

Expert Monitor Assessment on Year 2 (April 1, 2024 – March 31, 2025)

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.

Quick summary of assessing the 28 Remedy Requirements for Year 2 are as follows:

- 12 are in Exact Compliance
- 2 are in Significant Progress
- 8 are in Sufficient Progress
- 6 are in Slight Progress

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#	REMEDY REQUIREMENT	ASSESSMENT
1.	Update as to status and work of the Roundtable.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• Remedy Roundtable meets periodically.• The DRC makes a useful suggestion that more frequent meetings of the Roundtable, would facilitate interdepartmental collaboration.¹• Additional information provided this year about composition of the membership <p>Interdepartmental partnerships, which include Education and Early Childhood Development (work on the School Leavers Program), Office of Addictions and Mental Health (completing an analysis in gaps in services), Department of Justice (updates to the ACDMA), the Accessibility Directorate (regular collaboration on accessibility standards), Municipal Affairs and Housing (by law changes and changes to housing programs) on specific Remedy initiatives.</p>
2.	Leadership and Capability Panel established and has operational plan to advance training recommendations. a) Suite of training courses underway	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• Leadership and Capability Panel active in development and delivery of training, cultural change and development of implementation plans. This included Regional Hub staff in various positions.• Funding for two years to Inclusion NS for capacity building among family members of persons with disabilities to support implementation of the Remedy• DSP partnered with Nova Scotia Community College to deliver two micro-credentials for the Disability Support Sector <p>Overall, good amount of information provided by the Province</p>

¹ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 1.

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3.	<p>The Province will have carried out the following during the year:</p> <p>a) Increase in ILS plus/Flex Independent options by a further 200 (in addition to Y1 baseline)</p> <p>b) Reduction in the total number of people residing in ARC, RRC, and RCF's by 30% compared to baseline (n= 261 of 870 total) by providing those individuals with meaningful access to accommodative assistance to meet their different needs to live in community, and</p> <p>c) Planning commences in November for next groups including capacity</p>	<p>SIGNIFICANT/SUFFICIENT/SLIGHT PROGRESS*</p> <p>*Given the complex multiplicity of elements in Remedy Requirement #3, I give a specific assessment to each of the 14 parts.</p> <p>SLIGHT PROGRESS</p> <p>The Province describes the ILS and Flex Independent as “uncapped programs” that are “open to any DSP participants whose needs can be met in these programs and who choose to accept the supports offered.”² The DRC finds this to be “a plainly inadequate explanation” for the marginal results, which represent only 22 per cent of the Remedy’s Year 2 requirement.³</p> <p>I find the Province’s depiction of the programs is one that puts the onus on individuals. I would like to see more about outreach efforts planned by Disability Support staff and leaders to encourage actively take-up.</p> <p>In any case, ILS plus rolled out in May 2024 and to date 20 people are being supported in ILS plus and 9 more are in transition to it.</p>

² Annual Progress Report May 31, 2025 –Targets and Compliance, Year 2: April 1, 2024 to March 31, 2025, p. 4.

³ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 2.

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	<p>building and enhanced current lifestyle (n=208)</p> <p>d) 20 of 83 Existing TSA’s converted</p> <p>e) Plans for people in Psychiatric Hospitals and Forensic Hospital to return to their community of choice including:</p> <p>a. Plans and timelines finalized for ‘return to local community’ for people in psychiatric hospitals (n=48) and Forensic (n=28)—for completion within 5 years from year 1.</p> <p>b. Minimum of 78 individuals currently identified on Service Request List. Target 20% = 16 people moved out in Year 2.</p> <p>f) Increase in Shared Services under 65 in LTC Shared Services of 81 persons in community of choice for a total of 110 of 200 total.</p> <p>g) Planning/capacity building/enhanced current lifestyle for those in other systems (Shared services and psychiatric hospital/forensic) Baseline versus: estimate numbers n=16.</p>	<p>SUFFICIENT PROGRESS</p> <p>b) The Province reports “the percentage of people who have transitioned from ARCs, RRCs and RCFs or are engaged in transition planning with an IPSC represents 33% of ARC, RRC, RCF occupancy over baseline. Furthermore, occupancy in ARCs, RRCs and RCFs has decreased by 189 over baseline representing a 22% decrease.”⁴ This result contrast with the Year 2 requirement of a total reduction by 30 percent. I determine this result as sufficient progress achieving 72 per cent of the Year 2 target.</p> <p>SLIGHT PROGRESS</p> <p>c) IPSCs began working with a few residents of residential facilities in November 2024. Priority groups for IPSCs are individuals living in institutions (including hospitals), those on the Service Request List receiving no DSP supports, and those living in Temporary Shelter Arrangements. IPSCs are currently working with 104 individuals; this number will increase significantly in the coming months as additional staff are hired. Results fall well short of the requirement target of commencing capacity building and enhanced lifestyle for 208 individuals.</p> <p>SLIGHT PROGRESS</p> <p>d) TSAs are emergency settings established in response to a crisis and urgent need for an individual who would otherwise face homelessness, or an emergency room visit for a non-medical reason. Before approving a TSA, all other placement options are explored and exhausted. The Province explains the increase in the number of TSA’s as the result of two factors. One is the number of participants advised by a Service Provider they are no longer able to provide support and requested to move from their current placement option. “To avoid the individual having to go to a shelter (most shelters will not accept DSP participants) or going to the local Emergency Room, we [the DSP] are in a position of having to secure a TSA as an interim measure until the participant can access an IPSC.” The second factor is</p>

⁴ Annual Progress Report May 31, 2025 –Targets and Compliance, Year 2: April 1, 2024 to March 31, 2025, p. 5.

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	<p>h) Increase of 50 in DSP Homeshare options in community of choice, by region (n= 50): 240 total Homeshare.</p> <p>i) Reduce DSP Waitlist (Service Request List) “no support group” (Baseline of 589) by 289 through IF options.</p> <p>j) Planning and support and Discretionary Funding for DSP Waitlist (SRL) “no service” group– estimate numbers n=350</p> <p>k) Four new DSP Regional Multidisciplinary Mental Health/Health Teams and Supports operational, and Integration of Multi-disciplinary outreach teams complete.</p> <p>l) Award new proposals for MH/Health programs.</p> <p>m) Province wide Critical Response Team/capability fully established.</p> <p>n) Commence planning for School Leavers (n =100).</p>	<p>“an increase in the number of families who are requesting immediate placement of their family member due to an increase in support needs that can no longer be managed in the family home. Additional respite is provided as an initial response however there has been the need to create TSA’s due to the lack of available placements and the need for an immediate resolution for the family.”</p> <p>Transition planning commenced with TSAs via OISD training in December. While the number of people being supported in TSA’s has not decreased, they are being supported in community and have not been admitted to institutional settings. IPSCs are prioritizing working with people in TSA’s and developing plans to transition to other community options.</p> <p>The actual result, at the end of Year2 was a 76 percent increase over the baseline. in the number of TSAs</p> <p>SLIGHT PROGRESS</p> <p>e) IPSCs are prioritizing working with individuals in psychiatric and forensic hospitals to make plans for a good life in community. Given the concurrent demands on IPSCs to serve other groups (individuals living in other institutions, those on the Service Request List receiving no DSP supports, and those living in Temporary Shelter Arrangements) and the challenges in recruiting IPSCs, progress is constrained. I note that no data were included in the Province’s submission on this requirement.⁵</p> <p>SLIGHT PROGRESS</p> <p>f) Shared Services is a combination of supports and funding from the Disability Support Program (DSP), the Department of Seniors and Long-Term Care (SLTC) for individuals with disabilities under the age of 65 living in nursing homes whose primary needs are physical, and whose nursing needs are addressed in the community.</p> <p>This program so far supports eight individuals a mere fraction of the intended population by end of March 2025.</p>

⁵ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 4. See also Document 192 on the DSP Caseload dashboard, p. 2.

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		<p>SLIGHT PROGRESS</p> <p>g) According to the DSP Caseload Dashboard for April 2025, no IPSCs were working with individuals living in Long Term Care facilities or with individuals residing in Forensic Hospitals or Psychiatric Hospitals. In other terms, no planning by IPSCs occurred for capacity building or enhancing the current lives of these persons.</p> <p>SLIGHT PROGRESS</p> <p>h) DSP aims to have eight Home Share Coordinating Organizations approved across the province in the coming months. DSP has also provided grant funding to the Nova Scotia Residential Agencies Association to provide support to these host agencies and to create a community of practice for Home Share. DSP is in the process of launching a marketing campaign to raise public awareness about Home Share and begin to attract host families to the program.</p> <p>It is crucial that these efforts yield significant results in Year 3, especially in light of the fact that no Homeshare spaces are yet created in the province as part of the Remedy.</p> <p>SUFFICIENT PROGRESS</p> <p>i) The Service Request List “no support group” stands at 296 representing a reduction of 293, and thus meeting the target in the Remedy. A note of caution is that average length of time on the wait list has increased in recent years.⁶ The DRC adds that it is unclear to what extent IF options contributed to reducing the wait list.⁷</p>

⁶ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 7. See also the Appendix B Metrics Report, section 2.

⁷ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 6.

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		<p>SLIGHT PROGRESS</p> <p>j) In their progress report, the Province repeats the decision in May 2023 that individuals receiving support from Employment Support and Income Assistance and living with a disability can access the Disability Supplement of \$308/month. As I noted in my report last year, this action is external to the timeline and even to the Remedy agreement.</p> <p>SLIGHT PROGRESS</p> <p>k) DSP plans to have two of the four Regional Multi-Disciplinary Outreach Teams operational by August 31, 2025. In the meantime, DSP will prioritize services for those leaving institutions and will contract private services when needed.</p>

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		<p>SUFFICIENT PROGRESS</p> <p>l) Fit-gap analysis of mental health service for people with disabilities completed by DSP and the Department of Health and Wellness, and Office of Addictions and Mental Health. Actions steps to make further progress on identified primary care, mental health, and behavioural health gaps and challenges for DSP eligible individuals.</p>

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		<p>SUFFICIENT PROGRESS</p> <p>m) Crisis Prevention and Community Response Strategy implementation is underway and staff provided with training.</p> <p>SIGNIFICANT PROGRESS</p> <p>n) School Leavers program design work with the Department of Education and Early Childhood Development is complete. Registration is in progress and offers participation to the first 100 students identified in June 2025. The program commences in September 2025.</p>

<p>4.</p> <p>Full implementation of new individualized funding (IF) infrastructure system/administration and support structure:</p> <p>i. Individualized Funding: Implementation/evaluation/revision of new IF system.</p> <p>ii. Recruit coaches.</p> <p>iii. Develop trainer and user manuals.</p> <p>iv. Implementation of training for staff and users.</p>	<p>SUFFICIENT PROGRESS</p> <ul style="list-style-type: none">• The Province states: “The design of a new Individualized Funding policy and an Individualized Funding Administrative Service required extensive engagements, research and collaboration across multiple divisions. This represents a massive shift in the way DSP provides services and funding for persons with disabilities and a considerate process was required.”⁸• Extensive training, user manuals and implementation supports are in place.• The Individualized Funding (IF) Policy adopted in January 2025. The Province consulted with participants, families and service providers to help inform development of the IF policy.• The Collaborative Case Management system, which includes mechanisms to administer Individualized Funding, went live in January 2025.• Individualized Funding Administrative Backbone Service now projected to be active in the winter of 2026; however that date, the Province cautions is dependent on contract negotiations.
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⁸ Annual Progress Report May 31, 2025 –Targets and Compliance, Year 2: April 1, 2024 to March 31, 2025, p. 15.

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5.	Person Directed Planning (PDP) tender awarded for Province wide Peer and Technical Support Program.	<p>SUFFICIENT PROGRESS</p> <ul style="list-style-type: none">• “The Peer Support for Planning Project began in October 2024. However, in February 2025, the Remedy authors recommended the project slow down to enable time for the Local Area Coordinators to become

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		<p>established into their roles to inform better program design. A further workshop on this project was held with the Remedy authors in May 2025. It is anticipated that this service will go live in winter of 2026.”</p> <ul style="list-style-type: none">Investments in Inclusion Nova Scotia’s peer support program were made in 2024 to support families.
6.	Whether ACDMA reforms are enacted or not widespread accessible training commenced regarding supported decision-making for individuals, families, service providers and DSP staff. Anchor efforts (in the short term) on the presumption of capacity secured in NS law.	<p>SUFFICIENT PROGRESS</p> <ul style="list-style-type: none">A Supported Decision Making Toolkit has been developed and used to support introductory or basic training provided for all new hires.More substantive training and for existing staff as well as for individuals, families and service providers is essential.Great attention required in materials and workshops to the Remedy and human rights more generally
7.	Continue development and implementation of Local Area Coordination, including individualized planning and coordination services (navigational) and Intensive Planning and Support Coordination (IPSC).	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">The first recruitment cohort of IPSCs, EFACs and LACs hired and trained in November/December 2024 and a second recruitment cohort trained in January 2025. I address the matter of the adequacy of number hired under Requirements 10 and 11.A targeted recruitment campaign for IPSCs will begin in summer of 2025.DSP is introducing a new Manager of Support Planning position responsible for ensuring support plans adhere to the

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		<p>philosophy of strong support planning.</p> <ul style="list-style-type: none">Continuous Improvement Hub established to receive regular feedback from LACs and IPSCs, address practice challenges and support practice improvements to ensure adherence to fidelity requirements.
8.	Approve and implement fidelity requirements (see Year 1 for requirements/criteria).	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">Fidelity checklists for LAC, IPSC and EFACs approved and embedded in Practice Frameworks.First recruitment cohort of IPSCs, EFACs and LACs trained on Fidelity Checklists in November /December 2024 and a second recruitment cohort in January 2025.Continuous Improvement Hub established to receive regular feedback from LACs and IPSCs, address practice challenges and support practice improvements to ensure adherence to fidelity requirements.
9.	Implement technical support, training and fidelity requirements for new Local	<p>EXACT COMPLIANCE</p>

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	Area Coordination and Intensive Planning and Support Coordination staff (see Year 1 for requirements/criteria).	<ul style="list-style-type: none">• Training provided to Regional Hub Leadership team in August 2024 and for LACs, IPSCs and EFACs in November/December 2024 and January 2025• Technical and training support provided by Leadership and Capability Panel.
10.	<p>Recruit, train and have fully operational 50 new LACs and 65 new IPSCs in accordance with approved fidelity criteria.</p> <ul style="list-style-type: none">a) Total FTE/Ratios to meet benchmarks 1:20 for IPSCs and 1:50 for LACs; Supervisors at 1:8b) Referrals to LAC/IPSC/ Care Coordination/ Emergency Response Team/other services and supports such as health and housing.c) IPSC to be made available as required on demand after the initial intensive planning and facilitation process	<p>SLIGHT PROGRESS</p> <ul style="list-style-type: none">• By end of Year 2, 26 LACs and 24 IPSCs recruited – about half of the LAC requirement (52 percent) and just over a third of the IPSC requirement (37 percent).• In their <i>2025 Annual Progress Report</i>, the Province emphasized challenges of recruiting staff into these roles.• These results are marginal and more in progress than having made substantial progress.

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11.	Recruit next 30 new LACs and 15 new IPSCs (ex-Care Coordinator FTE).	<p>SLIGHT PROGRESS</p> <ul style="list-style-type: none">• The next 30 new LACs and 15 new IPSCs did not happen in Year 2.• In response, the Province is undertaking several remedial steps into Year 3: (i) a targeted recruitment campaign for IPSCs and LACs; (ii) prioritizing Remedy related hiring corporately (over other programs); (iii) obtaining permission from the NSGEU to conduct some processes concurrently; and, (iv) hiring additional Human Resources staff to support the hiring process and conducting additional recruitment activities.⁹• I will return to this issue in my report for next year.
12.	New Provincial capability for technical and peer planning supports program operational.	<p>SLIGHT PROGRESS</p> <ul style="list-style-type: none">• The Peer and Technical Planning Support Project began in October 2024. However, the Province explains that in February 2025, the Remedy authors recommended “the project slow down to enable time for the Local Area Coordinators to get into their roles.”¹⁰ The Province now anticipates that the Project will launch this summer.• The DRC expresses concern that “the Province has unilaterally departed from the Remedy requirements without consultation

⁹ Annual Progress Report May 31, 2025 –Targets and Compliance, Year 2: April 1, 2024 to March 31, 2025, p. 15.

¹⁰ Annual Progress Report May 31, 2025 –Targets and Compliance, Year 2: April 1, 2024 to March 31, 2025, p. 16.

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		<p>[which] is unacceptable and contrary to the Agreement.”¹¹</p> <ul style="list-style-type: none">• DSP made investments in 2024 to Inclusion Nova Scotia’s peer support programming for families and individuals.
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¹¹ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 14.

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13.	Local Area Coordination (LAC) staff commence disbursing discretionary funding.	<p>SUFFICIENT PROGRESS</p> <ul style="list-style-type: none">• Discretionary funding, known as Small Sparks, is available to LACs through the Regional Hub Model. New LAC staff trained on this program at the time of hiring.• Unclear from documentation if any funds actually allocated in Year 2.
14.	Update DSP client projection model using baseline numbers and provide assumptions, and outputs of the model.	<p>SLIGHT PROGRESS</p> <ul style="list-style-type: none">• Province only states, “participant/staffing model informs planning and decision-making.”• Moreover, that the Continuous Improvement Hub monitors caseload ratios.• As the DRC points out, the requirement here is “to update [the] DSP client projection model using baseline numbers and provide assumptions, and outputs of the model; there are no projected client numbers, with assumptions and outputs of the model.”¹²

¹² DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 15.

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15.	Disability Sector Workforce Plan approved and implementation commenced.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• Workforce Strategy approved and announced in January 2025 and implementation plan underway
16.	Regional Advisory mechanisms commenced.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• Four Regional Advisory Councils established, made up of 50 percent persons with disabilities, and held first meetings in June 2025.• Province confirms that these councils “will have access to innovation funding of up to \$500,000 per year (total for all four Councils) to design and implement innovative solutions to local challenges.”

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17.	Innovations and Transition funding commenced and allocated through Regional Advisory mechanism and Services Transition Development Fund commenced.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• Regional Advisory Councils will have access to innovation funding• Service Evolution fund supporting existing providers to move to a different model of service aligned with the Remedy launched in October 2024. Twenty-two grants awarded so far.

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18.	External evaluation team commences individual outcomes monitoring with agreed new tool.	<p>SUFFICIENT PROGRESS</p> <ul style="list-style-type: none">• Request for Proposals closed November 5, 2024• DSP is working with the Provincial procurement division to finalize this contract.• As the DRC notes, optimistically, the evaluation is months away from starting.¹³
19.	Updated DSP policies and practices consistent with eligibility of shared services participants.	<p>SUFFICIENT PROGRESS</p>

¹³ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 15.

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	<ul style="list-style-type: none">• Policy sections 9.3 and 9.4 rescinded in January 2024.¹⁴• Review of eight applicants previously denied under this policy completed.¹⁵• Collaborative Eligibility Pathway approved in December 2024.• The DRC asserts, “The circumstances which triggered the former exclusionary/discriminatory policy and the current Collaboration Pathway diversion away from the DSP are identical.” Moreover, the Province has an “obligation to expressly include in its DSP policies that all Shared Services participants – regardless of diagnosis – will be eligible for DSP supports.”¹⁶
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¹⁴ These policy sections previously prohibited individuals who are now eligible for Shared Services, from accessing Disability Support Programs.

¹⁵ Three of these individuals have passed away. The five remaining are being assigned IPSCs to proceed with planning.

¹⁶ *DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025)*, pp. 16 and 17.

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20.	Update efforts to remove waitlist for eligible applicants by establishing a human rights compliant client pathway that ensures timely access to accommodative assistance.	<p>SIGNIFICANT PROGRESS</p> <ul style="list-style-type: none">• Four DSP Connector roles (one in each region) hired. Connectors assist persons with disabilities to access appropriate supports and services to meet their needs.• Provinces announces, “DSP applicants will no longer be added to the Service Request List. Instead, through the DSP Connector, they will be offered appropriate services through LACs, or IPSCs.”• The DRC is sharply critical of this announcement by the Province and I address the issue in my Monitoring Report.• I recommend that the Parties meet to find a mutually agreeable approach to the Service Request List and to ensuring timely access to accommodative assistance, as per the Remedy.
21.	Update as to development and implementation of new program policies including arrangements for triage and “immediate assistance” once found eligible.	<p>SLIGHT PROGRESS</p> <ul style="list-style-type: none">• Disability Support Program policies remain out date in by not containing express statements of human rights principles, the entitlements in the <i>Social Assistance Act</i> or the Remedy requirements. I address the issue in my Monitoring Report.
22.	Update as to regional review of “eligible but not receiving support” group to examine demographics and determine priorities.	<p>SUFFICIENT PROGRESS</p> <ul style="list-style-type: none">• This is an ongoing requirement of the Regional Hub leadership team to complete, with the Continuous Improvement Hub supporting the Leadership Team• Lack of pertinent documentation provided by the Province on this group¹⁷

¹⁷ See Document 166.

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23.	Reduce waitlist for eligible applicants by implementing planning and support/Discretionary Funding for Waitlist “no service” group. Baseline of 589 versus: Waitlist/no support group reduced by n =289	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• Service Request List/ Wait List for “no service” group has reduced by 293 individuals to date, over baseline.• Local Area Coordinators (LACs) are to provide support to any individual who identifies as having a disability. They are also able to access discretionary funding for these individuals.
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24.	Report back on implementation of operational procedures to provide that applications that are denied based on eligibility criteria are documented.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• The Collaborative Case Management (CCM) digital system has this capability now built in.• The Regional Hub Leadership team is responsible for ongoing monitoring of these applications and will be reported on in the Annual Progress Report.
25.	Housing rental costs assistance review complete.	<p>SUFFICIENT PROGRESS</p> <ul style="list-style-type: none">• DSP Excess Shelter policy allows the provision of additional rental cost assistance in addition to the Standard Household Rate.¹⁸• At present, 1,010 people receive an Excess Shelter amount.• “The key flaw.” claims the DRC, “is that, even after the review of this Policy, the decision as to whether or not excess shelter is granted in any particular case remains a discretionary one (‘excess shelter <i>may</i> be approved’) – even where it is both required and warranted. Seen in these terms, the Policy is not in accordance with the ‘right to accommodative assistance’ which fully meets a person’s needs.”¹⁹
26.	Review of National Building Code adjustments complete.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none">• Building Code standards reviewed by DSP and feedback provided to Department of Municipal Affairs and Housing in September 2023.• “Ensuring safe and accessible housing arrangements will be included in the safeguarding component of the IPSC & LAC support planning process.”

¹⁸ Excess Shelter is frequently approved in recognition of the challenges persons with disabilities face in finding safe, accessible and affordable housing.

¹⁹ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 30, 2025) (June 2025), p. 20.

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27.	Licensing and standards review complete / HR principles embedded.	<p style="text-align: center;">EXACT COMPLIANCE</p> <ul style="list-style-type: none">• A review completed of the <i>Homes for Special Care Act</i> relates to licensing. Prepared by Legal Counsel it is subject to client privilege.• What the Province does say here is that the “Program Pathways will have safeguarding and Human Rights principles entrenched”; and that “DSP is undertaking a new project to explore replacement of licensing and accreditation options in the Individualized Funding model.”²⁰• This is work that the Province involves the DRC as well as community partners, such as service providers and their associations.
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²⁰ Annual Progress Report May 31, 2025 –Targets and Compliance, Year 2: April 1, 2024 to March 31, 2025, p. 23.

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28.	First review of new governance structures.	<p>SIGNIFICANT PROGRESS</p> <ul style="list-style-type: none">• Continuous Improvement Hub is receiving regular feedback on the new Regional Hub model and governance structures. Information gathered will inform the external evaluation.• First review of the new governance structures will be included in the scope of the external evaluation.• I make a recommendation in my Monitoring Report on how the Parties might work together on some of this work.