Approved Private Sector Home (APSHs). • These databases were implemented by the end of 2024.	• This recommendation is considered implemented	N/A

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
Outstanding: 3.2 Home Inspection Checklist Updated, But Each Group Home Not Assessed Annually We recommended the Ministry of Social Services update home inspection checklists to cover key risks areas at group and approved private service homes. (2021 Report – Volume 2, p. 153, Recommendation 2: Public Accounts Committee agreement February 27, 2023) Status – Partially Implemented	**271**	Implemented	• The ministry has reviewed its inspection checklists through work on *The Residential Services Act, 2019* (RSA), and the *Residential Services Regulations*, which came into force January 1, 2023. • The program standards checklist that is used for group home licensing addresses best practices around water temperature, medication handling, and waste disposal. This was implemented in January 2024. • The Annual Review checklist used for APSH licensing was updated to address best practices for water temperature, medication handling, and waste disposal in October 2024. • Disability Programs is finalizing a Residential Services Manual to further assist service providers to understand requirements of the *RSA* and regulations. • The ministry continues to work with the Ministry of Government Relations to address inconsistencies in fire inspections.	• This recommendation is considered implemented	N/A
Outstanding: We recommended the Ministry of Social Services annually inspect each group home to assess if it meets the minimum program standards requirements. (2021 Report – Volume 2, p. 154, Recommendation 3; Public Accounts Committee agreement February 27, 2023) Status – Not Implemented	**271**	Partially Implemented	• The Program Standards Report was fully implemented in January 2024. A minimum of one program standards review must be completed annually for each service provider licensed under the RSA. • The ministry's new Quality Assurance Unit (QAU) is established and will begin completing Program Standards Reviews in all North Service Area group homes in October 2025 and will expand this to group homes in rural Centre Service Area by March 2026.	• The new QAU has begun developing a framework that continues to monitor and improve the quality of life of individuals living in group homes.	By Fall 2025

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
Outstanding: 3.3 No Verification of Completed Periodic Criminal Record Checks We recommended the Ministry of Social Services verify completion of periodic criminal record checks for people caring for adults with intellectual disabilities living in group and approved private service homes. (2021 Report – Volume 2, p. 155, Recommendation 5; Public Accounts Committee agreement February 27, 2023) Status – Not Implemented	**272**	Implemented	• The ministry is taking a phased approach to the implementation of an annual Criminal Record Declaration (CRD) for all service providers. Group home (GH) operators were informed of this new requirement in May 2025, with the new requirement on schedule to be fully implemented in April 2026 when new service agreements will include the requirement. • For APSH operators, the requirement will be added to agreements with a phased approach over the 2025-26 fiscal year. Operators will be required to sign the new agreement at the time of their annual licensing renewal.	• This recommendation is considered implemented	N/A

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
Outstanding: 3.4 New Standards to Assess Quality and Fulfillment of Person-centred Plans in Development We recommended the Ministry of Social Services periodically assess the quality and fulfillment of person-centred plans for adults with intellectual disabilities living in group and approved private service homes. (2021 Report – Volume 2, p. 158, Recommendation 6; Public Accounts Committee agreement February 27, 2023) Status – Partially Implemented	**273**	Partially Implemented	• The Program Standards Report, which verifies person-centred plans are in place in organizations operating GHs, was implemented in January 2024. • The ministry's Case Management Project has developed a tool to measure the quality of person-centred plans, which is now in use in the pilot. • In 2025-26, the ministry is working with pilot organizations to begin to integrate the Outcomes Based Service Delivery (OBSD) Framework outcome domains into individuals' person-centred plans and focus on the OBSD Service-Level Indicators in their overall planning and service delivery.	• Through this work, the ministry is committed to reviewing the quality of person-centred plans to ensure they are meaningful and reflect individuals' choice and control over their own lives. • The new QAU will take over responsibility for Program Standards Report completion over time using a phased approach by targeting the Northern region first and gradually expanding to the Centre and South region • The ministry is continuing its work to roll out the OBSD Framework across the disability service sector, with the goal of ensuring all clients are progressing towards positive outcomes.	By 2026-27
Outstanding: We recommended the Ministry of Social Services have regular contact about the person-centred plans with adults with intellectual disabilities living in group and approved private service homes. Status – Partially Implemented	**273**	Partially Implemented	• A tool to measure the quality of person-centred plans has been developed and implemented for pilot use. • For group homes, the revised Program Standards Report was implemented in January 2024. This report includes tracking of completion/renewal dates for person-centred plans. The new Resident Support Plan requirement has been implemented for APSHs in June 2025 • In 2025-26, the ministry is working with pilot organizations to begin to integrate the OBSD Framework outcome domains into individuals' person-centred plans and focus on the OBSD Service-Level Indicators in their overall planning and service delivery.	• Implementation of the Resident Support Plan (RSP) for APSHs is occurring in two concurrent stages. All new residents and residents moving between homes immediately require an RSP; completed RSPs for existing residents in homes require completion by the operator's next annual licensing review. • The new QAU will take over responsibility for Program Standards Report completion over time using a phased approach by targeting the Northern region first and gradually expanding to the Centre and South region. • The ministry is continuing its work to roll out the OBSD Framework across the disability service sector, with the goal of ensuring all clients are progressing towards positive outcomes.	By 2026-27

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
Outstanding: 3.5 Further Analysis of Serious Incidents Needed We recommended the Ministry of Social Services analyze serious incidents related to adults with intellectual disabilities for systemic issues at each group and approved private service home. (2021 Report – Volume 2, p. 163, Recommendation 9; Public Accounts Committee agreement February 27, 2023) Status – Partially Implemented	**274**	Implemented	• Since the last Provincial Auditor Report, the ministry's new QAU has taken over responsibility for Serious Incident Reporting oversight and tracking. • New Serious Incident definitions are developed. A process has been developed to flag outstanding abuse investigations to ensure investigations are competed in alignment with policy and a proactive analysis plan has been developed to analyze reported serious incidents for common trends and to provide recommendations to address those trends. • The ministry will continue to follow up on key actions based on recommendations from the analysis plan. • Updated Serious Incident Definitions will be approved and implemented in 2026-27.	• This recommendation is considered implemented	N/A
Outstanding: 3.6 Implementation of Serious Incident Investigation Recommendations Not Sufficiently Monitored We recommended the Ministry of Social Services monitor for timely implementation of recommendations, set out in serious incident investigation reports, at group and approved private service homes. (2021 Report – Volume 2, p. 163, Recommendation 8; Public Accounts Committee agreement February 27, 2023) Status – Partially Implemented	**276**	Partially Implemented	• Standardized reporting on Serious Incidents is now established, with the ministry's new QAU monitoring reports. • The ministry has conducted analysis to provide recommendations to improve service quality and incident follow up.	• The ministry will follow up on key actions based on recommendations from the analysis.	2026-27

PUBLIC ACCOUNTS APPEARANCE OCTOBER 15, 2025
Chapter 9, Social Services, 2024 Report Volume 2 – Social Services Integrated

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
Outstanding: 4.3 Inconsistent Recording and Recovery of SIS Overpayments We recommended the Ministry of Social Services record and recover overpayments related to its Saskatchewan Income Support Program in a timely manner. (2020 Report – Volume 2, p. 96, Recommendation 2: Public Accounts Committee agreement March 2, 2022) Status – Partially Implemented	**55**	Implemented	• The ministry developed and implemented a Provincial Audit Improvement Strategy which focused on areas requiring improvement, including ensuring overpayments are recorded and recovered in a timely manner. • Since the audit, the ministry: o Completed a targeted review of Saskatchewan Income Support (SIS) cases with an overpayment to ensure overpayment recovery had been established. This work continues to be done and cases that do not have recovery in place are corrected. o Developed and implemented training for staff on entering and recovering overpayments in the system. o Implemented additional system functionality that enables overpayments to be transferred and recovered across cases.	• This recommendation is considered implemented.	N/A

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
New: 5.3 New Requirements for Procuring Hotels Implemented But Documentation Lacking for Hotel Selection *5.3.1 Requirement to Obtain Three Quotes* 1. We recommended the Ministry of Social Services maintain sufficient documentation to support appropriate selection of hotels needed for its child and family program clients.	**61**	Implemented	• Four live Linkin-EBMP information sessions were provided to Child & Family Program (CFP) employees in November and December 2024 regarding how to ensure consistent documentation in the CFP Linkin case management system for the three-quote process and rationale for hotel selection, rates, etc., in the case management system. The content remains available on the Linkin SharePoint site. • In January 2025, the Linkin Business Process Manual was updated to include a process document for the three-quote hotel process. In addition to providing staff with detailed instructions for documenting their hotel use process in Linkin, Q&A support sessions were offered to all program areas within CFP. o Going forward, the ministry will maintain the use of a price-quote list and the practice of choosing the most affordable accommodation that meets the client's needs. • Reminders regarding the process and links to the Business Process Manual and Linkin SharePoint site were shared with managers and supervisors on September 3, 2025, *What's Up in CFP* meeting, and will continue to be provided at regular intervals.	• This recommendation is considered implemented.	N/A

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
New: 5.4 Robust Data Collection and Evaluation of Hotel Pilot Projects Needed 2. We recommended the Ministry of Social Services centrally track and monitor hotels it pays and at what rates for clients of its income assistance and child and family programs.	**63**	Implemented	• Set up a centralized process in Saskatoon, Prince Albert, Regina, and Moose Jaw for program support staff to record and process hotel invoices. • The information collected helps provide an overview of the number of hotels in use and the rates charged, supporting analysis of trends over time. • The ministry continues to review the current process and the administrative requirements to track hotel usage, to inform potential adjustments or alternative approaches that balance operational demands with accurate tracking.	• This recommendation is considered implemented.	N/A
New: 3. We recommended the Ministry of Social Services complete a robust evaluation of its pilot projects to procure hotel rooms for clients of its income assistance and child and family programs.	**63**	Implemented	• Conducted an evaluation of both blocked room hotels and the three-quote procurement process. • Completed data collection, incorporating information from the centralized hotel invoice tracking process. • Reviewed evaluation results and recommendations with ministry leadership. Completed evaluation report. • Based on recommendations from the evaluation report, ministry is continuing the three-quote hotel price process and has extended the procurement of blocked hotel rooms in Saskatoon (5 rooms) and Regina (8 rooms).	• This recommendation is considered implemented.	N/A

Recommendation and Status at Time of Audit (Indicate whether new or outstanding)	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
New: 5.5 Payments Made to Vendors on Behalf of Clients Lacking Transparency 4. We recommended the Ministry of Social Services work with the Ministry of Finance to consider how to publicly report payments made to vendors on behalf of income assistance and child and family programs' clients.	**64**	Partially Implemented	• The Provincial Auditor found the ministry's reporting standards to be consistent with the Government's policy for reporting payee details. • The ministry has discussed the feasibility of reporting payments made to vendors on behalf of income assistance and child and family programs' clients with the Provincial Comptroller's Office. • The ministry will continue to adhere to the Government's financial reporting policies. Presentation of vendor payments will not change in the 2024-25 Public Accounts Volume 2 being released this fall.	• The ministry is working with the Ministry of Finance to consider options for how to best address the Provincial Auditor's recommendations. • The ministry's financial systems were designed based on existing reporting policies. The implications related to manual effort and/or systems changes required to provide ongoing reporting will be assessed.	July 2026

PUBLIC ACCOUNTS APPEARANCE OCTOBER 15, 2025

Chapter 12, Saskatchewan Housing Corporation, 2024 Report Volume 2 – Planning for Social Housing Units in Regina

Recommendation and Status at Time of Audit	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
New: 4.1 Further Analysis of Applicant Data Needed 1. We recommend the Saskatchewan Housing Corporation further analyze social housing applicant data to help determine social housing needs in Regina.	**102**	Partially implemented	• Additional approved applicant waitlist data has been included in the Saskatchewan Housing Corporation (SHC) Dashboard report and the 2025-26 quarterly corporate reporting. These metrics will provide greater insights into the social housing needs of clients. • SHC has formed a working group to lead vacancy response efforts and conduct detailed analysis of vacancy data and the approved applicant waitlist.	• Monthly reports will be produced and shared with Housing Authorities to ensure accurate and reliable applicant data is used to assess social housing needs. • Advance program and policy changes from the vacancy response working group's analysis and recommendations. • Trend analysis of the approved applicant data (included in the monthly vacancy reports and quarterly reporting) will also be utilized by the Portfolio Steering Committee during their community reviews to inform portfolio recommendations, such as whether to invest or divest units in the community.	December 31, 2025
New: 4.4 Long-term Forecast of Social Housing Needs Incomplete 2. We recommend the Saskatchewan Housing Corporation complete its forecast of long-term social housing needs in Regina.	**105**	Implemented	• The core housing need forecast was updated to 2031 using the University of British Columbia's Housing Assessment Resource Tools (HART) model. • The core housing need forecast will be updated further following the 2026 Census.	• This recommendation is considered implemented.	N/A

Recommendation and Status at Time of Audit	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
New: 4.6 More Plans to Address Vacant Housing Units Needed 3. We recommend the Saskatchewan Housing Corporation implement plans to help reduce vacant social housing units in Regina.	**110**	Partially implemented	• Capital investments of $10.8M are budgeted for 2025-26 in Regina to repair and renovate units that can serve the growing demand for social housing in the community. • SHC has formed a vacancy response working group to: (a) analyze housing demand within specific communities; (b) review potential policy changes regarding SHC's vacant units; and (c) take action as identified to reduce vacancies.	• The 2025-26 budget includes funding to begin a multi-year renovation project for 154 SHC-owned units in Regina, as well as planning costs for future repairs of an additional 165 SHC-owned units. • SHC is working with the Regina Housing Authority to hold a process mapping session to identify process efficiencies, which may identify opportunities to expedite placements of clients into SHC-owned housing units. • Advance program and policy changes from the vacancy response working group's analysis and recommendations, which include, but not limited to, prioritizing the acceleration of repairs in Regina, policy flexibility to offer lower-priority clients the opportunity to move into chronically vacant units, and limiting the number of times an applicant can decline a unit and remain on the waitlist.	March 31, 2026
New: 4.7 No Analysis of Possibly Over-housed Tenants 4. We recommend the Saskatchewan Housing Corporation periodically analyze data to identify and respond to possibly over-housed social housing tenants in Regina.	**111**	Not implemented	• Policy criteria and processes to respond to possibly over-housed social housing tenants are presently under development, including a plan for implementation in Regina by the end of 2025.	• SHC will gather and analyze data, including establishing a new periodic review schedule, to identify potentially over-housed social housing tenants in Regina. • Once policy criteria and processes are implemented, SHC will relocate any identified over-housed tenants in Regina to vacant units and will repurpose the units to accommodate those with greater demand on the waitlist. Additionally, it will review Regina Housing Authority's implementation of these updates in a future Operational Review.	December 31, 2026

Recommendation and Status at Time of Audit	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
New: 4.9 Operational Reviews Need Enhancing *4.9.1 No Established Benchmarks for Measuring Performance* 5. We recommend the Saskatchewan Housing Corporation set performance benchmarks for its social housing operational reviews of the Regina Housing Authority.	**115**	Implemented	• SHC has developed an Action Plan that includes benchmarks and goals to enhance communication with tenants and approved applicants, more accurate and timely data entry, and improving the repair processes. SHC has met with the Regina Housing Authority to review the plan. Benchmarks will be reviewed as part of the 2025-26 Operational Review.	• This recommendation is considered implemented.	N/A
New: *4.9.2 Lack of Follow Up on Compliance Issues and Recommendations* 6. We recommend the Saskatchewan Housing Corporation require the Regina Housing Authority to develop action plans addressing issues and recommendations identified in its social housing operational reviews.	**116**	Implemented	• SHC has drafted an action plan and is working with Regina Housing Authority on addressing compliance issues and recommendations from the 2022 Operational Review Report. • The Housing Operations unit meets biweekly with the Regina Housing Authority. • Additional follow-up will occur during the 2025-26 Operational Review.	• This recommendation is considered implemented.	N/A

Recommendation and Status at Time of Audit	Page	Current Status (implemented, partially implemented, not implemented)	Actions Taken to Implement Since PA Report	Planned Actions for Implementation	Timeline for Implementation
New: *4.9.3 Complaints Not Formally Monitored* 7. We recommend the Saskatchewan Housing Corporation enhance its monitoring and analysis of social housing tenant complaints in Regina.	**116**	Partially implemented	• SHC currently maintains an internal database that is used to track tenant complaints received throughout the province. • Regina Housing Authority is working to update how it tracks maintenance items. An app is being developed to track and assign maintenance tasks in a clear and concise format.	• Tenant surveys will be conducted as part of the 2025-26 Regina Operational Review to provide a representative overview of tenant satisfaction with their unit, the service provided by the housing authority, and other key indicators. • Responses from tenant surveys will be analyzed and used to help inform the operational review compliance issues and recommendations. • SHC currently maintains an internal database that is used to track tenant complaints made to SHC that are received from tenants and the public throughout Saskatchewan. This will continue to be updated and reviewed annually.	December 31, 2026
New: 4.10 Further Analysis and Reporting About Building Conditions Needed 8. We recommend the Saskatchewan Housing Corporation expand analysis and reporting on progress made against its building conditions target related to social housing in Regina.	**118**	Partially implemented	• In July 2025, SHC has completed its annual Facility Condition Index (FCI) update in its Capital Asset Planning Module (CAPM) software. • The Ministry of SaskBuilds and Procurement are conducting inspections of select SHC-owned buildings and directly entering the data into CAPM.	• SHC is working with CAPM's parent company, Ameresco, to update some of the assumptions in the FCI model, such as timelines for replacing specific building components. • The annual FCI update will be included in the Q3 SHC Dashboard report. SHC is exploring opportunities to include additional details in its ongoing reporting, such as FCI breakdowns by community and building components.	March 31, 2026