

Expert Monitor Assessment on Year 1: February – June 2023 (July 2025 Update)

In my analysis of the Remedy requirements and related reports for this period, the Province designates much of its progress to be “Complete” despite a wide range in the results of specific requirements. The results described in the Province’s *2025 Annual Progress Report* are varying degrees and kinds of progress.

As in my previous report, I apply in the assessment three standards of substantial progress, as follows:

- **Significant progress** refers to the Province making tangible improvements and advancements towards the intended outcomes, obtained to a **considerable degree** and with influential consequence.
- **Sufficient progress** refers to the Province making tangible improvements and advancements towards intended outcomes, realized to an **adequate degree** and effectiveness.
- **Slight progress** refers to the Province making modest tangible improvements and limited advancements towards intended outcomes, to a **minimal degree** and marginal in result. Things are more “in progress” than having “made progress.”

I apply these standards in addition to the terms **exact compliance** and **compliance in substance** where applicable to the requirements set out. For ease of referencing, the rating for each requirement from the *Monitor Report of July 2024* is included in square brackets.

Quick summary of assessing the 21 Remedy Requirements for February-June 2023, as of July 2025:

- 7 are in Exact Compliance [change from 5]
- 4 are in Significant Progress [change from 3]
- 8 are in Sufficient Progress [change from 7]
- 2 are in Slight Progress [change from 6]

ANNEX A: MONITORING REPORT 2024-25

REMEDY REQUIREMENT	ASSESSMENT
<p>1. Review Report recommendations regarding the establishment of the <i>Social Assistance Act</i> (Disability Supports Program – DSP) fit for purpose governance functions, including regional leadership, first voice consultation and co-production.</p>	<p>EXACT COMPLIANCE [EXACT COMPLIANCE]</p>
<p>2. Update DSP client projection model using baseline numbers and provide assumptions, and outputs of the model.</p>	<p>EXACT COMPLIANCE [EXACT COMPLIANCE]</p>
<p>3. Commence efforts (including communication and change management plan) to transfer DCS <i>Social Assistance Act</i> DSP intake function and Care Coordination staff to the Disability Supports Program.</p>	<p>EXACT COMPLIANCE [SIGNIFICANT PROGRESS]</p> <ul style="list-style-type: none"> • Four DSP Connectors recruited in each of the regions to assist persons with disabilities access services

ANNEX A: MONITORING REPORT 2024-25

<p>4. Establish a Remedy Secretariat including a Project management and Implementation Team:</p> <ol style="list-style-type: none"> DCS/DSP to align current Transformation Work Plan and budget to the agreed Remedy. Progressively design and build a new Remedy Secretariat/Project management and Implementation Team to progress urgent tasks such as Communications Plan and a Change Management Plan. Progress any new staff recruitments as a priority. 	<p>EXACT COMPLIANCE [SIGNIFICANT PROGRESS]</p> <ul style="list-style-type: none"> Innovation portfolio with project management capacity in place External Communications Plan developed Change Management Plan established Job postings and recruitment strategies underway for expediting the hiring of new staff
<p>5. Approve and implement intensive technical support and program design:</p> <ol style="list-style-type: none"> Identify early potential external technical resources that will be required for leadership development, cultural change, development of new programs (including fidelity requirements for new Local Area Coordination and Intensive Planning and Support Coordination staff) and more detailed Project Implementation Plans. Hold intensive technical support/program design session in May 2023. 	<p>SIGNIFICANT PROGRESS [SUFFICIENT PROGRESS]</p> <ul style="list-style-type: none"> Leadership and Capability Panel experts contributed to cultural change, leadership development, and Remedy project implementation Local Area Coordination (LAC) and Intensive Planning and Support Coordination (IPSC) staff fidelity requirements developed Program design sessions held in 2023 and through 2024
<p>6. Approve and implement a government wide data collection mechanism to track and update baseline data as required in a timely and consistent manner as required and to provide data updates twice yearly.</p>	<p>EXACT COMPLIANCE [EXACT COMPLIANCE]</p>

ANNEX A: MONITORING REPORT 2024-25

<p>7. Develop written policy and process to ensure no new congregate or institutional facilities are established for persons with disabilities.</p>	<p>EXACT COMPLIANCE [EXACT COMPLIANCE]</p>
<p>8. Take immediate actions to address any staff ceilings or other barriers to early recruitment of necessary staff – for example to do the early policy and program work required.</p>	<p>SIGNIFICANT PROGRESS [SUFFICIENT PROGRESS]</p> <ul style="list-style-type: none"> • Regional Hub Managers, Closure Specialists and Team Leads hired in August 2024 • Recruitment for various staff roles (LACs, IPSCs, EFACs and CLFs) over Fall 2024 • Given challenges, a targeted hiring campaign for IPSCs and LACs in summer 2025
<p>9. Develop and plan implementation of Local Area Coordination, including individualized planning and coordination services (navigational) and Intensive Planning and Support Coordination (IPSC).</p>	<p>SIGNIFICANT PROGRESS [SUFFICIENT PROGRESS]</p> <ul style="list-style-type: none"> • Policy and practice frameworks for Local Area Coordination and Intensive

ANNEX A: MONITORING REPORT 2024-25

	<p>Planning and Support Coordination approved</p> <ul style="list-style-type: none"> • Recruitment and training for staff roles over October-December 2024
<p>10. Commence priority new services such as the Emergency Response team to avoid new institutional admissions and support persons with disabilities in their community of choice.</p> <p>a. In particular, the Emergency Response team is required to enable a set date for firm prohibition on admission to institutions and LTC facilities.</p>	<p>SUFFICIENT PROGRESS [SLIGHT PROGRESS]</p> <ul style="list-style-type: none"> • Crisis Prevention and Community Response Strategy development is completed with implementation pending
<p>11. DCS/DSP to continue with urgent new services that are aligned with the Remedy such as: a. Institutional closure b. Development of urgent new services that are aligned with the Remedy such as Shared Services, and new ILS places.</p>	<p>SUFFICIENT PROGRESS [SLIGHT PROGRESS]</p> <p>Harbourside Lodge 9Adult Residential Centre) closed in July 2023</p> <p>Inclusive for Life (Residential Care Facility) closed in June 2024</p>

ANNEX A: MONITORING REPORT 2024-25

	Shared Services program developed, although uptake of new services is behind the Remedy timeline ¹
12. Appoint a Clinical Lead to lead the planning and development of the Multi-disciplinary Allied Health teams and inter agency development work.	<p>SLIGHT PROGRESS [SLIGHT PROGRESS]</p> <p>Director of Allied Health Supports hired, May 2024</p> <p>Two of four of the regional multi-disciplinary teams to be in place by end of August 2025</p>
13. Establish “no new admissions” policy once Emergency response capability in place.	<p>SLIGHT PROGRESS [SLIGHT PROGRESS]</p> <p>No new admissions policies established</p> <p>Crisis Prevention and Community Response Strategy capability not yet fully operational</p>

¹ See the Province’s *Year 2: April 2024 to March 2025 Targets and Compliance* Report, and the DRC’s Submission, June 27, 2025, p. 13.

ANNEX A: MONITORING REPORT 2024-25

<p>14. Harbourside closure completed and relocation of all those people who resided at Harbourside to their community of choice.</p>	<p style="text-align: center;">SIGNIFICANT PROGRESS [SIGNIFICANT PROGRESS]</p> <p>21 of 22 residents successfully relocated to a community of their choice One resident, in a rural area, returned to a facility because of the lack of primary care provider in their community “This individual has been assigned an IPSC to start planning for transition to community.”²</p>
<p>15. Commence work to remove waitlist for eligible applicants by establishing a human rights compliant pathway that ensures timely access to accommodative assistance. For the purposes of this Interim Settlement Agreement, “accommodative assistance” means social assistance, including supports and services, that meet the different needs of persons with disabilities.</p>	<p style="text-align: center;">SUFFICIENT PROGRESS [SUFFICIENT PROGRESS]</p>

² The Province, *Annual Progress Report May 31, 2025 – Targets and Compliance, Year 1: February to June 2023*, p. 6.

ANNEX A: MONITORING REPORT 2024-25

<ul style="list-style-type: none"> a. This to include such elements as alignment with an enhanced DSP Intake and triage function, referrals to LAC/IPSC/Care Coordination/Emergency Response Team/other services and supports such as health and housing. b. The pathway to also identify where additional supports may be provided to streamline DSP eligibility determination. 	<p>Local Area Coordinators hired and trained, November/December 2024</p> <p>Collaborative Eligibility Pathway approved, December 2024³</p> <p>Further implementation and documentation required to demonstrate progress on establishing a human rights compliant pathway for applicants and participants⁴</p>
<p>16. Approve and implement eligibility and key DSP policy review and update, including rescinding Eligibility policy sections 9.3 and 9.4.</p> <ul style="list-style-type: none"> a. Scope review of Licensing and standards. b. Review and address situation of individuals previously denied. 	<p style="text-align: center;">SUFFICIENT PROGRESS [SUFFICIENT PROGRESS]</p> <p>Policy sections 9.3 and 9.4 removed</p> <p>Review done of cases previously denied⁵</p> <p>Actions still required to demonstrate progress on establishing a human rights compliant pathway for applicants and participants, by amending DSP Policy manuals⁶</p>

³ A main aim of e Pathway is to offer supports to individuals who previously were ineligible for DSP services, because of policy sections 9.3 and 9.4.

⁴ In their submissions, the Disability Rights Coalition expresses “several concerns regarding the Province’s failure to include in its DSP Policies the entitlements of all persons with disabilities to accommodative assistance without delay in their community of choice.” *DRC Comments on Selected Indicators: February-June 2023 (June 2025)*, p. 2

⁵ See Document 118.

⁶ Human rights-based reforms to Disability Support Program Policy require, as the DRC notes, comprehensive eligibility without categorical/diagnostic ineligibility; a clearly expressed right to assistance; assistance that meets the needs of different persons with disabilities; no delays in receiving assistance for eligible persons; and a clearly expressed right to live a supported life in the community of choice. *DRC Comments on Selected Indicators: February-June 2023 (June 2025)*, pp. 3-4.

ANNEX A: MONITORING REPORT 2024-25

<p>17. Support Adult Capacity and Decision-making Act (ACDMA) review process by linking DSP to the review. Focus should be on using the presumptive capacity in NS law and on the practices of Supported Decision making.</p>	<p>SUFFICIENT PROGRESS [SLIGHT PROGRESS]</p> <p>In the Department of Opportunities and Social Development, Disability Support Program is “beginning a new project to enhanced Supported Decision Making that is aligned with the new system of Individualized Funding with a focus on self-determination, choice and control.”⁷</p>
<p>18. Province to conduct early research into Individualised Funding (IF) backbone systems and connections to possible technical support.</p>	<p>EXACT COMPLIANCE [EXACT COMPLIANCE]</p>

⁷ The Province, *Annual Progress Report May 31, 2025 – Targets and Compliance, Year 1: February to June 2023*, p. 8.

ANNEX A: MONITORING REPORT 2024-25

<p>19. Coordinate Seniors and Long Term Care (SLTC) and DSP to work collaboratively on the development of consistent structures for Individualised Funding (IF) programs.</p>	<p>SUFFICIENT PROGRESS [SUFFICIENT PROGRESS]</p> <p>Interdepartmental collaboration between Disability Support Program and SLTC, a work in progress</p> <p>DSP IF funding bands shared with SLTC and other partners.</p> <p>The DRC observes, ‘because there is not yet experience as to the adequacy of the Support Levels set out in these bands, the DRC is not in a position to comment on their adequacy –whether they are truly ‘accommodative’ in the sense of ‘meeting of different needs of persons with disabilities.’”⁸</p> <p>RFP procurement on IF Application work closed, August 2024</p>

⁸ DRC Comments on Selected Indicators: February-June 2023 (June 2025), p. 4.

ANNEX A: MONITORING REPORT 2024-25

<p>20. Review and align current DSP work on developing enhanced supports for children. New efforts should be consistent and complementary to efforts outlined in this report. Respite options could focus on Homeshare approach that fosters relationships and networks as the child grows.</p>	<p>SUFFICIENT PROGRESS [SLIGHT PROGRESS]</p> <p>Disability Support Program “Project Charter” on children and youth services approved, Fall 2024</p> <p>No progress to date on Homeshare placements</p>
<p>21. Establish a working group (DSP, IWK, Office of Addictions and Mental Health, Nova Scotia Health – NSH) to develop shared purpose and language on mandates, connection to the current process of development of a universal mental health and addictions system, partnering in case coordination between DSP and NSH for Complex cases, and address outstanding eligibility issues.</p>	<p>SUFFICIENT PROGRESS [SUFFICIENT PROGRESS]</p> <p>Remedy Roundtable active with membership from nine provincial government departments and offices</p> <p>Program development work underway on a gap analysis of mental health and care supports for people with disabilities</p> <p>In Year 2, a series of working groups established, that include C# (Care Coordination Centre), Converging Initiatives, and Discharge Hubs/Health Beyond Hospitals.⁹</p>

⁹ *Annual Progress Report May 31, 2025 – Targets and Compliance, Year 1: February to June 2023*, pp. 9-10.

ANNEX A: MONITORING REPORT 2024-25