

Interim Progress Report May 31, 2025 - Targets and Compliance
Year 1: February to June 2023

REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS ¹
1. Review Report recommendations regarding the establishment of the <i>Social Assistance Act</i> (Disability Supports Program – DSP) fit for purpose governance functions, including regional leadership, first voice consultation and co-production.	EXACT COMPLIANCE <ul style="list-style-type: none"> • <i>Monitor Report July 2024</i> 	<ul style="list-style-type: none"> • 149 Remedy Roundtable Presentation 29 Oct 2024 • 150 Remedy Roundtable Presentation 6 Jan 2025 • 151 Remedy Roundtable Membership Jan 2025
2. Update DSP client projection model using baseline numbers and provide assumptions, and outputs of the model.	EXACT COMPLIANCE <ul style="list-style-type: none"> • <i>Monitor Report July 2024</i> 	
3. Commence efforts (including communication and change management plan) to transfer DCS Social Assistance Act DSP intake function and Care Coordination staff to the Disability Supports Program.	COMPLETE <ul style="list-style-type: none"> • DSP Intake Function is completely within DSP • 4 DSP Connector roles (one in each region) have been hired. Connectors assist persons with disabilities to access appropriate supports and services to meet their needs (ie. LAC, IPSC, IF funding, etc). 	<ul style="list-style-type: none"> • 99 Memo – ESIA Intake CS All April 2 2024 • 100 Job posting for Connector Role January 2025 • 101 Job description for Connector Role January 2025 • 102 DSP Service Delivery Program Update 16 Aug 2024
4. Establish a Remedy Secretariat including a Project management and Implementation Team: <ul style="list-style-type: none"> a. DCS/DSP to align current Transformation Work Plan and budget to the agreed Remedy. b. Progressively design and build a new Remedy Secretariat/Project management and Implementation Team to progress urgent tasks such as Communications Plan and a Change Management Plan. 	COMPLETE <ul style="list-style-type: none"> • Project management structure in place to implement all Remedy related initiatives • Change management plan in place and in action • External Communications Plan developed with Arrivals and Departures and enacted. DSP shares key project updates with Inclusion NS and People First NS for distributions in their networks. DSP also holds webinars with DSP 	<ul style="list-style-type: none"> • 103 Innovation Portfolio Projects DSP 16 Dec 2024 • 104 External Communications Plan 31 Jan 2024 • 105 Change Management Plan Nov 2024 • 183 Screenshots of DSP online library 14 Jan 2025 • 206 Inclusion Nova Scotia Family Session on Individualized Funding and School Leavers 6 February 2025

¹ (documents 1 – 98 were disclosed in May 2024. Documents 99 – X are disclosed as part of this report)

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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c. Progress any new staff recruitments as a priority.	<p>Service Providers at least monthly. DSP leadership attends sector meetings (AGMs, Conferences, meetings, etc) as requested to share updates on the Remedy.</p> <ul style="list-style-type: none"> • Staff for new roles hired in October/November 2024 • Extensive strategies enacted to expedite the hiring process. This included prioritizing Remedy related recruitment corporately, obtaining permission from the union to conduct some processes concurrently, hiring additional Human Resources staff to support the hiring processes, conducting additional recruitment activities, etc. • A targeted recruitment campaign for IPSCs will begin in Summer of 2025. This will ensure skilled IPSCs can be hired in a timely manner. 	<ul style="list-style-type: none"> • Home page Nova Scotia Transforming Support • 106 Job Posting for LAC Sept 2024 • 107 Job Posting for IPSC Sept 2024 • 108 Job Posting for EFAC Sept 2024 • 11 Project Governance May 2024 • 109 Human Rights Remedy – Approved FTE Summary Jan 2025 • 110 DSP 2024-25 Estimates and Supplementary Detail Snapshot • 111 Recruitment Strategies and Mitigations Interim Progress Report Final 14 Jan 2025 • 228 Project Charter – Provincial Recruitment Strategy 25 March 2025
<p>5. Approve and implement intensive technical support and program design:</p> <p>a. Identify early potential external technical resources that will be required for leadership development, cultural change, development of new programs (including fidelity requirements for new Local Area Coordination and Intensive Planning and Support Coordination staff) and more detailed Project Implementation Plans.</p> <p>b. Hold intensive technical support/program design session in May 2023.</p>	<p>COMPLETE</p> <ul style="list-style-type: none"> • Experts engaged to support leadership development, design and implementation of new programs. Eddie Bartnik, Dr. Tim Stainton, Ralph Broad, Bronia Holyoak and Lorna Sullivan all engaged in leadership development, cultural change and development of project implementation plans. • Workshops on program design held in May 2023 and subsequently throughout 2024 as programs were being designed. 	<ul style="list-style-type: none"> • 14 Project charter – Design and Implement LAC, IPSC and EFAC • 15 Remedy Implementation Workshop Agendas • 183 Screenshots of DSP online library 14 Jan 2025 • 13 Fidelity Checklist LAC May 2024 • 16 Fidelity Checklist IPSC May 2024 • 19 Fidelity Checklist EFAC May 2024

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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	<ul style="list-style-type: none"> Fidelity checklists for LAC and IPSC completed and approved. IPSCs and LACs hired, trained and in place. 	
6. Approve and implement a government wide data collection mechanism to track and update baseline data as required in a timely and consistent manner as required and to provide data updates twice yearly.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none"> <i>Monitor Report July 2024</i> 	<ul style="list-style-type: none"> 133 Supported Decision Making Toolkit Jan 2025 136 Supported Decision Making Training Module 21 Nov 2024 230 Project Charter Supported Decision Making 1 April 2025
7. Develop written policy and process to ensure no new congregate or institutional facilities are established for persons with disabilities.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none"> <i>Monitor Report July 2024</i> 	
8. Take immediate actions to address any staff ceilings or other barriers to early recruitment of necessary staff – for example to do the early policy and program work required.	<p>COMPLETE</p> <ul style="list-style-type: none"> Regional Hub Managers, Closure Specialists and Team Leads all hired in August 2024. Staff recruitment took place throughout September, October and November of 2024 for LACs, IPSCs, EFACs, and CLF (community living facilitators). Extensive strategies were enacted to expedite the hiring process. This included prioritizing Remedy related hiring practices, obtaining permission from the union to conduct some processes concurrently, hiring additional Human Resources staff to support the hiring processes, conducting additional recruitment activities, etc. A targeted recruitment campaign specifically for IPSCs and LACs will begin in summer 2025. 	<ul style="list-style-type: none"> 106 Job Posting for LAC Sept 2024 107 Job Posting for IPSC Sept 2024 108 Job Posting for EFAC Sept 2024 112 Job Posting for Community Living Facilitator Sept 2024 145 Organizational Chart 23 Dec 2024 109 Human Rights Remedy – Approved FTE Summary Jan 2025 111 Recruitment Strategies and Mitigations Interim Progress Report Final 14 Jan 2025 228 Project Charter – Provincial Recruitment Strategy 25 March 2025

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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	This will ensure skilled IPSCs are hired in a timely manner	
9. Develop and plan implementation of Local Area Coordination, including individualized planning and coordination services (navigational) and Intensive Planning and Support Coordination (IPSC).	<p>COMPLETE</p> <ul style="list-style-type: none"> • Policy and framework of practice completed and approved • Staff training completed in November and December 2024 • LACs and IPSCs have been hired, trained and are working within the Regional Hubs. 	<ul style="list-style-type: none"> • 113 LAC Framework of Practice Jan 2025 • 114 IPSC Framework of Practice Jan 2025 • 115 Practice Framework for EFAC Jan 2025 • 14 Project Charter Design and Implement LAC, IPSC and EFAC 1 Sept 2023
10. Commence priority new services such as the Emergency Response team to avoid new institutional admissions and support persons with disabilities in their community of choice. In particular, the Emergency Response team is required to enable a set date for firm prohibition on admission to institutions and LTC facilities.	<p>COMPLETE</p> <ul style="list-style-type: none"> • Scoping workshops held with the Technical Report authors and DSP staff in November 2023. As a result, a shift in approach and messaging moving away from “emergency response” which suggests replicating existing emergency response services that already exist in the community, and instead focus on removing barriers to program participants accessing those existing services and strengthening strategies to prevent crisis. • Crisis Prevention and Community Response Strategy is complete and is part of the work of IPSCs and LACs. 	<ul style="list-style-type: none"> • 223 Crisis Prevention and Community Response Strategy Confidential 31 March 2025
11. DCS/DSP to continue with urgent new services that are aligned with the Remedy such as: a. Institutional closure b. Development of urgent new services that are aligned with the Remedy such as Shared Services, and new ILS places.	<p>COMPLETE</p> <ul style="list-style-type: none"> • Harbourside Lodge Adult Residential Centre closed in July 2023 • Inclusive for Life RCF in Dartmouth closed in June 2024. All 16 residents successfully moved to community and many are supported in the Independent Living Support Program. 	<ul style="list-style-type: none"> • 45 No New Admissions Policy Changes with Schedule May 2024 • 116 Facility Closure Letter Nov 2024

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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	<ul style="list-style-type: none"> • Since January 2023, licensed capacity in ARCs, RRCs and RCFS has reduced by 101 beds • There have been 582 new ILS placements over baseline. • The number of participants in Flex Independent has more than doubled over Y1 baseline, increasing to 129 from 60. • ILS+ was rolled out in May 2024 and provides up to a maximum of 84 hours a week of support (versus 31 hours in ILS) and options for overnight support. Thus far, 20 people are being supported in ILS+ and 9 more are in transition to it. • The Shared Services program has been fully developed and is operational. • No new admissions policy announced in May 2024, in effect January 1st, 2025 for ARC, RRC and RCF. 	
12. Appoint a Clinical Lead to lead the planning and development of the Multi-disciplinary Allied Health teams and inter agency development work	<p>COMPLETE</p> <ul style="list-style-type: none"> • Clinical Lead (now known as Director of Allied Health Supports) hired in May 2024 • Multi-Disciplinary Teams have been renamed “DSP Outreach Teams”. Extensive research and design has been completed. The team composition, service offerings and methods of access has all been designed. The Guiding Framework, Service Agreements and privacy impacts are being finalized now. The intention is to have two of the four teams operational by 	<ul style="list-style-type: none"> • 184 Allied Health Progress Update and Phased Approach report 14 Jan 2025 • 199 Disability Support Program Outreach Teams Meeting with Service Providers 30 April 2025

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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	<p>August 31, 2025. Design and Implementation underway.</p> <ul style="list-style-type: none"> A Manager of Allied Health was hired in May 2025. Team Lead in Allied Health roles are being designed. 	
13. Establish “no new admissions” policy once Emergency response capability in place.	<p>COMPLETE</p> <ul style="list-style-type: none"> No new admissions policy announced in May 2024 and in effect January 1st, 2025 for ARC, RRC and RCF. Crisis Prevention and Community Response Strategy is complete. 	<ul style="list-style-type: none"> 45 No New Admissions Policy Changes with Schedule May 2024 223 Crisis Prevention and Community Response Strategy Confidential 31 March 2025 197 Crisis Prevention and Community Response IPSC Training Scenarios 13 Jan 2025 198 Crisis Prevention and Community Response LAC Training Scenarios 13 Jan 2025
14. Harbourside closure completed and relocation of all those people who resided at Harbourside to their community of choice.	<p>COMPLETE</p> <ul style="list-style-type: none"> All 22 residents successfully moved to a community of their choice. However, one individual subsequently moved back into an Adult Residential Centre due to health concerns in October 2023 and remains there today. This individual has been assigned an IPSC to start planning for transition to community. 	
15. Commence work to remove waitlist for eligible applicants by establishing a human rights compliant pathway that ensures timely access to accommodative assistance. For the purposes of this Interim Settlement Agreement, “accommodative assistance” means social assistance, including	<p>COMPLETE</p> <ul style="list-style-type: none"> Local Area Coordinators, hired in November 2024, will help persons with disabilities find the appropriate supports in community, be they DSP or otherwise. Policy sections 9.3 and 9.4 removed. Review of 8 applicants who were previously denied 	<ul style="list-style-type: none"> 117 Collaborative Eligibility Pathway information 21 Nov 2024 101 Job description for Connector Role January 2025 46 Eligibility Policy Changes January 2024

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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<p>supports and services, that meet the different needs of persons with disabilities.</p> <p>a. This to include such elements as alignment with an enhanced DSP Intake and triage function, referrals to LAC/IPSC/Care Coordination/Emergency Response Team/other services and supports such as health and housing.</p> <p>b. The pathway to also identify where additional supports may be provided to streamline DSP eligibility determination.</p>	<p>under this policy completed. Three of these individuals have since passed away. The five remaining are being assigned IPSCs to proceed with planning.</p> <ul style="list-style-type: none">• The Collaborative Eligibility Pathway was approved in December 2024. This provides options for people who previously would have been denied DSP services under policy sections 9.3 and 9.4 with avenues to receiving appropriate supports. DSP will work with individuals, their support network and other government agencies to develop support plans that better meet people’s needs.• Local Area Coordinators will be available to anyone in Nova Scotia who self-identifies as having a disability. People who previously would not have met the disability criteria will be able to receive support through LACs.	
<p>16. Approve and implement eligibility and key DSP policy review and update, including rescinding Eligibility policy sections 9.3 and 9.4.</p> <p>a. Scope review of Licensing and standards.</p> <p>b. Review and address situation of individuals previously denied.</p>	<p>COMPLETE</p> <ul style="list-style-type: none">• Policy sections 9.3 and 9.4 rescinded in January 2024• Review of 8 applicants who were previously denied under this policy completed. Three of these individuals have since passed away. The five remaining are being assigned IPSCs to proceed with planning.• A review has been completed of the Homes for Special Care Act as it relates to Licensing in relation to the requirements of the Remedy. It	<ul style="list-style-type: none">• 46 Eligibility Policy Changes January 2024• 118 Review of cases previously denied 7 Jan 2025

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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	was prepared by Legal Counsel and subject to client privilege.	
17. Support Adult Capacity and Decision-making Act (ACDMA) review process by linking DSP to the review. Focus should be on using the presumptive capacity in NS law and on the practices of Supported Decision making.	<p>COMPLETE</p> <ul style="list-style-type: none"> The review of the ACDMA was completed in February 2022. The Department of Justice has developed a workplan to address findings of the review in a way that focusses on the presumptive capacity in NS law and practices of supported decision making. DSP training is based on using the presumption of capacity in NS law and on the practices of Supported Decision Making. DSP is beginning a new project to enhanced Supported Decision Making that is aligned with the new system of Individualized Funding with a focus on self-determination, choice and control. This work will build on existing legislation, new work within the Department of Justice, and the principles and philosophy of the Remedy. 	<ul style="list-style-type: none"> 204 Adult Capacity and Decision Making Act and Supported Decision Making Workplan 13 March 2025 164 DSP Training Schedule Nov Dec 2024 165 DSP Training Schedule January 2025 230 Project Charter Supported Decision Making 1 April 2025
18. Province to conduct early research into Individualized Funding (IF) backbone systems and connections to possible technical support.	<p>EXACT COMPLIANCE</p> <ul style="list-style-type: none"> <i>Monitor Report July 2024</i> 	
19. Coordinate Seniors and Long Term Care (SLTC) and DSP to work collaboratively on the development of consistent structures for Individualized Funding (IF) programs.	<p>COMPLETE</p> <ul style="list-style-type: none"> DSP and SLTC continue to work collaboratively on a number of initiatives The Individualized Funding Service and IT Application Request for Proposals was designed and will be awarded jointly between 	<ul style="list-style-type: none"> 120 Individualized Funding Service and IT Application RFP 2 July 2024 121 Correspondence between DSP and SLTC on Individualized Funding 11 Dec 2024

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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	<p>DSP and Seniors and Long-Term Care. The RFP closed in August 2024 and evaluation process is now in the final stages.</p> <ul style="list-style-type: none"> DSP has shared funding bands and Individualized Funding policy with SLTC and all relevant stakeholders. 	
20. Review and align current DSP work on developing enhanced supports for children. New efforts should be consistent and complementary to efforts outlined in this report. Respite options could focus on Homeshare approach that fosters relationships and networks as the child grows.	<p>COMPLETE</p> <ul style="list-style-type: none"> The development of a new array of services for Children and Youth (DSPCY) Project Charter was approved Nov 2024 and work is in progress 	<ul style="list-style-type: none"> 122 DSP Children & Youth Roadmap Project Charter Oct 2024
21. Establish a working group (DSP, IWK, Office of Addictions and Mental Health, Nova Scotia Health – NSH) to develop shared purpose and language on mandates, connection to the current process of development of a universal mental health and addictions system, partnering in case coordination between DSP and NSH for Complex cases, and address outstanding eligibility issues.	<p>COMPLETE</p> <ul style="list-style-type: none"> The DSP Director of Allied Health is part of the following initiatives: <ul style="list-style-type: none"> Working group established with OAMH, DHW, NSH. To complete a gap analysis of mental health services for persons with disabilities. C3 working group (Care Coordination Centre). The C3 group includes: the NSH Complex Care Manager, the Provincial Bed Manager, MHA, and a DSP Specialist. The mandate is plan for individuals who have been in hospital for at least 28 days and have been referred to DSP. The group also identifies and works with current DSP participants in hospital. The group identifies barriers, seek solutions, and 	<ul style="list-style-type: none"> 177 Department of Health and Wellness and Office of Addictions and Mental Health Implementing HRR Advisory Committee First Meeting 22 Aug 2024 178 Discharge Hub Core Team Terms of Reference Feb 2024 117 Collaborative Eligibility Pathway information 21 Nov 2024 123 Correspondence on Terms of Reference for C3 Working Group 13 Dec 2023

Interim Progress Report May 31, 2025 - Targets and Compliance

Year 1: February to June 2023

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	<p>ensure ongoing communication between systems.</p> <ul style="list-style-type: none">○ Converging Initiatives working group made up of representatives from DSP, DHW and NSH to align work between different departments○ Discharge Hubs/Health Beyond Hospitals working group. Allied Health Director part of this work with NSH, DHW and SLTC to improve outcomes for people leaving hospital● The Collaborative Eligibility Pathway was approved in December 2024. This provides options for people who previously would have been denied DSP services under policy sections 9.3 and 9.4 with avenues to receiving appropriate supports. DSP will work with individuals, their support network and other government agencies to develop support plans that better meet people’s needs.	