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Standing Committee on Social Policy

Services for Persons with Developmental Disabilities Act, 2008

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Comité permanent de la politique sociale

Loi de 2008 sur les services aux personnes ayant une déficience intellectuelle

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LEGISLATIVE ASSEMBLY OF ONTARIO

ASSEMBLÉE LÉGISLATIVE DE L'ONTARIO

STANDING COMMITTEE ON SOCIAL POLICY

Thursday 7 August 2008

COMITÉ PERMANENT DE LA POLITIQUE SOCIALE

Jeudi 7 août 2008

The committee met at 0901 in the Days Inn, Timmins.

SERVICES FOR PERSONS WITH DEVELOPMENTAL DISABILITIES ACT, 2008

LOI DE 2008 SUR LES SERVICES AUX PERSONNES AYANT UNE DÉFICIENCE INTELLECTUELLE

Consideration of Bill 77, An Act to provide services to persons with developmental disabilities, to repeal the Developmental Services Act and to amend certain other statutes / Projet de loi 77, Loi visant à prévoir des services pour les personnes ayant une déficience intellectuelle, à abroger la Loi sur les services aux personnes ayant une déficience intellectuelle et à modifier d'autres lois.

The Vice-Chair (Mr. Vic Dhillon): Good morning, everybody. Welcome to the hearings on Bill 77.

COMMUNITY LIVING TIMMINS

The Vice-Chair (Mr. Vic Dhillon): The first presenters today are from Community Living Timmins, if they can come up. Welcome to the committee. You have 15 minutes, and if you could state your name for the record, that would be really appreciated. You may begin.

Ms. Johanne Rondeau: Thank you. Good morning. My name is Johanne Rondeau. I'm the executive director for Community Living Timmins Intégration Communautaire. With me today is Brenda Beaudoin, the quality enhancement coordinator for Community Living Timmins. We thank you for the opportunity to speak to Bill 77, the proposed legislation for developmental services.

The Ontario government has been engrossed in transforming developmental services and working to create a more inclusive society for all citizens. Bill 77 is reflective of that, and its importance in setting standards that will stand for many years cannot be underestimated.

We also wish to offer our support to Community Living Ontario, which has done an excellent job of critiquing Bill 77 in its entirety. We wholeheartedly approve of all recommendations presented to you by Community Living Ontario.

Ms. Brenda Beaudoin: We will focus on the following matters: legal capacity and decision-making/enhancing the voice of the individual, recommendation 3;

person-directed planning, recommendation 4; living in peace and security, recommendation 9; and protections and appeals, recommendation 10.

I quote Community Living Ontario: "We recommend that person-directed planning be added as a funded element that is available to all those deemed eligible for supports and services.... Person-directed planning should not be carried out by the application centre but by individuals or agencies that are recognized as qualified planners according to standards that should be set through a regulation or policy directive."

Honourable ladies and gentlemen, there has been an explosion around the world in person-centred or person-directed planning. At the heart of this movement is the Learning Community, a group of educators, researchers, parents, writers, and various agency personnel, as well as people we support, who are trained to use and contribute to the growing body of tools that assist with person-directed planning. I am proud to be a member of this group, and have been trained as a trainer.

Standards for excellence in planning should come from the Learning Community. Trainers have been working throughout Ontario for years to assist agencies in getting started on this path. As well, members of the Learning Community have worked for MCSS in planning for people leaving the remaining institutions for community life. The recognition is there.

Person-directed planning must be recognized and funded in Bill 77. It ensures that those we support have a voice. The person-centered planner provides the accompaniment that lets the voice be heard in full harmony.

Legal capacity and decision-making/enhancing the voice of the individual, recommendation 3:

Again, I quote: "It is recommended that Bill 77 ... recognize the legal capacity of people who have an intellectual disability and provide for supported decision-making.... The concept of supported decision-making ... has recently been adopted into international law under article 12 of the UN Convention on the Rights of Persons with Disabilities. Acknowledging and supporting the legal capacity of the individual can be the most transformative step taken within this legislation." I took out the word "perhaps" because, in my mind, it is the most transformative.

My role as an advocate here is to open your hearts to the humanity of people with intellectual disabilities. You, as the standing committee of the Legislature, will make changes to the bill. You, as the overseers of this legislation, have the awesome responsibility of speaking through this bill for a group that is the most politically under-represented in the world: those with intellectual disabilities.

You must use your power to be the promoters of equality at the leading edge, the protectors of those whose voices have not yet been heard, and the purveyors of possibilities. You must recognize people with intellectual disabilities as a group that historically has had to surrender control over their lives, finances and dreams for a future that belongs to them.

I implore you to take a leap into the future with Bill 77. Review the UN Convention on the Rights of Persons with Disabilities, and bring this legislation up to its standards. You will be setting an example for other ministries, provinces, governments and countries.

Living in peace and security, recommendation 9: We can no longer allow others to have the legal authority to disrupt and intimidate people in their own homes, as occurred during the labour strike in the summer of 2007. Community Living Ontario, supported by Community Living Timmins, recommends that the Developmental Services Act be identified as a no-strike sector and that provisions be established by the legislation to create an arbitrated settlement mechanism to address future labour disputes and disagreements. Provisions such as those found in the Hospital Labour Disputes Arbitration Act should be included in Bill 77 with the aim of ensuring that the disruptions to people's homes and lives that occurred in 2007 never happen again.

Many people supported by seven Community Living agencies endured strikes and picketing which targeted their homes. Supported people were confined to their homes or forced to leave altogether. They were frightened and confused. Many neighbourhoods were disrupted by picket lines, porta-potties, shouting megaphones, and whistles. In some locations, this occurred at all hours of the day and night.

We recommend that you follow the example of Manitoba, where services provided by Community Living Manitoba are subject to the provincial Essential Services Act. Thank you, ladies and gentlemen.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much. We'll start with—

Mr. Dave Levac: She's got more, Vic. The Vice-Chair (Mr. Vic Dhillon): Oh.

Ms. Johanne Rondeau: Sorry about that.

I'd like to move on to recommendation 10, protections and appeals. We feel that measures must be in place to ensure that individuals and families are able to purchase quality supports within the community. Such measures must ensure provisions through which workers available for hire through direct funding can be paid a reasonable wage comparable to that of workers in service agencies, that there is also an expectation of quality in the supports offered and provided by these workers and that adequate training is made available to all workers in this sector. Workers should also be expected, at a minimum, to undergo a criminal records check.

We should add a provision that when direct funding is provided, those receiving that funding would be required to pay any support worker they engage an amount in keeping with the hourly wages of the workers who work for service agencies. In addition, support workers contracted through direct funding should receive additional remuneration to make up for benefits that they would have as employees of service agencies such as health insurance, pension contributions, travel allowance, sick leave and paid vacation. Also, as mentioned before, at the very minimum, these employees must undergo a criminal records check.

Policy directives would have to be issued to the application centres from time to time informing them of the appropriate amounts to be paid to individuals and their families under direct funding agreements.

Over the past several decades there were serious wage disparities between those employed by service agencies and those employed by the ministry in the government-run facilities. Now that there is going to be another two-stream system for the provision of supports to persons who have an intellectual disability, it's very important to make sure that it does not lead to continuing and perhaps even more glaring disparities, depending on which stream is chosen by persons needing support and those who choose to make their livelihood as support workers.

Research does suggest that if the government does not play a key role in setting employment standards and wage guidelines, direct funding could lead to a low-wage sector where some workers can earn far less than others who are doing very similar work. Possibilities for error and injury, abuse, isolation and neglect increase when there is no governing body as there is no accountability for the supports provided. These are the requirements for training of new employees of Community Living Timmins Intégration Communautaire. There are no requirements for those workers hired privately at present.

I want to end this presentation with a poem written by a young lady who has received support from Community Living Timmins. Her name is Ashley.

Ashley's Poem

No matter who you are in life,

Helping others out in your day-to-day job

I know is very stressful.

But at the end result,

With a lot of patience,

You will have a chance to learn and grow

With the people you support.

Yes, at the beginning,

We are a cocoon.

Then we become different coloured

Butterflies

In the end.

Thank you.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much. There's a little over a minute each, and we'll begin with the official opposition.

Ms. Sylvia Jones: Thank you, ladies. I appreciate your presentation. Brenda, you mentioned the Learning Community. Can you expand upon what that is and the role that they play within either Community Living Timmins or education?

Ms. Brenda Beaudoin: The Learning Community was established by Michael Smull, who works out of Oregon university. He was hired in the 1980s to depopulate institutions at that time. That's when he started working on person-centred planning. This has now grown worldwide, and Michael has been in Timmins, northern Ontario and southern Ontario several times. We've undergone training with them and are connected with them through the website and e-mail. We're involved in the worldwide movement and up-to-date learning as it occurs.

The Vice-Chair (Mr. Vic Dhillon): To the government side.

Mr. Dave Levac: Mr. Prue.

The Vice-Chair (Mr. Vic Dhillon): Oh, I'm sorry. Mr. Prue.

Mr. Michael Prue: Thank you. The request you made to have the workers deemed an essential service and their right to strike taken away—it's my understanding the last strike resulted because of the wage disparity. They were striking because they weren't making enough money. Is that—

Ms. Brenda Beaudoin: These strikes occurred in southern Ontario, so we don't have the details of that at this time, but that sounds correct, yes.

Mr. Michael Prue: It's a tough thing to take away one person's rights to give rights to someone else, which is what you're asking.

Ms. Brenda Beaudoin: No, sir, we are not—equality and dignity for all across the world, through the United Nations. People with intellectual disabilities have the right to peace and security in their own homes, whether workers come there or not. My 91-year-old mother has workers coming into her home. She would not be forced to dress in a T-shirt expounding labour issues, and I would suggest that this right should be equal to all people in their homes, wherever they live.

The Vice-Chair (Mr. Vic Dhillon): The government side?

Mr. Khalil Ramal: Thank you very much for your presentation. You mentioned many different elements. You talk about direct planning, which we never heard—this is our third day. Can you explain that? What do you mean by that, and what's the difference between direct planning, in your opinion, and an application centre? Why do you not want an application centre and you want to go to direct planning?

Ms. Brenda Beaudoin: The application centre will be collecting factual data to assist in determining what a person needs. Person-directed planning learns about the person—their personality, as well as their abilities, the support system around them—and they interview all of the support system around them, so that they gain all knowledge. The thing is to assist the person to have a

future that makes sense to them, on whatever level that may be. We have been totally amazed when we ask people what they wanted to do with their lives—the amazing stories that came out of that. Supporting them to get what they want on their own level has been very successful. Then the money that is funded by the government is used to assist them to reach their goals in their lives.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much. If someone has a BlackBerry near the mike, I'd ask that you check and move it away from the mike. I know it was me yesterday. Joe, is that you?

Mr. Joe Dickson: It's off.

The Vice-Chair (Mr. Vic Dhillon): Okay.

Thank you so much for your presentation. We really appreciate it.

FAMILY ALLIANCE ONTARIO TORONTO FAMILY NETWORK

The Vice-Chair (Mr. Vic Dhillon): The next presentation is from Christy Barber. I believe it's a teleconference.

Ms. Christy Barber: Yes, good morning. Can you hear me?

The Vice-Chair (Mr. Vic Dhillon): Good morning, Ms. Barber.

Ms. Christy Barber: Good morning to the panel in Timmins. I cannot hear you. I can hardly hear you at all. Can you hear me?

The Vice-Chair (Mr. Vic Dhillon): Yes, we can hear you. How's that now?

Ms. Christy Barber: That's fine.

The Vice-Chair (Mr. Vic Dhillon): Okay. Is that Christy Barber, just for the record?

Ms. Christy Barber: Yes, it is.

The Vice-Chair (Mr. Vic Dhillon): Okay, great. You have 15 minutes, Ms. Barber, and any time you don't use we'll divide up amongst the three parties. You may begin now.

Ms. Christy Barber: Good morning. My name is Christy Barber. I am a volunteer board member with Family Alliance Ontario. Family Alliance Ontario is an alliance of citizens that offers knowledge, tools and networking opportunities to individuals with disabilities and their families to assist them to realize a vision that includes having valued relationships, choice and control in their lives, and enables inclusion through meaningful contribution and participation in their communities.

As the people who live with the decisions made by the Ministry of Community and Social Services, we feel we have important information to share and the duty to speak up about the influences on the lives of our family members, especially as it pertains to new legislation. In addition to my comments and those made by Family Alliance members in London and Ottawa, I would like to say I'm in full support of the recommendations presented by the provincial ad hoc working group on Bill 77 in which we participated.

Family Alliance Ontario commends the Minister of Community and Social Services for updating the developmental disabilities act. It is our hope that this new act, Bill 77, will embed human rights and end injustice for persons with developmental disabilities. The transformation of developmental disabilities is to be guided by citizenship. Citizenship includes access, rights, valued status and full participation. We look to this legislation to be the foundation upon which the rights and citizenship of persons with developmental disabilities will rest. **0920**

Language and strategies in a bill, including a muchneeded preamble, should reflect the vision and principles of the transition process in which Family Alliance has had an influential role at the partnership table since 2004. The government indicated in its context for action that it would work with stakeholders to create a plan that would result in more self-reliant individuals and families supported by coordinated information, planning and services in their own community.

The new legislation aims to create an accessible, fair and sustainable system of community-based support. The word of choice is "support." My 32-year-old daughter, Nancy, a young woman with significant developmental and physical disabilities, accesses community-based support through a combination of agency-provided, residential support and direct-funded community participation support.

I would like to share with the committee our family's experience as it relates to some key aspects of Bill 77.

Nancy grew up with her three younger brothers, experiencing the fun and challenges of any large family, and was involved with her peers in camping, Guiding and community activities. With regular respite opportunities available from the age of five, Nancy spent two nights a week and one weekend a month at a children's residence, where she and we came to trust other qualified people to meet her most personal needs. We have a strong partnership with this agency which we have chosen to provide support for Nancy to live in a home in a community not far from her family home for over 10 years.

We received direct funding through the special services at home program from its inception in 1982. In 1997, Nancy became one of 50 individuals transitioning from school to receive support from the Individualized Quality of Life Project which, since 2000, has been operated as options planning and supports for inclusive living by Family Service Toronto. We have had access to what they call a community resource facilitator, who gets to know Nancy through visits and opportunities to meet with, listen deeply and guide discussions for planning purposes with Nancy's support network, a group of family and friends whose relationships with Nancy are vital to the good life she leads.

An independent facilitator—and there have been three over the 11 years—encouraged and supported us to get the so-named "Nancy's network" started as a forum for developing a shared vision for her life, dreaming and considering possibilities for Nancy's meaningful partici-

pation in valued roles in the community and helping to mobilize involvement with Nancy.

The community development and capacity building which occurs through this networking are so valuable to everyone involved. Facilitation must be an entitlement, available once eligibility is determined, preceding the application process. Family Alliance recommends that persons and families have the option of using independent facilitators from a publicly funded organization or choosing their own with public funds. We want families to have support to develop and sustain a support network, to realize the person-directed planning process lifelong, as needed.

Planning options should encourage community inclusion and not a life in service. Planning independent of the service system would enable a person to receive planning support and facilitation without any pressure to select one agency or program over another.

By having a facilitator work for the person, conflicts of interest would be avoided. Best practices of models that deliver unencumbered planning support and facilitation in Ontario are well documented. People, together with family and friends, need independent facilitation to guide and identify the goals and strengths that will enable them to move more deeply into the typical community.

Person-directed planning like this is key to citizenship and self-determination when it is based on the principles and values of the document Common Vision for Real Transformation, and it is quite different from planning for traditional programs. Research completed by John Lord and his colleagues shows that when facilitation is combined with individualized funding for disability support, very positive citizenship outcomes are the result. It is vital that the option of direct funding as a choice for individuals and their families be entrenched in this legislation.

Direct funding offers families increased flexibility, more control over their lives and a freedom from reliance on traditional services. Families who have worked to provide lives of participation and inclusion for their children will have the option for this life to continue into adulthood. The recognition of the legal capacity of a person with a developmental disability, together with close family and/or network supporters, to make a direct funding agreement and direct how funds will be used should be included in the act.

Adequate and secure individualized funding must be available to people with disabilities so they receive sufficient funds to purchase the supports they require to participate. Historical practices of poor or no funding to direct funding programs will not move citizenship rights forward. Rhetoric about policy changes must be matched by adequate funding. Family Alliance Ontario and its colleagues have been working with government for over 20 years to establish direct funding options and have witnessed those programs stalled or stopped. We recommend that direct individualized funding be implemented substantially to make real the values and principles pro-

claimed in the government's agenda for the transformation of developmental services.

The person, with their family and support network, should have control over the funds and choose how the money is to be administered. Funding should move with the person so people with disabilities may live and participate where they choose, close to family and friends, throughout the province of Ontario. There should be no arbitrary caps on amounts of direct funding. Creating programs where people must fit into limited amounts of funding does not respect citizenship or diversity.

Historically, funding to families has also been much less than funding to agencies to support an individual. This double standard must stop. Persons living in a typical community must be supported to the same extent as they would be in traditional service.

Nancy currently has a budget for direct funding reviewed and revised as needed and submitted for approval annually. Our family manages an allocation for Nancy's community participation support. We receive fiscal management assistance from options to pay Nancy's personal assistants either as her employees or as independent contractors. The facilitator is available to assist with personnel recruitment and training if requested. Nancy is supported to choose people who are interested and interesting. Many enduring relationships and community connections have been made possible with direct funding.

Our finances are reconciled at least quarterly. We believe that those managing supports for a family through direct funding should be included in all distributions of funds for wage increases for support workers. Fairness demands that families have equal opportunity to offer competitive salaries to ensure the long-term viability of individualized supports and the competency of support staff. Families and their networks can be trusted to support responsible decisions for their family members regardless of the complexity or amount of support needed.

The development and funding of an accessible infrastructure of facilitation and fiscal management is a recommended investment for direct funding to be successful. Agencies must develop responsive systems for facilitating direct funding and portability. The unbundling of resources by agencies for families who request individualized funding should be encouraged by the ministry. The level of individualized funding can be as high as the amount being used for the support of the individual in the service that will be unbundled.

Enshrining waiting lists in legislation is shocking and leads to enormous strains on families already providing the bulk of support to their sons and daughters. As an example, no funding for the Passport direct funding program was provided in 2008, yet \$200 million was provided for agency enhancements and wage increases; no funding was provided to families with direct funding to increase the pay of their workers. Such imbalances and discriminatory practices must stop. Provision for waiting lists in the act must be struck from the legislation.

Regarding application centres, there's a strong sense of conflict of interest when one centre is responsible for assessing, prioritizing and determining the funding with no provision of an independent appeal process. Best practices have emerged which include separate independent panels to prioritize and determine funding. The history of difficulties with the design of application centres is so strong that Family Alliance Ontario strongly recommends that application centres be taken out of the legislation completely. More research and development is necessary with more input from family stakeholders. Processes should be worked out through the regulations of the bill.

The system needs to be accountable to individuals and their families as well as to the taxpayers. People need to see that they are being treated fairly with a transparent process. Guidelines used for prioritization and funding allocations should be made available as general information and not held as closely guarded secrets. Decisions need to be reviewed on a regular basis and summaries made available. Family Alliance Ontario recommends accountability that ensures that those involved with the person with a disability are doing what they say they are doing personally, financially and collectively. People and families are accountable to government for the expenditure of funds while independent facilitators and direct service providers are accountable to the person by ensuring the person's plan is implemented.

Independent self-advocacy groups want to continue to be involved as decision-making partners at the various planning and community tables in the province. Representation from People First and family advocacy organizations should have an equal voice as service-providing agencies at all decision-making tables locally, regionally and provincially. In order for Family Alliance and other family networks and family-directed organizations to organize in such a fashion that permits us to play an integral role in promoting the inclusion of people with developmental disabilities, we recommend that Bill 77 make provisions for funding of independent self-advocacy groups.

Thank you very much for this opportunity to present.

The Vice-Chair (Mr. Vic Dhillon): Thank you. We have a little bit over a minute each, and we'll start with the NDP. Mr. Prue.

Ms. Christy Barber: I should explain that I'm not able to hear Mr. Prue very clearly. I may ask you to repeat your questions. Thank you.

Mr. Michael Prue: I haven't said anything yet. Can you hear now?

Ms. Christy Barber: Kind of, yes. Thank you.

Mr. Michael Prue: Okay. You made a number of statements, but there's one I'd like to zero in on. You want adequate funding. Has your group, Family Alliance, looked at the numbers, at how much funding you would seek from the government in next year's budget to actually make this bill do what you want it to do?

Ms. Christy Barber: We submitted a small budget request this fiscal year, which was turned down. It was

for some administrative support. It would be less than \$100,000 to be able to support some administrative functions and communication strategies. We are an umbrella group of family networks across the province, and that would enable us to disseminate information, to host educational forums and to have a small amount of administrative support housed in one of our local family networks.

The Vice-Chair (Mr. Vic Dhillon): Thank you. Government side?

Mr. Khalil Ramal: Khalil Ramal speaking. How are you, Mrs. Barber?

Ms. Christy Barber: I'm fine, thank you. How are you?

Mr. Khalil Ramal: Not too bad. Thank you very much for your presentation.

Ms. Christy Barber: I cannot hear you very clearly.

Mr. Khalil Ramal: Thank you very much for your presentation. My question to you is, for the last two days we listened to many different agencies and organizations—

Ms. Christy Barber: I'm sorry, I cannot hear you.

Mr. Khalil Ramal: In the last two days, we listened to many organizations and agencies. They claimed that direct funding wouldn't be a good idea because the parents cannot take it and cannot manage it—

Ms. Christy Barber: I'm sorry; I can't understand what you're saying. The connection is terrible.

The Vice-Chair (Mr. Vic Dhillon): Is there any other way we can do this, tech staff?

Mr. Khalil Ramal: Can you hear me now?

Ms. Christy Barber: No, there's a lot of reverberation from the microphone. I can't hear you.

Mr. Khalil Ramal: Okay. Can you hear me now?

Ms. Christy Barber: That's a little better.

Mr. Khalil Ramal: Okay. For the last two days, we heard from many organizations and agencies. They claimed that direct funding is not a good idea because the parents cannot manage the situations and they don't know what to do and they cannot find suitable support for their kids. So, since you have had direct funding since 1982 and you have a lot of experience with these situations, what can you say to those organizations?

Ms. Christy Barber: There are many families who have managed and continue to manage with the direct funding model that currently exists with special services at home for the majority of families who receive this support. We have found that with good facilitation support and fiscal management, and organizations like respiteservices.com who have a database of potential workers, we can manage to secure very good assistants. It has been proven that it can work. The benefits to our daughter and her life in the community of being able to have the choice of who supports her and what her activities are are wonderful.

The Vice-Chair (Mr. Vic Dhillon): Thank you. We'll have to move on to the official opposition. Mrs. Elliott.

Mrs. Christine Elliott: Thank you very much, Mrs. Barber, for your presentation. My name is Christine

Elliott. I'm a Conservative member of the committee. Can you hear me all right?

Ms. Christy Barber: Somewhat.

Mrs. Christine Elliott: Okay. I'll try moving a little closer. It seems, from the comments that you've made and from some of the comments that have been made by previous presenters, that independent planning and facilitation is really key, along with direct funding, in order to allow families to think outside traditional means of support and to be able to truly allow for thinking outside of the box. Independent planning seems to allow the flexibility for their child and also to think holistically of all of the needs of the child. Would you agree with that?

Ms. Christy Barber: Very much so, yes. To develop a relationship with someone who is not tied to particular programs or services and someone who is familiar with the individual and takes the time to get to know our daughter, takes the time to consider the community in which she lives—it's very important that that person is an agent and represents the interests of the individual.

Mrs. Christine Elliott: Thank you.

The Vice-Chair (Mr. Vic Dhillon): Thank you, Ms. Barber.

Ms. Christy Barber: You're very welcome. Thank you again for the opportunity.

COCHRANE TEMISKAMING RESOURCE CENTRE

The Vice-Chair (Mr. Vic Dhillon): The next presentation is from the Cochrane Temiskaming Resource Centre. Are they here?

Mr. Wade Durling: We are.

The Vice-Chair (Mr. Vic Dhillon): Good. All right. Good morning, gentlemen. Welcome to the committee. You have 15 minutes, and if you can state your names before you begin, that would be really appreciated.

Mr. Wade Durling: My name is Wade Durling. I'm the executive director of Cochrane Temiskaming Resource Centre. I'm joined by Gary Dowe on my left, who is the director of psychological services and infant development, also part of our organization, CTRC.

I want to thank you for the opportunity to present to your committee specific to Bill 77. I do have a written submission that's now going around. I will review it with you and then would welcome any additional questions or comments that you may have.

The paper that's coming around gives a quick overview of CTRC itself. It's a small acronym, so I'll use that. I won't read all of this, but just very quickly, I'll let you know that CTRC was a schedule II facility back in 1976. We supported children and adults with developmental disabilities. We have since, from the late 1980s and early 1990s, moved to a community model of service. I've put down on pages 1 and 2 the primary things that we do. Number one is the professional and clinical support team. We employ over 40 professional support staff, clinical staff, and they provide supports and

services to children and adults with developmental disabilities, and they do that across the areas of Cochrane and Temiskaming. One thing that we have discovered that's very important in service delivery is that you do service in the community of the individual. So in order to enhance our capacity to do that, we have also established satellite offices in key areas. In addition to offices here in Timmins, we have offices in Kapuskasing, Cochrane, Kirkland Lake and New Liskeard. We also provide supports up in the Moosonee-James Bay area.

The other component that CTRC does is the residential and day program piece. We support 57 adults in group home settings today, 28 adults in what's called a family home setting—it's very similar to a foster care arrangement—and we also provide that same support to children—three today. We also have one child in a special group home setting in Timmins at this point who's in transition to adult services, and we have a child in a placement in Ottawa because of his particular needs. We also support approximately 100 individuals in two day program settings, both within Timmins. So that's a little preamble in terms of who CTRC is.

CTRC applauds the government for its ongoing work on transformation of the developmental services sector in Ontario. Bill 77 is an important step, in our view, in this transformation. It proposes a revised framework for the provision and funding of services to, or for the benefit of, persons with developmental disabilities. To us, it is specific to the entire province of Ontario. Therefore, it must fully consider the geography and the diverse and rich culture within Ontario and ensure fairness and equity for all citizens with a developmental disability.

With that in mind, CTRC is pleased to be able to offer its comments specific to the proposed legislation in the context of northern considerations, so thank you for that.

I want to comment on a few things, the first one being the application centres, and I understand you're getting a few comments in that regard anyway. CTRC understands the interest in a single and clear point of access to services and to the principles of fairness and equity. While the legislation looks to ensure those principles, the method prescribed within the legislation of an application centre is concerning to this area of the province. It is our understanding that only one application centre is planned for the entire northeast district. To put that in context, the area of Cochrane and Temiskaming, which is only part of the northeast, covers a land mass that's greater than the size of the entire southern part of Ontario. Specifically, as it relates to geography, this plan for the northeast would resemble only one access centre for all adults with a developmental disability in the southern part of the province from Cornwall to Windsor and all points in between. This is further complicated by the concern of cultural diversity and transportation concerns. For example, consider how individuals from Moosonee and the James Bay coast will access services and how this will improve access for them. The communities within Cochrane and Temiskaming have strongly supported access to services within one's own community and a collaborative model has emerged and works very well. Access to service is not a serious concern in this area; what is of concern is availability of services.

0940

New referrals for service and re-referrals for service are limited. In 2007, as an example, CTRC received 71 referrals for service for all of Cochrane and Temiskaming. Although I didn't include it here, those referrals probably would be inclusive of referrals to any other service as well, given the nature of what our service does. Of those, 45 were new referrals to the system and the remaining 26 were re-referrals. Only four were applying for residential services; the majority were requesting clinical and other professional support services. The numbers do not suggest the need for a new and separate service. Further, unless the application centre would receive new funding, the concept of removing further dollars from an already stretched sector would be concerning. A question that has been voiced specific to this matter within this area is this: How will this benefit individuals in this area?

The proposed legislation, in section 8, suggests that the minister may designate a service agency as an application centre. That would suggest, at least to me, that a service agency and an application centre could be one and the same. CTRC would view this as a little more palatable than requiring two separate agencies. However, that seems contrary to the communication that we have heard that an application centre cannot provide direct service to individuals with a developmental disability and therefore could not be a service agency.

In short, we support the principles that are sought in the legislation, but our recommendation would be that the proposed legislation prescribes an application process and outcomes in place of legislating application centres and that individual communities work together with regional offices to ensure these outcomes are achieved.

In terms of waiting lists, the proposed legislation identifies that application centres will be responsible for monitoring waiting lists. Waiting lists are an unfortunate consequence of limited resources and services. Bill 77 provides no clarity on the role of service agencies in working with individuals waiting for service. Services and service agencies and community must work together with individuals and their support network to determine how best to support individuals, particularly those most in need.

This brings to mind a recent situation of three individuals all in need of an immediate residential group home placement and there being no beds being available. One of these three individuals was in the mental health unit of the local hospital, didn't need that service any longer, but wasn't able to return home. A second person was in her own apartment but no longer capable of supporting herself and raised significant questions of health and safety. The third was at home with aging parents who were no longer able to provide the support required. These situations arise regularly. The response to this is not about a wait list and no spaces being available; rather, it is about services working together with family and

community. Ultimately, with that in mind, a solution was found for all three. Services need to understand the needs of individuals and the community and be able to plan together in order to best respond to those needs within finite resources.

As such, we would recommend a caution to the concept of including wait lists within Bill 77 in its present format and simultaneously would promote that an appropriate process be included that ensures a timely response to those most in need and in urgent need and ensures involvement from services.

In terms of services, much of the work that CTRC does relates to psychology and other professional supports for individuals and their families. These supports are integral in maintaining community living arrangements for individuals and families. Approximately 38% of individuals with a developmental disability have a dual diagnosis, meaning a co-existing mental health issue and/or challenging behaviour or behaviours that seriously affect the quality of one's life. The majority of individuals supported by CTRC have a dual diagnosis.

Consequently, we'd recommend that sections 4(1)(5) and 4(2) of the legislation be broadened to talk about "psychology and professional services" instead of "a psychologist," and that it recognize the many specialized health care providers and professionals in the sector, including behavioural therapists, psychometrists and registered psychometrists, community support workers, occupational therapists, as well as speech language pathologists, to name a few. We would also note that speech language services, although in the proposed legislation, are limited in work with adults. Their work is primarily with children and early intervention practices.

We would further recommend inclusion of a clear process of addressing the needs and support questions of those with more complex needs, the dually diagnosed or the medically fragile. Many times, such needs are resource-intensive and immediate.

Some general comments: CTRC notes the clarification of "eligibility for services" through inclusion of a definition of "developmental disability" in section 3 of the act.

While the act contemplates a "review of determination" for eligibility for service, our view is that this component of the act is weak. Individuals and families must have access to a fair and objective appeal process, and this should be embedded in the act in very broad terms

CTRC supports the concept of two funding streams: funding agreements with service agencies, and direct funding agreements with individuals or other persons on their behalf. That being stated, measures must be taken to ensure: that service agencies are able to attract and retain qualified front-line and professional staff; that individuals and families are able to purchase quality supports within the community; sustainability of a stable system without the threat of eroding resources or quality of care.

In subsection 27(4)(d)(i), "the adequacy of the staff"—this has to do with inspections—just requires clarification in the act; I'm not sure what you mean.

Section 30, concerning takeovers, needs to consider that several agencies have more than one service agreement. In our opinion, the ministry should not have powers to take over and manage the affairs of a private agency based on a breach of contract. The ministry should and does have powers to assign a manager or reassign responsibilities and/or terminate funding related to services described in a contract of service.

The proposed access to an individual's personal information by the minister and ministry, as contemplated in this act, is concerning, as it relates to a person's right to privacy. People with a developmental disability, and indeed any person, have a right to expect that their personal information is secure and not subject to scrutiny by those they have not consented to have access, other than in very limited circumstances.

In summary, I want to thank you again for the opportunity of presenting to your Standing Committee on Social Policy concerning Bill 77. CTRC supports the idea of this new legislative framework, but strongly encourages the committee to consider our comments and recommendations and to adjust the proposed legislation specific to application centres, waiting lists, services, and as it relates to our general comments.

Finally, we would request that the committee ensure that the public will be fully consulted on the regulatory framework for this legislation prior to the government undertaking the process of drafting and adopting regulations.

The Vice-Chair (Mr. Vic Dhillon): Thank you. We have about a minute each. We'll begin with the official opposition.

Mrs. Christine Elliott: Thank you very much for your presentation. I just had two questions, if I may. One was with respect to the concept of the wait lists and being able to have a timely response for those most in need. It was suggested in one of the earlier presentations that if you had the independent planning and facilitator who was involved with that, even though you might not be able to get the person into the precise service that they might need, other things could be done in the meantime to sort of triage the situation until more concrete supports could be put in place. Is that what you're thinking of when you're talking about a different process?

Mr. Wade Durling: Yes, but not necessarily to limit it to an outside facilitator. I think there are also things that services can do.

My other concern in terms of what I'm hearing right now is that services are limited to a residential group home, which, to me, they're not. Services also need to expand and change. So if they're going to be involved in that process, then they need to be involved in the process, and the legislation needs to support that. Otherwise, services are off to the side and, really, we're just talking about a space that's available, and to me, that's not what this is about. I think the legislation has the wrong model.

Mrs. Christine Elliott: You're saying it needs to be more expansive and consider much more than just that piece?

Mr. Wade Durling: This is a whole community approach, at the end of the day, if we're going to do this and do this right. Everybody has a point: the individual, the family, a facilitator, whoever that person is, services, and a number of other people and professions as well.

The Vice-Chair (Mr. Vic Dhillon): Mr. Prue.

Mr. Michael Prue: Your point about the land mass is absolutely correct. How many application centres or community groups doing the applications would be necessary, in your opinion, for the northeast of Ontario?

Mr. Wade Durling: Personally, I strongly believe that services need to be where the individual is. The way we see this work right now is that individuals come to their own community, and they can walk in any door now, and then we do what's called a screen and link. So if you look at your primary communities, at least, that's where they need to be, and I've identified five of those right now that we have satellite offices in. The one place that we don't have that really needs something more specific is Moosonee and the James Bay area.

Mr. Michael Prue: So probably six.

Mr. Wade Durling: At least six.

Mr. Michael Prue: So if the government designated six and got away from the idea of "an" application centre in northeastern Ontario, you would support that?

Mr. Wade Durling: I support a collaborative model approach; I don't support a separate agency doing what I'm hearing—so I don't support the concept of application centres necessarily; the application process I do support, if that makes sense, and having it be fair and equitable across the province, I do support.

The Vice-Chair (Mr. Vic Dhillon): Mr. Ramal. 0950

Mr. Khalil Ramal: My question is also about the application centres. You mentioned in your brief that the application centres will help the government to reduce the waiting lists and see where we can service the people. Mr. Prue asked the question about satellites or how many application centres are needed in order to serve the whole region. Are you in favour of one centre and that centre connecting all of the province with satellite offices in order to communicate and participate in the service?

Mr. Wade Durling: I'm having difficulties with the idea of an application centre being legislated in Bill 77. I think our main message would be that we would look for the main components that you want out of this such as a fair application process.

Mr. Khalil Ramal: It's how we can unify service and assessment across the province. As we're speaking, we don't have any unification.

Mr. Wade Durling: But some of the testing that you've done, as an example, has been done inside a service agency, not inside a separate agency, and it's worked very well. I think there are other ways to do that without necessarily creating another bureaucracy.

The Vice-Chair (Mr. Vic Dhillon): Thank you, sir. Mr. Wade Durling: You're welcome.

TERESA COLANGELO

The Vice-Chair (Mr. Vic Dhillon): Next is another teleconference. Do we have Ms. Colangelo on the line?

Ms. Teresa Colangelo: Yes, hello.

The Vice-Chair (Mr. Vic Dhillon): Good morning. Welcome to the committee. You have 15 minutes, and if you can state your name for the record, you may begin.

Ms. Teresa Colangelo: Thank you for the opportunity to address the Standing Committee on Social Policy with respect to Bill 77. My name is Teresa Colangelo and I have been working in the developmental service sector as a front-line worker and disability advocate for more than 20 years.

I have been employed in a number of positions providing a variety of supports and services in residential, vocational and supported independent-living programs. I have had the privilege to have worked with hundreds of individuals with intellectual disabilities and their families throughout my career. I would like to share some of my observations and experiences of the developmental service sector over the last 20 years or so.

Back in the 1980s, when I was in school, community colleges offered developmental service worker programs. Enrolment in these programs was substantial. There were more applicants than spots in the program. The DSW program offered students specialized skills training to support persons with intellectual disabilities. Today, many colleges no longer offer DSW programs or are unable to attract people to this field.

As a result, the issue of finding and retaining qualified, experienced and skilled staff has continued to be a problem. Turnover rates among staff are high. Over the last 20 years, the staffing crisis has only gotten worse within a system that has been chronically underfunded while the need for supports and services has grown. Historically, there has always been a shortage of services and supports for people with intellectual disabilities; there have been more individuals requiring service and support than what is available to them.

Unfortunately, I have not seen much change in this area. Despite more individuals receiving services and supports, wait lists have continued to grow. All too often, individuals are entering into service with various agencies on an emergency basis because of changes in their health or family situations. People with disabilities should not have to go into crisis situations in order to obtain services and supports to which they are entitled as citizens. There ought to be a mandatory minimum level of support and service that is consistent across the province regardless of geographical area.

Bill 77 does not ensure that persons with intellectual disabilities will receive supports and services that they need. It does, however, identify that they will be placed on a waiting list if supports and services are not available. Bill 77 is a unique piece of legislation in that it entrenches waiting lists into the body of the legislation itself. By including wait lists in the legislation, the government is not respecting the rights or dignity of persons with intellectual disabilities to have equal access

and opportunities to supports and services within their communities and society.

Rather than entrenching waiting lists in the legislation, the government would serve these citizens more appropriately by having a concrete long-term plan that is adequately funded to reduce and eliminate wait lists across Ontario. In doing this, the government will send a clear message to individuals and families that they are important, that this is a priority for government, and that wait lists are unacceptable responses to a chronic need for funding, services and supports.

Persons with developmental disabilities are particularly vulnerable within our society. In order to protect and safeguard individuals against abuse or mistreatment, the government must consider the following:

First, adding a preamble to the legislation that outlines the intent of the law and that recognizes the rights of persons with disabilities to participate as full citizens with equal opportunity and access to supports and services. The preamble should identify the rights of full inclusion and citizenship of persons with disabilities, similar to the declaration made by the United Nations.

Bill 77 must protect against for-profit service providers setting up shop in communities and profiting off the backs of persons with disabilities. Funding is and has been a significant problem that has plagued this sector for decades. Service and support providers must ensure that all funding for individuals is actually spent on the individual in providing the necessary supports and services that the individual needs in order to live and function as independently as possible.

As well, financial accountability must be the same for all persons or agencies receiving funding. It is imperative that what little funding is allocated to this sector be monitored and accounted for. This is the only way to prevent corruption and to ensure that the monies allocated are spent on the necessary supports and services for individuals in need.

The government should also consider removing any reference to age in their definition of disability. The inclusion of age in the definition may in itself exclude or discriminate against those who have not received supports, services or appropriate medical diagnosis. There are many legitimate reasons for someone not to have been formally diagnosed by the age of 18, such as immigrating to Canada as an adult, socio-economic issues, lack of resources, language barriers and other issues within geographical areas, lack of trained professionals to accurately test and diagnose disabilities, and so on.

There must also be assurance to individuals and families who currently receive services and supports that reassessments will only be made when an individual's needs have changed; that is, reassessments made on the basis of changing needs rather than a review of funding.

Application centres must not create additional red tape for individuals and families, or redirect funding that could be otherwise invested in services and supports.

There must be a mandated minimal level of supports and services afforded to all individuals with developmental disabilities. This is the only way to ensure inclusion, participation and full citizenship.

As a developmental service worker, I have the experience, training and skills to perform a wide range of services and supports. I assess individuals in terms of their abilities and needs and locate the appropriate supports and services. Many of their needs are complex and challenging. Where no supports or services exist, I create them. I've been responsible for all aspects of one's life: their medical, emotional, spiritual, physical, financial, personal care and other needs. I am legally, morally and ethically accountable for the work that I do. This work comes with enormous responsibility and accountability to the individuals, their families, the community and the agency which I work for.

It is impossible for me to summarize in a few minutes the extent of the work or supports and services that we as developmental service workers provide to persons with disabilities, their families and the community. The government must begin the healing process and mend this fragmented system of developmental services in a way that truly respects the rights and dignity of those with disabilities and provides them with the necessary supports and services that they need.

Thank you, and I appreciate your time.

The Acting Chair (Mr. Dave Levac): Thank you very much, Ms. Colangelo. You have left enough time for each of the parties to have two minutes. We'll start with the NDP.

Mr. Michael Prue: You talked about the schools and the declining enrolment. Is this a direct result of the less than adequate pay within the workforce or work sites? **1000**

Ms. Teresa Colangelo: I believe so. There are many issues that plague the sector, and certainly underfunding is one. Workers need to make a viable living. I work for a large agency and there are thousands on staff, and many, many of my co-workers have two or three jobs to make ends meet. It becomes very difficult for workers to survive and so it's difficult for them to stay in this field. It's also not an easy job; it's not a job that anybody can do. It really is a job that people need to be committed to.

Mr. Michael Prue: I personally know people who work in the field, and they have shown me oftentimes bruises and difficulty dealing with clients who, through no fault of their own, often will be aggressive. Other than giving more money, what else can we do to get people interested in this kind of work, which is very difficult work?

Ms. Teresa Colangelo: Certainly wages are one thing, but also funding for better services—ensuring that the proper assistive devices are in place that reduce accidents and injuries. It's not just about aggression; not all the individuals with developmental disabilities have behavioural or aggressive issues. Many of them have high physical and medical needs, which takes a toll on their bodies. I'm sure you can ask any of the parents in that room who have physically assisted their children for years upon years and now are left with chronic back

conditions or other ailments. There needs to be a structure where all of the assistive devices that an individual may need are in place, as well as proper staffing levels and just really ensuring that their needs are accurately assessed and being met in a way that supports them and also considers the staff's health and safety.

The Acting Chair (Mr. Dave Levac): Thank you, Ms. Colangelo, and with that, we'll move to the Liberals.

Mr. Khalil Ramal: Khalil Ramal speaking; I'm representing the government. Thank you very much for the job you do on a daily basis. Like yourself, I've worked in both settings—big facility institutions and also in group homes. So I know what you're talking about and I know what you mean by physical abuse and many different aspects.

This bill focuses on direct funding to give families a choice and to seek better service: You spoke about the waiting list. The aim for the bill is of course to deal with the waiting list and give the family a choice to look after their loved one. You didn't talk much about this one here. What do you think about direct funding and how it will impact many people with disabilities across the province of Ontario?

Ms. Teresa Colangelo: I go back and forth about direct funding. I believe if it's a way to get individuals off a waiting list and give them services and supports, that's great. The trouble for me with individualized funding is that there has been a lot of research that I've read around individualized funding, and most of those families and individuals get far less funding to purchase the services and support than people who are affiliated with an agency.

Mr. Khalil Ramal: But we've listened to many families that have spoken to us the last two days and they were happy and thrilled with the direct funding; they've been managing their lives and their kids or their loved one very well over the years.

Ms. Teresa Colangelo: I think if it works for them, then that's great. My experience with individualized funding has been that there is still an onus on families and parents to pick up the shortfall where the funding is not sufficient. The idea for me is for individuals to be as independent as possible and not have to continue to rely on the families and their parents for continued support throughout their lifetime.

The Acting Chair (Mr. Dave Levac): We'll move to the official opposition.

Ms. Sylvia Jones: Ms. Colangelo, my name's Sylvia Jones and I'm with the Progressive Conservative Party. Great presentation, thank you. I wanted to get your thoughts on whether you believe entrenching the waiting lists in Bill 77 is in fact going to mean more service for individuals.

Ms. Teresa Colangelo: I'm sorry?

Ms. Sylvia Jones: Do you believe that entrenching the waiting lists in Bill 77 will equate to additional service?

Ms. Teresa Colangelo: No, I don't think so. I think that by putting it in the actual legislation, it is saying that, "It's okay if services and supports are not available; we

can put you there." What I'm saying is that I don't believe that anybody should have to wait for services. There needs to be a mandatory minimum level of service and support given to all individuals.

By putting waiting lists as part of the legislation, it allows for the opportunity for people to linger there for a very long time. Historically, some families have waited years, upwards of 10 or 15 years, for service. No one should have to wait that long. No one in the community would imagine waiting 10 or 15 years for health care, for example. Many of these individuals have unique challenges and very complex issues. It could be behavioural, it could be medical, it could be a number of challenges, and they require the supports now, not 10 years from now.

I understand that there may not be supports and services available in all areas, and there may be a need to wait in some circumstances, but waiting needs to be kept to a minimum. I think that when it's entrenched in the law, it means that we're saying that it's okay. If we're saying that people with disabilities ought to be full participants in our society, then they should be also respected enough not to have waiting lists entrenched into the law.

The Acting Chair (Mr. Dave Levac): With that, we want to thank you, Ms. Colangelo, for your participation today. We appreciate deeply your thoughts and your concerns.

Ms. Teresa Colangelo: Thank you very much.

ONTARIO PUBLIC SERVICE EMPLOYEES UNION, LOCAL 664

The Acting Chair (Mr. Dave Levac): Now we'll move on to the Ontario Public Service Employees Union, OPSEU, Local 664. If Helen Riehl is available, would she step forward, please?

For the record, would you please state your name and if you represent someone? You have 15 minutes to present. All of the time can be used in your presentation, or anything left at the end of your presentation will be divided up equally for questions and answers. Thank you for being here today.

Ms. Helen Riehl: Thank you. My name is Helen Riehl, and I'm representing the Ontario Public Service Employees Union, Local 664, which represents members from the Cochrane Temiskaming Resource Centre, Community Living Timmins, Community Living Iroquois Falls, and Access Better Living in Timmins.

Good morning. Let me start by welcoming you to Timmins and thanking you for giving me the opportunity to speak to you today regarding Bill 77.

A little bit on my background: I have been working in the developmental services sector for 27 years. I graduated from Sault College in 1981 from what was then called the MRC program, or the mental retardation counsellor program, which has now evolved and is known as the developmental service worker program. I currently work at the Cochrane Temiskaming Resource Centre,

which is a community-based agency providing professional and residential care to people with developmental disabilities in the districts of Cochrane and Temiskaming.

But as I said, I'm here today representing OPSEU. Provincially, OPSEU represents about 8,000 members in the developmental services sector, and about 1,000 of them are in northeastern Ontario. These workers are very dedicated to the work they do and the people they provide service for. We know our work, and we know what is needed. We recognize that new legislation is long overdue, but there are some issues with this bill that OPSEU wishes to address.

Too many people with developmental disabilities are going without the supports they need. Families who have a child with a developmental disability have told us that they want quality supports and services they can count on that are provided by the community-based developmental service agency system. Most families' lives are extremely demanding. They can't always manage the many different types of supports and services their loved ones need. They may not have the time to sift through and shop for the services they so desperately need.

We worry that this legislation could lead to the erosion of the quality supports that agencies are now able to provide and create a multitude of service providers, some for-profit, making it more difficult for families. We applaud the fact that you are making people with developmental disabilities a priority, but we have three serious concerns regarding Bill 77.

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Our biggest concern is the creation of individualized budgets through an assessment process. This bill sets out a needs assessment of each person with a developmental disability and then attaches a dollar value to the services for that person. Agencies will then receive funding that comes with that person for their service needs but won't receive the administrative and overhead costs that go along with running an agency. Agencies will be forced to cut corners to cover operating costs.

Also, since the funding is tied to the client, the agency becomes vulnerable as clients move on. Budget planning will be impossible, creating instability for families and workers. Agencies will go without those funding dollars while they work to fill the placement. The focus will shift to filling funded spaces and promoting the agency, instead of where it should be, which is providing service.

The second issue is the creation of third party private brokers as outlined in the bill. This is frightening. As you know, there are long waiting lists for services all across the province. In Timmins, many adults cannot receive more than a few hours of day support a week. Funding increases are needed to address this need, not another choice of where to go for a recommendation of where to receive funding. Also, in the past four years, Timmins has closed two group homes, resulting in the loss of nine full-time residential placements. Families are forced to wait until a client in an existing placement dies before a residential spot opens.

There are adults living with their aging parents who have no options. Those most in need are the only ones

eligible for residential placements, and then only when one becomes available. Families are left to consider abandoning their child, whether it's a minor or adult child. Given the limited options for these families, they will have no choice but to take the individualized funding. Yet supporters of Bill 77 say that families will have more choice. You don't have more choice when there's nothing to choose from.

Most working families will be forced to turn to the newly created privatized brokers. These brokers will take an automatic cut off the top and then find the lowest bidder to provide services, in most cases for low wages, little or no benefits and little or no accountability. This will result in high turnover of staff and unstable care for individuals.

When full funding is given to agencies, families can take comfort in knowing that there was a screening process of workers, an interview, a credential check and most likely a criminal reference check. They can take comfort in knowing that staff are trained in first aid, CPR and CPI. Usually there is some other type of formal training. They can take comfort in knowing that employees are accountable to their employers for their work and their actions.

After receiving an assessment, families will have limited options. They can use their assessment to access agency-provided services, but in most cases that will mean staying on the same waiting lists that they've already been on for many years, or taking the individualized funding.

This provision of the bill opens the entire sector to privatization and the lowest-common-denominator service provision. As we've seen in the competitive bidding process in home care, it doesn't work, and it won't work in developmental services.

We are very concerned that the assessment process will lead to the loss of services that some people are now receiving. This bill sets out to provide services to more people within the existing funding dollars.

It also legislates the assessment of everyone with a developmental disability, including those already receiving services. The inevitable outcome of this assessment, given the goal of equalizing services for everyone with a developmental disability, is the loss of services for some already in the system, as was also seen in the home care sector.

If Bill 77 goes ahead as is, it will have a huge detrimental effect on community-based developmental service agencies and the quality of care they are able to provide. We ask that you work with us to rework this legislation so that it addresses the above points. Thank you.

The Acting Chair (Mr. Dave Levac): Thank you very much for your presentation. You've left a couple of minutes each for the caucuses. We'll start with the Liberals.

Mr. Khalil Ramal: Thank you very much for your presentation. I have two questions. First, we heard many different groups for the last two days asking us as a government to change the service for people with de-

velopmental disabilities to an essential service, due to the strike that happened last summer. I guess that parents and agencies believe strongly that the privacy of those individuals who lived in their homes was being invaded.

My second question: The aim and goal of Bill 77 is to give a choice, not make it mandatory, to families who believe strongly that they are able to manage their own affairs and have the ability to find a good service for their loved ones.

Those are the two questions.

Ms. Helen Riehl: In terms of developmental services becoming an essential service, in the early 1990s some of us were under HLDAA, the Hospital Labour Disputes Arbitration Act. There was a settlement that was given— I believe it was in the Ottawa district—that was a fairly substantial wage increase and said that the sector had been underfunded for years and that these people needed their wages increased to bring them up closer to what they should be making. As a result of that, the government of the day removed developmental service workers from HLDAA. So it's entirely up to the government what they want to do. As unionized workers, we know that when you work in a right-to-strike environment, the possibility exists that you may go on strike. It's never an easy decision for anybody in this sector to take that step, to go on strike, and we certainly didn't want to do that. Making it an essential service—I really can't comment because I don't know what the majority of the sector

In terms of families being able to choose what they want, the frustration will come when the only choice they have is to hire the person across the street or their neighbour's cousin or something like that because the wait lists at the agencies that provide quality care and educated care are so long that they can't get care from those agencies. It's like the private health care argument. If somebody really needs surgery, are they going to wait three months if they have the money to pay and they can get it next week? I think that families will be selling themselves short of quality care in order to get the care immediately.

The Acting Chair (Mr. Dave Levac): And with that, I thank you very much. We'll move on to the official opposition.

Mrs. Christine Elliott: Thank you, Ms. Riehl. I think you hit the nail on the head when you were saying the basic issue here is funding. It doesn't really matter whether it's agency funding or direct service funding; both have to be funded significantly more in order for the system to work. But if there were sufficient funds for both direct and agency funding, given the comments that you've just made, when families would have a real choice, would you have a problem theoretically with that concept of working hand in hand with direct service providers?

Ms. Helen Riehl: I think that would depend on how they were able to access the service once they got the direct funding. If it's going to be through a broker who is making a profit, then definitely OPSEU wouldn't be in

favour of that. If it's going to be through an agency—there are some agencies that do that now, that help people with special services at home funding and then help them find a worker in order to provide that service—that's not as big an issue.

Mrs. Christine Elliott: So if it was with a planning and facilitation group that also was perhaps receiving some funding from the government or had some accountability mechanism, that would be acceptable?

Ms. Helen Riehl: Yes, for sure. The big thing is the accountability. They have to be accountable to someone.

Mrs. Christine Elliott: Thank you very much.

The Vice-Chair (Mr. Vic Dhillon): Thank you. Mr. Prue.

Mr. Michael Prue: I'm really worried about the third party broker system here in terms of how much it's going to cost and whether it's going to be another level of bureaucracy. Has OPSEU studied any other jurisdictions and any other use of these third party brokers: how much they cost, how they get their jobs, how qualified they are? And in the end, is their only job to find the cheapest common denominator?

Ms. Helen Riehl: From the studies that we've seen, I believe it was in Newfoundland and Labrador where they had a similar system and it didn't work because more money was being spent on—well, not more money on the brokers, but a lot of money was being given to the brokers. And then there were problems defining who the employer was.

Have they done a study on a dollar amount? I don't know. I know that in health care, competitive bidding has not been successful, and OPSEU has been pretty vocal on that and putting their concerns forward on that.

1020

Mr. Michael Prue: The right to strike was raised by my colleague Mr. Ramal, and it was also raised by someone here earlier this morning. I asked the question, and I want to ask you the same: Do workers in OPSEU consider their right to strike a fundamental right, or are they willing to trade it away for arbitration?

Ms. Helen Riehl: Arbitration has worked very well in some sectors of OPSEU, and they've been able to argue that sectors have been underfunded and to get more funding. That's what happened in OPSEU, which basically took away a lot of the access to arbitration in the first place. Personally, I would never want to give up my right to strike. I think that OPSEU, corporately, may have a different view of it if it was getting something that we wanted, but I couldn't say for sure.

The Vice-Chair (Mr. Vic Dhillon): Next, we have Ms. Stephanie Malinsky on the phone. No?

CANADIAN UNION OF PUBLIC EMPLOYEES, LOCAL 1880

The Vice-Chair (Mr. Vic Dhillon): Okay, we'll move on to the next presenters, the Canadian Union of Public Employees, Local 1880. Good morning. If you

could state your name for the record, and you have 15 minutes. You may begin.

Ms. Cindy Hertz: My name is Cindy Hertz. I want to thank you for the opportunity to speak today. I am a front-line worker from Community Living Algoma. I have worked in the developmental services sector for over 15 years. I am also active in my union, which is CUPE Local 1880.

I have travelled from Sault Ste. Marie to make this presentation. As I'm sure you can appreciate, the issue of distance and isolation is significant in the north. That, however, does not mean that communication is a problem. Word travelled fast in the Soo and I was approached over the last week by family members and co-workers with comments that they wanted me to share today. I also got on the phone and spoke to people in Manitoulin, Sudbury and Espanola. If I was going to drive six hours each direction, I wanted to make a presentation that was reflective of more than just my experiences and thoughts.

My job is to work as part of a team with families, coworkers and others in the community. I have worked with the same individuals for the past eight years. One woman I worked with for 14 and a half years, until just recently, when she passed away. I have been blessed to share in these people's lives. This is more than a job; it is an important part of my life.

As much as I love my work, I have had to struggle with the reality that I have needed two jobs. I have had to support my family and needed to work two jobs to make enough money to pay my bills. I am one of many in this position in my agency.

I'm sure it's not a surprise to anyone in this room that staff turnover is a big problem. A couple of years ago, I read a paper that the employers wrote, entitled Quality Supports through Competitive Compensation, which they submitted to the ministry. They explained how agencies are facing serious staffing issues. Some of the issues—not all—were: difficulties in attracting and retaining qualified employees; high turnovers resulting in increased recruitment, training and supervision costs; many employees being forced to hold multiple jobs due to low wages and part-time hours; experiencing a diminished pool of potential employees; finding it increasingly difficult to meet emerging service needs. All these issues apply to the north.

I was excited when I heard there was going to be new legislation. However, when I read it, it did not seem to me that the new legislation was going to address the problems I have listed. In fact, with direct funding, I can see things getting worse for the families and workers.

I cannot tell you in hard numbers—I'm sure the ministry has this information—but as difficult as staff turnover is and as difficult as it is to find people to fill vacancies in other parts of the province, this issue is huge in the north. Our populations are smaller and more spread out, and the distances we need to travel are greater. The issues of distance and isolation only intensify these challenges. If you look at Manitoulin Island, Sudbury, Fort Frances and Sault Ste. Marie, the realities are the

same. Finding developmental services staff and keeping them is a challenge. This challenge of getting staff with certain skill sets and keeping them is profound. In Manitoulin, the turnover of staff prior to the four-month mark presents a challenge. The feeling by many is that the job has become a transitional job. Increasing numbers of staff do not see a future in the sector. The same trend is seen across the north.

I'd like to spend some time today talking about an issue which some might see as a workers' issue, but it would not take long for anyone who lives in the realities of the developmental services sector to realize the importance of retention and recruitment. This example I'm giving is from where I work, not using names.

Staff with many years of experience work with an individual who lives at home. This person became physically aggressive to himself and others when entering his early teens. The family needed the supportive staff to work in their home for the safety of the person supported and themselves. Staff needed ongoing training and supervision and have had to coordinate between a number of individuals who were involved with the person supported. As the relationship and the understanding of the individual grew, his life became more settled and happy.

I feel the important keys to this success and others are knowing the person supported and their family, having experience with a wide variety of strategies to deal with the individual's challenges, working with a team, and being trained and supervised. This is an example of a person who is under the age of 18, and we hope he will continue with our agency through his adulthood.

In Sault Ste. Marie, the agency I work for is working to provide more supports to people in their homes. One of the challenges is finding people who will stay in this sector. Hopefully, if we all work together, great things will happen for all involved. There is a large training component, as there are unique challenges presented when working in someone's home.

In the north, families are finding it difficult to find staff to do respite work through direct funds, as salaries are just above minimum wage—and I should say "consistent" staff. In an agency, at least they offer staff benefits, training, job security, and a salary better than what the parents are able to provide through direct funding. If agencies, with their supports and compensation packages, are having challenges finding and keeping staff, how is it reasonable to think the direct funding option is going to work?

In addition to compensation and training, there is also the reality that this field has a high incidence of injuries. How will this issue be dealt with within the direct funding relationship? The government will need to take a look at liability issues of the parents as they expand the direct funding model.

In order to provide the services and supports that are right for the people we work with, we as workers need support too to make sure we have the training, updated information, skills and resources to do the job. This bill says it is about choice, but what is the choice, really? When there are waiting lists, parents have no choice. If they receive direct funding but cannot realistically recruit or keep qualified staff, what is the choice? When this fragmented funding model undermines agencies' funding, what is the choice? If community living agencies have a problem with staffing, how are families going to staff their homes? Again, is this really providing a great choice for people? We have seen what happens when work is casualized or becomes parttime. Workers come and go; the quality goes down. What choice does this mean, when the quality of service is eroded?

1030

If families need support to keep loved ones in their homes, agencies can be funded to provide these supports. If an individual needs a day program, employment opportunities, independent living supports or residential placements, an agency can provide these supports, too, if they are funded in a way that they can develop these programs.

When you look at the education sector and the health sector, it is recognized that individuals who deliver these services must have a skill set to do this work. Well, we do, too. Systems to provide services are put in place for a reason. Undermining agencies' ability to develop a skilled workforce is not good for the workers and the families; the two are interlinked.

The explanatory note for the bill sets out that the concept of the bill is to ensure that the act is applied consistently to persons with similar degrees of developmental disability. How can there be consistency when we move from the number of employers we have in the north to the possibility of over hundreds, through direct funding arrangements?

This bill will deskill the sector, when what should be the priority is building a sector that is firmly based on a strong agency foundation. Developmental services, as a sector, is not going away. It is crucial that the sector can rely on the fact that they are able to hire and keep people with skills that can support individuals and their families. A system of direct funding that undermines agencies and deskills workers is not good for the people we support, families and workers.

In summary, many of us were drawn to work in this agency or in this field because of family members and friends who were involved in this sector. Our work on the front lines with parents, families, staff and agencies is as a team, who work together to support individuals. We are not separate groups with different agendas. Our goal is to support individuals to have full participation in the community. This is a shared agenda. We know that quality of life for people with supports is closely intertwined with those who provide the support. In the north, how can it be good to further isolate workers by not having them be a part of an agency? How are parents going to find qualified people to work as independent contractors? How is the ministry going to ensure that parents, as employers, are going to provide the proper level of training and supports to ensure quality of care?

Legislation such as Bill 77 needs to come with a budget to support it. Being able to develop an individualized plan for a person with disabilities and then having a variety of high-quality options to access is what creates choice for individuals and families.

The focus of this bill seems to be more about setting up a new funding model than it is about addressing the long-standing challenges in the sector.

Thank you for providing me the opportunity to address you today.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much. You were right on for your time, and there's no more time for questions and comments.

FAIR SHARE TASK FORCE

The Vice-Chair (Mr. Vic Dhillon): Next, we have Fair Share Task Force. I believe it's a teleconference. Do we have our folks on the line? Hello?

Mr. John Huether: Hello?

The Vice-Chair (Mr. Vic Dhillon): Hi, there. Can you hear me okay?

Mr. John Huether: Can you hear me?

The Vice-Chair (Mr. Vic Dhillon): Yes, we can hear you fine. Can you hear us?

Mr. John Huether: Yes. It's a bit fuzzy, but for the most part we can hear you.

The Vice-Chair (Mr. Vic Dhillon): Okay. We'll try our best. Please identify yourself before you begin. You have 15 minutes.

Mr. John Huether: Okay. My name is John Huether. I'm the chair of the Fair Share Task Force. Also presenting with me is Jim Triantafilou, who's the executive director of Brampton Caledon Community Living. We very much appreciate the opportunity to make a presentation to the standing committee on this important piece of legislation.

Fair Share is a community coalition of social and health agencies and volunteers who are committed to advocating for equitable access to social and health services through funding equity across the province for both social and health services. We have been in existence for 17 years and have the support of the boards of trade in Peel region and the regional and municipal governments, as well as other community groups and organizations in Peel. We are also a partner in the Strong Communities Coalition, which is addressing the same issue on behalf of the United Ways of Peel, Durham, York and Halton, together with the growing communities health care coalition. Although our location is Peel, our advocacy is relevant to the entire province, especially those communities which have experienced population growth over the past 20 years and those who expect to grow as a result of the Places to Grow policies and direction.

I would ask Jim to present to you the first part of our presentation.

Mr. Jim Triantafilou: Good morning, ladies and gentlemen. Brampton Caledon Community Living is an

organization dedicated to the inclusion and well-being of persons with an intellectual disability. We are the major developmental service provider to children and adults with an intellectual disability and their families in Brampton and Caledon. Brampton Caledon Community Living is a member of the Fair Share Task Force and Community Living Ontario.

We thank you for this opportunity to contribute to the dialogue on Bill 77. Bill 77 provides a tremendous opportunity to modernize our approaches to supporting people who have an intellectual disability—

The Vice-Chair (Mr. Vic Dhillon): Are you still there?

Mr. Jim Triantafilou: Yes.

The Vice-Chair (Mr. Vic Dhillon): Continue.

Mr. Jim Triantafilou:—and to promote a more inclusive society which supports all people to participate fully within their communities.

We're experiencing some feedback at our end.

The Vice-Chair (Mr. Vic Dhillon): Can I ask you guys to use your handset, because we're getting feedback from your speakerphone.

Mr. Jim Triantafilou: Can you hear me?

The Vice-Chair (Mr. Vic Dhillon): Yes. I know it's a bit of an inconvenience when we're all wanting to talk in this setting, so I'd request that you continue using the handset.

Mr. Jim Triantafilou: All right, then.

This legislation provides a rare opportunity to make meaningful change in social policy and provide new tools needed to build a more inclusive society. Given that this legislation will likely serve our society for [inaudible] to get it right.

We would like to draw the committee's attention to the recommendations prepared by our provincial organization, Community Living Ontario, in response to Bill 77. Brampton Caledon Community Living echoes these recommendations and believes these recommendations would serve to enhance the lives of people with an intellectual disability and the call-for-action goals of the ministry's transformation initiative. It is recommended that Bill 77 include provisions to recognize the legal capacity of people who have an intellectual disability and provide for supported decision-making in order to ensure that people can enjoy their legal capacity and rights.

Acknowledging and supporting the legal capacity of the individual can be perhaps the most transformative step that can be taken with this legislation. Providing such recognition is essential in order to allow the individual a mechanism through which they can enter into an agreement for direct funding without having to surrender authority to a substitute decision-maker or guardian.

We recommend that person-centred or person-directed planning be added as a funded element that is available to all those deemed eligible for supports and services. Such planning should be made available after a determination of eligibility but before a person applies for services or funding and before his or her needs are assessed. Persondirected planning should be available to the individual on an ongoing basis, whether or not the individual proceeds to apply for support or funding beyond planning.

Person-directed planning should not be carried out by the application centre but by individuals or agencies that are recognized as qualified planners according to standards that should be set through a regulation or policy directive.

In order to address potential conflicts within the application processes and to build on effective processes currently being used, the legislation should make clear that the various functions might be delivered by different bodies within a given region. The various bodies responsible for the administration of the application process must be connected in such a way as to ensure easy access for people applying for support while eliminating any potential for conflict.

1040

To this end, the legislation should refer to an application process rather than to application centres. The responsibility for allocation of funding should remain a direct responsibility of government. The legislation must include an independent appeals mechanism for all decisions related to eligibility and allocation of support. This appeals mechanism should be independent of the application centres and provide for an unbiased third party to consider all appeals. This provision of third party appeal rather than a review should also apply to subsection 30(4), which deals with an agency or application centre for whom the government has elected to appoint a manager.

We ask that the Standing Committee on Social Policy make clear its expectations that the public will be fully consulted on concepts and ideas related to the regulatory framework and policy directives for the legislation before the government undertakes the process of drafting and adopting regulations.

Community Living Ontario's response also highlights issues related to the bill's provisions concerning waiting lists. Brampton Caledon Community Living recommends that references to waiting lists be removed and replaced with a focus on providing adequate funding. The need for waiting lists implies that the funding available to support persons with intellectual disabilities will not be adequate or sufficient to meet the growing needs within Ontario. We are concerned that the institutionalization of waiting lists in legislation will make them acceptable and a part of the system rather than something that must be eliminated in the interest of fairness and the principles of inclusiveness in the community over time. Why should one person receive support and another not?

We are also troubled by ministry statements that no new funding will be provided for the creation of application centres and that these centres will be funded through existing resources. We are deeply concerned that this will come at the cost of cutting services that are already underfunded and under pressure.

I will now hand this over to John Huether.

Mr. John Huether: Just to focus on the waiting list issue for a moment, we'd like to ask that a different

approach to the existence and management of waiting lists be adopted if they are to exist. Transparency, accountability and openness about the waiting lists and the needs that they reflect is essential. The length of wait time and the nature of service that a person must wait for must be tracked publicly so that goals to reduce wait times and increase availability of service can be established, and that's for all communities within Ontario.

If wait lists have to be included in the legislation, then one might consider putting a time limit on their existence, which would then require the Legislature to review their efficacy and how many people have not received services as a result of the existence of the waiting lists, rather than adequate funding.

It is important that goals be established to reduce wait times and that prioritization decisions do not leave persons without supports for long periods of time, regardless of severity of need. A long-term policy commitment toward the provision of essential support to all persons with intellectual disabilities in Ontario without significant wait times should provide the framework for an interim approach to the management of wait lists in such a way that progress towards the goal of full accessibility is achieved over a transition period.

Under the current system of funding allocations for services for persons with intellectual disabilities, there is enormous disparity between communities within Ontario. The allocations of dollars are not related to the needs within communities and they do not reflect the growth in population that has occurred over the past 25 years or that is planned in the next 20 years. The incidence of intellectual disabilities within the population crosses all cultural and socio-economic boundaries and can be expected to occur at the same incidence rate throughout all communities in Ontario. Therefore, the disparity in the distribution of funds through developmental services has a significant impact on the availability of services from one community to another, and there is considerable inequity in the present system that we would like to see the current legislation address in some way.

In 2006-07, there was \$1.131 billion invested in services for persons with developmental disabilities. Using 2007 population figures, this meant that the Ontario per resident allocation was \$88.40. This compares to \$55.10 for the 905/GTA communities of Peel, Halton, York and Durham, where the greatest amount of population growth has occurred. The rest of Ontario, outside of the 905/GTA, had a resident per capita of \$100, while residents of Peel received less than half, \$48.20 per resident.

The result of these disparities is that there are huge numbers of persons with intellectual disabilities who are not receiving service. They're on waiting lists for residential service, respite care and day supports. There are over 600 persons waiting for residential placement. Although in the current Passport program there are 182 persons receiving service, there are an additional 135 persons waiting for service. These kinds of wait lists and time and the unfairness of the funding allocation need to

be addressed through establishing principles in the legislation.

In the long run, the goal in Ontario should be that there is adequate funding to provide support for all persons with developmental disabilities, to allow them to fully participate in the community. However, it is recognized that this goal is long term, rather than an immediate one. In the meantime, together with an accountable and transparent management of waiting lists, the government needs to be committed to creating a fair and equitable distribution of funding to all communities throughout the province.

We would urge that the legislation address this issue of funding equity and include a commitment to the allocation of funding on the basis of a fair and reasonable funding formula that ensures that resources are fairly distributed to all communities for fair and equitable distribution and allocation to individuals. Persons with intellectual disabilities should have similar access to service, regardless of where they live. This cannot happen without funding equity. A commitment to this should be included in the legislation, and the ministry should be expected to develop a funding formula, primarily population-based, that recognizes the need for services for all persons with intellectual disabilities.

We ask that the committee recommend and develop such a formula to the ministry as a support to this legislation.

Thank you very much for the opportunity to make this presentation to you.

The Vice-Chair (Mr. Vic Dhillon): We have just about 30 or 35 seconds for each side, so if you guys can please—

Mr. John Huether: Sorry, I'm having difficulty hearing you.

The Vice-Chair (Mr. Vic Dhillon): We just have time for brief comments from each side. We're going to begin with Ms. Sylvia Jones of the opposition.

Ms. Sylvia Jones: Thank you for putting together your brief. It was excellent, as I expected—

Mr. John Huether: I'm sorry, I'm having difficulty

Ms. Sylvia Jones: Can you hear me now?

Mr. John Huether: That's better, thank you.

Ms. Sylvia Jones: Okay. Thank you for your excellent brief. I am particularly intrigued by your concept of including goals to reduce the wait lists. Thank you for that suggestion, and we'll work on that end.

Mr. John Huether: Good.

The Vice-Chair (Mr. Vic Dhillon): Mr. Prue.

Mr. Michael Prue: I'm hoping that you'll be able to send us a copy of the brief; we don't have it here. I'm really interested in the disparity in Peel, the amount of money that is being received, and ways of making it fairer across the province. Could you make sure that the clerk gets a copy so we can all have a look at how Peel and other regions are being underfunded?

Mr. John Huether: Yes, we will.

Mr. Michael Prue: Thank you.

The Vice-Chair (Mr. Vic Dhillon): Mr. Ramal.

Mr. Khalil Ramal: Thank you very much for your presentation. We're looking forward to seeing your written submission. As has been mentioned, your concerns have been raised by different organizations and groups. Hopefully, after we've finished with this consultation process, we'll address most of these issues.

Mr. John Huether: Thank you.

The Vice-Chair (Mr. Vic Dhillon): Thank you, guys, for taking the time.

Mr. John Huether: Okay. Good luck with your work.

COMMUNITY LIVING WEST NIPISSING

The Vice-Chair (Mr. Vic Dhillon): The next presentation is from Community Living Nipissing. Good morning and welcome to the committee. If you can please state your name, and you may begin.

Ms. Denise Plante-Dupuis: Hello. My name is Denise Plante-Dupuis, and I am here representing Sylvie Belanger, who is the executive director of Community Living West Nipissing, not Community Living Nipissing.

To begin, I'd like to thank you for the opportunity to speak about Bill 77 and I'd like to recognize the Ontario government for its efforts in transforming developmental services and working to create a more inclusive society for all citizens. I'd also like to thank the government for bringing forward this important legislation, which will likely serve society for decades to come.

The proposed legislation looks to address a number of important issues of significance to the developmental services sector. I believe, however, that important changes should be made to the bill that will address the needs of people who have intellectual disabilities. Community Living West Nipissing supports all recommendations brought forward by Community Living Ontario. However, we would like to focus on the matter of application centres and that of living in peace and security.

With respect to application centres, we are recommending that Bill 77 refer to an "application process" as opposed to "application centres." This would allow for the system to address potential conflict within the application process and to build on effective process currently being used. The rationale for this request is based on factors that affect those living in northern Ontario.

As you are aware, relative to the province, the north region is very vast and large. I know this is not new to you; you've heard this already this morning. However, the north region has a higher proportion of elderly people, francophones, and First Nations, as well as higher unemployment and lower income rates. The north region also has a lower percentage of individuals with a post-secondary education and a lower rate of contact with medical professionals. These factors are unique to the north and will directly impact individuals' ability to access application centres.

For instance, should there be only one application centre for the north, travel barriers will exist in regard to accessibility. Many individuals will not have the funds or means for personal travel. Moreover, public transportation is costly and not always reliable or even available in the north. On the other hand, should these centres be virtually based, which in theory sounds great, we need to remember that many people living in rural and remote northern communities do not have Internet access. Regardless of physical or virtually based access centres, it's our belief that more than one application centre may be needed per region in order to accommodate the unique cultural and geographical needs of the individuals living in the north.

In some parts of northern Ontario, there is only one agency within a 100-kilometre radius. Individuals living in those communities know where to go for services as of now, and those agencies are working collaboratively with partnering agencies in neighbouring cities.

Thus, we are recommending that the issue of regional application centres be addressed in the legislation by changing all references to application centres to that of application process.

With respect to living in peace and security, which is recommendation number 9, we are recommending that the developmental services be identified as a no-strike sector and that provisions be established within the legislation to create an arbitrated settlement mechanism to address future labour disagreements. This recommendation is based on experiences of Community Living agencies that endured strikes and picketing which targeted their homes in 2007. During the strikes, many people were confined to their homes or forced to move from their homes. Neighbourhoods were disrupted by picket lines, shouting, megaphones and whistles. I think we need to ask ourselves, "How would we react to these situations outside of our own homes?"

At Community Living West Nipissing, we want to ensure that the rights of people living in our homes are not violated with respect to living in peace and security. Declaring the sector a no-right-to-strike sector would ensure that such violations wouldn't happen. Moreover, it would ensure that valuable money and time are spent providing support and services. In 2007, Community Living West Nipissing spent three months preparing for the possibility of a strike that never actualized. A lot of time and energy were diverted from management's normal operations. This is time and energy that would have better benefited our programs.

This matter can be addressed in the legislation by incorporating provisions of the Hospital Labour Disputes Arbitration Act with respect to arbitrated settlements. Alternately, a developmental services arbitration act could be considered, with provisions that approximate those under the Hospital Labour Disputes Arbitration Act.

In summary, in order to ensure that the legislation is effective in addressing the needs of people who have an intellectual disability in Ontario, we strongly urge the committee to address the issues of application centres and living in peace and security.

Thank you for your time. I'd be happy to take any questions you may have.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much. We have about four minutes each. We'll begin with Mr. Prue.

Mr. Michael Prue: On the question of the right to strike, we've asked labour people and they seem unwilling for the most part to give up that right to strike. Have you had discussions with the union at your location or other locations about giving that up, and what would they get in return?

Ms. Denise Plante-Dupuis: I've had a few conversations with our union members. Those whom I have had discussions with have been honest in telling me that when they've been at other agencies that have gone through strikes, they've actually gone and worked as scabs for other agencies because they had their own concerns about the quality of services that the individuals living in these homes were going to be receiving during the strikes. I know when we were preparing for the strikes in 2007, a lot of the staff were very concerned about the people in the homes and how they would react.

I manage a group home for individuals who have not only an intellectual disability but also severe mental illness and challenging behaviours. When we were preparing for the strike, staff were telling me, and I realized, that most of the individuals living in that home would probably be hospitalized in psychiatric facilities because of the commotion that would be caused by the strikes. That's really scary, and it's also going to cost the system a lot more money in the long run.

Mr. Michael Prue: Yes, of course, but I think part of the reason that people resort to strikes—you know that they don't want to, but they do so because the wages are so terrible. Is that not the reason why they—

Ms. Denise Plante-Dupuis: Yes.

Mr. Michael Prue: Okay. So we need to find, I guess, a mechanism, or the government needs to find some money within the body of the bill, to make strikes unnecessary. Would that not be a better thing than taking away the rights?

Ms. Denise Plante-Dupuis: I can only speak for myself on this one, but I would say no, that's not enough.

Mr. Michael Prue: Okay. So you want to take that right away as well.

Ms. Denise Plante-Dupuis: Yes. I think that we're providing an essential service here and it needs to be looked at in that manner.

Mr. Michael Prue: You also talk about the application centres. We've heard this a great many times. We had one presenter earlier today talk about the necessity of having at least six application centres or sub-centres in northeastern Ontario. Would you echo that same comment?

Ms. Denise Plante-Dupuis: I probably wouldn't put a number, I wouldn't identify an exact number, but I do believe that applications should be processed in the same place where the service is being delivered, especially in the north. Like I said, we have a shortage of professionals, physicians. When you are trying to access a service and your application centre could be hundreds of

kilometres away, it's really going to be difficult for those application centres to know the available resources in your community. I think those are issues that are going to be creating a lot of barriers.

Mr. Michael Prue: Over the last number of years, I've had the privilege of travelling with Gilles Bisson around this enormous riding, which is just part of northeastern Ontario, but a big part, and it can take three or four hours in a fast plane to go from Timmins up to Peawanuck. Is there any other way that this can be done? Maybe teleconferencing can work, but I've been in many of those places—Fort Albany, Peawanuck—

The Vice-Chair (Mr. Vic Dhillon): Just very quickly. Mr. Michael Prue: —and there are very few computers.

Ms. Denise Plante-Dupuis: Yes.

The Vice-Chair (Mr. Vic Dhillon): Thank you. Government side?

Mr. Khalil Ramal: Thank you very much for your presentation. It seems like all the Community Living centres across the province of Ontario are doing the same messaging in terms of application centres or process centres. But you know the aim of this bill is to unify the assessment and eligibility across the province of Ontario, and also to study carefully the waiting list and see how we can deal with it. At the present time, the current system doesn't give us that opportunity and ability to examine how many people are on the waiting list. As you know, many families apply in the north, the south, the east and the west, so there is a lot of duplication in the system. In order to have a unified standard system, we proposed the application centres. So you are against it. Can you tell me how we can replace that and achieve our goal of unifying the standard across the province of Ontario?

1100

Ms. Denise Plante-Dupuis: I don't believe I have the one answer. I'm not sure if you're familiar with the networks of specialized care that we have. We have the north network, the south network and the central network. What they're doing is bringing together agencies and communities through teleconferencing. It's for individuals who have not only developmental disabilities, but also the mental health and challenging behaviour component to it.

With the networks, we are developing similar ways of ensuring eligibility and similar ways of evaluating needs in terms of mental health. I think that it's working effectively for that part of the service component that we're offering. I think that maybe it would be looked at to make sure that—if the application process is the same throughout the communities, then I think we're already resolving some of those problems. I don't think it's necessarily that it has to be one centre. As long as the process is the same, I think that a lot of those challenges will be dealt with.

Mr. Khalil Ramal: Yes, but at the present—my colleague has a question.

The Vice-Chair (Mr. Vic Dhillon): Very quickly, Mr. Naqvi.

Mr. Yasir Naqvi: Thank you very much. I just want to pick up from Mr. Prue's comment about the geography and distances being large. I understand the legislation proposes two application centres for the north. Do you think there could be other alternatives by which we can make the process easier for those who need the service, for example, creating an online version of an application centre? That idea was raised in another presentation yesterday.

Ms. Denise Plante-Dupuis: That comes back to my comment about virtual-based systems. No, I don't think that would be effective, because too many communities don't have Internet. So if something's online, they can't access it.

The Vice-Chair (Mr. Vic Dhillon): Thank you. Mrs. Elliott?

Mrs. Christine Elliott: Thank you very much for your presentation and particularly your perspective on the north and the application centres issue. Many people have talked to us about a process, rather than a centre. You've got some wonderful suggestions with the networks of specialized care actually delivering the uniform policy and perspectives through some of the local networks. If that were the case, would you actually even need physical application centres, or do you think you could do it through the networks? I'm just really grappling with how to deal with this.

Ms. Denise Plate-Dupuis: I still haven't, in my own mind, figured all that out, but I'm thinking that you wouldn't probably need the actual centres themselves. I think that, right now, the agencies are already doing it. This would just allow them to do it in a more uniform way

Mrs. Christine Elliott: Thank you.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much.

WOODVIEW CHILDREN'S MENTAL HEALTH AND AUTISM SERVICES

The Vice-Chair (Mr. Vic Dhillon): We're just trying to get in touch with the next folks, who are going to be on teleconference. Why don't we take a five-minute recess here and we'll come back once they're on the line? Thank you.

The Clerk of the Committee (Mr. Katch Koch): I think they're on.

The Vice-Chair (Mr. Vic Dhillon): They are? Okay. Hello?

Mr. Gordon Dunning: Hello. Can you hear me?

The Vice-Chair (Mr. Vic Dhillon): Yes. Can you hear us?

Mr. Gordon Dunning: You're very quiet and we're having trouble distinguishing what you're saying.

The Vice-Chair (Mr. Vic Dhillon): Are you on a speakerphone? No? Can you hear me now?

Mr. Gordon Dunning: We can just hear you.

The Vice-Chair (Mr. Vic Dhillon): How about now? Mr. Gordon Dunning: We can hear you.

The Vice-Chair (Mr. Vic Dhillon): Okay. Good morning, and welcome—

Mr. Gordon Dunning: Would you like us to start?

The Vice-Chair (Mr. Vic Dhillon): Welcome to the committee. If you can state your names, yes, you can start. You have 15 minutes.

Mr. Gordon Dunning: Okay. Thank you very much for this opportunity of speaking with you today. My name is Gordon Dunning. I'm the chair of the board of Woodview. With me today is Cindy I'Anson, who is the executive director of Woodview.

Woodview services adults with autism in the Hamilton region. We're here today in support of the proposed legislation. In particular, we support the new functional definition of developmental disability and the dual funding of services to agencies and individuals.

There are two areas where we'd like to see the legislation strengthened. The first is to ensure that all eligible individuals receive support. The second is to allow appeals of the application centres' decisions to neutral third parties.

I'd now like to turn it over to Cindy I'Anson to further develop those thoughts.

Ms. Cindy I'Anson: Woodview has been providing children's mental health services and autism services since 1960 in the communities of Brant, Hamilton and Halton. We provide a full range of children's mental health services, including counselling, educational programs and therapeutic recreational programs in the community, in people's own homes, in schools and in our own residential program. We also provide a range of services to children with autism, including a special school, IBI programs as well as respite, social interaction and recreational programs. Since 1988, we have provided independent living programs to adults with autism.

Autism is a lifelong disability. Individuals have difficulties with social relations and communications, and engage in repetitive thoughts and behaviours. Adults with autism have difficulties in verbal and non-verbal communication, social interaction and in completing the activities of daily living. Many individuals with autism have normal or above-normal intellectual abilities, as measured by traditional IQ tests. Our adult autism programs provide opportunities for social interaction and development and assistance in learning the essential skills to perform the activities of daily living. Our goal is to have each individual live as independently and productively as possible with the minimum level of support. We are seeing an increasing demand for our autism services for children and youth in our communities. We recently received additional government funding to enable us to provide more services to meet this need. We are now providing IBI services for young children and, in Hamilton, we are providing social and recreational programs funded through a ministry respite initiative. These programs complement special services that some local school boards are able to provide.

As this population of children and youth ages, they will require services to transition to adulthood and to develop the skills to live independently and have productive lives. This need for service is made more critical as families lose the support they receive through the school system at age 21. We are well positioned to meet these adults' needs. We have provided social, recreational, vocational and independent living skills programs for adults with autism for the last 20 years. Many of the individuals we serve have been unable to obtain services elsewhere, despite their obvious disability, because of their normal intellectual ability, as measured by traditional IQ tests.

We are fortunate that in the Hamilton community we have received government funding for these programs. We've been able to develop a small but innovative program that has been internationally recognized. However, to meet the anticipated increase in service demands, we will need an additional source of funds. Our current programs, initially serving 12 individuals, are now providing support to more than 60 adults with very little increase in funding.

We do support the change in definition of "developmental disability." One of the hurdles to funding has been the narrow definition in the legislation for developmental disability. Many individuals with autism have no intellectual impairment, but their pronounced social communication impairments, together with their repetitive thoughts and behaviours, lead to great difficulty in carrying out the ordinary activities of daily living.

We are pleased to see that the new definition of "developmental delay" in the proposed legislation focuses on levels of functioning. This will ensure that an individual's IQ level is not an artificial barrier to them receiving service. We strongly support this change in the legislation.

We note that the legislation provides for designation of application centres and the issuance of policy directives for administration of the act. In order to ensure that the intent of the act is carried through in the policy directives, we believe that the act should be strengthened to ensure that all individuals who meet the eligibility requirements of the act receive support. Without this, there is a danger that all funds will be allocated to those considered most in need. Other individuals whose needs are real but less expensive may be denied a chance of a meaningful, productive life.

We would welcome the opportunity to be included in a consultation when policy directives are being drafted, in particular, with respect to those related to eligibility and method of assessment, resource allocation, and the priorities for funding.

. 1110

We also note that there is no appeal of the decisions of an application centre to a neutral third party. We think that the legislation should be amended to ensure that the application centres are accountable for their decisions.

We do support the proposed dual funding model. Funding service agencies allows for the provision of basic services and the maintenance of essential service infrastructure. Providing direct funding to individuals allows them to choose services that best meet their individual needs. We believe this will encourage agencies to provide high-quality, cost-effective services.

If the new legislation is to be effective, there needs to be adequate funding provided. We appreciate the competing demands that are placed on government for funds; however, the cost of not providing adequate services to adult developmental services is high. Many adults with autism are capable of working and contributing to their communities, but only with the right support. Adults with autism whose only support is their immediate family often become isolated and their support needs increase. This places an unacceptable emotional and financial burden on the family.

Mr. Gordon Dunning: In conclusion, we strongly support the direction of the new legislation. We hope we will have the opportunity of working with the government to ensure its effective implementation.

At Woodview, we have 20 years of experience in providing cost-effective solutions to supporting adults with autism and helping them lead productive lives. We'd like to help to meet what we know is a growing demand for services for the adult autism population.

Now, we'd be pleased to answer any questions that the committee may have.

The Vice-Chair (Mr. Vic Dhillon): The government side.

Mr. Dave Levac: Hello, it's Dave Levac, MPP for Brant. Thank you very much for your presentation and your support for the legislation. I can only tell you, as strongly as I've been involved with Woodview over the years—my 25 years of teaching led me to membership on RPAC—Woodview's success and my own personal experiences with Woodview regarding the students that I was in charge of through RPAC, Project X and all of the other good work that Woodview and others do in the community; we want to thank you. I really will advocate on your behalf to participate in the formation of the rest of the bill and the regulations and the input on that. I will make sure that I dedicate myself to ensuring that your voice is heard.

You did mention some things that I think are important for us to recognize in the legislation, and that is for the future. We have an issue that's been long-standing about autism—but we now need to kind of be inclusive in this piece of legislation—that when these students and kids become adults, there is considered to be a drop-off in terms of our capacity to lend assistance. I think you're identifying the fact that that's a possibility, so I appreciate that.

What's your take on the costs involved in the services that you provide for adults with autism, so that we can get a gauge on the kind of services that can be provided through this legislation?

Mr. Gordon Dunning: We'd be very pleased to talk to you about that. Within our program in Hamilton, we have indeed got many years of experience of supporting adults with autism. What we have found is that our transition program can prepare adults for more independent living and to require fewer services. It really does depend on the level of functionality of the particular individual. Some individuals need a fairly low level of support; they need recreational programs so that their social skills remain high, and they need some active monitoring to make sure that they can cope with life's crises as they come along in new situations. There, you're talking about quite modest levels of funding which are required to maintain those individuals. Clearly, other individuals need daily support, and those are more costly. So we'd be pleased to provide the committee with—

The Vice-Chair (Mr. Vic Dhillon): I apologize; we have to move on. We'll be moving on to the official opposition.

Mrs. Christine Elliott: My name is Christine Elliott. I'm one of the Conservative members of the committee. I think you've brought a really valuable perspective to the committee today, that of adults with autism, because it tends to be a group that I don't think we always think of. It doesn't get slotted into any easy category. When we speak of people with autism, we tend to think of children, so your perspective is very valuable and much needed. And I agree with you; it should be a functional definition, so as to be able to include many adults with autism who might not have an intellectual disability.

The other comment that I'd like to make is with respect to your comments that there are not many social, recreational or vocational opportunities out there for people with intellectual disabilities or autism. We're hopeful that with the direct funding aspect, if the planning component was also included in that, that would assist in helping those individuals find those opportunities.

Do you have a perspective on the independent planning aspect of it, whether it's needed or not?

Mr. Gordon Dunning: We do support the dual funding model which is outlined in the legislation. Agencies such as our own do need direct support so that we can have the infrastructure in place, but we also believe that giving individuals or their immediate caretakers access to individual funds allows them to select the right service at the right time for those individuals.

The Vice-Chair (Mr. Vic Dhillon): Mr. Prue.

Mr. Michael Prue: It's Michael Prue here. I just have some questions around an appeal. You talked about an appeal process. How do you envisage this? Do you think that a separate body needs to be set up? Would we do it through the Ombudsman's office? What kind of appeal are you talking about?

Mr. Gordon Dunning: We hadn't really formed a view. It was really just a governance issue which we were picking up on, in that the application centre seemed, under the legislation, to be reviewing its own decisions, and that's never a good governance structure. The Ombudsman's service might be the correct mechanism, but we haven't really thought that through completely.

Mr. Michael Prue: You also made a comment about servicing all individuals. There is a provision in the act talking about wait lists. Are you concerned about the fact that this is embodied in the legislation?

Mr. Gordon Dunning: Yes, that is one of our concerns. Even if some of the individuals whom we service or we'd like to service are eligible under the act, will they just simply get stuck on a wait list? What are the provisions going to be to make sure that all individuals get the right level of service?

Mr. Michael Prue: That would then come down to funding, and that's really not part of the bill; it would be part of the budget process, probably to follow the bill. Has your group given any thought or indication of how much additional funding would be necessary to service all the individuals, say, in your catchment area? How much more money to service all and get rid of the wait list in your area?

Ms. Cindy I'Anson: That would be difficult to say at this point. Part of the issue is that we have a specific program for adults with autism, which is unique across Ontario, at least. So I think that part of the issue is that there aren't even enough services in the rest of the province. We've been taking people from all over the place—

The Vice-Chair (Mr. Vic Dhillon): Thank you very much.

Ms. Cindy I'Anson: —so it would be hard to pin down. We could certainly try to figure that out, but at this point, I wouldn't be able to answer that.

The Vice-Chair (Mr. Vic Dhillon): Thank you.

Mr. Gordon Dunning: Our concern is—

The Vice-Chair (Mr. Vic Dhillon): Thank you very much for your presentation. Time's up. I didn't want to be so abrupt. We really appreciate you taking the time. Bye, if you're still there.

That is the end for this morning's session. We'll break now for lunch, and we'll be back at 1 o'clock in this room.

The committee recessed from 1120 to 1244.

AUTISM ONTARIO

The Acting Chair (Mr. Dave Levac): Okay. Thank you very much for the provision of lunch. We appreciate it very much, on behalf of the committee.

We appreciate the fact that Mr. Doug Reynolds, the past president of the adult issues task force, is here to speak to us on behalf of Autism Ontario. Mr. Reynolds, thank you very much for the time that you've spent getting here. We definitely appreciate it. I quickly had a little chit-chat with you and we talked how about it's typical for the north to understand what that kind of travel is all about. Thank you for being here, and you have 15 minutes. For the record, please identify yourself and what group you're representing, if at all. If you use all your 15 minutes, then there won't be time for questions and answers. If you'd like to leave some time at the end for some dialogue, that's your prerogative.

1250

You may begin, and thank you very much for being here, Mr. Reynolds.

Mr. Doug Reynolds: Thank you for the opportunity. I'm Doug Reynolds; I'm here on behalf of Autism Ontario. I do hope to keep my formal remarks, such as they are, to substantially less than 15 minutes and offer some opportunities for dialogue. I deliberately do not intend to repeat the material that was part of the submissions made by Autism Ontario or indeed by other groups like Kerry's Place Autism Services, whose submissions I've seen and certainly concur with.

Rather, what I'd like to do is use the few minutes available to me to give you some perspective that is perhaps more anecdotal, more immediate, more personal, based on my own experience and the experience of folks I've spoken with who deal with issues of individuals with various developmental disabilities, primarily autism, which is my perspective.

By way of introduction, I was for many years a member of the board of directors of Autism Ontario and chair of that board for three years during the late 1990s, and also very actively involved on the original adult task force of Autism Ontario back in the early 1990s and the subsequent adult issues working group that has been ongoing for the last several years.

I come to this perspective as the parent of a child with autism. I have a son who is 25 years old, finished school and living at home. Some of my reflections will be based on either personal experience or experience of other parents. I hope that that perspective, to complement the more formal perspective you will have received elsewhere, will be helpful to you.

I'd like to reflect on what I see to be some special challenges of northern Ontario, and perhaps northern and rural Ontario, and how that might be reflected ultimately in a legislative and policy framework to provide services for adults with a variety of developmental disabilities.

I guess I'd like to start with a personal observation. Although historically there are and continue to be what would be identified as funding issues, I do not see this as primarily an issue around funding and resources. I see it at least as much as an issue around how resources are allocated and used and how the structures are put in place to facilitate services.

As I indicated earlier, I have a 25-year-old adult son with autism. Although we receive some funding for provision of services for him, and that is welcomed and helpful, I should point out that whatever programming he receives, he receives because we have gone out into the community, identified opportunities and structured programs for him. There are no formally structured programs available for him or indeed most adults anywhere on the spectrum of developmental disabilities in much of northern and rural Ontario and probably much of Ontario.

There are problems within the system for the average parent related to our ability to deliver services. My wife and I are both university graduates, both in the social sciences; we are reasonably capable of structuring a custom program for our son. We are probably the exception. For the average parent, just navigating the system of funding, let alone structuring programs, is hugely onerous.

I'd like to reflect on some of my observations around why this is a challenge. Certainly the model that we've used historically in Ontario, not only for social services but for health, education and many other critical services, is based on a community agency model, where we facilitate and fund community agencies for the delivery of services. I would suggest that we have historically made those models work more effectively in the realms of health and education than we have with respect to social services. I think some of the fundamental difficulties we face are how we facilitate what is, I believe, an excellent model of community delivery of services. How do we build into that model not only the necessary expertise in more remote areas but accountability, standards and just some reasonable assurance that services of some quality will be delivered?

I would suggest this is not unlike the evolution that we went through in education in the early 1980s. When we moved special education and individuals with disabilities into the mainstream of our classrooms, we went through some teething difficulties, but we made a fundamental policy change which was to say that we would provide a level of service, we would mandate a minimum level of service, and we would see to it that the community agencies, namely local school boards and local school systems, were capable of delivering on that service.

So I would say that the one characteristic that is much applauded, and that I applaud, in this bill around portability of funding and the ability of parents and other caregivers to have and exercise a greater degree of control is a two-edged sword, because if we cannot provide quality services and accountability in our communities, what are we left with?

The other thing I would point to is that in our smaller, more rural communities, we are often in, frankly, a single-service-provider scenario. That service provider is usually a provider of more generic developmental services.

I'll reflect on a personal story here, very briefly. I don't intend this as an attempt to bash a particular agency, but rather to illustrate some flaws in the system.

My son was, for a period of time, in a day program offered by a local agency. Because of our location and the nature of the north, it was about an hour's drive each way to get him to the program. We received a phone call quite abruptly to say that they had difficulty handling him and he could only remain in the program if we were willing to undertake to pick him up at a moment's notice if he became disruptive or difficult. When we subsequently raised some other concerns about the program, particularly a lack of structure and supervision—the incident that led to it, by the way, was that he was in a bit of a workshop setting and he was to cut rags with a ragcutting machine. He's very adept with machinery and likes that sort of thing. When he ran out of rags to cut and

there was nobody around to provide him with more, he found another resident's sweater and cut it up. This disruptive behaviour, unfortunately, as ironic as it sounds, got him turfed from the program.

More importantly, though—and again, I don't mean this as a slight on the program—they are the only service provider. When I raised greater concerns, and subsequently they were investigated by the ministry, their funding partner, it was made clear to me by everyone concerned, and I certainly knew from experience, that I had burned my bridges. I can never go back to that agency. I am persona non grata. In fact, when I first began raising concerns, all subsequent communication with them came from their legal counsel rather than their staff.

Again, I say that by way of illustration of the reality of the world that we caregivers live in and the environment that's created by having a single-provider environment, or a very limited environment, with wait lists and other things that limit access to service.

In any case, I think I should probably stop here and take advantage of any opportunity to address questions you may have.

The Acting Chair (Mr. Dave Levac): Thank you very much, Mr. Reynolds. You have left us with a few minutes. I'll divide that up evenly and we'll go into the rotation, which I have down as Mr. Prue from the NDP. Just a minute and a half, or so, Mr. Prue.

Mr. Michael Prue: I thank you for the anecdotal stuff because it brought home the difficulties in the north. Other than setting up new agencies, what can we do in sparse populations? I'm particularly thinking in northern Ontario of some of the First Nations communities that are isolated and have children with autism or developmental disability. What can we do? Have you any suggestions?

Mr. Doug Reynolds: My immediate suggestion would be a more aggressively proactive role on the part of the ministry in terms of supporting and facilitating the development and emergence of new agencies within communities.

I attended a public consultation that about 60 or 70 folks showed up for, where the overwhelming consensus—this was in Sudbury—was that we need all-day programs for our kids across the spectrum. It was suggested, and I had some subsequent conversations with my MPP, who was very supportive, but the fact is that unless a group of us parents get together and have enough interest and focus and understand how to work the system and go approach the ministry and get the ball rolling, it's really a very onerous undertaking.

So what we need, I guess, is some leadership and facilitation, because I believe that the local delivery model is fundamentally sound, but that model needs to be better supported.

Mr. Michael Prue: Thank you.

The Acting Chair (Mr. Dave Levac): Thank you very much, Mr. Reynolds and Mr. Prue. I will turn to the Liberals and Mr. Ramsay.

Mr. David Ramsay: Welcome, Doug. Good to see you again. We've worked together in the past, each of us

wearing different hats. It's good to see the work that you're doing here, and thank you very much for travelling to Timmins and giving us your advice.

I wanted to follow up on Mr. Prue's question, because this is always a concern. As a fellow northerner, of course, in any professional need that we have up north, especially in health care, it's no longer an issue with retaining and recruiting doctors, as you know; it's the whole spectrum of health care workers, and with social workers too. You're talking about more about specialty types of skills, and I think that's going to be a real challenge for rural and northern Ontario. If you have any other perspective on that, how we need to do that—I take your point from the initial answer about maybe the ministry getting a little more proactive in that, and that may be the way to go. I just wondered if you had any other perspective on that.

Mr. Doug Reynolds: The further perspective I would offer is that when I observe the spectrum of services available to adults, particularly with autism, in Ontario, what I am struck by is that we have everything from absolute excellence—I look at organizations like Kerry's Place Autism Services or Woodview Manor, which really represent the gold standard. They quite clearly are not equipped to offer a province-wide service. I think we need to look at methods of turning those organizations into centres of excellence, if you will, that will provide training and support, because I don't believe we have the critical mass, for example, to create specialized autismspecific agencies in our northern and rural communities. I think what we need to do is not duplicate administrative structures but take our existing generic service agencies and provide the means to allow them to develop subsets of specialized services for autism and perhaps in other areas, taking advantage of the very significant expertise we have in places like Kerry's Place and facilitate in the knowledge transfer.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much. Ms. Elliott?

Mrs. Christine Elliott: I'd also like to thank you, Mr. Reynolds, for travelling such a distance today to meet with us and give us your personal perspective on the challenges that you and your family and your son are facing.

I was really interested in the comment you made about how you and your wife are able to plan for your son because you go out into the community and you're the one who seeks these things out. One of the suggestions that's been made to the committee is that there be some element of planning facilitation that will help not just with traditional service agencies to provide services, but also to help in terms of achieving one's personal goals and dreams and achieving the goal of social inclusion into the community. Is that something you would agree with as well?

Mr. Doug Reynolds: Absolutely. I'm glad you raised the issue of social inclusion, because I would say, for example, in terms of the self-directed program that we've created—and I agree that support to help other people

who may have less experience in the area do that would be very helpful. But what is lacking is that social inclusion. We can hire a one-on-one worker and he can take my son and have him engage in a variety of community activities. What he does not have, which he had when he was in school and which all of us who work in our various jobs have, is a consistent social milieu into which he goes regularly and participates. He continues to ask, "Why don't I go to the centre any more?" and, "When are you going to find me another centre to go to?"

So this sense of lack of social inclusion and the lack of a regular environment—he's self-aware enough to know that he's missing something, and I think that's probably fairly typical. So that is a real challenge. That's why something as fundamental as some kind of structured day program, which is not a complex, costly, difficult thing to do, would be such a huge benefit in many communities.

Mr. Khalil Ramal: On a point of order, Mr. Chair: I wonder if I can ask questions, since he travelled a long distance and there's nobody here yet to do the presentations? Is that possible?

The Vice-Chair (Mr. Vic Dhillon): Do we have unanimous consent?

Mr. Michael Prue: Are they on the phone? I don't want to keep them.

The Vice-Chair (Mr. Vic Dhillon): I agree with you, Mr. Prue.

Thank you very much.

SHEILA ZHANG-SMITH

The Vice-Chair (Mr. Vic Dhillon): Do we have the people on the phone? Hello.

Mrs. Sheila Zhang-Smith: Hello.

The Vice-Chair (Mr. Vic Dhillon): Hi. Welcome to the committee. Good afternoon.

Mrs. Sheila Zhang-Smith: Thank you. Good afternoon. First of all, I would like to thank everyone on the committee for—

The Vice-Chair (Mr. Vic Dhillon): I would like you to please state your name for Hansard.

Mrs. Sheila Zhang-Smith: It's Mrs. Sheila Zhang-Smith. I'm the president of CUPE Local 2936.

The Vice-Chair (Mr. Vic Dhillon): That's fine. You may continue. Thank you very much.

Mrs. Sheila Zhang-Smith: Thank you. First of all, I would like to thank everyone on the committee for allowing us, as voters, to come in here and speak up regarding this proposed bill.

I want it to be known that three years ago I was brutally attacked and as a result I suffered traumatic acute brain injury. This happened a number of years ago in another workplace.

1300

For those of you who do not know what this means, it means that while I'm currently working with developmentally delayed individuals on a full-time basis, I'm also in receipt of the Ontario disability support program, which means that the government takes back 50% of

what I earn. It also means that I understand what it's like to have challenges in my day-to-day life. I was diagnosed at the age of 30. If I were diagnosed after this bill passes, it would not apply to me. What would happen to the supports I may need then? Anyone can get a brain injury at any time. If it has a long term, then the person will likely always need support.

I have had people read me the bill a number of times so I could work to understand it. Since then, I've been out on the streets meeting people with children who have disabilities all across St. Catharines and Collingwood showing the ministry's Spotlight newsletter, the proposed bill and the issues raised by both CUPE and OPSEU. I was shocked that hardly anyone even knew it was being considered and there are people that still will be affected. If this bill were to pass, a lot of these people I spoke to would be affected.

People are really worried about having to go through reassessments. What if we lose service or service has to be rolled back? Even if this is not likely going to happen, the thought that it is a possibility is really stressful. I work with a few supported people who, every time they even need to attend a dentist's appointment, suffer anxiety to the point that they have to take medication just to get through the ordeal.

We do not deserve this at all. Why would you guys consider taking money from the people who deserve it the most and who depend on this assistance to survive? It should not even be a possibility.

Also, too many people have been waiting periods of years, so what about these long waiting lists? What is the guarantee that everyone will receive legitimate services that they deserve? Many people will likely have to resort to hiring brokers to get services we have already had to some degree in agencies. Why would the government not just give the money to the agency to provide the service?

From experience, I know that sometimes with these brokers, they send us to companies who want to make a profit, and we end up getting the short end of the stick and suffer with people who don't care about us as individuals; rather, they just show up for the money.

I'm concerned about a system where there's not enough accountability. Agencies do a good job doing their work; why do we need someone else to do it? Workers going into homes must be trained and held accountable. There are people and their families who can be taken advantage of. If we have to do direct funding then we suffer again because we don't have a lot of money given to us already for the services we require. The agencies that we have in place right now work very hard with us and love their jobs. Also, there are people I spoke to whose families have all died and they have no one else to assist them in their day-to-day living; they are also not capable of surviving without the daily assistance from their workers. Without workers, they won't survive, and in the end they're going to end up on the street.

I don't understand how this bill would help anyone in the long run, since we are out of options for services because there are not enough of them. It is my thought that we do need to change some of the things written in this proposed bill before we pass it. We need to ensure that it's 100% in understandable language since, again, a lot of the people this bill would affect have language barriers or do not quite understand what's going on here at all. It is the government's job to ensure the safety of the people who voted them in the office in the first place. I know first-hand what it's like to have someone who is only caring for me for the money to be the one responsible for giving me my care. I sat through many hours where the caregiver was not attending to my needs, and it is my thought that the workers at Community Living are there to give me my very best. I think this bill should support agencies being strong. It is not like this bill will allow for equal opportunity with everyone; there are not enough services.

Will we, too, have to endure the same negative impact that the home care systems are going through currently or even in the past? I have letters to give you from people I spoke to who have concerns and are asking questions. There are a lot of questions that still need to be answered and changes that need to be addressed with this proposed bill. Thank you for your time today.

The Vice-Chair (Mr. Vic Dhillon): We'll start with the official opposition.

Ms. Sylvia Jones: Sheila?

Mrs. Sheila Zhang-Smith: Yes.

Ms. Sylvia Jones: My name's Sylvia Jones. I'm with the Progressive Conservative Party. Thank you for your presentation; I think you raised a very valid point about the age restriction and how that needs to be removed. Also, your comments about the waiting lists being put right into the legislation without any goals or expectations of trying to decrease them are valuable points. I appreciate those. Thanks.

Mrs. Sheila Zhang-Smith: Thank you.

Mr. Michael Prue: I want to commend you for taking the time to read this bill. It's about four inches thick and it's very complex—and your friends, too, for explaining it to you.

I want to get back to one of the first things you said about being brutally attacked and then on ODSP and them taking half of your money off you. How does that affect your ability to obtain service for yourself?

Mrs. Sheila Zhang-Smith: It means that I have to work more hours at my full-time job in order to provide for my needs to obtain these services.

Mr. Michael Prue: So you have ODSP, plus you work full-time as well?

Mrs. Sheila Zhang-Smith: Yes.

Mr. Michael Prue: So the job must not pay a great deal of money, because if it did, you wouldn't be getting ODSP at all.

Mrs. Sheila Zhang-Smith: Right.

Mr. Michael Prue: Okay. So this has been, I guess, a very difficult period for you since you were attacked.

Mrs. Sheila Zhang-Smith: Yes.

Mr. Michael Prue: You said you wanted the bill to be in understandable language. I think almost every On-

tarian would agree with you on this bill, and every other bill, that it should be readable. I'll just leave it at that. I think all of the government members have heard that. Maybe we should have more people writing bills who are not lawyers.

Mrs. Sheila Zhang-Smith: Right. I agree.

Mr. Michael Prue: Okay. Thank you.

Mr. Dave Levac: Thank you very much for your presentation, ma'am. I want to thank you also for going public and explaining the circumstances of your experience to give people a better understanding of the situation.

You mentioned a little bit about the funding and that you're concerned. Other organizations similar to the one you represent speak about parents not having the capacity, experience, knowledge and understanding of the services, that they might not be able to use the money in a way that is appropriate, that you figured they should be doing it. Can you explain in more depth why you believe parents would not have the capacity to take that funding from a direct source and distribute it to a service that they require?

Mrs. Sheila Zhang-Smith: A lot of the people I work with have seniors for parents, or they don't have parents. Therefore, they're not able to maintain the knowledge on where to go or who to speak to, even. It makes it even harder for them when they're having to deal with their own lives and trying to adapt with the funding that they receive themselves. Or the ones who don't have parents, who do they go to? That's what I meant.

The Vice-Chair (Mr. Vic Dhillon): Go ahead.

Mr. Khalil Ramal: Khalil Ramal from the government side. Thank you very much for your presentation. I know you brought to us a different perspective on the bill. As you know, the aim of this bill is to create a choice and broaden the services for many families across the province of Ontario. This was the aim of direct funding. If the person, family or any individual chooses not to take it, they have a right not to take it and belong to an agency or community centre. So don't you think it's important to bring this issue forward and pass the bill?

Mrs. Sheila Zhang-Smith: Sorry, could you repeat that?

Mr. Khalil Ramal: I said that it's the aim and goal of the bill to broaden the service for people with disabilities. That's why we introduced the bill. That's why we're travelling the province of Ontario to seek input from many different individuals, organizations and agencies. We want to create a choice for families. If they choose to take that choice, that's fine. If they don't, they can keep getting services from the agency they like. So don't you think it's important to create those choices?

Mrs. Sheila Zhang-Smith: It's important if every-body has the same knowledge. You said that you guys have travelled all over Ontario informing people. Yet, I just told you that I've spoken to people in both St. Catharines and Collingwood who have no idea about this bill at all. I've got 700 written submissions that I have to submit to you guys from people who have never even heard of this bill. So how is it possible that you've visited

everybody, if I've spoken to 750 people in a matter of two weeks that have no clue what I'm talking about?

The Vice-Chair (Mr. Vic Dhillon): It was advertised. Mr. Khalil Ramal: It was advertised in the media: television, radio and also in the written media. It's impossible to cover every inch—

The Vice-Chair (Mr. Vic Dhillon): And on the legislative channel.

Mr. Khalil Ramal: And the legislative channel also advertised it for a long time. I agree with you that you cannot cover the whole province, but we're talking about creating choices. This is what I'm saying: We heard many different families who came forward and told us that they support this bill because this bill gives them a choice. Some other families don't want choice. This is about creating choices.

Mrs. Sheila Zhang-Smith: What choice do the people have who don't have family members? That's what I'm asking. If all the services are gone, they have to go through—

Mr. Khalil Ramal: They can remain with agencies in the community, wherever they feel comfortable to receive the service from—

Mrs. Sheila Zhang-Smith: The ones who are still on the waiting list—what about them? Who do they speak to once they're reassessed if all the services are gone? We barely have enough now. What do they do? They're going to be forced to hire the brokers.

Mr. Khalil Ramal: It's important in this bill to see how many people apply, because at the present time in the current system, people apply in many jurisdictions. That's why the waiting lists are packed. Hopefully, when we pass this bill, it will give us an idea of how many people are sitting on the waiting list, and we can address it in a professional and efficient manner.

The Vice-Chair (Mr. Vic Dhillon): I'd just like to point out that the deadline for submissions is August 12 at 5 p.m. Maybe that information will help, Sheila. If there's anybody else who is interested in making a submission, and as well as yourself, as you have some submissions, please forward them on to us.

Mrs. Sheila Zhang-Smith: Yes, I started the faxing into the numbers with the different paperwork that I have three days ago. They're still coming, and I've let everybody know.

The Vice-Chair (Mr. Vic Dhillon): Thank you very much.

Mrs. Sheila Zhang-Smith: You're welcome.

PROVINCIAL NETWORK ON DEVELOPMENTAL SERVICES

The Vice-Chair (Mr. Vic Dhillon): Do we have the next folks on the phone? Hello?

Mr. Geoff McMullen: Hi, it's Geoff McMullen here from the Provincial Network.

The Vice-Chair (Mr. Vic Dhillon): Good afternoon, Mr. McMullen. You have 15 minutes. Any time that you

do not use will be divided up amongst the three parties. You may begin now.

Mr. Geoff McMullen: Okay. Thank you. I'm speaking as chair of the Provincial Network on Developmental Services. The Provincial Network is an affiliation of provincial organizations representing 250 agencies and families that provide supports to individuals and families in the developmental services sector.

We certainly believe that Bill 77 is poised to address a number of important issues that affect the lives of people who have a developmental disability. The Provincial Network supports many of the positive changes that have been proposed and is eager to work together with its partners and the government to make sure the bill creates a progressive framework for the transformation of developmental services. We certainly support the government's attempt to develop better tools for understanding resource needs in the sector. We support enhanced accountability measures that may contribute to better outcomes for people and certainly the closure of the remaining institutions. It has been decades since the last major changes were made to the Developmental Services Act. The changes that are proposed today are likely to affect the lives of people who have a developmental disability and their families for generations to come.

I would like to emphasize that the Provincial Network has reviewed, discussed and endorsed all the recommendations for Bill 77 that have been made by its member organizations. Over a short period of time, community organizations have mobilized their resources to develop an understanding of Bill 77 and its implications for people and their families.

The Provincial Network has identified five key priority areas for making improvements to Bill 77. We believe that these changes will result in a piece of legislation that is on the cutting edge of international policy and has the longevity to serve Ontarians for decades to come. While time only permits me to briefly address these five priorities, I would like to direct your attention to the brief that we have submitted for a full list of recommendations endorsed by the Provincial Network.

I would like to start with the changes that we are seeking that are related to the rights, dignity and personhood of people who have a developmental disability. A legislative framework that is truly transformative would enhance the autonomy of people who have a developmental disability and ensure that people's rights, dignity and personhood are protected. There are a number of measures that could be included in Bill 77 to ensure that this is so. People who have a developmental disability should enjoy the same privacy and peaceful enjoyment of their homes as other citizens. This sense of safety, security and self-control was severely disrupted for many people during strikes that occurred in the summer of 2007. Many people had their homes picketed in the course of disputes between unions, agencies and government. The people who were most negatively affected by these actions were people who were essentially powerless to affect the outcomes of the dispute.

Bill 77 should include measures that will address the chronic underfunding of wages in the sector and should prevent such disruption and intimidation from ever occurring again. People who are supported to live in the community should not be subject to intrusion of their privacy for the purpose of inspection, except under authority of warrant. As proposed, Bill 77 would prevent people who have a developmental disability from enjoying the same rights to due process enjoyed by all citizens. Affiliates of the Provincial Network have not been able to identify a single instance where an attempt was made to gain access to a home that is supported and operated by an agency and access was not granted. Such inspections should only be permitted with the consent of the occupant or under authority of warrant. Standards of accountability should extend to the quality of outcomes and satisfaction that a person experiences as a result of the supports that they receive.

While Bill 77 establishes a review process for decisions related to eligibility, there are limits to the fairness and review that are conducted internally. The proposed legislation should enact a process by which a person can make an appeal to a third party related to the various stages of decisions by which a person's supports are determined. Planning for life in the community can assist a person to secure their independence and autonomy in the application process. A primary aim of transformation is to ensure that people have control over their lives. Good person-directed planning can assist a person to reclaim autonomy by drawing on the supports of family, friends and community to explore all the options that may be available to them before making a formal application for support. We have emphasized the importance of planning as a separate priority, and I will talk about this later.

Recognizing that people who have a developmental disability have a legal capacity may be one of the most transformative steps that could be taken in the proposed legislation. The introduction of direct funding in Bill 77 has the potential to enhance the autonomy of people who have a developmental disability and to ensure that supports and services are fully accountable to the person. This will only be the case if provisions are made for recognizing the legal capacity of people who have a developmental disability and for recognizing that people who need assistance in exercising their legal capacity can be supported to do so. The concept of supported decision-making is recognizing that a person can enrol the support of those they trust to assist them in making and articulating decisions. Supported decision-making has roots in Ontario and has recently been adopted in international law through the UN Convention on the Rights of Persons with Disabilities.

The second priority area that we have identified is related to the scope and vision of the legislation. There has been broad agreement among the stakeholders that Bill 77 would benefit from statements that communicate the purpose of the legislation and the vision for social change that it aims to achieve. This could be accom-

plished by changing the title of the bill and by including a preamble.

The title plays an important role in setting the tone and intent of the legislation. The current title speaks only to the provision of services. While the ministry funds services for people, the intent of those services is to support people to participate in a full life in their community. The current title identifies services as an end goal rather than as a means to support inclusion in society.

Many acts also include a preamble that articulates the vision, scope and purpose of the legislation. There are acts passed by this government that include preambles, such as the recent Long Term Care Homes Act and the Human Rights Code. Bill 77 promises to fulfill the vision of an inclusive society where the people who have a developmental disability enjoy the same rights and privileges as all citizens in Ontario. A preamble should capture this vision and recognize people who have a developmental disability as valued citizens.

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Our third priority is to address the application centres proposed by Bill 77. The concern about application centres has been voiced consistently across the province. Over the past 10 years, considerable efforts and expense have been made to improve access, to coordinate supports and services regionally. Many positive practices have emerged, and partners in the developmental service sector are anxious to build on these practices rather than cast them aside in favour of a new system.

There are also concerns about the governance of the application centres. If enacted, application centres will exercise a considerable amount of power over the lives and interests of people who have a developmental disability and over service providers. Bill 77 does not reveal its plans for composition of the board of directors for an application centre, other than to indicate that it may be a service provider or a corporation.

Further concerns have been voiced about the conflict of interest that will inevitably occur by charging one organization with an extensive list of responsibilities, including determining eligibility, administering an application process, assessing needs, setting priorities, allocating and distributing funds, making referrals to agencies, monitoring quality and satisfaction, holding waiting lists, and so on.

One important conflict of interest is that the mechanism that allocates funding should not be held by the same body that determines what a person's needs are in the first place. Needs are needs and should not be influenced by resource availability. The Provincial Network supports the creation of application processes that provide an initial point of access to supports, opportunities for data collection and a mechanism for system planning.

Many of the concerns about the proposed application centres are based in the understanding that a broad list of functions will be held by a single body. The legislation should make clear that the various functions envisioned as part of the application centre could be held by different bodies within a given region. To avoid confusion,

the legislation should refer to an "application process," rather than defining it by a location. This would allow the elements described under the application section to be delivered by different bodies. The Provincial Network believes that the responsibility for allocation of funding should still remain a direct responsibility of government.

Our fourth priority is to seek changes to Bill 77 that will ensure consistency in the quality of supports. Making direct funding available to people who have a developmental disability is consistent with the concept of self-determination and choice that is fully endorsed by the Provincial Network. However, implementation of direct funding programs should be undertaken with the understanding that offering a mechanism for direct funding is only one element of the policy framework in which successful direct funding programs have operated. In order to ensure the best quality and supports under direct funding, a number of issues must be addressed. Clear standards of accountability and compliance should be put in place and applied consistently across all the funding streams. The accountability measures in Bill 77 appear to be more rigid for agencies than for other streams of funding. The Provincial Network is concerned that lower standards and accountability for third party and for-profit service providers will result in receiving lower quality service.

Section 7(1) makes provision for the director to issue policy directives to service agencies and deal with performance standards and performance measures. There is no corresponding provision with respect to the services purchased through direct funding. It is important to enact measures that will ensure that people can purchase quality supports within the community.

There should be measures to ensure that workers available for hire through direct funding can be paid a reasonable wage, comparable to that of workers in service agencies, and to take into account the fact that workers hired through direct funding do not typically have access to health, pension and other benefits afforded to workers in agencies.

The legislation should also ensure that people are able to change funding streams or engage a mix of agency and direct funding based on their needs. Funding should be portable, so that as a person's needs and plans change, they can continue to have support without interruption.

Our fifth priority is to seek the inclusion of person-directed planning as a funded element that is made available after determination of eligibility but before the application and assessment process. Person-directed planning processes are recognized as critical elements in addressing a person's support needs. The Provincial Network is concerned that the current legislation provides no mention of resources for planning as a corefunded element. Dedicated resources for person-directed planning could be a transformative element of the legislation that would positively change the way that many people approach applying for supports and services. Good resources for planning will assist a person to complete the application process more efficiently and effectively and be better informed about their personal

goals and about existing or potential resources available to them in the community. Planning should be added as a core service funded by government and should be available to all who are deemed eligible.

Planning services should not be provided by the same body that administers applications and conducts assessments. Resources for planning should be accessible either through agency-based or independent planners who are qualified. Standards should be set through the regulations or in policy. Qualified planners should be knowledgeable about generic services and resources and should be skilled in assisting persons to make connections and build relationships.

On a final note, I would like to emphasize a broad consensus that has been reached among developmental service partners regarding changes that should be made to Bill 77. This remarkable level of agreement has led us to conclude that our concerns and recommendations are legitimate. In closing, I'd like to stress that the bill certainly should be an enabling bill that supports adults to become active members in their communities.

The Vice-Chair (Mr. Vic Dhillon): Thank you, Mr. McMullen. You were right on the time; you used up your 15 minutes. Thanks for making this presentation.

Thank you committee, staff.

This committee will adjourn now—

Ms. Elliott?

Mrs. Christine Elliott: I do have a request to make of the research officer, Ms. Campbell, if I might, with respect to several items that have come up during the course of discussion today.

One is with respect to a comment that was made by Community Living Timmins on the UN Declaration on the Rights of Disabled Persons, in the context of the discussion on supported decision-making. I was wondering if we could get a copy of the UN declaration and any other information that we can find out about supported decision-making as it relates to that; that has been a consistent theme that has come up from many presenters.

The other issue was brought up by the member from Community Living for West Nipissing in the context of speaking about application centres. She was talking about networks of specialized care. I was wondering if we could get some information specifically about who participates in that and actually how many there are across Ontario, or if it's just a local, northern situation. She seemed to indicate that there were several networks available that might be able to perform the same function as an application centre.

The Vice-Chair (Mr. Vic Dhillon): Okay. Thank you.

Thank you very much, everybody. We're going to adjourn for today and convene tomorrow morning in Ottawa.

Mr. Dave Levac: That's a long walk.

The Vice-Chair (Mr. Vic Dhillon): For you.

I've been told that the taxis will be outside at 2 p.m., so we'll see you at the front.

The committee adjourned at 1328.

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