

Monitoring Report 2024-25: Gaining Traction

**Year 2 of the Nova Scotia
Human Rights Remedy**

**Submitted to the Province of Nova Scotia, Nova Scotia
Disability Rights Coalition, and Nova Scotia Human
Rights Commission**

**Dr. Michael J. Prince
Expert Monitor**

July 31, 2025

TABLE OF CONTENTS

1. Message from the Expert Monitor	4
2. At a glance	5
3. Introduction	6
3.1 Purpose of this report	6
3.2 Human Rights Remedy	6
3.3 Structure of this report	7
4. Overview of Monitoring Report 2023-24	8
4.1 Monitoring Process	8
4.2 Role of Expert Monitor	9
4.3 Assessing Compliance and Progress	10
4.4 Summary of Substantive Findings and Recommendations	12
4.5 Recommendations from Year 1 and Government's Responses	13
5. Expert Monitor Assessment of Year 2	16
5.1 General Approach	16
5.2 Overall Representations	18
5.3 Update on Year 1	19
5.4 Overview of Year 2	23
6. Foundational Issue: Eligibility for Disability Support Programs	24
6.1 Social Assistance is a Legal Entitlement	24
6.2 Post-Report Correspondence	26
6.3 A Review of DSP Policy Manuals	28
7. Specific Observations on the Year 2 Reports	30
7.1 Interim Progress Report, January 15, 2025	31
7.2 Annual Progress Report, April 1, 2024 – March 31, 2025	33
7.3 A Closer Look at Slight Progress	34
8. Selected Themes	36
8.1 Recruiting and Training Staff	36
8.2 Mobilizing Multiple Kinds of Participation and Knowledge	39
8.3 Governing and Interdepartmental Relationships	42
8.4 Working with Multidisciplinary Health Teams	44
8.5 Closing Facilities and Transitioning to Communities	46
9. Looking Ahead: from traction to acceleration	49

MONITORING REPORT 2024-25: GAINING TRACTION

9.1 Understanding System Change	49
9.2 Reasons for Optimism and Conditions for Success	50
9.3 Moving into Year 3	51
10. Conclusions: gaining traction is movement, not momentum	53
11. Summary of Recommendations	54

Annexes

Annex A: Expert Monitor Assessment on Year 1: February – June 2023

Annex B: Expert Monitor Assessment on Year 1: April 1, 2023 – March 31, 2024

Annex C: Expert Assessment on Year 2: April 1, 2024 – March 31, 2025

List of Tables

1. Comparing updated assessments of the remedy results, February 1, 2023 - June 30, 2023
2. Comparing updated assessments of the remedy results, April 1, 2023 - March 31, 2024
3. Comparing updated assessments of the remedy results, February 1, 2023 - June 30, 2023 and April 1, 2023 - March 31, 2024
4. Interim Progress Report, January 15, 2025
5. Update on Annual Progress Report, April 1, 2023 – March 31, 2024
6. Comparing assessments of Year 2 Remedy Requirement #3

List of Charts

1. Mobilizing Participation and Knowledge in the Remedy
2. Remedy initiatives led or co-led by other provincial government departments

1. Message from the Expert Monitor

July 30, 2025

I am gratified to submit *Monitoring Report 2024-25: Gaining Traction*, prepared in my role as Expert Monitor, in accordance with the Board of Inquiry Decision and Interim Settlement Agreement. The report provides an independent and impartial assessment of the Province's compliance and progress in relation to the Agreement.

This work is important to the people of Nova Scotia. It is an appraisal of the Province fulfilling its obligations to transform the provision of supports to ensure the timely access to assistance that meets the diverse needs of persons with disabilities living in Nova Scotia. This redesign must accommodate the needs of all persons with disability who require social assistance, including children, youth and adults with intellectual disabilities, and those with long-term mental illness and/or and persons with physical disabilities.

This report presents the results of my review and assessment conducted for the second year of the Human Rights Remedy, April 1, 2024 to March 31, 2025. The report also provides my update assessment of activities and time-periods for the first year: February 1, 2023, to June 30, 2023; and April 1, 2023, to March 31, 2024.

The Province of Nova Scotia produced their second Annual Progress Report on May 30, 2025. In accordance with the Interim Settlement Agreement, I had 60 days from receipt of that Progress Report to file my response. In separate correspondence on May 30, 2025, the Province provided their response to the 14 specific recommendations contained in my Year One Report. On June 28, 2024, the Nova Scotia Disability Rights Coalition produced a set of submissions for my consideration about the Province's second Annual Progress Report. Furthermore, the Province sent a letter, on July 11, 2025 commenting on the process and the Monitor's role, and, in turn, the DRC responded, on July 17, 2023, to clarify their position on issues raised.

I wish to acknowledge the shared commitment of the Parties to remedying systemic discrimination in the provision of services to persons with disabilities and to creating equitable and inclusive communities across Nova Scotia.

Again, this year, I want to thank Dr. Melina Buckley, who serves as independent legal adviser in the monitoring process, for her legal counsel and other contributions to my report.

Respectfully,



Michael J. Prince, CM, BA, MPA, PhD
Emeritus Lansdowne Professor of Social Policy, University of Victoria

2. At a glance

In this second year of implementing this Human Rights Remedy, there are notable examples of building capacity for moving in the direction of system transformation. In a complex and vast undertaking as this, there also are challenges and notable delays in delivering new programs and services to individuals and families in local communities.

The Province is achieving relatively more satisfactory results on many Year 1 requirements than was the case last year. Almost half of the remedy requirements in Year One (43 of 90), I had assessed as “slight progress,” meaning they advanced only minimally with marginal results.

From an update review of all ninety requirements of the Remedy for 2023-24, I found that for the period ending March 31, 2025:

- 25 requirements were in “exact compliance” [previously 17]
- none were “compliance in substance” [previously 2]
- 59 attained some level of “substantial progress” [previously 38]
- Six attained “slight progress” [previously 43].

Most of the Year 1 requirements I previously characterized as slight progress are advancing tangibly with an adequate “sufficient progress” or considerable “significant progress.” Belated effectiveness, undoubtedly. Incomplete compliance, certainly. A degree of progress, nonetheless, that indicates the Province is gaining traction.

This is apparent in Year 2 performance such as key leadership roles being filled; training courses for staff development starting to be delivered; new governance structures and roles for first voice beginning to take shape; growing awareness and acceptance of the Remedy by self-advocates, families, service providers, and public servants.

Of the 28 requirements for Year 2, the Province reports exact compliance on 20 and substantial progress on the other eight. *My assessment determines that 12 of the Year 2 requirements are in exact compliance, 10 requirements are in substantial progress (two of which are in significant progress, eight in sufficient progress), and six requirements demonstrate slight progress.*

Supporting documentation and explanations for reporting results contained in both the Interim Progress Report and Annual Progress Report this year are an improvement over last year’s reporting. The Province has undertaken to offer additional context for decisions and outcomes and additional information on mitigation strategies for addressing obstacles and challenges in implementation.

I make nine recommendations to promote and encourage enhanced compliance, going from gaining traction this year to accelerating progress in Year 3 and beyond.

3. Introduction

3.1 Purpose of this report

This report provides an independent and impartial assessment of the Province's compliance and progress in relation to the Interim Settlement Agreement (the ISA or the Agreement). The Agreement represents a collaborative and legally binding process, and comprehensive plan designed to result in a systemic human rights remedy (the Human Rights Remedy or the Remedy).¹

In particular, that assessment includes an in-depth examination of the indicators, timeframes, targets, and outcomes for Year 1 and for Year 2 of this Agreement.

This Agreement is unique in how it was developed, what it contains, and what it ultimately promises in moving toward an inclusive and fair society in Nova Scotia.

The Remedy sets out a five-year timeframe to implement a broad range of significant changes in provincial and local services, positive shifts in community networks and public attitudes, and in enhanced personal possibilities for individuals living with disabilities and their families.

Each year, the Province is responsible for submitting an Interim Progress Report (by January 15) and an Annual Progress Report (by May 31).

Under the Agreement, as Expert Monitor I undertake annual monitoring of the implementation to ensure the Province is continually making substantial progress and eliminating the systemic discrimination – the unfair treatment of people with disabilities as a group. I assess performance based on information provided by both Parties in line with the remedy requirements and outcomes. I report both positive and negative findings where appropriate, and make recommendations to support the process and facilitate effective implementation of the Remedy.

This report presents the results of my review and assessment conducted as the Expert Monitor for the second year of the Remedy, April 1, 2024 to March 31, 2025.

The report also provides my update assessment of activities and time-periods for the first year: February 1, 2023, to June 30, 2023; and April 1, 2023, to March 31, 2024.

Monitoring contributes to the process of redressing human rights violations and remedying systemic discrimination against persons with disabilities in the provision of social assistance.

3.2 Human Rights Remedy

The Remedy is about how to support individuals and their families in building inclusive lives in communities of their own choosing throughout the province.

¹ Attached to the Interim Consent Order of June 28, 2023, the Interim Settlement Agreement is a 15-page document along with four appendices, agreed to by the Parties on April 25, 2023. Available at https://humanrights.novascotia.ca/sites/default/files/interim_consult_order_settlement_sig_redacted.pdf

The human rights approach, which underpins the Interim Consent Order and Interim Settlement Agreement, provides guidance in how to assess the Province's activities and progress. This approach recognizes the interests and capacities of individuals. This approach aims to support people in communicating their preferences and making their own decisions. It entails ensuring the provision of accommodative social assistance. I will say more about these human rights principles and methods throughout this report.

To be effective, the Province must implement the Human Rights Remedy by taking into account the needs of individuals with disabilities who experience implementation of each remedial requirement in specific life circumstances and in specific local communities. The Province must also evaluate whether implementation operates in real life to meet these particularized needs.

3.3 Structure of this Report

The rest of this report is as follows.

The fourth section provides an overview of the 2023-24 Monitoring Report. It describes the monitoring process, the role as Expert Monitor, and the criteria for assessing progress and compliance. There is then a summary of my substantive findings along with my recommendations and the Province's responses to those recommendations.

The fifth section offer my assessment for this year. It outlines my general approach and overall findings, followed by an update on progress of the remedy requirements for Year 1 and then an overview of the status of the remedy requirements for Year 2.

The sixth section focuses on a particular foundational issue of the Remedy, that is, the matter of eligibility for the Disability Supports Program. In the Nova Scotia context, accommodative social assistance refers to supports and service provided under the *Social Assistance Act*. For those eligible, such assistance is a legal entitlement held by persons with disabilities, provided in a timely and non-discriminatory manner.

The seventh section provides specific observations on the implementation of Remedy provisions for Year 2, with remarks on the *Interim Press Report* of January 15, 2025 and the *Annual Progress Report* of May 30, 2025. I additionally take a closer look at the items identified as having achieved slight progress.

The eighth section surveys several themes bearing on the Remedy: recruiting and training staff, mobilizing four kinds of participation and knowledge, governing and interdepartmental relationships, working with multidisciplinary health teams, and closing facilities and transitioning to communities.

The ninth section looks ahead to Year 3 and remarks on the absolute necessity for the Province to go from gaining traction this year to accelerating progress.

The tenth and eleventh sections present conclusions and summarize my recommendations.

Underpinning and informing my comments, findings, and recommendations are three annexes. In turn, these provide details on my assessments of progress on the Remedy requirements in

February –June 2023, Year One of April 1, 2023 –March 31, 2024 and the *Annual Progress Report* for Year 2, April 1, 2024 –March 31, 2025.

4. Overview of Monitoring Report 2023-24

4.1 Monitoring Process

The remedy in the *Disability Rights Coalition v. Province of Nova Scotia* provides that an independent expert will monitor progress made toward the eradication of systemic discrimination against persons with disabilities in the provision of social assistance. I was appointed Expert Monitor in early 2024 and have now received four reports (two interim and two annual) from the Province, and four sets of comments from the DRC. My role is in some ways unique, although human rights monitoring more generally plays a well-established and important function in the movement toward creating equality for all.

In my first report published on July 30, 2024, I set out a detailed description of the context for my role drawing together relevant aspects of the legal decisions in this case, the Interim Settlement Agreement itself, and general principles applicable to human rights monitoring. I did so conscious of the public interest and with the goal of facilitating community awareness and a general understanding of the legal principles of this Agreement. My first report is available on the Human Rights Commission website.²

In this, my second, report, it is sufficient to highlight key aspects of this context as a foundation for understanding my role and the findings and recommendations that I make here. In this human rights complaint brought by a number of directly affected individuals and the DRC, the Nova Scotia Court of Appeal decided the Province had systemically discriminated against persons with disabilities for over two decades. Compliance with the Nova Scotia Court of Appeal decision requires eliminating the systemic discrimination against persons with disabilities established in this complaint and fulfilling the legal entitlements of persons with disabilities to accommodative social assistance. Ultimately, compliance is judged through the eventual outcome and the actual effects of persons with disabilities enjoying non-discriminatory access to public assistance.

Following this decision, the Province and the DRC developed the Interim Settlement Agreement through a collaborative process of negotiation and consultation. The Agreement is a detailed plan incorporating advice from persons with disabilities and other experts and is designed to remedy the systemic discrimination in the provision of social assistance over a five-year period. It consists of four parts and four detailed appendices setting out the actions and results agreed upon by the Parties, data disclosure requirements, and document disclosure requirements. The Agreement is legally binding by the Nova Scotia Human Rights Board of Inquiry Interim Consent Order of June 28, 2023.

The Agreement also sets out the roles and responsibilities of the Province and the Expert Monitor in assessing and reporting to the public on the progress made toward fulfilling the terms of the Agreement and thereby remedying the systemic discrimination. The DRC has the right to

² https://humanrights.novascotia.ca/sites/default/files/monitoring_report_year_one.pdf

submit comments on the Province's report and to supply other information to assist in the evaluation of progress.

The Agreement requires me to prepare a Monitoring Report that will:

- i. Review and comment on the accuracy and adequacy of the data provided by the Province and make any necessary recommendations to the Parties for further disclosure in order to fully and properly monitor compliance and progress with this Interim Settlement Agreement.
- ii. With respect to the indicators, timeframes, targets, and outcomes for the relevant year as set out in Appendix A (including any adjustments or changes to indicators, timeframes, and targets identified in previous Progress Reports or Monitoring Reports,) review and comment on whether the Province is in compliance.
- iii. If the Province is not in exact compliance:
 1. Assess whether there has been compliance in substance;
 2. Assess the reasons given by the Province for the non-compliance;
 3. Assess whether the Province has adequately considered and addressed any and all alternative measures;
 4. Assess whether those alternative measures are equally or more efficacious in achieving the outcomes;
 5. Where there are no alternative measures proposed by the Province, comment on whether any or all of those reasons for non-compliance amount to factors outside the control of the Province;
 6. Assess whether the Province is making substantial progress towards remedying the discrimination;
 7. Make any recommendations as to steps the Province should take to ensure that substantial progress continues to be made.

4.2 Role of External Monitor

In my capacity as Expert Monitor, my function is to review, comment upon, assess and make recommendations. I have the authority to make recommendations in two broad areas, procedural, and substantive. On the accuracy and completeness of data provided by the Province, I can make any necessary recommendations to the Parties for further disclosure to monitor compliance and progress fully and properly with this Agreement. On continuing to make substantial progress, I can make recommendations as to steps the Province should take to ensure such progress continues. I do not have the power to order the Parties to take any action nor refrain from taking any action. At the same time, my comments, assessments, and recommendations have greater persuasive force than a standard project evaluator or policy advisor because my monitoring function is integral to the human rights process initiated under Nova Scotia's Human Rights Act.

Through my reports, I seek to assist the Parties as they continue their collaborative work toward implementing the Human Rights Remedy. I see myself as an additional, albeit passive, voice in the remedial dialogue integral to moving from a remedy in principle set out in the Agreement to remedy in practice. The Province and the DRC mainly shape this dialogue, but the voices of individuals with disabilities, their families and informal support networks, and the many people responsible for carrying out the remedy must be taken into account. The individuals with disabilities who require social assistance are the solid core of this transformative process.

4.3 Assessing Compliance and Progress

The Agreement provides three key terms to be used by the Province in its self-assessment and by me in my independent evaluation of annual progress (paragraph 6):

- a. "Exact compliance" means that the Province has complied in exact terms with an indicator, timeframe, target or outcome in Appendix A;
- b. "Compliance in substance" means that the Province has accomplished the underlying purpose of an indicator, timeframe, target or outcome in Appendix A, by using alternative measures which are equally or more efficacious than the original indicator, timeframe, target or outcome, without necessarily meeting the exact requirement set out;
- c. "Substantial progress" means that, from an overall perspective, the Province is making sufficient progress in complying with Appendix A that it is still anticipated that the discrimination will be remedied in the timeframe contemplated by Appendix A in accordance with Appendix D, irrespective of any specific indicator, timeframe, target of Appendix A.

In my first monitoring report, I set out how I understand exact compliance, compliance in substance, and substantial progress. I did so primarily to be deliberate and transparent in my evaluation and to provide guidance to the Province and to the DRC.

It is important to reiterate that exact compliance is a rigorous standard, one mutually agreed to by the Parties and legally binding under the Agreement. It is a standard fitting for human rights remedies designed to dismantle systemic discrimination against persons with disabilities. Last year, I found the Province's self-assessment applied a milder and more flexible interpretation of exact compliance. A robust interpretation of the term is that all the elements of listed in Appendix A - indicator, timeframe, target, and outcome - must be fulfilled for a given item to be found to be in exact compliance. I continue to apply this muscular approach, in keeping with human rights principles.

I also provided guidance in assessing whether the Province's actions amounted to "compliance in substance", which means the Province has accomplished the purpose of an indicator, timeframe, target, or outcome (listed in Appendix A) by using alternative measures. I reflected on the types of questions raised by substituting alternative measures including the issues of efficacy, effectiveness, documentation of rationale for the substitutions, opportunities for participation and

relations of authority and accountability. These issues bear directly on a human rights complaint approach. I also underscore that the Agreement was the result of a great deal of consultation and negotiation between the Parties and was deeply informed by the technical report. A unilateral decision to substitute requirements is not to be taken lightly. I recommended that in cases where the Province is contemplating an alternative measure, which could materially alter the original terms of a remedy item, that the Province notify and consult with the DRC and adopt an alternative substantial measure only after best efforts to reach agreement.

In my first Monitoring Report, I noted that I found it less than straightforward to evaluate the term “substantial progress” to the status of changes and results regarding various requirements for Year 1 as set out in the progress reports. Many of the results the Province designates “substantial progress” requires qualifying language capable of distinguishing between degrees of “more or less” progress. I attributed the latitude given to the term “substantial progress” by the Province to result from the lack of gradations for evaluating progress that is short of exact compliance or compliance in substance, but where it would be unfair, at this stage to decide on non-compliance.

In order to be fair to the parties and give primacy to human rights principles, I decided to apply the term “substantial progress” in a way that recognizes gradations or a spectrum on the way toward compliance. It is useful to employ terms that convey the extent of progress made relative to each of the indicators, targets and outcomes set out in the Interim Settlement Agreement, relative to the three timeframes. Progress must be considered within each reporting year relative to that year, relative to the outcomes required in each of the subsequent years and relative the ultimate outcomes required by March 31, 2028.

I assessed “substantial progress” as encompassing three standards:

- *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.”

Making these distinctions about substantial progress is useful for the processes of implementing the Remedy and monitoring implementation. One benefit is to yield assessments of the remedy requirements, which are more precise and fit empirically with the supporting documentation, where provided. A second use is to provide the Province with a refined way to classify specific results in subsequent progress reports, enhancing transparency and accountability. A third use is to advise discussions by the Parties and their decisions, by offering areas for priority attention and mitigation of risks in moving towards remedying the discrimination.

I invited the Province and the DRC to respond to my approach and left it open to them to propose different terms and ways of understanding substantial progress on a going forward basis. I recommended that the Parties should work together to clarify and agree upon the character and meaning of “substantial progress.” This could involve the adoption of one or more terms, in conjunction with “substantial progress” that represent partial degrees of progress.

The Province has not responded to my refinement of “Substantial Progress”. While the Parties have not jointly agreed to a more detailed definition of this term, the DRC welcomed my continued use of the three categories I have developed and the Province “welcomed nuanced feedback regarding requirements for which it claims to have made substantial progress in Year 2.” I will therefore continue to use this scaled approach.

4.4 Summary of Substantive Findings and Recommendations

My first report on progress made in 2023-2024 contained specific findings on each of the Province’s responsibilities during the two periods under review (February 1, 2023, to June 30, 2023, and April 1, 2023, to March 31, 2024), overall findings, and made 14 recommendations. I analyzed the compliance results thematically relative to the policy goals and means to achieve substantive equality underlying the Agreement: first voice participation opportunities, supported decision-making, deinstitutionalization, homeshare/homesharing, and tenders and procuring services. I concluded that while fundamental reforms were underway, progress is slower and more uneven than called for in the first two periods of the five-year remedial plan.

Across the 90 requirements spanning the two reports, I assessed that 17 provisions were in “exact compliance,” 2 items in “compliance in substance” and 71 of some gradation of “substantial progress.” Notably, for almost half of the requirements (43 out of 90), I concluded that only slight progress had been made. Details of my assessments of each requirement were set out in Annexes A and B to that report. I include these 2023-2024 findings annexes to this report to enable a year-by-year comparison.

The Province and the DRC held substantially different views on the nature of the Interim Progress Report and the reporting requirements thereunder. After reviewing the positions of the two Parties, I strongly recommended that the Province produce robust Interim Progress Reports each year that include all the necessary documents to demonstrate exact compliance and, where less than full compliance exists, to provide meaningful explanations. This seemed to be to be especially important given apparent delays in making progress on many items in the first year. I understand that reporting takes time and human resources, but the production of a robust Interim Report should speed up preparing the Annual Progress Report. Importantly, it will also provide an opportunity for the parties to find joint solutions to obstacles and delays.

I also expressed concerns about the Province’s substitution of an alternative measure to the requirement to establish a working group – the one item where the Province has stated that it had complied in substance with the Agreement. The Province had not provided me with an explanation on how the substitution was equally or more efficacious than the original remedy item of a working group nor did it report on whether it formally consulted with the DRC in

advance on this item. Without this additional information, I could not agree that there was compliance in substance.

Looking forward, I provided the Province with recommendations regarding reporting requirements and highlighted key developments that I would be looking for by the end of Year 2. My recommendations aimed to encourage that collaborative spirit and help structure that collaboration going forward to ensure the Human Rights Remedy gets on track in Year 2 and stays on track in subsequent years.

4.5 Recommendations from Year 1 and the Government's Responses

For the record, I list the 14 recommendations I made last year and the Province's responses, which appear in italicized text.

1. In cases where the Province is contemplating an alternative measure, which could materially alter the original terms of a remedy requirement, the Province should notify and consult with the Disability Rights Coalition and only adopt an alternative measure after best efforts to reach agreement.

Since the 1st Annual Progress Report, the Province and the DRC have held several productive, collaborative meetings to specifically focus on the requirements of Year 2 (September 13, 2024) and on the Interim Progress Report areas where "exact compliance" was not anticipated (February 10, 2025; February 24, 2025.) In addition, the Province has provided documents to the DRC on request and written answers to specific questions. In the Province's view there have not been alternative measures contemplated which would "materially alter the original terms of a remedy requirement"; however, the collaborative relationship with the DRC since the 1st Annual Report has been beneficial in ensuring the remedy moves forward.

The above response was to Recommendations 1, 12 and 14.

2. The Parties should work together to clarify and agree upon the character and meaning of "substantial progress." This could involve the adoption of one or more terms, in conjunction with "substantial progress" that represent partial degrees of progress.

The Province understands the desire to differentiate between degrees of progress, and recognizes that "substantial progress" is a broad term. At the same time, "substantial progress" is the term used in the binding Interim Consent Order issued by the Board of Inquiry, and its definition at s.6(c) of the Order was agreed on between the Province and the DRC as part of an involved negotiation of this complex Order.

Moreover, an emphasis on defining partial degrees of progress runs the risk of losing focus of the fundamental basis of the Interim Consent Order. The Parties agree, for example, that "it is possible for the Province to remedy the discrimination without meeting each specific indicator, or target, or without perfectly complying with the associated timelines"

(s.5(a)), and that “the ultimate outcome of this Interim Settlement Agreement is the remedying of the discrimination through the achievement of the outcomes, rather than the specific compliance with any particular indicator or target” (s.5(c). For this reason, the definition of “substantial progress” does not focus on “any specific indicator, target, timeframe” but rather on the ultimate goal of remedying discrimination within the timeframe reflected in the Order. The parties negotiated an agreement whereby the achievement of individual targets and indicators is less important than the overall goal of remedying discrimination, and the language to describe compliance reflects that.

For that reason, the Province does not wish to create new compliance language which might shift the focus towards individual targets rather than the ultimate goal. However, the Province does understand that the Monitor may wish to describe the progress made in terms which are more nuanced, and we welcome that feedback. We are hopeful that the increased detail in the 2nd Progress Report is helpful to the Monitor in making such assessments.

3. I strongly recommend that the Province produce robust Interim Progress Reports each year that include all the necessary documents to demonstrate exact compliance and, where less than full-compliance exists, to provide meaningful explanations. This seems especially important given apparent delays in making progress on many requirements in the first year.

The Province adopted a more robust approach to the Interim Progress Report provided in January, and also scheduled follow up briefings with the DRC in February to answer any questions and provide further information.

4. I recommend that the Province work toward developing qualitative and/or quantitative indicators for monitoring and evaluating increased first voice participation and collaboration among partners.

As should be evident from the content of the Progress Report, the Province has been able to significantly increase first voice participation.

5. The Province should examine options for recognizing formal supported decision-making arrangements in legislation. There is a leadership role for the executive branch of the Nova Scotia government, including the public service on this fundamental human right.

Progress on this item is reviewed in the Progress Report.

6. I strongly urge that the Province explain and demonstrate how it will achieve these key requirements, and meet their obligations on deinstitutionalization, within the five-year period.

This is reviewed in the Interim Progress Report and Progress Report.

7. Recognizing the need for concerted action on home share places in communities of choice, I recommend that the Interim Progress Report for January 2025 include a detailed account of what steps the Province has taken to get the plans for home share back on track.

Progress on this item is reviewed in the Progress Report.

8. Identifying delays in procuring services to implement the Remedy requirements, I recommend that the next Interim Progress Report, January 2025, include a detailed account of what steps the Province has taken to get procurement planning and management practices and timely decision-making back on track.

The timing of the procurement process continues to affect the ability of the Province to meet specific deadlines contemplated by the Remedy. However, given the definition of “substantial progress” and the parties’ agreement that no individual timeline is critical to ultimately remedying the discrimination, the Province is confident that the procurement process will not prevent the discrimination from being remedied within the timeframe contemplated by the Order. A more detailed explanation is included in the Annual Report.

9. To comply with reporting obligations of the Order, I recommend the Province provide consistently across all items and particularly for any not in exact compliance, reasons for the partial-compliance, the measures the Province plans to implement, and when they plan to do so to ensure compliance within the timeframe. Going forward, the forms could have an agreed upon template with these reporting requirements included.

This feedback has been incorporated into the Province’s approach to the Interim and Annual Progress Reports.

10. To enhance transparency and accountability, I recommend the Province ensure for Interim Progress Reports and Annual Progress Reports that all supporting documents are dated, acronyms within each document explained, and lead responsible officials identified.

We would note that, in many cases, the supporting documents are prepared for other purposes and simply disclosed as part of the Progress Report, rather than being drafted specifically for the Monitor. However, where possible this feedback has been incorporated.

11. For remedy requirements where supporting documentation relies on confidential materials, I recommend the Province provide (without disclosing any personal information, jeopardizing IT security or revealing the provision of advice, as per the Freedom of Information and Protection of Privacy Act) a high-level synopsis of information pertinent to that corresponding item. Such

information could include a summary of statistics, general policy statements, program overviews, appeal processes and accountability measures.

We note that both the Monitor and the DRC have full access to any confidential documents. It is unclear what real value would be added by summarizing those documents further. However, if on a case-by-case basis the Monitor or the DRC see value in summarizing a specific document, we can consider that request.

12. As a matter of best practice in collaboration, the Province should notify the Disability Rights Coalition in a timely manner and consult in a meaningful manner on any items in which “compliance in substance” is or appears likely to be the status of an item under the Remedy in all subsequent Reports.

See response under Recommendation 1.

13. On Disability Support Program eligibility policy, the Province should provide public documentation in subsequent progress reports, which demonstrates the DSP policy, application process, operational procedures, and related screening tool(s) are in accordance with the Social Assistance Act. To add greater clarity on the DSP eligibility policy, the Province establish a program pathway that treats all applicants with disabilities fairly and equitably, regardless of the nature of their condition or impairment.

Progress on this item is reviewed in the Interim and Annual Progress Report, and was the subject of meetings with the DRC in February 2025.

14. I recommend that the Parties review the remedy requirements for Year 2 to clarify expectations and confirm a shared understanding around the relevant indicators, data disclosures, and outcomes for these steps.

See response under Recommendation 1.

I appreciate the Province providing an overall response to the 14 specific recommendations in my Year 1 Monitoring Report. Some of the above responses are perfunctory. For Year 2 and subsequent years, I would welcome that the Province’s response on each recommendation be thoughtful and focused. Consider these remarks, then, as a recommendation on how to respond to recommendations.

5. Expert Monitor Assessment of Year 2

5.1 General Approach

In accordance with the Agreement, within 60 days of receiving an Annual Progress Report from the Province, the Expert Monitor is to provide all Parties with a Monitoring Report.

MONITORING REPORT 2024-25: GAINING TRACTION

The Monitoring Report is to do six things. Firstly, to review and comment on the accuracy of the data provided by the Province with respect to the Agreement.

Secondly, with respect to the indicators, timeframes, targets and outcomes for the relevant year, and any adjustments or changes to these, review, and comment on whether the Province is complying.

These annual indicators, timeframes, targets and outcomes serve a number of important functions. They depict desired states of affairs mutually agreed upon by the Parties in reference to key values and principles of human rights. As such, they are a source of legitimacy, which justify the resources and activities devoted to the remedy. Moreover, these annual indicators and timelines serve as guidelines for action and as public metrics by which people within government and those in community can track and assess developments. That these annual targets, and outcomes and timelines are real is apparent by the array of decisions, undertakings, roles and documentation intentionally directed toward the practical realization of them.

Thirdly, if the Province is not in exact compliance, I am to assess whether there has been “*compliance in substance*” and assess the reasons given by the Province for the less than full-compliance.

The Agreement anticipates the possibility of adjustments and changes in measures used to implement requirements of the Remedy. Accordingly, I am to assess whether the Province has adequately considered and addressed all alternative measures; and assess whether these alternative measures are equally or more efficacious in achieving the outcomes. Compliance in substance means the outcome has been achieved but through another means than agreed upon by the Parties in the Interim Settlement Agreement.

Fourthly, where the Province is not in exact compliance or in compliance in substance with any provision, I am to assess whether the Province has made substantial progress toward achieving that provision of the Agreement and toward remedying the systemic discrimination.

Fifthly, the Province can justify its failure to comply with or make substantial progress with a provision by claiming that this failure is due to factors “*outside of its control.*” To make this claim, the Province must show that it has considered alternative means to achieve compliance to avoid factors outside of its control. Where the Province makes this justification in its Progress Report, I am to assess whether the factors outside of its control are demonstrated in a manner consistent with the Agreement.

Finally, as Expert Monitor, I have the authority to make recommendations in two broad areas. On the accuracy and completeness of data provided by the Province, I can make any necessary recommendations to the Parties for further disclosure to monitor compliance and progress fully and properly with this Agreement. On continuing to make substantial progress, I can make recommendations as to steps the Province should take to ensure such progress continues.

I offer recommendations in this as well as in other sections this report and provide a summary of all my recommendations in section 11.

5.2 Overall Representations

This part presents a high-level summary of how the two Parties to the Settlement Agreement and Human Rights Remedy – the Province and the DRC – represent the status of the remedy work. I then briefly present my own overall assessment.

The Province characterized its first year as one where the focus was on implementation planning, “maintaining stability in the existing system to endure people are supported and safe, while at the same time building a new system.” According to the Province, “in year one, we had to determine exactly how – designing the tools, securing the resources and making detailed and informed plans to get us from point A to point B in piece.”³

I characterized the first year as a mixed record with the need for getting on track.

The Province characterizes their second year of the remedy plan as one where the focus has “shifted to putting the foundational elements in place to support a new system whose structures and approaches are human rights based.” The Province points out that they adopted a “stronger focus on engagement with first voice and community partners, including the Disability Rights Coalition.”⁴ One example is appointing 64 citizens to the newly established four Regional Advisory Councils. The Province also notes putting in place foundational elements such as finalizing facility closure agreements with operators, recruiting disability supports professionals in the regional hub sites, and launching the Remedy Workforce Strategy.

The Province acknowledges there have been challenges in this second year. They devote a considerable portion of their Annual Progress Report on the nature of four types of challenges and outline their responses in mitigating them.⁵ Even with such challenges, the Province achieved several important results in Year 2 and claim they “have built significant momentum over the last two years.”⁶

The DRC has a markedly different and more critical assessment of where things stand at the end of Year 2. In their submissions, the DRC they draw attention to “significant delays” in implementing several remedy requirements. The DRC asserts, the Province has “fallen far behind” a number of critical and required Remedy timelines.⁷ The DRC notes instances of the “belated compliance” of Year 1 requirements occurring in Year 2. They also express concern over how the Province intends “to catch up on delays” in order to meet Remedy requirements and timelines.⁸

Across their differences, I observe that both Parties agree much work remains to be done; that challenges will keep arising; and that the outcome is transformational change. Both Parties refer

³ 2025 Annual Progress Report, p. 4.

⁴ 2025 Annual Progress Report, p. 7.

⁵ The 2025 Annual Progress Report discusses these challenges on pages 10-21.

⁶ 2025 Annual Progress Report, p. 22.

⁷ DRC Submissions, June 27, 2025, p. 2 and 6.

⁸ DRC Submission, June 27, 2025, pp. 4-6.

to the Premier's public apology made in November 2023 to people with disabilities.⁹ As well as being a highly symbolic political commitment, the Premier's words represent an ongoing standard for governmental leadership and public accountability moving ahead.

Most of the Year 1 requirements, which I previously assessed as "slight progress," are now advancing tangibly with an adequate ("sufficient progress") or considerable ("significant progress") degree of effectiveness. Belated progress, undoubtedly. Incomplete compliance, certainly. A degree of progress, nonetheless. This is apparent in Year 2 performance, as I will discuss more fully later in this Report.

Therefore, at the end of Year 2, there are signs of some progress, though the momentum is not as rapid as the Province suggests. Nor are all the "critical conditions for success in place."¹⁰ In this second year of implementing this Human Rights Remedy, there are notable examples of building capacity for moving in the direction of system transformation. In a complex and vast undertaking as this, there also are challenges and delays in delivering new programs and services to individuals in local communities.

My overall assessment, then, is that the Province is gaining traction.

5.3 Update on Year 1

In my first report, last year, I reviewed and assessed the 90 requirements spanning the two reports for February-June 2023 (21 requirements) and April 1, 2023-March 31, 2024 (69 requirements). I concluded that 17 provisions were in "exact compliance," 2 items in "compliance in substance" and 71 of some gradation of "substantial progress." I have reviewed the status of these 90 remedy requirements again for this report. Details of my updated assessments of each requirement are in Annexes A and B to this report.

Table 1 offers an update of the status of the 21 remedy requirements for the period February-June 2023.

Table 2 provides an update on the 69 remedy requirements for Year 1, April 1, 2023 to March 31, 2024.

Table 3 aggregates the status assessments by the Province and the Expert Monitor.

For easy reference, for each table the assessments from my 2024 report are included in square brackets.¹¹

⁹ See <https://www.disabilityrightscoalitionns.ca/2023/11/09/disability-rights-coalition-ns-welcomes-premiers-apology/>

¹⁰ 2025 Annual Progress Report, p. 3.

¹¹ I do the same in Annexes A and B to this report.

**Table 1: Comparing updated assessments of the remedy results
February 1, 2023 – June 30, 2023**

Remedy Requirements (21)	Updated status reported by the Province May 2025	Updated status assessed by Expert Monitor July 2025 [2024]
Exact compliance	5	7 [5]
Compliance in substance	-	-
Complete	16	
Substantial progress		12 [10] Significant progress = 4 [3] Sufficient progress = 8 [7]
Slight progress	-	2 [6]
Total	21	21

In both their *Interim Progress Report* and *Annual Progress Report* for this year, the Province introduced a new term to describe progress for remedy requirements, that is, “Complete.” I do not know if the DRC and Province discussed and have agreed on this term and its definition. It is not a term contained in the Interim Consent Order. Its use here is puzzling given that the Province indicated in correspondence to me that they do not wish to create new compliance language.¹² Nor is any explanation given in the reports. Appropriate and accepted terms already exist for describing the achievement of remedying discrimination within the timeframe, namely, exact compliance and compliance in substance. I would not want to see abandoning the standard of exact compliance, when and where that is the fitting assessment of progress for any given requirement.

As I observed in my first report, terminology must tell noteworthy differences in degrees and kinds of progress. That is why I took the term substantial progress and gave it conceptual and analytical nuance to distinguish significant, sufficient and slight progress. These have the merit of relating to the overall goal of remedying discrimination against people with disabilities in Nova Scotia. By comparison, the word “Complete” as applied by the Province for everything not in exact compliance is like a blanket, warmly covering all manner of results while obscuring particular details and important differences.

In this update on the status of the 21 remedy requirements for the February to June 2023 period, I find positive movement on several items. This is shown by the modest increase in the number of

¹² Letter to the Monitor, May 30, 2024, p. 2. See also the DRC Submission, June 27, 2025, p. 6.

MONITORING REPORT 2024-25: GAINING TRACTION

requirements now in exact compliance (from 5 to 7) as well as those in significant progress (from 3 to 4), accompanied by a decline in the number of requirements achieving just slight progress (from 6 to 2). The requirements with slight progress concern development of the multi-disciplinary allied health team and inter-agency development work (#12) and the crisis prevention and community response capability in place (#13). The Province has gained traction, though work remains in advancing the targets, indicators and outcomes for this period.

Turning to Year 1, April 1, 2023 to March 31, 2024, Table 2 gives an update on the 69 remedy requirements.

**Table 2: Comparing updated assessments of the remedy results
April 1, 2023--March 31, 2024**

Remedy Requirements (69)	Updated status reported by the Province May 2025	Updated status assessed by Expert Monitor July 2025 [2024]
Exact compliance	12	18 [12]
Compliance in substance	1	- [2]
Complete	47	-
Substantial progress	9	43 [18] Significant progress = 20 [2] Sufficient progress = 23 [16]
Slight progress	-	8 [37]
Total	69	69

Overall, I find advancement for most Year 1 remedy requirements by the end of Year 2. Key findings are as follows:

- Notable increase in Exact Compliance remedies from 12 to 18 requirements.
- Major increase in Substantial Progress remedies from 18 to 43 requirements.
- Extensive decline in Slight Progress remedies from 37 to eight requirements.

One may infer that of the “Complete” results identified by the Province some are in Exact Compliance and most are in substantial progress, either significant or sufficient progress.¹³

¹³ Of the 69 requirements, with 12 already in exact compliance, 57 could conceivably have changed in one form or another. Assessments for 12 requirements did not change in Year 2, leaving 45 requirements that did change from their Year 1 status. Of these, 32 of 45 (or 71 percent) changed from slight progress to sufficient progress or significant progress. Thus, most of the movement in Year 2 by Year 1 requirements came from a minimal starting place at the end of Year 1. This is evidence of gaining traction.

MONITORING REPORT 2024-25: GAINING TRACTION

The Province did assess nine remedy requirements to be in substantial progress. For these, the *2025 Annual Progress Report* detailed contingencies that affected implementation of targets and timelines. As examples, the Province noted there were challenges in the recruitment and training of skilled personnel (items 6, 25 and 38); unknown factors related to system transformation (items 54 and 55), and, complexities around procurement and contract negotiations (items 56 and 59). Helpfully, the Province described mitigation strategies, such as the development of interim measures, for addressing these challenges and resulting delays.¹⁴

At the end of March 31, 2025 (Year 2), then, a number of requirements from Year 1 continue to be in progress.¹⁵

Table 3 gives a summary of all 90 requirements spanning the periods February-June 2023 and April 1, 2023-March 31, 2024.

**Table 3: Comparing updated assessments of the remedy results
February 1, 2023--June 30, 2023 and April 1, 2023--March 31, 2024**

Remedy Requirements (90)	Updated status reported by the Province May 2025	Updated status assessed by Expert Monitor July 2025 [2024]
Exact compliance	17	25 [17]
Compliance in substance	1	- [2]
Complete	63	-
Substantial progress	9	55 [28] Significant progress = 24 [5] Sufficient progress = 31 [23]
Slight progress	-	10 [43]
Total	90	90

For the periods of February-June 2023 and Year 1, I determine the Province as having achieved at this time **exact compliance on 25 remedy requirements**.

¹⁴ *2025 Annual Progress Report*, pp. 23 and 36. The Province did not invoke the provision that factors outside of their control resulted in or were responsible for partial-compliance. This represents a recognition by the Province that it has the capacity to implement the requirements of the Interim Settlement Agreement.

¹⁵ These are remedy number 6, 19, 25, 26, 38, 53, 54, 55, 56, and 59. See *2025 Annual Progress Report*, pp. 11-12, 14, 16-17 and 20.

I determine the Province has now made **substantial progress on 55 remedy requirements**. That is, tangible improvements and advancements towards the intended outcomes, obtained to a considerable (significant) or adequate (sufficient) degree.

I further find that the Province has attained **slight progress on 10 requirements**. Last year, I assessed nearly half of all the requirements (43 of 90) to be of only slight progress. Those numbers have dropped significantly to 10 of 90. I take a closer look at those remaining at slight progress in section 7.3 of this Report.

Finally, on the supporting documentation provided by the Province on these periods, there has been a marked improvement in the both the overall amount and quality of information, and in the provision of public sources with far less of a reliance on confidential documents. However, on certain items, supporting data and details were incomplete or absent.¹⁶

5.4 Overview of Year 2

I present here general summary comments about Year 2. I give detailed remarks on a range of characteristics of Year 2, in sections 6, 7 and 8 of this report. See also Annex C to this report.

Of the 28 requirements for Year 2, the Province reports exact compliance on 20 and substantial progress on the other eight. The Province states it “anticipates the discrimination will be remedied within the require timeframe.”¹⁷

My assessment of Year 2 has nuances with details and differences in the nature and degree of achievements.

I determine that **12 of the remedy requirements are in exact compliance**.¹⁸

I further establish that **10 remedy requirements are in substantial progress**. That is, tangible improvements and advancements towards the intended outcomes, obtained to a considerable degree of significant progress for two requirements¹⁹ and to an adequate degree of sufficient progress for eight requirements.²⁰

One of the remedy requirements for Year 2 (item #3) is complex with multiple elements. Overall, I conclude that **five remedy requirements demonstrate slight progress**.²¹

On the question of supporting documentation and explanations for reporting results, the Province offers additional context for decisions and outcomes and additional information on mitigation strategies for addressing obstacles and challenges in implementation. I concur with the DRC’s observation that, “the Province’s Annual Report for Year Two contains more detailed information about its progress regarding the requirements than the Annual Report submitted for Year One. The Province’s Year Two Report includes more fulsome explanations of the reasons

¹⁶ I discuss this in section 7.3 of this Report and in the Annexes.

¹⁷ *2025 Annual Progress Report*, p. 2.

¹⁸ Year 2 requirements number 1, 2, 7, 8, 9, 16, 17, 23, 24, 26, and 27.

¹⁹ Requirements 20 and 28.

²⁰ Requirements 4, 5, 6, 13, 18, 19, 22 and 25.

²¹ These are requirements 3, 10, 11, 12, 14 and 21.

for non-compliance and its strategies for overcoming challenges than the previous year's Report."²²

I commend both Parties for engaging in more meetings and discussions this year. For example, following the release of the January 2025 *Interim Progress Report*, the Parties met in February resulting in the provision of further information by the Province in response to a series of questions and comments by the DRC concerning that report and the data table.²³ Through such constructive dialogue, which can involve sharing perspectives and building trust, both Parties contribute to the actualization of the Human Rights Remedy through relational implementation.

To cite an example, in comments from the DRC to the Province, one was that “the documents are not coming out in plain language or in a way that is accessible even to the public.” In response, the Province wrote, “The Interim Order requires disclosure of a large volume of documents which are prepared for many purposes and for many audiences – typically not for the public *per se* (though some of course are written for a public audience.) We are committed to disclosing all relevant documents, not merely that ones that have been written in plain language with the public audience in mind. That said, we are always happy to collaborate to find plain language ways of explaining any particular document where requested.”²⁴

I believe there is an opportunity here for enhanced cooperation and effective communication, which goes beyond placing the onus on the DRC or first voice individual and groups to request a document to be in plain language.

From both an accessibility and human rights perspective, the Province ought to be more proactive and systematic in producing inclusive materials.

I therefore recommend that the Executive Director of the Remedy work with the DRC, People First of NS and Inclusion Nova Scotia to develop and implement an action plan for the routine production of plain language documents related to the Human Rights Remedy. One option could be for DSP to contract with People First and/or Inclusion Nova Scotia to work with provincial officials along with the Disability Advisory Committee.

6. Foundational Issue: Eligibility for the Disability Support Program

The Nova Scotia Court of Appeal's finding of systemic discrimination hinged in large measure on its finding that the Province's Disability Support Program (DSP) policies and practices disregarded the legal obligations of its governing legislation, the *Social Assistance Act*, RSNS 1989, c 432. The Court contrasted this with the Province's adherence to similar legal obligations in the *Employment Support and Income Assistance Act*, SNS 2000, c 27, the social assistance program for persons without disabilities or for those who did not require supports to live in

²² DRC Submission June 27, 2025, p. 4.

²³ “Follow-Up Information – January 2025 Interim Progress Report,” Email from Maria Z. Medioli to Expert Monitor and others, April 22, 2025.

²⁴ “Response to DRC Questions,” p. 7.

community. In particular, the DSP policies and practices treated some people with disabilities as ineligible for assistance, without any legal basis for doing so. Eligibility for the DSP is a core or foundational issue in the finding of systemic discrimination and therefore, of the remedy.

6.1 Social Assistance is a Legal Entitlement

In Year 1, the remedy required the Province to review and update DSP eligibility policy in accordance with the *Social Assistance Act*, including rescinding Eligibility policy sections 9.3 and 9.4. In my first Monitoring Report, I concluded that the Province had achieved sufficient progress on this requirement because it has removed sections 9.3 and 9.4 and was in the process of reviewing the existing policies, standards and guidelines.

In Recommendation #13, I recommended the Province provide public documentation in subsequent progress reports, which demonstrates the DSP policy, application process, operational procedures, and related screening tool(s) are in accordance with the *Social Assistance Act*. I also recommended, “To add greater clarity on the DSP eligibility policy, the Province establish a program pathway that treats all applicants with disabilities fairly and equitably, regardless of the nature of their condition or impairment.”²⁵

In their response to my recommendations, the Province claimed it “has largely been able to act on each recommendation.” On this recommendation specifically, the Province indicated, “Progress on this item is reviewed in the Interim and Annual Progress Report, and was the subject of meetings with the DRC in February 2025.”²⁶

In both its Year 1 and Year 2 submissions, the DRC has emphasized the importance that DSP Policies be updated, revised and implemented to align with the *Social Assistance Act* and the Remedy. The DRC has provided me with detailed input concerning eligibility and entitlement problems in current DSP policies and practices. In response to the *2025 Annual Progress Report*, the DRC, in its submissions on June 27, 2025, stated, “None of the current DSP Policy Manuals regarding eligibility have been revised in alignment with the SAA and the requirements of the Remedy.”²⁷

I have also received information about ongoing discussions between the DRC and the Province about these concerns. Specifically, the Province’s plans with regard to review and revise its DSP policies and other documents addressing eligibility to ensure they are fully compliant with “the Remedy requirements, the SAA, and the Court of Appeal’s ruling interpreting the Human Rights Act and the SAA.”

The DRC is of the view that it is essential the revised eligibility policy be in writing: “The Remedy is a ‘rights document’. The Remedy requires that rights be explicitly stated in writing so that never again will the disregard for legal requirements and protections be incorporated into the policies that guide the people implementing these programs.”

²⁵ *Getting on Track*, p. 50.

²⁶ Letter to the Monitor May 30, 2025, p. 5.

²⁷ DRC Comments, June 27, 2025, pp. 4-5. This is in regards to requirement number 44 in Year 1.

Progress appears stalled on this foundational issue, one central to eradicating systemic discrimination and implementing the Human Rights Remedy. Social assistance in Nova Scotia is a statutory entitlement, a benefit provided by law.²⁸ Even as a right, the determination of eligibility concerns assessing actual need as demonstrated in individual cases. Interpretation and discretion will remain in one form or another.²⁹ A risk is that eligibility can serve improperly as a gatekeeper at odds with the right to equality and the transformative process underway; historic discrimination based on type of disability can unwittingly continue. An important result of the Remedy is the timely and predictable provision, and the respectful administration of assistance that meets the diverse needs of persons with disabilities in Nova Scotia.

As Expert Monitor, my role is well defined and, on this issue, my standpoint is as follows. It is correct, as the Province says, that I cannot add additional work above the Human Rights Remedy requirements other than requiring additional reporting. In addition, the DRC is correct in that their position on this matter is consistent with the plain language of the Settlement Agreement and its status as a legal order. None of my Year 1 recommendations added new work. My aim here is to clarify the relationship of the human rights principles and the provision of accommodative assistance to persons with disabilities in Nova Scotia. I am responsible for monitoring and assessing the incorporation and realization of human rights principles in the actual implementation of the Remedy.

The review and clarification of DSP eligibility requirements is a remedy requirement. It is difficult to see what the barriers are to the review and revision of these policies and practices to ensure they accord with the Remedy, the *Social Assistance Act*, and the *Human Rights Act* as interpreted by the Court of Appeal. My evaluation would be easier if the Province had reported on its progress.

Removing sections 9.3 and 9.4 were necessary remedial actions. Although, by themselves, they are insufficient responses to modernizing DSP eligibility processes. Beyond a semantic alignment with specific requirements is the matter of a substantive alignment, one that addresses pre-existing barriers and inequitable living conditions for people with disabilities, thus advancing progress toward the overall Remedy.

One of the substantial shifts resulting from the DRC's successful systemic complaint is the recognition that accommodative social assistance is a legal entitlement held by persons with disabilities. The Province's duty to provide this assistance in a non-discriminatory manner is now recognized as a legal obligation rather than a matter of pure policy choice. The governing legal principles and remedial terms, as a result, must inform the compliance and monitoring processes. The decisions of the Nova Scotia Court of Appeal and the Board of Inquiry (2022) take precedence and "any question as to the nature of the discrimination will ultimately be resolved by reference to those legal decisions, rather than the terms of this Agreement."³⁰

²⁸ Court of Appeal, paragraphs 170 and 171; Document 194, p. 9.

²⁹ Areas of discretionary decisions in the administration of social assistance include emergency placements for services, residents of another province, persons with acquired brain injury, and exceptions around the age criteria.

³⁰ Interim Settlement Agreement, Part A, at paragraph 2.

6.2 Post-Report Correspondence

The Interim Settlement Agreement requires the Province to report on its progress in meeting the remedy requirements twice a year and provides the DRC have the opportunity to comment on the report. These reports and comments are to allow the Monitor to review, comment and assess on compliance and to keep the public apprised of the progress made on rectifying this systemic human rights infringement. As befits this collaborative process, the Agreement does not provide for further responses or rebuttal. While acknowledging this framework, the Province wrote to me on July 11, 2025 stating its intention not to respond to or rebut the DRC's comments but "to comment on the process itself, and the Monitor's role." The letter makes three points: "No indicator, target, or timeline is mandatory"; "The Monitor cannot create new requirements"; and "A lack of evidence is not evidence of a lack." The DRC wrote to me on July 17, 2025, responding on each of these points.

My role is to monitor, not adjudicate; this is a collaborative rather than an adversarial process. The issues raised in this correspondence, however, are central to my function and encroach on my ability to carry out my responsibilities. I offer this perspective with a view to reaffirming the common ground between the Province and the DRC on the nature of their negotiated agreement resulting in them applying for the interim remedy order on a consent basis. I refrain from entering the fray on the disagreements between the parties in this correspondence except as they arise in my comprehensive review and assessment set out in other sections of my report.

As set out in s. 10, the Agreement legally requires the Province "to remedy the discrimination as recommended by the Review Team, and specifically, in accordance with the indicators, timeframes, targets and outcomes identified in Appendix A to this Interim Settlement Agreement." The section uses the mandatory term, "shall". My main function is to review and comment on whether the Province is in compliance with the indicators, timeframes, targets and outcomes identified in Appendix A (ss. 16 (b) (ii)). In order to assess compliance, I can comment on the adequacy of data and recommend further disclosure (ss. 16 (b) (ii)). I am not empowered to make new requirements, but I can "Make any recommendations as to steps the Province should take to ensure that substantial progress continues to be made" (ss. 16 (b) (iii) 7). I have no power to compel the Province, only to assist through providing suggestions.

The Agreement recognizes that it may be possible for the Province to remedy the discrimination without achieving exact compliance with every remedy requirement. It is also possible that even with exact compliance on every requirement, discrimination may not be eliminated, hence the status of the agreement as an "interim remedy order". My responsibilities focus on reviewing, assessing compliance with the remedy requirements contained in the Agreement, and it is clear from the Province's reports and the DRC's comments that they continue to share this focus. In its July 11 letter to me, the Province invites the DRC for further input and dialogue on its concerns over lack of evidence about the impact of delays in implementation. I agree there are benefits to gain through enhanced collaboration.

A critical example of the need for further collaboration relates to the Service Request List. Frankly, I have concerns about the Province's decision to stop adding DSP applicants to the

Service Request List because being referred to a DSP Connector and being offered services does not appear to be equivalent to receiving accommodative social assistance. This may likely be an instance of transitioning from the existing system to the new one. The Province can change the terminology but must continue to track the delay between when a request for assistance is received and when it is received. It may also be useful to track referral to the DSP Connectors as one-step toward the provision of accommodative social assistance.

As the Expert Monitor, I need to be informed on the number of people accessing appropriate services in the timeliness of receipt of this assistance.

Accordingly, I recommend that the Province report on what mechanisms have been put in place to replace the Service Request List; and strongly encourage that the Province collaborate with the DRC to ensure the alternative is fully transparent.

6.3 A Review of DSP Policy Manual

In their submission, the DRC included copies of the DSP Program Policy, Level of Support Policy, Financial Eligibility Policy, Basic and Special Need Policy, and Appeal Policy.

On this issue of eligibility determination, I reviewed the documents with three questions in mind.³¹

1. Do these policy manuals explicitly contain a human-rights approach to the provision of services to persons with disabilities?
2. Do these policy manuals reflect an understanding of disability as resulting from “the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others”?³²
3. Do the policy manuals identify the statutory obligations and responsibilities of the Province in remedying systemic discrimination by promoting and protecting the human rights of applicants and participants of DSP services?

Specific references to the Human Rights Remedy are notably absent from the “policy statement” and “policy objective” sections of these DSP manuals. There is no mention of such principles as accessibility, personal dignity, social security or community inclusion in the objectives of the Financial Eligibility Policy document. There is no statement, which asserts in plain language the principle that eligibility itself is determined separately from the availability of departmental resources.³³ Neither do we find mention for a person eligible for DSP support of their right to

³¹ See the Court of Appeal decision, paras. 170-71; 2025 *Annual Progress Report*, p. 11; and Document 154, pp. 4, 12, 16 and 17.

³² This is the concept of disability contained in the United Nations Convention on the Rights of Persons with Disabilities, which also appears in Document 157, p. 17. A similar definition is in the *Nova Scotia Accessibility Act*, SNS 2017, 3(1) (i).

³³ Section 5.6.1 of the Financial Eligibility Policy, which concerns the initial eligibility amount calculation for participants, does say this: “Once an applicant has been determined to be eligible for the DSP (now a DSP participant)), through completed functional and financial assessments, assistance will be provided to them based on their eligibility amount. For a participant to receive financial assistance the cost of services and supports

assistance in a community of choice. Nor is there much consistency in references to the rights of applicants and participants more generally. The Level of Support Policy does speak, however, of participant's rights and the role of supported decision-making. The accountability section across these policy manuals concentrates on financial approvals and fiscal sustainability, with no references to the Human Rights Remedy or human rights principles more generally.

The image of disability contained in the documents tend to be individualistic in orientation.³⁴ The focus is on functional limitations of a person in their activities of daily living, informed by medical diagnoses of various disorders.³⁵

Notwithstanding the significance of complex needs,³⁶ a social orientation with attention to environmental factors³⁷ and/or a human rights model of disability are largely missing from these departmental documents.³⁸

People with disabilities appear as applicants to or participants of DSP services. While this is perhaps understandable language administratively, it omits an official recognition and organizational appreciation of these people as rights-holders³⁹ and of government officials as duty-bearers. This omission underscores the importance of ensuring “staff have both the skills and understanding to drive the kind of cultural change required in a human rights approach to

provided to them must exceed their income.” The policy statement in the Basic and Special Need Policy reads: “Once an applicant becomes eligible for the DSP, they are eligible for basic support needs, which include shelter, food and clothing.”

³⁴ This is not to criticize individualized planning and support or individualized funding, but rather is a comment on the understanding of disability. Indeed, the Remedy calls for person-directed decision-making whereby the individual is actively involved in the making of decision that affect them, their support networks and their living conditions. Concerns over an individual model of disability include reproducing traditional notions of normalcy, which can then cause stigma and low self-esteem; placing undue expectations on the individual to overcome barriers; and paying insufficient attention to the larger social and economic structures that shape people's lives.

³⁵ These diagnostic criteria include mental health, neurocognitive, neuro-developmental, congenital and genetic disorders. Document 117, p. 6. See also Document 154, pp. 8 and 12, on the outdated language of a medical model of disability.

³⁶ It is important to acknowledge that some people with disabilities require “a high level of support with activities of daily living, personal care and some medical interventions,” which may involve access to nursing and allied health services. Document 117, pp. 9-10.

³⁷ Environmental factors include attitudes, technologies, information and communication, the design of building and layout of public spaces, policies, programs and administrative procedures, and discriminatory behaviours. See the *Accessibility Act*, SNS 2017, c 2, section 3.c.

³⁸ The Appeal Policy sets out more fully than the other DSP policy documents a series of rights and responsibilities. The person has a series of procedural rights related to their completed application for receipt of assistance. These procedural rights include the right to a decision review of the original determination, an appeal board hearing, notification in writing of any decision, to discuss the decision with their care coordinator, to provide supplemental information, assisted by a representative, and to a fair and timely review. See also the DSP Program Policy, section 13.2.

³⁹ Both applicants and participants of the DSP programs are rights-holders, though not identical sets of rights in relation to social assistance. Certain rights under the social assistance regime are categorical and specific to participants.

disability support.”⁴⁰ When applicants meet eligibility conditions,⁴¹ they shall receive benefits as a matter of right.

For persons with disabilities in Nova Scotia, this presumptive right to social assistance based on need is crucial for four reasons.

1. People with disabilities disproportionately live in poverty. In the words of the Nova Scotia Court of Appeal, they are among the “poorest citizens.”⁴²
2. People living with disabilities continue to face attitudinal and environmental barriers that prevent them from achieving equal participation in society.
3. People with disabilities are subject to multiple types of discrimination.⁴³
4. The presumptive right to social assistance is in accordance with the *Social Assistance Act* and the Human Rights Remedy.

I conclude that the current versions of DSP eligibility-related policy manuals are deficient as guiding frameworks for protecting the rights of persons with disabilities in the province.

If the Human Rights Remedy does not show up in these working documents, how can we ensure they show up in the work of managers and staff?

To create a more robust and consistent application of human rights principles to the provision of social assistance services, further changes by the Province to these eligibility policy documents are warranted.

Building on Recommendation #13 from my Report last year, I am adding, in this Report, more specificity to promote timely implementation. I strongly recommend that in updating these manuals the Province undertake the following. In the policy statements, contain information about the Human Rights Remedy; in the policy objectives, include reference to guiding principles and values of human rights; in the procedures and practices, identify specific rights and duties relevant to the topic at hand; and, in the accountability sections, refer directly to the Remedy, noting pertinent outcomes where appropriate.

This includes, among other items, the Excess Shelter Policy in the DSP’s Basic and Special Needs Policy.⁴⁴ To accord with the Remedy, the Excess Shelter Policy should uphold the principle that a person meeting the criteria will receive the shelter expense amount, as per their household size, as a right to accommodative assistance.⁴⁵

7. Specific Observations on the Year 2 Reports

⁴⁰ 2025 Annual Progress Report, p. 11. On the rights of persons with disabilities, see Document 154.

⁴¹ These eligibility conditions for social assistance are age, residency, disability, income and other applicable assets.

⁴² Nova Scotia Court of Appeal, paragraph 170.

⁴³ These first three points come from the preamble of the Nova Scotia *Accessibility Act*, SSN 2017.

⁴⁴ Document 166.

⁴⁵ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 31, 2025) (June 2025), pp. 19-20.

MONITORING REPORT 2024-25: GAINING TRACTION

This section offers comments on the *Interim Progress Report*, which came available January 15, 2025 and the *Annual Progress Report* for Year 2, published May 30, 2025.⁴⁶

I shall begin by making three comments on the general nature of the Year 2 requirements. The first and most elementary observation is that there are 28 remedy items for Year 2, far fewer than the 69 requirements for Year 1. The second is that a large majority of the requirements are relatively straightforward in that they contain essentially one main activity. A few requirements (# 4 and #10) have a few activities and one requirement (#3) is highly complex, containing 14 components for action. The third comment concerns the ability to monitor progress. While several requirements have specific and measurable indicators for the April 2024 to March 2025 timeframe,⁴⁷ several other requirements are less precise, referring to process-oriented activities such as “updates”⁴⁸ or “reviews.”⁴⁹

Combined with the foundational work from Year 1, these characteristics of Year 2 requirements in all probability provided an encouraging context for the Province in planning, implementation and reporting.

7.1 *Interim Progress Report, January 15, 2025*

Table 4 compares the status assessments by the Province and myself as Expert Monitor from the January 15, 2025 *Interim Progress Report* on Year 2.

Table 4: *Interim Progress Report: January 15, 2025*

Items (28)	Status reported by the Province	Status assessed by the Expert Monitor
Exact compliance	20	12
Compliance in substance	--	--
Substantial progress	8	10 Significant progress = 2 Sufficient progress = 8
Slight progress		6
Total	28	28

⁴⁶ Available at <https://humanrights.novascotia.ca/remedy#progress>

⁴⁷ Examples for Year 2 are requirements 2, 4, 7, 8, 9, 16 and 28.

⁴⁸ Year 2 requirements 1, 14, 19, 20, 21, and 23.

⁴⁹ Year 2 requirements 25, 26, 27, and 28, are further examples of indicators that lack specific and measurable indicators.

MONITORING REPORT 2024-25: GAINING TRACTION

Of the 28 remedy items for Year 2, the Province presents an account of “exact compliance” for 20 of the 28 requirements.

In reviewing the 2025 *Interim Report* and associated documentation and metrics (see Annex C), I determined the Province was in exact compliance with 12 of the 20 requirements they had identified (43 per cent compared to the Province’s assessment of 71 per cent). Half of the requirements in exact compliance dealt with providing updates or reporting on particular activities.

I differ with the Province’s assessment on exact compliance with respect to the following requirements:

- Person Directed Planning tender awarded for Province wide Peer and Technical Support Program. (#5)
- 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. (#6)
- Update DSP client projection model using baseline numbers and provide assumptions, and outputs of the model (#14)
- Updated DSP policies and practices consistent with eligibility of shared services participants. (#19)
- Update as to development and implementation of new program policies including arrangements for triage and “immediate assistance” once found eligible. (#21).

For the first of these requirements, the Province provided a November 2024 training module and a January 2025 supported decision-making toolkit for all new hires by end of Year 2. It was unclear how or when this training material would be widespread and accessible to individuals, families, and service providers. I therefore designated this as significant progress.

For the second requirement, the Interim Report said the updated modelling outputs would be available as of March 31, 2025, yet provided no supporting documentation. Instead, I designated it as significant progress. For comments on the other requirements, see Annex C.

The Province assessed their performance as making “substantial progress” on the following eight requirements:

- “The Province will have carried out the following during the year....”⁵⁰ (#3)
- “Full implementation of new individualized funding infrastructure system/administration and support structure.” (#4)
- “Recruit, train and have fully operational 50 new LACs and 65 new IPSCs in accordance with approved fidelity criteria.” (#10)
- “Recruit next 30 new LACs and 15 new IPSCs (ex care Coordinator FTE).” (#11)

⁵⁰ This requirement contains 14 distinct commitments or items, which, for reasons of space, I do not list here. I discuss this requirement more fully in section 7.3 and in Annex C.

MONITORING REPORT 2024-25: GAINING TRACTION

- “New Provincial capability for technical and peer planning supports program operational.” (#12)
- “External evaluation team commences with individual outcomes monitoring with agreed new tool.” (#18)
- “Reduce waitlist for eligible applicants by implementation planning and support/Discretionary Funding for Waitlist “no service” group. Baseline of 589 versus: Waitlist/b no support group by n =289.” (#23)
- “First review of new governance structure.” (328)

For all but one of these requirements, I deemed they were making significant progress. The Province reported that, “Workforce is our most significant challenge with recruitment in particular presenting the biggest barrier to compliance with timelines.”⁵¹ I note for example, that the Province was undertaking steps to expedite recruitment working in collaboration with the Nova Scotia Government Employment Union.

Requirement 23 was the item I assessed to be sufficient progress rather than a more fulsome significant progress. The wait list for the “no service” group had reduced by 174 individuals or 60 per cent of the target reduction of 289.

Of the Year 2 requirements, #3 is the most complex. It contains 14 individual items from 3 a) through to 3 n). It has about 30 supporting documents. I offer a detailed analysis of this requirement in section 7.3.

7.2 *Annual Progress Report, April 1, 2024 – March 31, 2025*

Table 5 compares the assessments of the Province and the Expert Monitor of the 28 remedy requirements for Year 2. Information on my evaluation of each of the requirements for this period are in Annex C of this Monitoring Report.

Table 5: Update on Annual Progress Report, April 30, 2023 - March 31, 2024

Items (69)	Status reported by the Province	Status assessed by the Expert Monitor
Exact compliance	20	12
Compliance in substance	--	--
Substantial progress	8	10 Significant progress = 2 Sufficient progress = 8
Slight progress		6

⁵¹ Cover letter from Maria Mediloi, Executive Director, Department of Opportunities and Social Development, January 15, 2025, p. 2.

MONITORING REPORT 2024-25: GAINING TRACTION

Total	28	28
-------	----	----

The Province reports exact compliance on 20 of the human rights remedy requirements and substantial progress on the remaining eight. While these totals are the same as in the Interim Report, there are shifts in the status of two targets. The Interim Report assessed item 5 – Person directed planning tender awarded for province-wide peer and technical support program – to be in exact compliance. In the *2025 Annual Progress Report*, the Province has changed the status to substantial progress. The Province’s explanation for this change is worth quoting:

Inherent in a transformation of this magnitude is a high level of complexity and interdependency across component parts with many unknowns. As more detailed planning is undertaken and the Remedy is translated into project plans, new implementation considerations and requirements come to light – for example, new or different skills and resource needs, policy and program design objectives, or changes to the order and sequencing of activities.

To put it simply, we often don’t know what we don’t know – and we won’t until we undertake detailed planning to understand the impacts on other streams of work or other provincial government departments and programs are fully understood.⁵²

The status also changed for requirement #23, on reducing waitlist for eligible applicants by 289 individuals. In January, the Interim Report anticipated a reduction of 174 individuals, so substantial progress seemed appropriate. By the end of March, the Annual Report could state that the Service Request List/Wait List for “no service” reduced by 293 individuals; hence, exact compliance now for Year 2.

My assessments remained the same. As earlier stated I determine that 12 of the remedy requirements are in exact compliance.

I further determined that 10 remedy requirements are in substantial progress. That is, tangible improvements and advancements towards the intended outcomes, obtained to a considerable degree of significant progress for two requirements and to an adequate degree of sufficient progress for eight requirements.

One of the remedy requirements (item #3) is complex with multiple elements. Taken as a whole, this remedy requirement demonstrates slight progress for Year 2. In total, six items displayed slight progress in Year 2.

7.3 A Closer Look at Slight Progress

In both the interim and annual progress reports, the Province gave remedy requirement #3 a blanket rating of substantial progress encompassing all 14 elements. I assessed the Province to have made “significant progress on one element, “sufficient progress” on four elements and “slight progress” on nine elements within requirement #3.

⁵² *2025 Annual Progress Report*, p. 18.

MONITORING REPORT 2024-25: GAINING TRACTION

Recall that slight progress refers to the Province making modest tangible improvements and limited advancements toward intended outcomes, to a minimal degree and marginal in result. According to my terminology, things are more “in progress” than having “made progress.”⁵³

Applying this term to assess levels of compliance for the multiple elements of requirement #3 yields the results summarized in Table 6. Comparing assessments, there is agreement between the Province and Monitor that none of the elements in requirement #3 is in exact compliance or compliance in substance. However, there are notable differences in interpreting and representing the nature of the actual progress.

This leads to a more fundamental point. The Interim Consent Order establishes the textual organization of remedies for all five years, to which the Parties have agreed. The overall assessment of Year 2 is dependent, in part, on how the targets, indicators and timelines, organize into lists of remedies; whether any given target is one piece of a remedy requirement or, instead, is a stand alone remedy requirement. If, say, most or nearly all of the elements in requirement #3 were separate requirements, then the assessments of overall compliance by both the Province and Monitor would be different. The denominator with which we calculate and grade results would of course be different. With possibly 40 requirements in total, the Province could be reporting 20 in exact compliance and 20 in substantial progress for Year 2.⁵⁴ This tally certainly looks and sounds different and likely would influence the sense to be made of what is going on, how to characterize it, and what to expect about progress going forward. My intention with these remarks is to offer another perspective on the Parties’ divergent evaluations on Year 2.

Table 6: Comparing assessments of Year 2 Remedy Requirement #3

Remedy Requirement #3 (14 elements)	Status reported by the Province	Status assessed by the Expert Monitor
Exact Compliance	--	--
Compliance in Substance	--	--
Substantial Progress	14	5 Significant = 1 Sufficient = 4
Slight Progress		9
Total	14	14

Note: Details are in Annex C of this report.

For the following **nine Remedy #3 elements I assess their status as slight progress:**

⁵³ *Monitoring Report 2023-24: Getting on Track*, p. 31.

⁵⁴ With 40 remedy requirements in Year 2 (rather than 28); my tally would be 12 in exact compliance, 10 significant progress, eight sufficient progress, and 10 slight progress.

MONITORING REPORT 2024-25: GAINING TRACTION

- a) Increase in ILS plus/Flex Independent options by a further 200 (in addition to Year 1 baseline)
- c) Planning commences in November for next groups including capacity building and enhance current lifestyle (n =208)
- d) 20 of 83 Existing TSAs [Temporary Shelter Arrangements] converted
- e) Plans for people in Psychiatric Hospitals and Forensic Hospitals to return to their community of choice including:
 - a. Plan 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.
 - b. Minimum of 78 individuals currently identified on Service Request List. Target 20% = 16 people moved out in Year 2.
- f) Increase in Shared Services Under [age] 65 in LTC [Long Term Care] Shared Services of 81 persons in community of choice for a total of 110 of 200 total.
- g) Planning/capacity building/enhanced current lifestyle for those in other systems (Shared services and psychiatric hospital/forensic) Baseline versus: estimate numbers = 16.
- h) Increase of 50 in DSP Homeshare options in community of choice, by region (n =50): 240 total Homeshare.
- j) Planning and support and Discretionary Funding for DSP Waitlist (SRL [Service Request List]) “no service” group – estimate numbers n = 350.
- k) Four new DSP Regional Multidisciplinary Mental Health/Health Teams and Supports operational, and Integration of Multi-disciplinary outreach teams complete.

Within the category of slight progress, different degree of progress and delays are apparent. On a few elements, in fact, change was in a direction opposite to the intended results.⁵⁵

Taking this closer look at the third requirement for Year 2 reveals there is considerable work ahead to attain the desired targets and outcomes.⁵⁶ This closer look lends support to concerns expressed by the DRC regarding delays and the catching-up required. This analysis also signifies the utility of taking a broad category of compliance, such as substantial progress, and, by assessing several elements, distinguishing gradations of fit. My approach provides us with a more accurate assessment of the extent of compliance and the distance to achieving the outcomes required by the Interim Consent Order.

8. Selected Themes

Themes are recurring ideas and issues that figure prominently in the Human Rights Remedy. This section surveys several ideas and issues bearing on an array of requirements and timelines. The themes are Recruiting and Training Staff; Mobilizing Participation and Knowledge;

⁵⁵ These are 3d) and 3f). See the DRC Submission, June 27, 2025, pp. 6-8.

⁵⁶ Two requirements from February-June 2023 remain at slight progress, as do eight requirements from Year 1. See Annexes A and B.

Governing and Interdepartmental Relationships; Working with Multidisciplinary Teams; Closing Facilities and Transitioning to Communities.

8.1 Recruiting and Training Staff

According to the Province, their most significant challenge to date in implementing the Remedy has been in recruiting skilled staff and that within this challenge, the most demanding aspect has been filling the positions for Intensive Planning and Support Coordinators (IPSCs).⁵⁷ This is critical, given the central role and multiple functions IPSCs are to perform in the transformed disability supports system.

Throughout Nova Scotia, the disability support workforce delivers residential, day programs, and community-based programs. The Disability Supports Program (DSP) currently funds and/or licences 144 service provider organizations. Four different associations represent service providers and eight different unions represent staff in unionized sites. In addition to residential rehabilitation workers and residential care workers, the workforce includes a range of health and non-health professionals. Challenges here relate to “inconsistency across the operational and service delivery models” as well as inconsistency for disability workers in hiring, training requirements and compensation practices.⁵⁸

As of March 31, 2025, the Province reported that IPSCs were working with 104 participants, 94 of whom are living in institutions. By May 30, 2025, this had increased to 124 participants.⁵⁹ The Province has undertaken modelling to determine if current recruitment and hiring efforts will support achievement of Remedy requirements for the purposes of closing facilities and transitioning individuals into communities of choice. The projection for the end of Year 3 is that there would be 47 IPSCs with the capacity overall to support 710 cases (presumably individuals). Assumptions for this projection are that IPSCs will maintain a caseload of no more than 1:20, that caseload capacity for new IPSCs will grow over several months, and that 40 per cent of cases will require indefinite IPSC support while the remaining 60 per cent will transition to a Local Area Coordinator (LAC) after one to two years.⁶⁰

The DRC highlights important shortfalls in meeting Year 2 requirements on recruiting, training and having operational LACs and IPSCs. “The requirement by end of Year 2 was to have fully operational 50 LACs and 65 IPSCs. In fact, by end of Year 2, the total recruitment was 26 LACs and 24 IPSCs, representing 52% of the LAC requirement and 37% of the IPSC requirement by end of Year 2.”⁶¹

The Province acknowledged, in their *2025 Annual Progress Report*, that recruiting staff was taking longer than planned. The Province gave three reasons for the shortfall in staffing results. One was the competitive nature of hiring because of the labour shortages in the health care and social service sectors, both provincially and nationally, faced by governments as well as service

⁵⁷ *2025 Annual Progress Report*, p. 21.

⁵⁸ Document 167, pp. 4-5. See also Documents 192 and 203 for data from caseload dashboards.

⁵⁹ Document 188, p. 1.

⁶⁰ Document 188, p. 1.

⁶¹ DRC Comments on Selected Indicators: Year 2 (April 1, 2024-March 31, 2025) (June 2025), p. 12.

providers.⁶² A second reason was rigidities in the timelines and processes found in collective agreements and other human resource policies and practices in the provincial government. The third reason was that some delays were at least partly the consequence of decisions taken by the Province to phase-in hiring of some positions.⁶³

Despite challenges in employing the expected numbers of IPSCs and LACs in Year 1 or Year 2, of which the DRC comments on extensively in their submission,⁶⁴ the Province is confident, “based on current and planned hiring” that “there will be sufficient IPSC capacity to meet the support planning and transition targets in the Remedy by year five.” The Province claims this capacity will be available to support several groups covered by the Remedy: “individuals living in adult residential centres, regional rehabilitation centres, and residential care facilities; group homes and developmental residences; under 65 and living in long-term care; supported through a temporary shelter arrangements; in psychiatric and forensic hospitals; and on service request list not receiving support.”⁶⁵

Put another way, the beneficial results anticipated from hiring IPSCs are substantial. Enhanced access to Individualized Funding for participants. A significant uptake in the use of Shared Services; a reduction in the number of Temporary Shelter Arrangements necessary in response to emergencies; helping every individual eligible for DSP but receiving any services actually obtaining supports; working with individuals medically cleared to leave forensic and psychiatric hospitals to transition to a community of choice.

What is the Province doing to address the recruiting challenges and give confidence in the projections for IPSC capacity? Measures identified include:

- The Disability Workforce Strategy approved in January 2025 with implementation underway⁶⁶
- A targeted recruitment campaign for IPSCs to begin in the summer of 2025
- DSP hiring additional Human Resources staff to support hiring processes
- Manager of Support Planning position established, “responsible for ensuring support plans adhere to the fidelity and philosophy of strong support planning.”⁶⁷
- Manager of Training position established⁶⁸
- 100 bursaries for Disability Support Training Program with professional certification offered by public and private colleges in Nova Scotia⁶⁹
- Continuous Improvement Hub established to monitor caseload ratios and effectiveness⁷⁰
- Peer and technical planning and support planning program to launch in summer 2025

⁶² Document 149, p. 12.

⁶³ 2025 *Annual Progress Report*, May 30, 2025, p. 11.

⁶⁴ DRC Submissions, June 2025, pp.

⁶⁵ Document 188, p. 1.

⁶⁶ Document 167 and Document 228.

⁶⁷ *Annual Progress Report, May 31, 2025 – Targets and Compliance*, pp. 18-19.

⁶⁸ *Annual Progress Report, May 31, 2025 – Targets and Compliance*, p. 18.

⁶⁹ Document 201, p. 3.

⁷⁰ Document 166.

- Leadership and Capability Panel of experts delivering training support to DSP leaders, managers and staff
- The DSP working with the Public Service Commission and the NSGEU to streamline recruitment and hiring practices⁷¹
- Prioritizing Remedy related hiring over other programs in the provincial public service.⁷²

For the disability support workforce in community, the plan is to elevate the core competencies and training requirements of workers so they “better reflect the current and future skills needed to support people with disabilities live a good life in the community.”⁷³

The Province says “as the work progresses, DSP will assess program needs and, in consultation with DRC, determine if additional IPSC positions ... would be better allocated to LACs.”⁷⁴

I endorse this commitment by the Province to consultation with the DRC. I would recommend extending that commitment to all major aspects of workforce strategy and activities, including recruitment, training and staffing decisions. Consultations could address hiring qualified IPSCs in a timely manner, balancing the workload of new roles (the LACs and IPSCs) with the workload of existing programs, meeting the facility closure timelines with adequate support planning capacity and options for individual moving into community.

8.2 Mobilizing Multiple Kinds of Participation and Knowledge

The United Nations Convention on the Rights of Persons with Disabilities calls on state parties “to ensure the participation of persons with disabilities, their families and representative organizations in implementation and monitoring efforts.”⁷⁵ Related human rights principles are self-advocacy and empowerment, belonging and inclusion in society, and the transparency and accountability of public bodies.

A theme of the Human Rights Remedy is how to engage the participation of people with disabilities and mobilize their experiences and ideas of the people affected by policies and programs.

In this context, four kinds of participation and knowledge can be distinguished for discussion purposes, recognizing that in practice these overlap and interact in various ways. There is also a diversity of ideas and viewpoints within each kind. See Chart 1.

The first kind is the involvement of the Parties, the Province and the DRC. The focal point of course is the Interim Settlement Agreement and its annual indicators, timeframes, targets and outcomes. There have been additional meetings, following on the January 2025 Interim Progress

⁷¹ Document 111, pp. 203.

⁷² *2025 Annual Progress Report*, p. 22.

⁷³ Document 231, p. 4.

⁷⁴ Document 188, p. 1.

⁷⁵ Document 154, p. 12.

Report, in which the DRC has requested further information and explanation on a host of items and the Province has responded.⁷⁶

A second form is the participation of experts, consulted and commissioned to offer strategic advice and technical guidance, undertake policy or program research, and perhaps provide training services. Some experts bring their personal experiences as a person with a disability or as an individual living with a family member with a disability.

The Leadership and Capability Panel comprises nine members from Canada, Australia, New Zealand and the UK.⁷⁷ These experts on disability services, human rights and public policy offer training services and give advice and recommendations on the implementation of Remedy-related initiatives, such as the Person Directed Supports Network Pilot.⁷⁸

A third kind is the participation and knowledge of officials in the disability support system – community service providers⁷⁹ or the provincial public service. This includes the knowhow of front-line workers, supervisors and managers, executive directors, board members, facility operators, and other leaders. Some are decision-makers while others may feel more like decision-takers. In any event, observations and lessons grounded in policy and practice can offer valuable insights.

The Remedy Roundtable has a large membership of 29 provincial government officials, mostly senior leadership, led by the Executive Deputy Minister to the Premier and Head of the Public Service of Nova Scotia. The Roundtable includes four other Deputy Ministers, four Associate Deputy Ministers and several executive directors. Nine government departments and other entities are represented, namely, Opportunities and Social Development; Education and Early Childhood Development; Seniors and Long Term Care; Communities, Culture, Tourism and Heritage; Justice; Finance and Treasury Board; Labour and Advanced Education; Municipal Affairs and Housing; and Office of Addictions and Mental Health and the Department of Health and Wellness. Organizationally, then, the Remedy Roundtable embodies the whole of government scope of, and collective responsibility for the Remedy.

A fourth kind is grassroots participation and the local production of awareness, experience and knowledge by individuals living with disabilities, their parents and other family members, friends, and significant others in support networks. Stories are a common expression of this knowledge. Historically, experts and officials discounted this personal knowledge and participation, eventually giving rise to first voice and the community living and disability rights movements. One example of this is the principle of person-directed decision-making, whereby the individual is actively involved in the making of decision that affect them.

⁷⁶ Email from Maria Mediloi to the Expert Monitor, April 22, 2025.

⁷⁷ Document 156.

⁷⁸ Document 205.

⁷⁹ Service providers are usually agencies (perhaps an individual) contracted with the Department of Opportunities and Social Development Disability Support Program to provide services to participants

Regional Advisory Councils are now operative with a mandate to support first voice consultation of co-production.⁸⁰ There are four Councils, one in each region of the province. Each council has 16 members from local communities. More than half of the members are people with disabilities and some designated as youth or senior representatives.⁸¹ The functions and activities of these new advisory bodies are to:

- Give advice to government on decisions affecting their communities.
- Share information with their communities.
- Help communities work together to better support people with disabilities.
- Help create services that are missing or improve services that are not working well.
- Review applications for innovation funding.⁸²

It will be of interest to see how these new Regional Advisory Councils work with the new Regional Hub Managers and Community Living Facilitators in building community capacity.⁸³ That is, how their work can enhance the personal resources and natural supports already in community for persons with disabilities.⁸⁴ Of equal importance is how their work will promote a shift in culture of the disability support system to a human rights approach.⁸⁵

Chart 1 identifies how particular processes and structures under the Remedy represent the various forms of participation and knowledge.

Chart 1: Mobilizing Participation and Knowledge in the Remedy

	Mechanisms
Parties to the Agreement	<ul style="list-style-type: none"> • Interim Settlement Agreement • Annual Progress Reports • Meetings between the Province and DRC • Submissions and statements to the Expert Monitor
Experts	<ul style="list-style-type: none"> • Leadership and Capability Panel • Guidance from Remedy Authors to Disability Support Program leadership • Training workshops for provincial staff
Community service providers and Public Service Officials	<ul style="list-style-type: none"> • Remedy Roundtable • DSP Advisory Committee • Accessibility Secretariat

⁸⁰ Year 1 Requirements 48 and 49.

⁸¹ A list of the membership is given in Document 210, p. 14 and in Document 226, p. 1

⁸² Document 210, p. 13. On the Service Evolution Funding initiative, see Documents 159 and 186.

⁸³ Regional Hubs are located in each of the four regions of the province. They are to serve as the primary resource point for individuals and families seeking disability supports, for facility closure projects, and liaison with clinical services and other government programs.

⁸⁴ Document 149, p. 24.

⁸⁵ Documents 149, p. 12.

	<ul style="list-style-type: none"> • Accessibility Advisory Board
First Voice and other groups and support networks	<ul style="list-style-type: none"> • Regional Advisory Councils • Rebuilding Hope Conference • First Voice consultations (e.g., People First of Nova Scotia) • Project funding to Inclusion Nova Scotia

Meaningful participation and multiple kinds of knowledge give the Human Rights Remedy authenticity, urgency, and legitimacy. All are essential to the ultimate success of remedying systemic discrimination against persons with disabilities in Nova Scotia.

Certain question of governance arise about how all these work together. What is the current state of interplay of legal obligations, special expertise, practitioner knowledge, and personal lived experiences? Is there adequate resources allocated to each kind of participation to ensure effective communication and information sharing?

8.3 Governing and Interdepartmental Relationships

Last year I wrote, “Remedy requirements are interdepartmental and cross-sectoral in character, relying on actions by organizations in the disability system and community services, of course, along with organizations in the mental health and health sectors, housing and municipal affairs, and the secondary and post-secondary systems in Nova Scotia. Progress on targets is likely to become even more dependent on such networks of collaboration.”⁸⁶

For Year 2, again several remedy requirements demonstrate the significance of interdepartmental collaboration. How to best support youth with disabilities leaving the school system after graduation for valued roles in community life. How to work collaboratively with colleagues in the mental health and health sectors. How to work with the housing sector in helping individuals move from institutions to a good life in a community of choice. Effective interdepartmental working relations are essential to support individuals with complex care needs.⁸⁷

In large governmental systems of public administration, problems of silos can occur. A “silo refers to the effect of individual government departments working independently with limited contact with each other rather than collaboratively aligning their work and efforts.”⁸⁸ The DRC submits, “[T]here may well be Departmental Silo problems involved in the failure to introduce the required Policies to ensure younger adults are not admitted to LTCs/Nursing Homes.”⁸⁹

Innovations like transforming disability systems involve departing significantly from standard roles and operating procedures. Interdepartmental collaboration is necessary for changing

⁸⁶ *Monitoring Report 2023-24*, p. 50.

⁸⁷ Document 194, p. 6.

⁸⁸ Document 194, p. 9.

⁸⁹ *DRC Comments on Selected Indicators: Year 1 (June 2025)*, p. 3.

MONITORING REPORT 2024-25: GAINING TRACTION

conventional organizational cultures of program design and service delivery in order to tackle discriminatory practices and advance human rights-based approaches. See Chart 2.

Implementing the Remedy, the Province observes, involves a high level of interdependency cross component parts. “Change in one are can have significant impacts in another; progress in one area is contingent upon progress in another.”⁹⁰ Moreover, that cross-departmental coordination takes time, which can result in delayed action, and simultaneously reap benefits, such as the development of consistent structures across programs, benefitting various population groups.⁹¹

For its part, “The DRC agrees with the Province that the Remedy is a whole-government effort. Although the Disability Support Program is leading the work on the Remedy, the contributions of many departments within the Provincial government are crucial to ensure the Remedy targets are met.”⁹² The DRC believes that “to meet the five-year timeline will require the Remedy to be treated as an urgent priority by all government departments whose collaboration it requires.”⁹³

As a promising practice, the DRC points to the Shared Service model⁹⁴ as “a successful example of collaboration between the DSP and another government department to support individuals to transition to life in community. The DRC understands that the Province treats persons supported through the Shared Services program as full participants, equal in all respects to persons the DSP has traditionally supported through its programs. The DRC would like to see this same model applied to other persons supported by the DSP in collaboration with another government department or service.”⁹⁵

Chart 2: Remedy initiatives led or co-led by other provincial government departments

Department	Remedy items	Status
Accessibility Directorate	--	Work underway on developing several standards
Education and Early Childhood Development	School Leavers Program	Registration in process summer 2025 for 100 students
Health and Wellness	Access to primary health care and community-based care	In progress

⁹⁰ 2025 Annual Progress Report, p. 10.

⁹¹ 2025 Annual Progress Report, p. 15.

⁹² DRC Submission, June 27, 2025, p. 16.

⁹³ DRC Submission, June 27, 2025, p. 3.

⁹⁴ Shared Services combines the services of the Disability Support Program and programs offered through the Department of Seniors and Long Term Care. Together they provide support in community for individuals with high needs requiring personal care and nursing.

⁹⁵ DRC Submission, June 27, 2025, p. 24.

MONITORING REPORT 2024-25: GAINING TRACTION

Justice	Policy engagement in review of ACDMA ⁹⁶ Review	Update on options for recognizing formal supported decision-making arrangement in legislation
Municipal Affairs and Housing	Housing programs and bylaw changes	In progress
Office of Addictions and Mental Health	Gap analysis in services for addictions supports, primary care, mental and behavioural health, and challenges for DSP eligible participants	Partial compliance with interim plans
Seniors and Long Term Care	Full implementation of new individualized funding infrastructure system/administration and support structure	Partial compliance

Sources: *2025 Annual Progress Report*, pp. 1, 13, 14 and 17, and Document 149, p. 15.

Governance involves a framework of practices for directing organizations, involving people, making decisions, implementing activities, and identifying accountabilities.

In the past few years, the governance landscape in Nova Scotia for disability supports has changed significantly. New roles and entities such as the Intensive Planning and Support Coordinators (IPSCs) and IPSC Team Leads, Local Area Coordinators (LACs) and LAC Team Leads, the Remedy Roundtable, Leadership and Capability Panel, Regional Closure managers, Facility Closure Specialists, DSP Connectors, managers of training and support planning, Community Living Facilitators, a Continuous Improvement Hub, the Regional Advisory Councils, and so forth.

One of the documents provided by the Province is the organizational chart for the Disability Support Program as of December 2024.⁹⁷ It is instructive in showing roles and reporting relationships for the current and future state of service delivery.

The Year 2 requirement of a first review of the new governance structures remains doing.⁹⁸ When the external evaluation happens, I would suggest it look at the Regional Hub model and other governance roles and relationships.

What seems lacking is a comprehensive map of the governance landscape for the Human Rights Remedy. I would recommend that the Parties work together to produce a chart or diagram,

⁹⁶ The *Adult Capacity and Decision-Making Act* is a provincial law for adults who cannot make some or all decisions for themselves and allows another person to make some important decisions for them.

⁹⁷ Document 145.

⁹⁸ Remedy Requirement 28 of Year 2. See *Annual Progress Report May 31, 2025 – Targets and Compliance, Year 2*, p. 30 and *DRC Comments on Selected Indicators: Year 2*, p. 20

perhaps accompanied by a guidebook in plain language and available in alternate formats that would identify and describe briefly the roles and relationships. In addition, this information could indicate how human rights principles are present in organizational mandates, policy processes, and administrative practices.

8.4 Working with Multidisciplinary Health Teams

Implementing remedy requirements around mental health and addiction services and multidisciplinary allied health outreach remain challenging for the Province.

The following Year 1 remedies continue to be in less than exact compliance:

- Appoint DSP Clinical Lead to commence design and planning for Regional Teams, building on existing DSP capacity (#51)
- Tender process commences for DSP program multidisciplinary teams (#53)
- New mental health proposals out for tender or funded through Mental Health and Addictions (#54)
- Tenders awarded for new programs delivery commencing April 2024 (#55)
- DSP commence integration of institutional teams into new regional outreach teams (#56).⁹⁹

Moreover, the following Year 2 remedy targets are far from exact compliance:

- Four new DSP Regional Multidisciplinary Mental Health/Health Teams and Supports operational, and Integration of Multi-disciplinary outreach teams complete (#3k)
- Award new proposals for MH/Health programs (#3l).¹⁰⁰

The Province attributes these delays to factors related to system transformation, more specifically to the necessity for change management efforts. Interdepartmental work on mental health and addictions supports, the Province explains, “was imperative to determine the types of services individuals with disabilities require in community and – given the history of the medicalization of disability -- to ensure our partners in health care agencies fully understood of the direction and spirit of the Remedy.”¹⁰¹

On being behind with implementing the multi-disciplinary teams, the Province explains, “a significant amount of planning work with ARC [Adult Residential Centres] and RRC [Regional Rehabilitation Centres] providers was required given that existing DSP-funded allied health supports are currently attached to these organizations, providing access to healthcare positions that are challenging to recruit.”¹⁰²

The Province is adopting a phased approach to implementing the new Disability Support Outreach Teams model.¹⁰³ Two of the four teams, those for the Western Region and Eastern

⁹⁹ See Annex A for details.

¹⁰⁰ See Annex C for details.

¹⁰¹ 2025 Annual Progress Report, p. 20.

¹⁰² 2025 Annual Progress Report, p. 20.

¹⁰³ Document 184, 4.

Region, the Province says *should* be operational by August 31, 2025. “In the short-term, these teams will be comprised of existing DSP-funded allied health professionals employed by the ARC and RRC organizations in those regions. In Northern Region and Central Region, new partnerships are being pursued with health care and/or community-based organizations to create new models for the provision of allied health services.”¹⁰⁴

Over subsequent second and third phases, the Disability Support Outreach Teams aim to expand eligibility to individuals in Group Homes and Developmental Residences, and then eventually to all DSP participants.¹⁰⁵

I appreciate the implementation will evolve based on lessons learned from the initial phase. I acknowledge the work done on data analysis, jurisdictional scans, and targeted engagements. I further appreciate that the road to transformation involves transitions. A successful journey in this case requires having a well-defined itinerary. What is not clear is the overall timeline for this phased approach to allied health and regionally based outreach services.

The DRC emphasizes their concern “that the health services required to transition individuals from institutions to community-based settings will not be established in the timeframe required by the Remedy.”¹⁰⁶ (This connects directly with deinstitutionalization, the final theme.)

Working implicitly to the five-year timeframe risks resulting in a lack of urgency, an undue reliance on short-term mitigations, and losing any momentum and goodwill so far established.

To establish effective health services that support DSP participants to transition to community life, the DRC contends, “will require urgent efforts from the Department of Health and Wellness, Nova Scotia Health, and the Office of Mental Health and Addictions, in addition to the Disability Supports Program.”¹⁰⁷ This is a reasonable expectation of the deputy ministers and other senior public servants at the Remedy Roundtable to push forward. This work on mental health and addictions, and multidisciplinary outreach teams is pivotal not only to the Human Rights Remedy, it is central to the Nova Scotia government’s agenda on health care and the Premier’s historic apology to people with disabilities. Making the Remedy a major policy priority requires sustained strategic involvement by key Cabinet ministers and the Premier’s Office.

I recommend that to ensure continuous and timely progress for the Disability Support Outreach Teams model, the Province identify deliverables and milestones and publish timelines for the three phases and for the intended outcomes of effective and equitable provision of supports across Nova Scotia.

8.5 Closing Facilities and Transitioning to Communities

Under the Human Rights Remedy, deinstitutionalization is a multifaceted set of initiatives and requirements. Key elements include (i) no new admissions policy, (ii) DSP facility closure

¹⁰⁴ 2025 *Annual Progress Report*, pp. 20-21.

¹⁰⁵ Document 184.

¹⁰⁶ DRC Submissions, June 27, 2025, p. 16.

¹⁰⁷ DRC Submissions, June 27, 2025, p. 16.

strategies and actions, (iii) returning medically approved residents in psychiatric and forensic hospitals to local communities. Other key elements are (iv) training and redeploying facility-based service providers to new community roles, (v) building and/or expanding quality community-based services (generic or specific services, informal and formal supports), and (vi) coordinating support efforts and individuals with education, health and housing systems.

The following requirement from Year1 remains a concern:

- “Work with SLTC [Seniors and Long Term Care] and review and revise the policy on admissions to LTC (for young people) and ensure no new admissions to LTC occur due to DSP failure to provide appropriate community supports.” (#17)

“Worryingly,” as the DRC expresses it, “the Province did not make any discernable progress over the course of Year Two in de-institutionalizing adults under 65 from long-term care facilities. Indeed, by the end of Year Two there was a significant increase in the number of adults under 65 living in long-term care over the baseline figures used as a benchmark for tracking Remedy progress.”¹⁰⁸ The increase amounted to 52 more young people admitted to long-term care facilities or 12 percent growth. It is hard to square these results with the Province’s assessment of this requirement as complete. This appears to be unnecessary institutionalization, imposing disadvantages on the individuals concerned.

To ensure that formal policy can guide actual practice, I recommend the Province develop an explicit policy on admissions to Long Term Care facilities for adults under 65 that is consistent with the Human Rights Remedy and human rights principles more generally.

Effective January 1, 2025, admissions to three types of institutional facilities in the province have ceased. These are Adults Residential Centres (ARCs), Regional Rehabilitation Centres (RRCs), and Residential Care Facilities (RCF). There are seven ARCs/RRCs and 19 RCFs across the province.¹⁰⁹

- ARCs provide support to individuals who need high levels of supervision and support in their activities of daily living, routine home and community activities. An ARC provides structured supports and services to enhance the development of a person’s interpersonal, community oriented and activities of daily living skills to support their transition to a community-based option. Staffing is 24 hours/7 days a week.
- RRCs provide support to participants who need a range of support in activities of daily living, routine home and community activities, and need high levels of support with severe/multiple behaviour challenges. RRCs provide rehabilitation and developmental programs to participants who require an intensive level of support and supervision related to complex behavioural challenges and skill development needs to support their transition to a community-based option. Staffing is 24 hours/7 days a week.
- RCFs provide individuals with residential living support, minimal support with their activities of daily living, routine home and community activities. Participants are

¹⁰⁸ DRC Submissions, June 27, 2025, p. 7.

¹⁰⁹ Document 148, p. 2.

provided with limited direct support/supervision and generally do not have major medical or behavioural support needs.¹¹⁰

Group Homes (GHs) and Developmental Residences (DRs) are other residential living options for individuals with disabilities offered under the Disability Support Program, which support between four to twelve individuals.¹¹¹

Effective January 1, 2026, Group Homes with more than four beds will cease any new admissions until they have reduced their bed number to a maximum of four. Group Homes in Nova Scotia are community-based residential supports licensed under the Disability Support Program. “A Group Home provides participants with residential living support, learning and assistance with their activities of daily living, routine home and community activities. A Group Home focuses on enhancing a participant’s skill development.”¹¹² From a policy perspective of levels of support, Group Home participants have assessed needs determined as minimal or moderate.¹¹³

As well, effective January 1, 2026, Development Residences may support a maximum of four participants. Licensed under the Disability Support Program, Development Residences are community-based residential supports for individuals with intellectual disabilities. There are three categories of these residences, depending on the severity of disability and other health conditions and presence of behavioural challenges.¹¹⁴ From the policy perspective of levels of support, Developmental Residence participants have assessed needs determined as high, enriched or intensive.¹¹⁵

To date, two DSP facilities have closed. Harbourside Lodge, an ARC closed in July 2023, with 21 of 22 residents located in communities of their choice. Inclusive for Life, a RCF closed in June 2024, with all 16 residents placed in a community of their choice.

Agreed upon closure timelines for ARCs and RRCs as follows:

- January 2026 (one facility)
- January 2027 (three facilities)
- January 2028 (two facilities).¹¹⁶

For the RCFs, the agreed closure timelines are as follows:

¹¹⁰ Disability Support Program, *Program Policy*, Updated February 18, 2025. Department of Opportunities and Social Development. p. 8.

¹¹¹ Disability Support Program, *Facility Closure Guide*, Updated March 2024, p. 4.

¹¹² Disability Support Program, *Program Policy*, Updated February 18, 2025. Department of Opportunities and Social Development. p. 7.

¹¹³ Disability Support Program, *Level of Support Policy*, Updated February 18, 2025. Department of Opportunities and Social Development.

¹¹⁴ Disability Support Program, *Program Policy*, Updated February 18, 2025. Department of Opportunities and Social Development. pp. 7-8.

¹¹⁵ Disability Support Program, *Level of Support Policy*, Updated February 18, 2025. Department of Opportunities and Social Development.

¹¹⁶ Document 210, p. 4

- RCFs in the Northern Region will all close by January 2027
- RCFs in the Eastern, Western, and Central regions will all close by January 2028.¹¹⁷

For GHs and DRs, closure strategies and timelines are for development in the coming year.¹¹⁸

Closing facilities and transitioning to communities requires continual respectful attention to the concerns and questions of individual participants, families, facility-based operators and their boards, community service providers, frontline staff, and allied health professionals.¹¹⁹ From persons with lived experience with disability, the Province has heard of anxiety about consistency in supports, excitement around moving into apartments and making new friends, and uncertainty over everyday living and the availability of community activities.¹²⁰

This underscores the importance of communication and engagement efforts by the Province on the closure and transitions. Addressing timelines and supports, explaining what to expect, and identifying next steps.¹²¹ Year 2 activities in this area also included closure agreements with facilities, the production of closure and transition guides, and the hiring of Regional Closure Specialists and Community Living Facilitators. Regional Closure Specialists lead the strategies for the ARCs, RRCs, and RCFs and the Community Living Facilitators focus on supporting individuals with disabilities currently in institutional facilities to plan and transition to community-based supports.¹²²

IPSCs and LACs (and existing Care Coordinators) are staff roles critical to the success of transition planning and capacity building. Earlier, I discussed concerns over the delays in hiring the planned numbers of IPSCs in Year1 and Year 2. I consider this further in the next section.

9. Looking Ahead: from traction to acceleration

9.1 Understanding System Change

In their latest *Annual Progress Report*, the Province offers a composite picture of the work at hand. There is the responsibility of maintaining stability in the existing systems to help ensure people with disabilities are supported and safe, while undertaking changes and planning for transitions. There is the effort of implementing reforms in line with the Remedy and its human rights philosophy. There are examples of putting in place mitigation measures in response to several challenges with widespread effects.¹²³ This is a reminder that not all changes are planned nor permanent in nature. There are welcome changes adopted in engaging with first voice and

¹¹⁷ Document 210, p. 4.

¹¹⁸ “Updates and Supports: Moving to Community –Closing DSP Facilities,” p. 2. <https://www.dsp-transformation.ca/timeline>

¹¹⁹ Document 149. p. 6.

¹²⁰ Document 148, p. 3.

¹²¹ See Documents 116, 126, 127, 128, and 210.

¹²² Document 210, p. 4.

¹²³ Over half the 2025 *Annual Progress Report* describes four main challenges and their effects on making progress on both Year 1 and Year 2 requirements.

other community groups, in meeting with DRC representatives, and in providing fuller information and explanations in the progress reports.

Five types of results were achieved in Year 2, verifiable by the documentation on requirements and the remedy metrics. With a selection of examples, the five types are:

1. *There are requirements in exact compliance or that have achieved substantial progress.* The Regional Advisory Councils are active as significant venues for first voice participation and other kinds of community engagement. The Service Evolution Fund, launched in October 2024, awarding grants totalling almost \$1 million to 24 projects across the province will help align service delivery with the Remedy.¹²⁴
2. *There are items that I assess to be significant progress or sufficient progress.* Many of these are instances of gaining traction. For example, the population in ARCs, RRCs and RCFs has declined by 72 percent of the target over the baseline figures used as a benchmark. The Collaborative Case Management digital system for tracking eligibility decisions and administering Individualized Funding
3. *There are remedy requirements with modest or slight progress.* Only 22 percent of the planned number of individuals in IL Plus/Flex independent program receive support.¹²⁵ Only 37 percent of IPSCs and 52 percent of the LACs are hired. The new Individualized Funding infrastructure system to be operational by now has a target date of the winter of 2026.
4. *There are examples of minimal action or inaction.* A case of minimal action is that only seven Shared Services placements of the required 200 have happened, a mere 3.5 percent of the target.¹²⁶ A case of inaction is that none of the planned 240-homeshare places in communities across the regions of the province exists. The five-year plan is for 500 homeshare places by June 2027. As I reported last year, this poses a risk to the successful transition of about 400 residents in ARCs and RRCs to community-based options.
5. *A few requirements are heading in the wrong direction, at least for now.* As noted previously, while the Remedy requirement was to ensure no new admissions to Long Term Care institutions for young people, admissions increased by a 12 percent. While the Province was to convert 20 of the 83 Temporary Shelter Arrangements into permanent accommodations in the community, such arrangements increased by 75 percent increase (from 83 to 146).

In the field of disability supports and more generally health and social services, reforming policies and implementing programs are rarely if ever a mechanical process. Different degrees and rates of change and different directions of results can occur. Whether because of external

¹²⁴ 2025 Annual Progress Report, p. 7.

¹²⁵ DRC Submissions, June 27, 2025, p. 13. This equates to 89 of 400 participants.

¹²⁶ DRC Submissions, June 27, 2025, p. 8.

factors, policy rigidities, departmental silos, or deliberate decisions to pause or to phase-in a project,¹²⁷ not all results are substantial progress representing momentum.

9.2 Reasons for Optimism and Conditions for Success

The Province identifies three developments as reasons to be optimistic about implementing the Remedy and transforming the disability support system. One is the \$120 million investment in Budget 2025-26 by the provincial government and a commitment that extends across the provincial public service.¹²⁸ A second encouraging sign is that “service providers are rethinking their approach to supporting people with disabilities and realigning their current models to align with the values of the Remedy.” The Province notes the willingness of service providers “to engage, innovate and adapt,” no doubt encouraged by the Service Evolution Fund. A third reason for optimism, noted by the Province, “is seeing the impact of our efforts on the lives of the people we serve” as recounted in stories by staff members.¹²⁹

Optimism gets the better of the Province when, after mixed results at the end of two years, it boldly concludes, “The Remedy will make Nova Scotia not just a leader in Canada, but a global leader in how we welcome and support people with disabilities.”¹³⁰

This raises the questions: What are the conditions for success, and are they firmly in place? The Province claims the essential conditions are in place, hence their optimism.¹³¹

I have endeavoured to ascertain what is happening and what is not happening and why – the achievements, the delays, the setbacks, the interim measures. Conditions for success include having a critical mass of numbers in staffing at all levels of operations, and thus the capacity to adopt reforms and sustain new directions. In addition to dedicated public servants, another condition for success is sustained attention by the government executive, ensuring this is a policy priority. Creating a community of practice in Nova Scotia for homeshare is another way of shifting culture and building capacity for community living.

Based on careful assessment, there are fair and reasonable grounds to be cautious in making assertions of significant momentum or in making predictions at this point about global leadership.¹³²

¹²⁷ An example of the phased approach to project management and implementation is the Continuous Improvement Hub. See Document 166.

¹²⁸ The 2025-26 Nova Scotia Budget includes a \$19.4 million increase to support the transformation of the province’s disability support system as part of the Human Rights Remedy. This brings the total investment to date at \$121.4 million. See <https://novascotia.ca/budget/>

¹²⁹ *2025 Annual Progress Report*, pp. 22-23.

¹³⁰ *2025 Annual Progress Report*, p. 24.

¹³¹ *2025 Annual Progress Report*, see pp. 3 and 22.

¹³² The *2025 Annual Progress Report* ends oddly, with a statement by the Province that “At the end of the day, success isn’t something we can track in a table or write on a page.” (p. 25). As a human rights remedy, mutually negotiated and legally binding on the Parties, documentation is fundamental to the monitoring, determining, and evaluating of success.

Not yet advancing consistently and comprehensively toward the outcomes of the Remedy, the Province is gaining traction. Interim measures can be useful to mitigate a pressing challenge or ease the effects of a delay. At the same time, keeping focused on the Remedy's vision, it is important for senior leadership to determine when mainstream activities can replace interim measures.

Intentional planning and culture change, adequate and timely resourcing, collaborative relations across government departments, and meaningful engagement and communications with a range of partners in community are great conditions for building momentum.

9.3 Moving into Year 3

As we move further into Year 3 (I write this four months into the third year) there remains unfinished business from Year 1 and Year 2, with certain remedy requirements with slight progress, others sufficient progress. For example, those in slight progress from the February-June 2023 period are the implementation of the multi-disciplinary team and inter-agency work, having the emergency response team operational, and embedding supported decision-making in policies and practices.¹³³

Intensive planning and support coordination and the role of IPSCs is without doubt a critical condition for success in several aspects of the Remedy. Essential to that success will be the targeted recruitment campaign for IPSCs this summer yielding strong results of skilled personnel joined with a stream of new hires throughout the year.

With an adequate number of IPSC staff in place, the intended positive effects of their work is considerable. Beneficial effects include the uptake of the Shared Services increasing significantly; the number of individuals in Temporary Shelter Arrangements beginning to reduce; and more people in psychiatric and forensic hospitals returning to their community of choice. Still further intended benefits are working with residents in ARCs, RRCs and RCFs in developing transition plans for capacity building and enhanced current lifestyle; and DSP participants on the Service Request List with no support, declining in numbers.

An issue worth watching is that IPSC caseloads (FTE/Ratios) stay within mandated levels, which in part is a function of hiring sufficient number of LACs and continuing implementation of the technical and peer planning supports program.¹³⁴

Eligibility for the DSP is a foundational issue at the core of the Remedy. The Province is legally obliged to provide social assistance to eligible persons in need. I will be looking for the Province having carried out embedding human rights principles and practices in the Disability Support Program policy manuals and related documents. All legal rights obligations of applicants and participants and public officials should appear explicitly in public documents. Principles include that all applicants with disabilities be treated fairly and equitable, regardless of the nature of their condition or impairment. That a person eligible for Disability Support Programs has a right to

¹³³ See February – June 2023 requirements 12, 13 and 17.

¹³⁴ Year 3: April 1, 2025 – March 30, 2026, see Requirements 3, 4, 5 and 12 a), b), e), f), g), i).

assistance in their community of choice. That such accommodative service must be provided to persons determined eligible without delay.

Culturally appropriate resources for Black Nova Scotians with disabilities and to Mi'kmaq with disabilities are promising developments in advancing the Remedy. Outreach efforts by the Province in Year 2 provide a basis for further relationship building.¹³⁵

10. Conclusions: gaining traction is movement, not momentum

As Expert Monitor, my role is to examine how the Province is doing in dismantling systemic discrimination against people with disabilities in Nova Scotia. It is to assess documentation on the progress in achieving the Remedy requirements for building a new system of disability support. It is to encourage that the Province enacts and progressively realizes a human rights approach for people with disabilities.

Nova Scotia has the highest rate of disability among persons aged 15 and older of all Canadian provinces.¹³⁶ Nearly two in five adults in Nova Scotia live with a disability. Almost three-quarters of those with a disability, experience accessibility barriers and almost half of those with a disability experience discrimination. They have lower rates of employment and lower incomes than do people without disabilities.¹³⁷ This is the demographic, social and economic context within which is the Human Rights Remedy.

Traditionally, the promotion and protection of human rights has not been a major consideration in social assistance regimes across the country. Institutionalization of people with intellectual and developmental disabilities is a vestige from another era. These form part of the policy context and content of the Human Rights Remedy.

For people with disabilities and their families, we are in a time of keen expectations and planned transformations. Common beliefs and attitudes about impairments are changing. Conceptions of people with disabilities are changing. Laws and policies about the capacity and self-determination of individuals with disabilities are changing. The ways in which we design and deliver services and programs are changing.

The provincial government itself is the subject of change, revising positions and creating new ones, introducing new programs while reforming or discontinuing old ones, all the while altering patterns of work and management. Paradoxically perhaps, the province is also an anchor. During this transformation project, the public service behaves in many respects as an entity of stability

¹³⁵ Officials in the Disability Support Program have been working with the Confederacy of Mainland Mi'kmaq (CMM) and members of the Federal Government to develop a plan of supports for Indigenous people who will need to leave institutions in the coming years. "DSP is funding an LAC type position with CMM – and recruiting an IPSC designated to be filled by an individual who is Mi'kmaq. The recruitment will be undertaken jointly by CMM and DSP. The individuals hired into these roles will work directly with Indigenous people with disabilities to create options for them to live a good life in the community of their choosing."

¹³⁶ Nova Scotia has a disability prevalence of 38 percent, compared to the national average of 27 percent. Document 154, p. 26.

¹³⁷ Document 154, p. 26. These data are for 2022 or 2023.

and predictability in funding programs and providing services. The social value of this function is not to be underestimated. As well; the province is an agent of social change especially in relation to the disability support sector. Relationships among public organizations, services providers and community partners are changing. Residential facilities across the province are closing. Funds are available to community agencies for innovating practices.

Taken as a whole, I conclude the degree of progress indicates the Province is gaining traction. I have determined the Province is achieving relatively more satisfactory results on many Year 1 requirements than was the case last year. Moreover, in this second year of implementing the Remedy, there are notable examples of building capacity for moving in the direction of system transformation. In a complex and vast undertaking as this, there also are challenges and delays in delivering new programs and services to individuals and families in local communities. There are differences between movement and momentum.

I am mindful that the next Interim Progress Report in January 2026 will be the halfway point of the Remedy's five-year timeline. The task ahead is to implement the remedy requirements more fully and promptly. With heightened resolve, there is still time "to get the future right."¹³⁸

My recommendations seek to build on this traction and move toward momentum for the Human Rights Remedy in Year 3 and subsequent years.

11. Summary of Recommendations

I recommend:

1. That for Year 2 and subsequent years, the Province's responses to each of my Recommendations be collected together and include focused explanations with specific and contextual information. (page 16)
2. That the Executive Director of the Remedy work with the Disability Rights Coalition, People First of Nova Scotia and Inclusion Nova Scotia to develop and implement an action plan for the routine production of plain language documents related to the Human Rights Remedy. One possibility would be for DSP to contract with People First and/or Inclusion Nova Scotia to work with provincial officials along with the Disability Advisory Committee in producing accessible documents. (page 24)
3. That the Province report on what mechanisms have been put in place to replace the Service Request List; and, that the Province collaborate with the DRC to ensure the alternative is fully transparent and in alignment with the Remedy and human rights principles more generally. (page 27)
4. That the Province integrates the Human Rights Remedy and human rights principles more generally in its update of Disability Support Program policy manuals. To do so by: incorporating information about the Human Rights Remedy in policy statements;

¹³⁸ Ronald Wright, *A Short History of Progress*, Toronto: Anansi Press, 2004, p. 132.

referring to guiding principles and values of human rights in the policy objectives; identifying specific rights and duties relevant to the specific procedures and practices; and, referring directly to the Remedy, noting pertinent outcomes in the accountability sections. (page 30)

5. That in order to accord with the Remedy, the Excess Shelter Policy should uphold the principle that a person meeting the criteria will receive the shelter expense amount, as per their household size, as a right to accommodative assistance. (page 30)
6. That the Province commit to consultations with the Disability Rights Coalition on all major aspects of workforce strategy and activities, including recruitment, training and staffing decisions. Consultations could address hiring qualified IPSCs in a timely manner, balancing the workload of new roles (the LACs and IPSCs) with the workload of existing programs, meeting the facility closure timelines with adequate support planning capacity and options for individual moving into community. (pages 38-39)
7. That given the lack of a comprehensive overview of the governance landscape for the Human Rights Remedy, the Parties work together to produce a map, perhaps accompanied by a guidebook in plain language and available in alternate formats that would identify and describe briefly the roles and relationships. In addition, this information could indicate how human rights principles are present in mandates, processes and practices. (page 44)
8. That to ensure continuous and timely progress for the Disability Support Outreach Teams model, the Province identify deliverables and milestones and publish timelines for the three phases and for the intended outcomes of effective and equitable provision of supports across Nova Scotia. (page 46)
9. That the Province develop an explicit policy statement on admissions to Long Term Care facilities for adults under 65 that is consistent with the Human Rights Remedy and human rights principles more generally. (page 47)