

*Interim Progress Report May 31, 2025 - Targets and Compliance*  
**Year 2: April 1, 2024 to March 31, 2025**

#	REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS
1.	Update as to status and work of the Roundtable.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>• Remedy roundtable continues to meet regularly. The next meeting is scheduled to coincide with receipt of the the Disability Rights Coalition’s response to this year’s annual report.</li> <li>• Outside of the Roundtable meetings, DSP continues to work closely with Roundtable member departments: Department of Health and Wellness (working access to primary health care), Seniors and Long-Term Care (work on the IF administrative service and the Shared Service Program), Education and Early Childhood Development (work on the School Leavers Program), Office of Addictions and Mental Health (completing an analysis in gaps in services), Department of Justice (updates to the ACDMA), the Accessibility Directorate (regular collaboration on accessibility standards), Municipal Affairs and Housing (by law changes and changes to housing programs) on specific Remedy initiatives.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>149</b> Remedy Roundtable Presentation 29 Oct 2024</li> <li>• <b>150</b> Remedy Roundtable Presentation 6 Jan 2025</li> <li>• <b>151</b> Remedy Roundtable Membership Jan 2025</li> </ul>
2.	<p>Leadership and Capability Panel established and has operational plan to advance training recommendations.</p> <p>a) Suite of training courses underway</p>	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>• A team of experts are engaged to support leadership development, design and implementation of new programs. Eddie Bartnik, Dr. Tim Stainton, Ralph Broad, Bronia Holyoak, Janet Cleese and Lorna Sullivan continue to be engaged in the development and delivery of training, cultural change and development of implementation plans.</li> <li>• Persons with disabilities contributed to the design and delivery of a range of training as part of a co-production model.</li> <li>• Funding has been provided to Inclusion NS to support the capacity building among family members of persons with disabilities to support implementation of the Remedy</li> <li>• DSP partnered with Nova Scotia Community College (NSCC) to deliver two Microcredentials for the Disability Support Sector---<i>Advocacy for the Rights of Persons with Disabilities</i> and <i>Human Rights Foundations for</i></li> </ul>	<ul style="list-style-type: none"> <li>• <b>164</b> DSP Training Schedule Nov Dec 2024</li> <li>• <b>165</b> DSP Training Schedule January 2025</li> <li>• <b>157</b> Optimal Individual Service Design Information for Hosts 18 Oct 2024</li> <li>• <b>180</b> Optimal Individual Service Design Course Participant feedback 10 Jan 2025</li> <li>• <b>183</b> Screenshots of DSP online library 14 Jan 2025</li> <li>• <a href="#">Provinces Hosts Second Rebuilding HOPE Conference   Nova Scotia Transforming Support</a></li> </ul>

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		<p><i>Disability Support Professionals.</i> A supervisor’s toolkit resource was developed with sector representatives to support the application of learnings in the workplace. The Microcredentials were co-created with first voice representatives and advice sought from a family and sector representatives. To date, 20 frontline and 20 supervisors participated in the program. NSCC is updating the content based on evaluation feedback and working with DSP to identify an approach to expand the roll out of the two modules.</p> <ul style="list-style-type: none"><li>• DSP funded service provider staff to take part in training that is aligned with the Remedy:<ul style="list-style-type: none"><li>○ Approximately 300 people took Trauma Informed Care</li><li>○ Approximately 100 people took “Foundations of Belonging”</li><li>○ Fifteen sector staff are completing Behaviour Interventions advanced Certificates.</li><li>○ 100 bursaries are being provided to enable people to take the Disability Support Program offered by NSCC or other private colleges.</li><li>○ A variety of workplace safety courses including: Psychological Health and Safety; Safe Handling and Mobility; Workplace Violence and Prevention Education; JOSH training; and Safety for Supervisors and Managers.</li></ul></li><li>• The Regional Hub Leadership team took part in extensive training in August 2024, much of which was delivered by the Leadership and Capability Panel. This was part of an intentional cultural change strategy to train leadership roles first so that they are then prepared to apply that learning as they onboard new staff.</li></ul>	<ul style="list-style-type: none"><li>• <b>220</b> Welcome to Foundations of Belonging in the Workplace 31 March 2025</li><li>• <b>201</b> Disability Support Professional Certificate Information Sheet 1 April 2025</li><li>• <b>231</b> Project Charter Workforce Competencies 31 March 202</li><li>• <a href="#">Bursaries for Disability Support Training Programs   Government of Nova Scotia News Releases</a></li><li>• <a href="#">Progress Update on Disability Support Transformation   Government of Nova Scotia News Releases</a></li><li>• <b>210</b> DSP Staff Webinar 16 April 2025</li></ul>

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		<ul style="list-style-type: none"> <li>Remaining Regional Hub roles (LAC, IPSC, EFAC, and CLFs) took part in extensive training in November and December 2024 and January 2025 much of which was delivered by the Leadership and Capability Panel.</li> <li>IPSCs took part in the Optimal Individual Service Design course (OISD) in November/December 2024 working with individuals in institutions and TSAs to develop support plans.</li> <li>Learnings from the initial rounds of training will be reflected in the planning currently underway for the next round of new hires which will be delivered by persons with disabilities and international experts in the field of disability. This training is also being supported by a new role in DSP – Manager of Training. This person will be responsible for creating and maintaining a high quality and sustainable training program for new and current staff.</li> </ul>	
3.	<p>The Province will have carried out the following during the year:</p> <p>a) Increase in ILS plus/Flex Independent options by a further 200 (in addition to Y1 baseline)</p> <p>b) Reduction in the total number of people residing in ARC, RRC, and RCF's by 30% compared to baseline (n= 261 of 870 total) by providing those individuals with meaningful access to accommodative assistance to meet their different needs to live in community, and</p> <p>c) Planning commences in November for next groups including capacity</p>	<p style="text-align: center;"><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Recruitment and Earlier Unknown factors related to system transformation</p> <p>a) ILS and Flex Independent are both uncapped programs and are open to any DSP participants whose needs can be met in these programs and who choose to accept the supports offered. The number of participants in Flex Independent has more than doubled over Y1 baseline, increasing to 129 from 60.</p> <p>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.</p>	<ul style="list-style-type: none"> <li>• <b>68</b> ILS + Policy May 2024</li> <li>• <b>157</b> Optimal Individual Service Design Information for Hosts 18 Oct 2024</li> <li>• <b>129</b> Optimal Service Design Focus Participant Information 7 Jan 2025</li> <li>• <b>180</b> Optimal Individual Service Design Course Participant feedback 10 Jan 2025</li> <li>• <b>193</b> Community Transition Guide Families and Support Networks 1 Feb 2025</li> <li>• <b>194</b> IPSC Transition Guidebook 1 Feb 2025</li> <li>• <b>195</b> Facility Closure Guide DSP Partners 31 Jan 2025</li> </ul>

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	<p>building and enhanced current lifestyle (n=208)</p> <p>d) 20 of 83 Existing TSA's converted</p> <p>e) Plans for people in Psychiatric Hospitals and Forensic Hospital to return to their community of choice including:</p> <p>a. Plans and timelines finalized for 'return to local community' for people in psychiatric hospitals (n=48) and Forensic (n=28)—for completion within 5 years from year 1.</p> <p>b. Minimum of 78 individuals currently identified on Service Request List. Target 20% = 16 people moved out in Year 2.</p> <p>f) Increase in Shared Services Under 65 in LTC Shared Services of 81 persons in community of choice for a total of 110 of 200 total.</p> <p>g) Planning/capacity building/enhanced current lifestyle for those in other systems (Shared services and psychiatric hospital/forensic) Baseline versus: estimate numbers n=16.</p>	<p>b) The percentage of people who have transitioned from ARCs, RRCs and RCFs or are engaged in transition planning with an IPSC represents 33% of ARC, RRC, RCF occupancy over baseline. Furthermore, occupancy in ARCs, RRCs and RCFs has decreased by 189 over baseline representing a 22% decrease. IPSCs are currently working with 94 residents of institutions developing individual transition plans, representing 11% of the baseline ARC, RRC and RCF population.</p> <p>c) IPSCs began working with residents of ARCs, RRCs and RCFs (via OISD training) in November 2024. In the immediate term, IPSCs are being assigned to individuals living in institutions (including hospitals), those on the Service Request List receiving no DSP supports and those living in Temporary Shelter Arrangements. IPSCs are currently working with 104 individuals, this number will increase significantly in the coming months as additional staff are hired. Now that these staff are in place, DSP is set to meet remedy targets and the overall 5-year timeline.</p> <p>d) TSAs are emergency settings established in response to a crisis and urgent need for an individual who would otherwise face homelessness, or an emergency room visit for a non-medical reason. Before approving a TSA, all other placement options are explored and exhausted. The increase in the number of TSA's is a result of the number of participants who have been advised by a Service Provider they are no longer able to provide support and are requested to move from their current placement option. To avoid the individual having to go to a shelter (most shelters will not accept DSP participants) or going to the local Emergency Room, we are in a position of having to secure a TSA as an interim measure until the participant can access an IPSC. We have also</p>	<ul style="list-style-type: none"> <li>• <b>196</b> Regional Closure Specialist Facility Closure Guidebook 31 Jan 2025</li> <li>• <b>221</b> Your Path to Transitioning to Community 1 Feb 2025</li> <li>• <b>121</b> Correspondence between DSP and SLTC on Individualized Funding 11 Dec 2024</li> <li>• <b>190</b> Home Sharing Program Description 13 March 2025</li> <li>• <b>191</b> Home Share Home Study Toolkit 21 March 2025</li> <li>• <b>189</b> Home Share Safeguards 28 Feb 2025</li> <li>• <b>215</b> Service Provider Home Share Presentation on Application and Funding 25 March 2025</li> <li>• <b>216</b> Service Provider Home Share Presentation on the NS Model 11 March 2025</li> <li>• <b>217</b> Service Provider Home Share Presentation 8 April 2025</li> <li>• <b>218</b> Home Share Coordinating Organizations Application 8 April 2025</li> <li>• <b>70</b> Notice of Disability Supplement May 2024</li> </ul>

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	<p>h) Increase of 50 in DSP Homeshare options in community of choice, by region (n= 50): 240 total Homeshare.</p> <p>i) Reduce DSP Waitlist (Service Request List) “no support group” (Baseline of 589) by 289 through IF options.</p> <p>j) Planning and support and Discretionary Funding for DSP Waitlist (SRL) “no service” group— estimate numbers n=350</p> <p>k) Four new DSP Regional Multidisciplinary Mental Health/Health Teams and Supports operational, and Integration of Multi-disciplinary outreach teams complete.</p> <p>l) Award new proposals for MH/Health programs.</p> <p>m) Province wide Critical Response Team/capability fully established.</p> <p>n) Commence planning for School Leavers (n =100).</p>	<p>seen an increase in the number of families who are requesting immediate placement of their family member due to an increase in support needs that can no longer be managed in the family home. Additional respite is provided as an initial response however there has been the need to create TSA’s due to the lack of available placements and the need for an immediate resolution for the family. The approval of a TSA is not a permanent solution, participants will assigned an IPSC and have access to Individualized Funding. Transition planning commenced with TSAs via OISD training in December. While the number of people being supported in TSA’s has not decreased, they are being supported in community and have not been admitted to institutional settings. IPSCs are prioritizing working with people in TSA’s and developing plans to transition to other community options. We anticipate that TSA numbers will begin to reduce with additional IPSCs starting.</p> <p>e) IPSCs are prioritizing working with individuals in psychiatric and forensic hospitals to make plans for a good life in community</p> <p>f) Shared Services is a combination of supports and funding from the Disability Support Program (DSP) and the Department of Seniors and Long-Term Care (SLTC) for individuals with disabilities under the age of 65 living in nursing homes whose primary needs are physical and whose nursing needs can be met in the community. Eight individuals are being supported in this program. An additional five individuals are in the process of being assessed for the program and six people are in the process of being matched with a service provider.</p>	<ul style="list-style-type: none"> <li>• <b>184</b> Allied Health Progress Update and Phased Approach report 14 Jan 2025</li> <li>• <b>223</b> Crisis Prevention and Community Response Strategy 31 March 2025</li> <li>• <b>197</b> Crisis Prevention and Community Response IPSC Training Scenarios 13 Jan 2025</li> <li>• <b>198</b> Crisis Prevention and Community Response LAC Training Scenarios 13 Jan 2025</li> <li>• <b>199</b> Disability Support Program Outreach Teams Meeting with Service Providers 30 April 2025</li> <li>• <b>139</b> School Leavers Project Charter July 2024</li> <li>• <b>181</b> School Leavers Overview 14 Jan 2025</li> <li>• <b>227</b> School Leavers Process Flow 1 April 2025</li> <li>• <b>222</b> School Leavers Info Sheet 1 April 2025</li> <li>• <b>209</b> Office of Addictions and Mental Health Overview of Actions and Achievements 1 April 2025</li> <li>• <b>224</b> Confidential Department of Health and Wellness, Office of Addictions and Mental Health, Department of Opportunities and</li> </ul>

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		<p>It is anticipated that uptake of the Shared Services model of support (now part of Individualize Funding) will increase significantly now that IPSCs are in place. IPSC will engage at an individual level with DSP eligible participants in Nursing Homes which will increase their awareness of support options available via DSP.</p> <p>g) IPSCs are being assigned to people who would benefit from Shared Services and those in hospital. IPSCs are working with individuals to develop support plans aligned with their own choices.</p> <p>h) Extensive research and design work went into the Home share program design. The Home share service is now finalized and applications for Home Share Coordinating Organizations were released in March 2025. DSP Service Providers were invited to apply to become host agencies. DSP aims to have 8 organizations approved across the province in the coming months. DSP has also provided grant funding to the Nova Scotia Residential Agencies Association to provide support to these host agencies and to create a community of practice for Home Share. Finally, DSP is in the process of launching a marketing campaign to raise public awareness about Home Share and begin to attract host families to the program.</p> <p>i) SRL “no support group” stands at 296 representing a reduction of 293, hit the target identified in the Remedy. At the same time the remaining individuals on the SRL “no support group” are being prioritized for assignment to LACs or IPSCs.</p>	<p>Social Development Executive Summary on Implementing the Human Rights Case Remedy 1 April 2025 DRAFT</p> <p>• <b>225</b> CONFIDENTIAL Proposed Primary Healthcare Pathway for DSP Participants 1 April 2025 DRAFT</p>

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		<p>j) Individuals receiving support from Employment Support and Income Assistance and living with a disability can now access the Disability Supplement of \$308/month.</p> <p>k) DSP has been working closely with the Service Providers who operate ARCs and RRCs today to design the new services that will be required in community today. This took time and some change management efforts. Today, however, these Multi-Disciplinary Teams have been renamed “DSP Outreach Teams” and composition, service design, mandate and methods of access have been defined and implementation is underway. New roles within DSP are being designed and will support the work of the outreach teams. The Guiding Framework, Service Agreements and privacy impacts are being finalized now. The intention is to have two of the four teams operational by August 31, 2025. In the meantime, DSP will prioritize services for those leaving institutions and will contract private services when needed. In Western and Eastern Regions, DSP-funding for the existing allied health positions, identified as included in the DSOT composition, will continue, with additional funding being provided as required to strengthen the teams and broaden the scope of services offered. New service agreements will be established to support these organizations in shifting to providing community-based outreach support to DSP participants move into and settle in their communities of choice. In Central and Northern Regions new Disability Support Outreach Teams will be established through partnerships agreements between DSP and health and/or community based organizations . These teams will not include RN/LPN positions. There will be a separate Nursing Strategy Project initiated this fiscal year, that will identify and address the</p>	

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		<p>nursing support and service needs of DSP participants now and into the future.</p> <p>l) In 2021, Nova Scotia became the first province in Canada to commit to providing universal mental health and addictions care. An approach to care where Nova Scotians can get the help they need, regardless of their ability to pay out of pocket – this includes support for early intervention to get people access to the care they need sooner. Many Nova Scotians are already accessing mental health and addictions support at no cost across the province through provincial partnerships with Nova Scotia Health, the IWK, community-based organizations, and others. Mental Health and Addictions funding through the Office of Addictions and Mental Health (OAMH) has increased from \$248M in 2021-2022 to \$363M in 2025. Document <b>209</b> Office of Addictions and Mental Health Overview of Actions and Achievements 1 April 2025 outlines details of the actions OAMH and our health system partners have taken to improve access to community-based care to address system-wide gaps for all Nova Scotians, including DSP eligible individuals, with that funding. Fit-gap analysis completed with Department of Health and Wellness and Office of Addictions and Mental Health. DSP worked closely with those departments throughout the process. Short-, Medium- and Long-Term actions have been identified to make further progress on identified primary care, mental health, and behavioural health gaps and challenges for DSP eligible individuals.</p>	



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		<p>m) Crisis Prevention and Community Response Strategy has been implemented and staff have been provided with training.</p> <p>n) School Leavers program design work with the Department of Education and Early Childhood Development (EECD) is complete. Registration is in progress and offers participation to the first 100 students to be identified in June 2025. The program commences in September 2025.</p>	
4.	<p>Full implementation of new individualized funding (IF) infrastructure system/administration and support structure:</p> <p>i. Individualized Funding: Implementation/evaluation/revision of new IF system.</p> <p>ii. Recruit coaches.</p> <p>iii. Develop trainer and user manuals.</p> <p>iv. Implementation of training for staff and users.</p>	<p style="text-align: center;"><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Procurement</p> <ul style="list-style-type: none"> <li>The design of a new Individualized Funding policy and an Individualized Funding Administrative Service required extensive engagements, research and collaboration across multiple divisions. This represents a massive shift in the way DSP provides services and funding for persons with disabilities and a considerate process was required. Extensive training, user manuals and implementation supports are in place. The IF coaches will be part of the Administrative Service once launched.</li> <li>The Individualized Funding (IF) policy was implemented in January 2025. Significant engagement with participants, families and service providers informed the development of the IF policy including: <ul style="list-style-type: none"> <li>53 phone interviews</li> <li>63 in-person interviews</li> <li>433 surveys</li> <li>61 question booklets</li> <li>5 in-person group sessions</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• <b>131</b> Individualized Funding Policy Jan 2025</li> <li>• <b>161</b> Individualized Funding Training Module Dec 2024</li> <li>• <b>120</b> Individualized Funding Service and IT Application RFP 2 July 2024</li> <li>• <b>202</b> Individualized Funding Plan Tool for Program Participants 31 March 2025</li> <li>• <b>207</b> Individualized Funding Info for Families 20 Mar 2025</li> <li>• <b>206</b> Inclusion Nova Scotia Family Session on Individualized Funding and School Leavers 6 February 2025</li> <li>• <a href="#">More Funding for Disability Support, Summer Respite   Nova Scotia Transforming Support</a></li> <li>• <b>187</b> Funding Band Methodology 29 January 2025</li> </ul>

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		<ul style="list-style-type: none"> <li>The first cohort of IPSCs, EFACs and LACs were trained in the new IF policy Nov/December 2024 and then a second cohort received training in January 2025.</li> <li>Individualized Funding Administrative Backbone Service, including IF coaches, is set to go live in the winter of 2026 but it is dependent on contract negotiations. The newness and complexity of the service requirements resulted in the procurement process taking longer than anticipated.</li> <li>The Collaborative Case Management system (CCM), which includes mechanisms to administer Individualized Funding, went live in January 2025.</li> <li>As an interim step, while the DSP transitions all participants to permanent, individualized funding, DSP increased funding in existing Individualized Funding programs (Flex Individualized Funding, Direct Family Support for Children and Alternative Family Supports) by \$9.4 million impacting approximately 2,900 individuals. This interim measure is intended to address the diminished purchase power caused by CPI pressures and stabilize and support these participants during the next 1-2 years while the Remedy focuses on closing institutions and supporting those on the SRL not receiving DSP.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>208</b> Monthly Service Provider Webinar – Individualized Funding and No New Admissions 10 Dec 2024</li> <li>• <b>219</b> Monthly Service Provider Webinar Individualized Funding 14 Jan 2025</li> <li>• <a href="#">Service Provider Webinars on Vimeo</a></li> </ul>
5.	Person Directed Planning (PDP) tender awarded for Province wide Peer and Technical Support Program.	<p style="text-align: center;"><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Earlier unknown factors related to system transformation</p> <ul style="list-style-type: none"> <li>• The Peer Support for Planning Project began in October 2024. However, in February 2025, the Remedy authors recommended the project slow down to enable time for the Local Area Coordinators to become</li> </ul>	<ul style="list-style-type: none"> <li>• <b>162</b> Peer Support Planning Project charter 15 Oct 2024</li> <li>• <b>163</b> Family Leadership Proposal Inclusion NS 26 Mar 2024</li> <li>• <b>200</b> Peer and Technical Support Planning Expert Session 5 May 2025</li> </ul>

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		<p>established into their roles to better inform program design. A further workshop on this project was held with the Remedy authors in May 2025. It is anticipated that this service will go live in winter of 2026.</p> <ul style="list-style-type: none"> <li>Investments in Inclusion Nova Scotia's peer support program were made in 2024 to support families.</li> </ul>	<ul style="list-style-type: none"> <li><b>205</b> Guidance from Remedy Authors on Peer and Technical Support 5 Feb 2025</li> </ul>
6.	Whether ACDMA reforms are enacted or not widespread accessible training commenced regarding supported decision-making for individuals, families, service providers and DSP staff. Anchor efforts (in the short term) on the presumption of capacity secured in NS law.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>A Supported Decision Making Toolkit has been developed and used to support training provided for all new hires.</li> <li>Training for staff is based on the presumption of capacity secured in Nova Scotia Law.</li> <li>DSP is undertaking work to further enhance Supported Decision Making and align it 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.</li> </ul>	<ul style="list-style-type: none"> <li><b>133</b> Supported Decision Making Toolkit Jan 2025</li> <li><b>136</b> Supported Decision Making Training Module 21 Nov 2024</li> <li><b>230</b> Project Charter Supported Decision Making 1 April 2025</li> <li><b>204</b> Adult Capacity and Decision Making Act and Supported Decision Making Workplan 13 March 2025</li> </ul>
7.	Continue development and implementation of Local Area Coordination, including individualized planning and coordination services (navigational) and Intensive Planning and Support Coordination (IPSC).	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>The first recruitment cohort of IPSCs, EFACs and LACs were hired and trained in November/December 2024 and a second recruitment cohort were trained in January 2025.</li> <li>A targeted recruitment campaign for IPSCs will begin in Summer of 2025. This will ensure skilled IPSCs can be hired in a timely manner.</li> <li>Modelling of caseload allocation indicates that DSP will be able to adhere to the caseload ratio requirements of the Remedy. Additional hiring of LACs and the introduction of the peer support planning program will mitigate the risk of IPSC caseloads exceeding mandated levels and expand support planning capacity and options.</li> <li>DSP is introducing a new position "Manager of Support Planning" who will be responsible for ensuring support plans adhere to the fidelity and</li> </ul>	<ul style="list-style-type: none"> <li><b>166</b> Continuous Improvement Hub Project Charter Dec 2024</li> <li><b>165</b> DSP Training Schedule January 2025</li> <li><b>164</b> DSP Training Schedule Nov Dec 2024</li> <li><b>202</b> Individualized Funding Plan Tool for Program Participants 31 March 2025</li> <li><b>211</b> Individualized Funding Tool My Funding Proposal 31 March 2025</li> <li><b>212</b> Individualized Funding Tool My Plan Tool 31 March 2025</li> </ul>

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		<p>philosophy of strong support planning. This manager will also create and facilitate a community of practice for IPSCs and LACs.</p> <ul style="list-style-type: none"> <li>• A continuous Improvement Hub has been established to receive regular feedback from LACs and IPSCs, address practice challenges and support practice improvements to ensure adherence to fidelity requirements.</li> <li>• DSP has been working through a tripartite table 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. This has come to fruition as a result of extensive work between the three parties and a commitment to working collaboratively to support all Nova Scotians with disabilities to live in the community of their choice.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>213</b> Individualized Funding Planning Toolkit 31 March 2025</li> <li>• <b>214</b> Individualized Funding Support Plan Tool 31 March 2025</li> <li>• <b>188</b> Modelling Assumptions Staffing and Remedy Targets 30 May 2025</li> <li>• <b>192</b> April Caseload Dashboard 1 April 2025</li> <li>• <b>203</b> Hiring Dashboard 12 May 2025</li> <li>• <b>228</b> Project Charter – Provincial Recruitment Strategy 25 March 2025</li> </ul>
8.	Approve and implement fidelity requirements (see Year 1 for requirements/criteria).	<p><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>• Fidelity checklists for LAC, IPSC and EFACs finalized, approved and embedded in Practice Frameworks.</li> <li>• The first recruitment cohort of IPSCs, EFACs and LACs were trained on Fidelity Checklists in November /December 2024 and then a second recruitment cohort was trained in January 2025.</li> <li>• A continuous Improvement Hub has been established to receive regular feedback from LACs and IPSCs, address practice challenges and support practice improvements to ensure adherence to fidelity requirements.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>13</b> Fidelity Checklist LAC May 2024</li> <li>• <b>16</b> Fidelity Checklist IPSC May 2024</li> <li>• <b>19</b> Fidelity Checklist EFAC May 2024</li> <li>• <b>166</b> Continuous Improvement Hub Project Charter Dec 2024</li> <li>• <b>228</b> Project Charter – Provincial Recruitment Strategy 25 March 2025</li> </ul>
9.	Implement technical support, training and fidelity requirements for new Local	<b>EXACT COMPLIANCE</b>	<ul style="list-style-type: none"> <li>• <b>164</b> DSP Training Schedule Nov Dec 2024</li> </ul>

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#	REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS
	Area Coordination and Intensive Planning and Support Coordination staff (see Year 1 for requirements/criteria).	<ul style="list-style-type: none"> <li>• Extensive training provided to Regional Hub Leadership team in August 2024</li> <li>• Training for LACs, IPSCs and EFACs in November/December 2024 and January 2025</li> <li>• Technical and training support provided by Leadership and Capability Panel.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>165</b> DSP Training Schedule January 2025</li> <li>• <b>156</b> Leadership and Capability Panel Membership January 2025</li> </ul>
10.	<p>Recruit, train and have fully operational 50 new LACs and 65 new IPSCs in accordance with approved fidelity criteria.</p> <p>a) Total FTE/Ratios to meet benchmarks 1:20 for IPSCs and 1:50 for LACs; Supervisors at 1:8</p> <p>b) Referrals to LAC/IPSC/ Care Coordination/ Emergency Response Team/other services and supports such as health and housing.</p> <p>c) IPSC to be made available as required on demand after the initial intensive planning and facilitation process</p>	<p style="text-align: center;"><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Recruitment and talent shortages</p> <ul style="list-style-type: none"> <li>• Regional Hub Managers and Team Leads were hired in August 2024</li> <li>• Cohorts of LACs, IPSCs and EFACs were hired in November 2024 and in January 2025.</li> <li>• A targeted recruitment campaign for IPSCs (the most challenging position to fill) will begin in summer of 2025. This will ensure skilled IPSCs can be hired in a timely manner.</li> <li>• Approximately 97 Regional Hub positions were filled between August 2024 and May 1<sup>st</sup>, 2025 including IPSCs and LACs. Considering those new hires, 104 people have been assigned IPSCs and 61 people have been assigned LACs.</li> <li>• Many of the new hires were existing Care Coordinators. DSP has had to balance continuity of service for program participants in the existing system while also launching the new model of service. Many of the new hires had to stay in their current role until a sufficient number of people had been hired to backfill their current position. DSP has been gradually increasing the workload of the new roles while maintaining a manageable workload within the existing system. In discussions with the Remedy authors, they acknowledge that the resources and effort</li> </ul>	<ul style="list-style-type: none"> <li>• <b>188</b> Modelling Assumptions Staffing and Remedy Targets 30 May 2025</li> <li>• <b>228</b> Project Charter – Provincial Recruitment Strategy 25 March 2025</li> </ul>

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#	REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS
		<p>required to maintain the current system while designing and implementing the new system was underestimated.</p> <ul style="list-style-type: none"> <li>DSP has sufficient numbers of IPSCs to meet closure timelines within 36 months. DSP is also on track to provide IPSC or LAC support to everyone currently on the Service Request List not DSP receiving support.</li> </ul>	
11.	Recruit next 30 new LACs and 15 new IPSCs (ex Care Coordinator FTE).	<p style="text-align: center;"><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Recruitment and talent shortages</p> <ul style="list-style-type: none"> <li>A targeted recruitment campaign for IPSCs and LACs will begin in summer of 2025. This will ensure skilled IPSCs can be hired in a timely manner</li> <li>Extensive strategies undertaken to expedite recruitment including: prioritizing Remedy related hiring corporately (over other programs), obtaining permission from the union to conduct some processes concurrently, hiring additional Human Resources staff to support the hiring process, conducting additional recruitment activities, etc.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>106</b> Job Posting for LAC Sept 2024</li> <li>• <b>107</b> Job Posting for IPSC Sept 2024</li> <li>• <b>111</b> Recruitment Strategies and Mitigations Interim Progress Report Final 14 Jan 2025</li> <li>• <b>228</b> Project Charter – Provincial Recruitment Strategy 25 March 2025</li> </ul>
12.	New Provincial capability for technical and peer planning supports program operational.	<p style="text-align: center;"><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Earlier unknown factors related to system transformation</p> <ul style="list-style-type: none"> <li>The Peer and Technical Planning Support Project began in October 2024. However, in February 2025, the Remedy authors recommended the project slow down to enable time for the Local Area Coordinators to get into their roles. A further workshop on this project was held with the Remedy authors in May, 2025. It is anticipated that this service will go live in the summer of 2025.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>162</b> Peer Support Planning Project charter 15 Oct 2024</li> <li>• <b>163</b> Family Leadership Proposal Inclusion NS 26 Mar 2024</li> <li>• <b>200</b> Peer and Technical Support Planning Expert Session 5 May 2025</li> <li>• <b>205</b> Guidance from Remedy Authors on Peer and Technical Support 5 Feb 2025</li> </ul>

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#	REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS
		<ul style="list-style-type: none"> <li>Investments in Inclusion Nova Scotia's peer supports were made in 2024.</li> </ul>	
13.	Local Area Coordination (LAC) staff commence disbursing discretionary funding.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>Discretionary funding, known as Small Sparks, is available to LACs through the Regional Hub Model. New LAC staff are trained on this program at the time of hiring.</li> </ul>	<ul style="list-style-type: none"> <li><b>160</b> CONFIDENTIAL Small Sparks Materials Dec 2024 DRAFT</li> </ul>
14.	Update DSP client projection model using baseline numbers and provide assumptions, and outputs of the model.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>Participant/staffing model continues to inform planning and decision making.</li> <li>Continuous Improvement Hub continues to monitor caseload ratios and effectiveness.</li> </ul>	<ul style="list-style-type: none"> <li><b>188</b> Modelling Assumptions Staffing and Remedy Targets 30 May 2025</li> <li><b>192</b> April Caseload Dashboard 1 April 2025</li> </ul>
15.	Disability Sector Workforce Plan approved, and implementation commenced.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>The Workforce Strategy was approved and released publicly in January 2025.</li> <li>The Workforce Strategy implementation plan is underway</li> </ul>	<ul style="list-style-type: none"> <li><b>167</b> DSP Workforce Strategy 14 Jan 2025</li> <li><b>201</b> Disability Support Professional Certificate Information Sheet 1 April 2025</li> <li><b>231</b> Project Charter Workforce Competencies 31 March 2025</li> <li><a href="#">Bursaries for Disability Support Training Programs   Government of Nova Scotia News Releases</a></li> <li><a href="#">Progress Update on Disability Support Transformation   Government of Nova Scotia News Releases</a></li> </ul>
16.	Regional Advisory mechanisms commenced.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>Terms of Reference for Regional Advisory Council and application process developed in consultation with DSP Advisory Committee.</li> </ul>	<ul style="list-style-type: none"> <li><b>146</b> Regional Advisory Council Terms of Reference Jan 2025</li> </ul>

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#	REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS
		<ul style="list-style-type: none"> <li>Regional Advisory Council members were announced on the 29<sup>th</sup> of March, 2025. The councils are made up of 50% persons with disabilities and then a range of other equity seeking groups are represented. Four councils have been established, and operations will be per the terms of reference, with support from the Regional Hub Managers. These Advisory Councils will also have access to innovation funding of up to \$500,000 per year (total for all four Councils) to design and implement innovative solutions to local challenges.</li> <li>The inaugural meetings of the Councils are scheduled for June 4th (Northern), June 5th (Eastern), June 11th, (Western) and June 18th (Central). The Executive Director of DSP will attend all of these first meetings.</li> </ul>	<ul style="list-style-type: none"> <li><b>147</b> CONFIDENTIAL Advisory Council Innovation Fund Guidelines Jan 2025 DRAFT</li> <li><b>226</b> Regional Advisory Council Names 29 March 2025</li> <li><a href="#">New Regional Advisory Councils to Support Community-led Remedy Work   Nova Scotia Transforming Support</a></li> </ul>
17.	Innovations and Transition funding commenced and allocated through Regional Advisory mechanism and Services Transition Development Fund commenced.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>Regional Advisory Councils will have access to innovation funding as identified in TOR</li> <li>Service Evolution fund supporting existing providers to move to a different model of service aligned with the Remedy launched in October 2024. Twenty-two grants have been awarded thus far.</li> </ul>	<ul style="list-style-type: none"> <li><b>146</b> Regional Advisory Council Terms of Reference Jan 2025</li> <li><b>147</b> Advisory Council Innovations Fund Guidelines Jan 2025</li> <li><b>158</b> Service Evolution Fund Poster Oct 2024</li> <li><b>159</b> Service Evolution Fund Application form Oct 2024</li> <li><b>186</b> Overview of Service Evolution</li> <li>News Funding Grants 14 Jan 2025</li> <li><b>226</b> Regional Advisory Council Names 29 March 2025</li> <li><a href="#">New Regional Advisory Councils to Support Community-led Remedy Work   Nova Scotia Transforming Support</a></li> </ul>



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#	REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS
			<ul style="list-style-type: none"><li>• <a href="#">Service Evolution Fund Supports Remedy Projects   Government of Nova Scotia News Releases</a></li><li>• <a href="#">Funding for More Remedy Projects   Government of Nova Scotia News Releases</a></li></ul>
18.	External evaluation team commences individual outcomes monitoring with agreed new tool.	<p><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Procurement</p> <ul style="list-style-type: none"><li>• Request for Proposals closed November 5, 2024</li><li>• DSP is working with the Provincial Procurement division to finalize this contract.</li></ul>	<ul style="list-style-type: none"><li>• <b>155</b> RFP Human Rights Remedy Evaluation 8 Oct 2024</li></ul>
19.	Updated DSP policies and practices consistent with eligibility of shared services participants.	<p><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"><li>• Policy sections 9.3 and 9.4 were rescinded in January 2024. These policy sections previously prohibited individuals who are now eligible for Shared Services, from accessing DSP.</li><li>• Review of 8 applicants who were previously denied under this policy completed. Three of these individuals have passed away. The five remaining are being assigned IPSCs to proceed with planning.</li><li>• 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 to live in community. DSP will work with individuals, their support network and other government agencies to develop support plans that better meet people’s needs.</li><li>• Local Area Coordinators will be available to anyone in Nova Scotia who self-identifies as having a disability. People who previously would not</li></ul>	<ul style="list-style-type: none"><li>• <b>46</b> Eligibility Policy Changes January 2024</li><li>• <b>118</b> Review of cases previously denied 7 Jan 2025</li><li>• <b>117</b> Collaborative Eligibility Pathway information 21 Nov 2024</li></ul>

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		have met the disability criteria will be able to receive support through LACs.	
20.	Update efforts to remove waitlist for eligible applicants by establishing a human rights compliant client pathway that ensures timely access to accommodative assistance.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>• 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).</li> <li>• DSP applicants will no longer be added to the Service Request List. Instead, through the DSP Connector, they will be offered appropriate services through LACs, or IPSCs.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>101</b> Job description for Connector Role January 2025</li> </ul>
21.	Update as to development and implementation of new program policies including arrangements for triage and “immediate assistance” once found eligible.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>• The DSP Connector and/or LACs will ensure immediate access to supports.</li> <li>• Immediate financial assistance is also available through Employment Supports and Income Assistance, supported by the DSP Connector or LAC.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>101</b> Job description for Connector Role January 2025</li> <li>• <b>11</b> LAC Job Description May 2024</li> </ul>
22.	Update as to regional review of “eligible but not receiving support” group to examine demographics and determine priorities.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>• This is an ongoing requirement of the Regional Hub leadership team to complete</li> <li>• The Continuous Improvement Hub will support the Leadership Team to provide a report on “eligible but not receiving support” group as part of the annual progress report</li> </ul>	<ul style="list-style-type: none"> <li>• <b>166</b> Continuous Improvement Hub Project Charter Dec 2024</li> </ul>
23.	Reduce waitlist for eligible applicants by implementing planning and support/Discretionary Funding for Waitlist “no service” group. Baseline of 589 versus: Waitlist/no support group reduced by n =289	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>• Service Request List/ Wait List for “no service” group has reduced by 293 individuals to date, over baseline.</li> <li>• Local Area Coordinators are available to provide support to any individual who identifies as having a disability. They are also able to access discretionary funding for these individuals.</li> </ul>	<p><b>113</b> LAC Framework of Practice Jan 2025</p>

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		<ul style="list-style-type: none"> <li>IPSCs are assigned on a priority basis to individuals who are eligible for DSP and not receiving any services.</li> </ul>	
24.	Report back on implementation of operational procedures to provide that applications that are denied based on eligibility criteria are documented.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>The Collaborative Case Management (CCM) digital system has this capability now built in.</li> <li>The Regional Hub Leadership team is responsible for ongoing monitoring of these applications and will be reported on in the Annual Progress Report.</li> </ul>	<ul style="list-style-type: none"> <li><b>144</b> Documenting Eligibility Decision in CCM Dec 2024</li> </ul>
25.	Housing rental costs assistance review complete.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>DSP Excess Shelter policy allows the provision of additional rental cost assistance in addition to the Standard Household Rate.</li> <li>Excess Shelter is currently being provided to 1010 people. Excess Shelter is frequently approved in recognition of the challenges persons with disabilities face when it comes to finding appropriate housing.</li> </ul>	<ul style="list-style-type: none"> <li><b>169</b> Excess Shelter Policy</li> </ul>
26.	Review of National Building Code adjustments complete.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>Building Code standards were reviewed by DSP and feedback provided to Department of Municipal Affairs and Housing in September 2023.</li> <li>Ensuring safe and accessible housing arrangements will be included in the safeguarding component of the IPSC &amp; LAC support planning process.</li> </ul>	<ul style="list-style-type: none"> <li><b>80</b> NS Building Code Consult Feedback DSP 25 Sept 2023</li> </ul>
27.	Licensing and standards review complete / HR principles embedded.	<p style="text-align: center;"><b>EXACT COMPLIANCE</b></p> <ul style="list-style-type: none"> <li>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 was prepared by Legal Counsel and subject to client privilege.</li> <li>Program Pathways will have safeguarding and Human Rights principles entrenched.</li> <li>DSP is undertaking a new project to explore replacement of licensing and accreditation options in the Individualized Funding model.</li> </ul>	<ul style="list-style-type: none"> <li><b>229</b> Project Charter DSP Licensing Housing Safeguards 1 April 2025</li> </ul>

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#	REMEDY REQUIREMENT	STATUS AS OF MAY 31, 2025 / COMMENTS	SUPPORTING DOCUMENTS
28.	First review of new governance structures.	<p><b>SUBSTANTIAL PROGRESS*</b></p> <p>*The reasons for Substantial Progress instead of Exact Compliance are explained in the 2025 Annual Progress Report in the Challenges section under Procurement</p> <ul style="list-style-type: none"><li>• The Continuous Improvement Hub is receiving regular feedback on the new Regional Hub model and governance structures throughout the first year. Information gathered through this process will then be fed into the external evaluation.</li><li>• The first review of the new governance structures will be included in the scope of the external evaluation.</li></ul>	<ul style="list-style-type: none"><li>• <b>166</b> Continuous Improvement Hub Project Charter Dec 2024</li><li>• <b>155</b> RFP Human Rights Remedy Evaluation 8 Oct 2024</li></ul>