COMMUNITY SERVICES COMMITTEE
Wednesday, February 9, 2022

AGENDA

1.   Call to order.

2.   Roll call.

3.   Disclosure of pecuniary interest and general nature thereof.

4.   Adoption of minutes of previous meeting held on January 12, 2022.

5.   Delegations - None at time of mailing.

6.   Community Services Department   <u>Page</u>

    a) Department Report   3

    b) Ontario Works Division Report   11

    c) Child Care and Early Years Division Report   64

7.   New Business.

8.   Closed Meeting – None at time of mailing.

9.   Date of next meeting (Wednesday, March 9, 2022) and adjournment.

NOTE: a) **County Council: Wednesday, February 23, 2022.**
          b) Submissions received from the public, either orally or in writing may become part of the public record.

Strategic Plan

Strategic Plan Goal # 1: To inform the Federal and Provincial government on our unique needs so that Renfrew County residents get their "fair share".

Initiatives:
   (a) Create s strategic communications plan
   (b) Identify and advocate for issues important to the County of Renfrew.

Strategic Plan Goal # 2: Fiscal sustainability for the Corporation of the County of Renfrew and its ratepayers.

Initiatives:
   (a) Commitment from Council supporting principles within the Long-Term Financial Plan
   (b) Establish Contingency Plan to respond to provincial and federal financial pressures and opportunities beyond the Long-Term Financial Plan.

Strategic Plan Goal # 3: Find cost savings that demonstrate our leadership while still meeting community needs.

Initiatives:
   (a) Complete community needs assessment
   (b) With identified partners implement plan to optimize service delivery to the benefit of our residents.

Strategic Plan Goal # 4: Position the County of Renfrew so that residents benefit from advances in technology, to ensure that residents and staff have fair, affordable and reasonable access to technology.

Initiatives
   (a) Ensure that the County of Renfrew is top of the list for Eastern Ontario Regional Network funding for mobile broadband

   (b) Lobby for secure and consistent radio systems for first responders and government
   (c) Put a County of Renfrew technology strategy in place.

COMMUNITY SERVICES REPORT

TO: Community Services Committee

FROM: Laura LePine, Director of Community Services

DATE: February 9, 2022

SUBJECT: Department Report

INFORMATION

1.   **Rural Ontario Municipalities Association (ROMA) [Strategic Goal #1 (b)]**

Attached as Appendix I is the County of Renfrew brief that was presented to Minister Clark, Minister of Municipal Affairs and Housing at the annual ROMA conference. The County of Renfrew was granted a delegation with Minister Clark on Monday, January 24, 2022 to discuss housing in Renfrew County. The delegation was chaired by Chair James Brose and was attended by Warden Robinson, CAO Paul Moreau, Director of Property and Development Craig Kelley and Director of Community Services Laura LePine.

Attached as Appendix II is a follow up letter to Minister Clark.

RESOLUTIONS

2.   **Investing in Inclusive and Accessible Communities [Strategic Plan Goal #3]**

Recommendation: THAT the Community Services Committee recommends to County Council that the County of Renfrew apply to the Inclusive Community Grants funding program for the development of a County of Renfrew Housing Action Plan.

Background
Attached as Appendix III is information relating to the Province's call for applications for the next round of Inclusive Community Grants. As stated,

these grants provide successful municipalities, non-profit community organizations, and Indigenous communities with up to $60,000 for a local project that will help older residents and people with disabilities participate in community life. This year, Ontario will prioritize projects that support under-served communities and those that address COVID-19-related challenges.

Over the past couple of years, the County of Renfrew has identified that there is a need for various levels of government to further address the affordable housing situation in the region. The strategies also suggested that partnerships amongst governmental organizations, private developers, and non-profit entities would prove advantageous as a path forward to seeing housing needs being met. To reach a true understanding of what role both tiers of local government can assist, it is prudent for the County to consult with the local municipalities on the entire inventory of municipally-owned property assets to determine what possibilities exist for affordable housing developments, a mixed-housing development, aspirational/attainable housing developments, etc.

To that end staff are recommending that an application be pursued to create a new Housing Action Plan. It is proposed, based on final confirmation of eligible expenses and outcomes, that the funding will go towards a consultant who will assist with taking the information gleaned from the County's Housing and Homelessness Strategy and the County's Senior's Housing Strategy, along with extensive consultation with the local municipalities and come up with a housing action plan that would collect and review all municipal assets and provide a best practice approach for disposal and/or conversion of those assets.

The deadline for applications is March 3, 2022.

3.   **Ontario Works Division Report**

Attached as Appendix IV is the Ontario Works Division Report prepared by Ms. Andrea Patrick, Manager of Ontario Works, providing an update on activities.

4.   **Child Care and Early Years Division Report**

Attached as Appendix V is the Child Care and Early Years Division Report, prepared by Ms. Judy Mulvihill, Manager of Child Care and Early Years Services, providing an update on activities.

Affordable and Attainable Housing Capital Project Funding

Partnerships

Minister of Municipal Affairs and Housing

Thank you!

We are very pleased to be the recipient of $1.5 million through the Social Services Relief Fund 4 to start construction in 2022 on a capital project that will allow us to build six new affordable and supportive housing units in Renfrew County. This program has come at a crucial time as affordable and attainable housing continues to be a significant issue in our area.

Background:

The Ministry of Municipal Affairs and Housing has shown its flexibility in supporting municipalities to find ways of increasing affordable housing stock, and while these tools can be very effective in some areas, rural communities are having difficulty adapting them to their various situations.

The last affordable housing development in the County of Renfrew was designated for seniors and that was six years ago in the Town of Arnprior. Two years prior, a non-profit housing group in the Town of Petawawa also built affordable seniors housing. In both those cases, the developments each received in excess of $2 million in provincial funding.

In our research, we have not been able to find a single non-profit housing development built in the County of Renfrew that did not receive a financial incentive from the province.

Our solution:

The County of Renfrew wants to build on the success of our partnership with MMAH, where we used our $750,000 in modernization funding to become more efficient in the way in which we serve our residents, while obtaining considerable long-term financial savings.

The County of Renfrew would welcome the opportunity to work with the province, perhaps in a pilot project capacity, to find more efficient and innovative ways of addressing the critical shortage of attainable and affordable housing across rural Ontario.

We continue to react to the needs in our community without having the benefit of time or money, both of which are required if we hope to plan for now and into the future. Together, we have the ability to collaborate on an in-depth study to identify among other things the needs of residents in rural Ontario, innovative community housing successes nationally and internationally potentially leading to a more modern approach to future housing solutions to reflect a more efficient use of provincial/federal/municipal dollars.

The County of Renfrew is proposing this new approach to Community Housing begin in our region. The County prides itself on its exceptional aptitude for innovative approaches and practices to challenging situations. The Renfrew County Virtual Triage Assessment Centre (RCVTAC), Long-term Care Community Paramedic Program, and the modernization of our administrative delivery model, are three excellent examples of the forward thinking approach of our staff and council.

In closing, the County of Renfrew would welcome the opportunity to have further discussion with MMAH to explore, in greater detail, the potential of working together for the betterment of all Ontarians.

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**Office of the
County Warden**

County of Renfrew
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January 31, 2022   Appendix II

The Honorable Steve Clark
Minister of Municipal Affairs and Housing
17th Floor, 777 Bay Street
Toronto, Ontario M7A 2J3
minister.mah@ontario.ca

Dear Minister Clark:

Thank you very much for meeting with us at ROMA on Monday, January 24, 2022 to discuss innovative approaches to community housing and new purpose built homes in Renfrew County. We are invigorated by your announcement that your government is taking steps to assist further modernization and efficiency programs amongst municipalities like our own, through Phase 3 of the Municipal Modernization Program.

The County of Renfrew is like many other municipalities; working with our communities and community leaders to determine the best type of housing mix to help bridge the gap in affordable housing and encourage homeownership. The solutions lie in collaboration between many partners, including the private and public sectors, and we're working on an innovative approach to determine how Renfrew County moves on our next projects. We are encouraged by your-interest in partnering with us to meet the housing needs of our residents now and into the future.

To that end, we would like to reiterate our desire to work within one of your funding envelopes. Our plan is to develop an approach to reevaluate our housing strategy, catalogue County and other public assets, and garner input from the public on what partnerships could be leveraged to create an innovative approach to providing housing in communities across the region, including the Algonquins of Pikwakanagan. We will establish new relationships with the goal of creating a where, when and how solution, in order to identify a range of housing opportunities that truly meet the needs of residents.

In closing, the County of Renfrew looks forward to working with your Ministry to determine our best next steps so we can achieve these goals together.

Sincerely,

Debbie Robinson

Debbie Robinson, Warden
County of Renfrew
warden@countyofrenfrew.on.ca

c: Honourable Doug Ford, Premier of Ontario
     John Yakabuski, MPP, Renfrew-Nipissing-Pembroke and Parliamentary Assistant to the Premier

Ontario Investing in Inclusive and Accessible Communities

Applications are now open for 2022-23 Inclusive Community Grants

January 25, 2022
Seniors and Accessibility

TORONTO — Ontario is investing $750,000 to help communities across the province become more inclusive and accessible for people of all ages and abilities.

Applications for the next round of Inclusive Community Grants opened today. These grants provide successful municipalities, non-profit community organizations, and Indigenous communities with up to $60,000 for a local project that will help older residents and people with disabilities participate in community life. This year, Ontario will prioritize projects that support under-served communities and those that address COVID-19-related challenges.

"Our communities are made stronger when we ensure everyone is included in community life," said Raymond Cho, Minister for Seniors and Accessibility. "That's why I'm proud to announce the launch of the latest round of funding for Inclusive Community Grants, which will help communities across the province design and implement community-based projects to meet the needs of seniors and people with disabilities."

The Inclusive Community Grants program was created in November 2020 and funding from the first round went towards projects such as:

- Making public buildings and outdoor spaces more accessible in 13 rural communities across the Haliburton and Kawartha Lakes region
- Developing culturally appropriate age-friendly community resources for Haudenosaunee Elders at Six Nations Health Services
- Addressing the emerging needs of older adults in light of the COVID-19 pandemic by the Lakehead Social Planning Council in a partnership with Centre Francophone de Thunder Bay and Pride Thunder Bay.

Applications for Inclusive Community Grants are now open and available at Ontario.ca/GetFunding. Eligible organizations will have until March 3, 2022, to submit their applications.

Quick Facts

- Ontario is investing $750,000 to support community-based projects as part of the 2022-23 cycle of the Inclusive Community Grants program.
- Inclusive and Age-Friendly Communities work to promote accessibility, safety and active living for people of all ages and abilities.

Additional Resources

- Creating a more inclusive Ontario: age-friendly community planning guide for municipalities and community organizations
- Accessibility in Ontario
- Programs and services to support Ontario's seniors

Related Topics

Home and Community

Information for families on major life events and care options, including marriage, births and child care. Also includes planning resources for municipalities. _Learn more_

Media Contacts

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Communications Branch
msaa.media@ontario.ca

ONTARIO WORKS REPORT
Prepared by Andrea Patrick, Manager of Ontario Works
Prepared for: Community Services Committee
February 9, 2022

INFORMATION

1. **Ontario Works Caseload Statistics [Strategic Plan Goal #1 (b)]**

Month	2021 Total Caseload	2020 Total Caseload
January	1,062	1,273
February	1,052	1,287
March	1,076	1,327
April	1,048	1,344
May	1,037	1,268
June	1,014	1,199
July	1,002	1,160
August	985	1,125
September	946	1,074
October	974	1,083
November	977	1,080
December	1,017	1,073

2. **Social Assistance Service Delivery Temporary Measures [Strategic Plan Goal #3 (b)]**

    Since the beginning of the pandemic, the Ministry of Children, Community and Social Services (MCCSS) has put various measures in place to reduce the strain for social assistance front-line staff and health care professionals. Currently we are at a critical point of the pandemic and with a surge of COVID cases the demand for social assistance has been continuously increasing.

    Given this information, MCCSS has made some additional changes to ease the administrative burden and allow staff to focus on supporting the needs of recipients:

    - Suspending the March 2022 Eligibility Verification Process (EVP) Audit Plans for Ontario Works and the Ontario Disability Support Program. Additionally, sites will not be held to Ministry established performance targets for the January 2022 EVP audits.
    - Pausing the year-end reporting and annual reconciliation (Audited Financial Statements) deadlines for municipalities and First Nations.
    - Waiving the requirement to submit a Service Plan Addendum for 2022.

    The Ministry will communicate any changes to reporting deadlines and the resumption of EVP reviews once public health and safety measures are lifted.

    Attached as Appendix OW-I is an email dated January 14, 2022 from MCCSS for further details on the above changes.

3. **eSignature is expanding in Ontario Works in 2022 [Strategic Plan Goal #3 (b)]**

    MCCSS is excited to introduce an eSignature option for social assistance recipients. Between February and June of this year, the new signature solution will be rolled out across the province in five phases. The County of Renfrew is one of ten municipalities going live in the first phase. Two staff members have been identified as leads on this project to help coordinate the roll-out and to champion this new initiative. The new technology will enable consent forms as well as the rights and responsibilities form to be signed digitally to reduce the need for in-person visits. This initiative will be expanded over time to offer the eSignature option for additional forms.

This technology was successfully piloted in two Ontario Works (OW) and two Ontario Disability Support Program (ODSP) offices in the fall which led to the province-wide implementation plan.

4. **September 2021 Provincial Social Assistance Caseload Forecast Update [Strategic Plan Goal #1 (b)]**

   Attached as Appendix OW-II is a memo dated December 10, 2021, from the Director of the Social Assistance Service Delivery Branch introducing the September 2021 Social Assistance Caseload and Expenditure Forecast report.

   The annual caseload forecast from MCCSS was prepared by the Business Intelligence and Practice Division, using actual social assistance data and labour market trends up to September 2021. The forecast shows an anticipated caseload increase in 2022-23 of 6.2% for ODSP and 17.3**%** for OW over the previous fiscal year.

5. **Human Services Integration Maturity Model [Strategic Plan Goal #3 (b)]**

   Attached as Appendix OW-III is a memo dated December 6, 2021, from the Assistant Deputy Minister of the Strategic Policy Division, MCCSS regarding the Human Services Integration (HSI) Maturity Model. The Ministry contracted Deloitte to engage with municipal partners to develop a shared vision for system development. The HSI Maturity Model is to be used as a tool to guide both provincial and municipal delivery agents. It will inform planning and delivery decisions and help identify opportunities for further integration that will continually improve the client experience.

6. **Social Assistance Renewal: What We Heard [Strategic Plan Goal #3 (b)]**

   Attached as Appendix OW-IV is a memo dated January 20, 2022, from the Assistant Deputy Minister of the Social Assistance Programs Division regarding the release of the report "What We Heard – Staff and Client Engagement Findings". The report outlines the results from collaborative engagements that were held throughout 2021 with both provincial and municipal social assistance staff and will be used to inform the development of the new service delivery operating model.

From: Social Assistance (MCCSS) <Social.Assistance@ontario.ca>

Sent: January 14, 2022 4:08 PM

Subject: Social Assistance Service Delivery Temporary Measures

[CAUTION -- EXTERNAL E-MAIL - Do not click links or open attachments unless you recognize the sender.]

Quick Summary

The Ministry is enacting additional temporary measures to help ease staff capacity concerns and allow delivery partners to focus efforts where it's needed most.

FYI for

•   Patti Redmond, Director, Social Assistance Service Delivery Branch

•   Rick Raghubir, Manager, Social Assistance Performance and Accountability Branch

•   Ontario Works Administrators

o   CMSMs/DSSABs

•   Social Assistance Program Managers

•   Social Assistance Program Supervisors

What's Happening

At the onset of the pandemic the Ministry put various measures in place to reduce in-person contact and ease the burden for Social Assistance frontline staff and health care professionals. Several high impact measures that address program staff and health care capacity are still in place.

Currently, we are at a critical point in the pandemic with the surge of COVID cases putting a strain on all systems. As the demand for social assistance increases alongside of staff shortages across SA programs, additional measures are being put in place to ease the burden including:

•   Suspending the March 2022 Eligibility Verification Process (EVP) Audit Plans for Ontario Works and the Ontario Disability Support Program. Additionally, sites will not be held to ministry established performance targets for the January 2022 EVP audits. Delivery partners are encouraged to continue working though any backlog of EVPs as capacity allows.

•   Eliminating January 2022 interim reporting for First Nation delivery partners.

• Pausing the year-end reporting and annual reconciliation (Audited Financial Statements) deadlines for municipalities and First Nations.

• Waiving the requirement to submit a Service Plan Addendum for 2022.

The ministry will communicate expectations and timelines for year-end reporting deadlines and the resumption of EVP reviews once public health and workplace safety measures are lifted.

More Information

Temporary Social Assistance measures that have been in place since the onset of the pandemic in 2020 include:

• Expanded Emergency Assistance Program

• Not requiring Healthcare Professional Verification for Health and Additional Benefit forms

• Automatic extensions for expired Health and Additional Benefits

• Not requiring in person verification of client identity documentation

• Permitting verbal consent for client applications and consent forms

• Not requiring 24-month financial reviews

• Flexible attestations for Additional Benefits payrun

• Permitting legal clinics to sign/submit internal review requests and consent forms on behalf of clients

• Appointment scheduler has been turned off in OASA to reduce in-office traffic

These measures will remain in place for the time being and will be reassessed once public health and workplace safety measures are lifted.

Contact

If you have any questions or concerns, please contact Danielle Lewis Danielle.lewis@ontario.ca.

Sent from

Jeff Bowen, Director, Social Assistance Performance and Accountability Branch

Ministry of Children,   **Ministère des Services**
Community and Social Services **à l'enfance et des Services**
                                 sociaux et communautaires

Director's Office   Bureau du directeur
Social Assistance   Direction de la prestation des
Service Delivery Branch   services en matière d'aide sociale

Ontario

December 10, 2021

MEMORANDUM TO: Ontario Works Administrators

FROM: Patti Redmond
             Director, Social Assistance Service Delivery Branch

RE: September 2021 Social Assistance Caseload Forecast
_____

Enclosed is the September 2021 social assistance caseload forecast for the 2021-22 and 2022-23 fiscal years prepared by the Business Intelligence and Practice Division of the Ministry of Children, Community and Social Services.

This September 2021 Social Assistance Caseload and Expenditure Forecast uses actual social assistance data and labour market trends up to and including September 2021 and the September 2021 unemployment rate forecast of the Ministry of Finance. It incorporates the impacts of policy and program changes implemented to date. Note that this is a forecast of what the caseload level would be if assumed economic and policy conditions prevail in the current and next fiscal years.

The document also provides a distribution of the province-wide caseload forecast by Consolidated Municipal Service Manager (CMSM)/District Social Services Administration Board (DSSAB) for planning purposes only. The distribution is based on each CMSM/DSSAB's 2021-22 year-to-date actual average share of the provincial caseload.

I trust you will find this information useful.

Patti Redmond
Director, Social Assistance Service Delivery Branch

Ontario Ministry of Children, Community and Social Services
September 2021 Provincial Social Assistance Caseload Forecast

ONTARIO WORKS AVERAGE MONTHLY CASELOAD September 2021 Forecast			
	2020-21*	2021-22	2022-23
Singles with children	64,458	62,205	71,085
% change		-3.5%	14.3%
Singles without children	133,169	127,186	150,821
% change		-4.5%	18.6%
Couples	19,607	17,681	22,028
% change		-9.8%	24.6%
Total Ontario Works	217,234	207,071	243,934
% change		-4.7%	17.8%
Temporary Care Assistance	6,851	7,047	7,122
% change		2.9%	1.1%
GRAND TOTAL	**224,084**	**214,118**	**251,057**
% change		-4.4%	17.3%
*actual monthly average caseload			

ONTARIO DISABILITY SUPPORT PROGRAM AVERAGE MONTHLY CASELOAD September 2021 Forecast			
	2020-21*	2021-22	2022-23
Singles	333,886	335,241	356,604
% change		0.4%	6.4%
Couples	44,259	43,185	46,379
% change		-2.4%	7.4%
Total ODSP	378,145	378,427	402,984
% change		0.1%	6.5%
Assistance for Children with Severe Disabilities	24,613	25,219	25,747
% change		2.5%	2.1%
GRAND TOTAL	**402,758**	**403,646**	**428,731**
% change		0.2%	6.2%
*actual monthly average caseload			

1. Forecast

▫ Following the increase in the maximum number of weeks people could receive federal COVID-19 recovery benefits, the forecast Ontario Works caseload for 2021-22 has been adjusted downward by about 60,100 cases (21.9%) compared to the September 2020 caseload forecast, as individuals and families in financial need due to the COVID-19 pandemic continued to receive federal COVID-19

benefits. In 2021-22, the Ontario Works average monthly caseload is forecast to be about 214,000 cases – about 4.4% lower than in 2020-21. This includes a potential surge following the end of the federal Canada Recovery Benefit in October 2021, leading to an average monthly Ontario Works caseload that could reach 246,000 from November 2021 to March 2022, 54,000 more cases each month compared to the forecast monthly average from April 2021 to October 2021. Some factors could impact whether this surge materializes:

- o The impacts of federal benefits on people's asset levels is unknown. Some people may have built up their asset levels and may not qualify for Ontario Works when their receipt of federal benefits ends.
- o The impacts of COVID (including vaccination policies) and federal benefits on people's behaviours towards work is unknown.

- Following recent caseload trends, the forecast Ontario Disability Support Program (ODSP) caseload has been adjusted downward by about 10,400 cases (2.4%), on average, over three years from 2021-22 to 2023-24 compared to the September 2020 caseload forecast. The ODSP average monthly caseload is forecast to increase by about 0.2% in 2021-22 and 6.2% in 2022-23. In subsequent years, the caseload is forecast to increase by about 2.9% a year, on average, returning to its pre-COVID growth trend.

- Total Ontario Drug Benefit (ODB) Program expenditures in 2021-22 are projected to be about $1.1 billion – about 31.1% higher than in 2020-21. Contributing to higher expenditures in 2021-22 is the anticipated caseload surge following the end of the federal Canada Recovery Benefit, a forecast increase of Hepatitis C treatment costs of over 30%, and the relatively lower forecast rebate from prescription drug manufacturers that the Ministry of Health determines based on actual ODB claims beginning in 2021-22.

2. Caveats

- This social assistance caseload forecast uses actual social assistance data and labour market trends up to and including September 2021. It includes the expected impacts of 2021 Budget initiatives and other approved program and policy changes to date. It does not incorporate potential impacts of Social Assistance Recovery and Renewal initiatives that have not yet been implemented, the potential out-year transfer of employment assistance-related funding as part of Employment Services Transformation, nor initiatives the Ministry is considering as part of the 2022-23 Multi-Year Planning exercise.

- This is a forecast of what the caseload and expenditure levels would likely be if current expectations prevail in the future. The forecast assumes that current

policies and practices continue over the next four years. However, a variety of risks to this forecast exists.

▣ The Ministry of Finance's September 2021 Labour Market Forecast is a key input to this social assistance caseload forecast and is a source of risk.

▣ The Ministry also faces the following forecast risks:

  o A decision by the federal government to expand access to Employment Insurance (EI) (e.g., to provide EI coverage to the self-employed and those in the gig economy) could result in actual social assistance caseloads that are lower than indicated in this forecast.

  o Higher than anticipated uptake of the new Canada Worker Lockdown Benefit and higher than historical uptake of the Canada Recovery Caregiving Benefit and Canada Recovery Sickness Benefit brought about by potential public health lockdowns could result in actual social assistance caseloads that are lower than indicated in this forecast.

  o Any potential public health lockdowns as a result of a fourth or subsequent wave of COVID-19 infections that would limit access to the health system could also delay applications for ODSP, resulting in actual ODSP caseloads that are lower than indicated in this forecast.

  o Actual social assistance expenditures could be higher than forecast if the ODB rebate from prescription drug manufacturers is lower than estimated and/or if actual Hepatitis C treatment costs are higher than estimated.

September 2021 Social Assistance Caseload Forecast Distributed by 47 CMSM/DSSAB's

▣ A distribution of the provincial social assistance caseload forecast by CMSM/DSSAB is provided for planning purposes only. The Ministry does not produce a caseload forecast at the CMSM/DSSAB level that reflects local economic conditions. The Ministry only produces a forecast of the Ontario Works caseload and the Ontario Disability Support Program caseload at the provincial level.

▣ This distribution is based on each CMSM/DSSAB's 2021-22 YTD (i.e. April 2021 to October 2021) actual average share of the provincial caseload.

September 2021 Caseload Forecast Distributed by CMSM/DSSAB - Ontario Works

REGION	CMSM/DSSAB	Ontario Works (including Temporary Care Assistance) Monthly Average Caseload		
		2020-21*	2021-22	2022-23
TORONTO	Toronto CMSM	66,952	64,250	75,335
CENTRAL EAST	Dufferin CMSM	481	421	493
	Simcoe CMSM	5,350	4,734	5,550
	Wellington CMSM	1,863	1,751	2,053
	York CMSM	7,769	7,535	8,834
CENTRAL WEST	Halton CMSM	1,895	1,713	2,009
	Peel CMSM	13,858	12,074	14,157
	Waterloo CMSM	8,666	8,392	9,840
EASTERN	Cornwall CMSM	1,605	1,493	1,751
	Lanark CMSM	889	772	905
	Leeds & Grenville CMSM	1,285	1,151	1,350
	Ottawa CMSM	15,634	14,717	17,256
	Prescott & Russell CMSM	917	874	1,024
	Renfrew CMSM	1,133	1,118	1,311
HAMILTON-NIAGARA	Brant CMSM	1,954	1,904	2,233
	Hamilton CMSM	10,569	9,941	11,656
	Niagara CMSM	9,276	9,006	10,560
	Norfolk CMSM	1,192	1,140	1,336
	Oxford CMSM	1,227	1,169	1,371
NORTH EAST	Cochrane DSSAB	1,729	1,818	2,131
	Greater Sudbury CMSM	3,253	2,948	3,456
	Manitoulin-Sudbury DSSAB	520	530	621
	Muskoka CMSM	698	668	783
	Nipissing DSSAB	1,894	1,784	2,091
	Parry Sound DSSAB	654	638	748
	Timiskaming DSSAB	663	633	742
NORTHERN	Algoma DSSAB	709	682	799
	Kenora DSSAB	597	663	777
	Rainy River DSSAB	232	226	265
	Sault Ste. Marie DSSAB	1,951	1,884	2,209
	Thunder Bay DSSAB	2,893	2,836	3,325
SOUTH EAST	Durham CMSM	7,815	7,224	8,470
	Hastings CMSM	2,017	1,908	2,237
	Kawartha Lakes CMSM	1,459	1,345	1,578
	Kingston CMSM	2,266	2,210	2,592
	Northumberland CMSM	601	518	607
	Peterborough CMSM	3,062	2,986	3,501
	Prince Edward-Lennox & Addington CMSM	834	839	984
SOUTH WEST	Bruce CMSM	453	451	528
	Chatham-Kent CMSM	2,258	2,253	2,642
	Grey CMSM	1,298	1,230	1,443
	Huron CMSM	421	411	482
	Lambton CMSM	2,714	2,625	3,078
	London CMSM	9,995	9,620	11,280
	St. Thomas CMSM	1,256	1,168	1,370
	Stratford CMSM	686	679	797
	Windsor CMSM	7,093	6,853	8,035
First Nations		11,549	12,332	14,460
Provincial Total (including First Nations)		**224,084**	**214,118**	**251,057**

Numbers may not add up due to rounding

* Actual monthly average caseload

September 2021 Caseload Forecast Distributed by CMSM/DSSAB -ODSP

REGION	CMSM/DSSAB	Ontario Disability Support Program (including Assistance for Children with Severe Disabilities) Monthly Average Caseload		
		2020-21*	2021-22	2022-23
TORONTO	Toronto CMSM	85,574	86,150	91,504
CENTRAL EAST	Dufferin CMSM	1,182	1,185	1,259
	Simcoe CMSM	15,073	15,011	15,943
	Wellington CMSM	5,097	5,102	5,419
	York CMSM	14,869	14,803	15,723
CENTRAL WEST	Halton CMSM	6,943	6,940	7,371
	Peel CMSM	22,669	22,720	24,132
	Waterloo CMSM	13,738	13,757	14,612
EASTERN	Cornwall CMSM	5,832	5,835	6,198
	Lanark CMSM	2,813	2,818	2,993
	Leeds & Grenville CMSM	3,954	3,963	4,209
	Ottawa CMSM	27,493	27,591	29,305
	Prescott & Russell CMSM	3,022	3,034	3,223
	Renfrew CMSM	3,864	3,859	4,099
HAMILTON-NIAGARA	Brant CMSM	5,819	5,830	6,192
	Hamilton CMSM	21,972	22,067	23,439
	Niagara CMSM	17,598	17,582	18,675
	Norfolk CMSM	3,275	3,269	3,472
	Oxford CMSM	3,086	3,082	3,273
NORTH EAST	Cochrane DSSAB	3,331	3,328	3,535
	Greater Sudbury CMSM	6,812	6,841	7,266
	Manitoulin-Sudbury DSSAB	1,033	1,026	1,090
	Muskoka CMSM	1,988	1,996	2,120
	Nipissing DSSAB	4,785	4,770	5,066
	Parry Sound DSSAB	1,628	1,630	1,731
	Timiskaming DSSAB	1,624	1,609	1,709
NORTHERN	Algoma DSSAB	1,713	1,709	1,815
	Kenora DSSAB	1,308	1,309	1,390
	Rainy River DSSAB	516	516	548
	Sault Ste. Marie DSSAB	4,319	4,333	4,603
	Thunder Bay DSSAB	6,173	6,206	6,592
SOUTH EAST	Durham CMSM	15,995	16,016	17,011
	Hastings CMSM	9,233	9,253	9,828
	Kawartha Lakes CMSM	3,031	3,055	3,245
	Kingston CMSM	7,731	7,755	8,237
	Northumberland CMSM	2,744	2,756	2,928
	Peterborough CMSM	5,865	5,870	6,234
	Prince Edward-Lennox & Addington CMSM	2,763	2,772	2,945
SOUTH WEST	Bruce CMSM	1,868	1,870	1,987
	Chatham-Kent CMSM	4,837	4,846	5,147
	Grey CMSM	3,574	3,585	3,808
	Huron CMSM	1,918	1,918	2,037
	Lambton CMSM	4,019	4,012	4,261
	London CMSM	16,694	16,667	17,703
	St. Thomas CMSM	2,969	2,970	3,155
	Stratford CMSM	1,931	1,933	2,053
	Windsor CMSM	14,983	14,965	15,895
First Nations		3,502	3,530	3,749
Provincial Total (including First Nations)		402,758	403,646	428,731

Numbers may not add up due to rounding

* Actual monthly average caseload

Ministry of Children, Community and Social Services

Strategic Policy Division

315 Front Street W, 3rd Floor
Toronto, Ontario M7A 1E9

Telephone: 416-325-4771

Ministère des Services à l'enfance et des Services sociaux et communautaires

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December 6, 2021

Memorandum to: Provincial-Municipal Human Services Collaborative (PMHSC) Membership

From: Karen Glass
Assistant Deputy Minister
Strategic Policy Division
Ministry of Children, Community and Social Services

Subject: <u>**Human Services Integration (HSI) Maturity Model**</u>

As discussed at the November 9th meeting of the Provincial-Municipal Human Services Collaborative (PMHSC), please find attached a copy of the Human Services Integration Maturity Model and self-assessment tool.

During the summer of 2021, the Ministry of Children Community and Social Services worked with Deloitte to engage with ministry partners and the 47 Consolidated Municipal Service Managers/District Social Services Administration Boards (CMSMs/DSSABs) to develop a shared vision for system development in Ontario articulated through a Human Services Maturity Model.

The HSI Maturity Model outlines a shared vision for system development across provincial ministries and municipalities by providing a tool to assess progress towards a shared desired end state. The vision describes the desired end state of a seamless human services system where services are delivered effectively and efficiently to meet individual needs, whether directly provided by government or our community partners.

The HSI Maturity Model:
- Is a tool to support organizations in making transformations in complex and changing environments;
- Describes different stages along a spectrum, moving towards a shared end-goal;
- Allows for assessment of current state and evaluates impacts of program/system design;
- Helps identify which areas may be prioritized for change;

- Supports decision makers by outlining how options for change will advance maturity along the spectrum; and,
- Uses an equity lens to address the needs of all through adequate services, supports and resources.

The Province will be using the Maturity Model to assess our current levels of maturity across various programs, and to measure our own progress towards a fully integrated Human Services System as we contemplate future changes. We would encourage you as partners to also begin using the Maturity Model within your own human service areas to inform planning and delivery, and to identify and evaluate opportunities to further integration.

As our work on integration pushes forward, we have also opened dialogue with the Ontario Municipal Social Services Association (OMSSA) to ensure ongoing opportunities to provide feedback on tools such as the Maturity Model, and to maintain consistent communication on working-level developments. We anticipate that there may be broader evaluation of the Maturity Model and its use by OMSSA members, and would welcome both individual and consolidated user feedback through this mechanism.

The HSI Maturity Model is the first tool we are adding to the development of an Integration Toolbox. With the sharing of the Maturity Model, we are shifting our efforts to the development of an Integration Lens. We will continue to engage with you through the PMHSC and OMSSA as our work on this, and other tools to enable Human Services Integration, continues.

We appreciate all of your input on the Maturity Model and your continued support and engagement. Please do not hesitate to contact me should you have any questions or would like to discuss further.

Regards,

Karen Glass

Attachments:
- PMHSC November PowerPoint
- Maturity Model Guidance Document
- Maturity Model Assessment Document

Ministry of Children, Community, and Social Services

Human Service Integration Maturity Model

Presentation to Provincial Municipal Human Services Collaborative Table

November 2021

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Purpose

The June PMHSC meeting focused on co-development of maturity model generative state.

MCCSS committed to finalizing and sharing back the built-out maturity model with municipal partners.

Today, we'll:

- Review the purpose of the maturity model and what it enables

- Provide an overview of the work to date to develop the maturity model

- Discuss next steps

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Advancing Human Services Integration

Programs and municipalities have been making progress to better support clients; however, they have encountered systemic barriers to advancing their human services work, both in design and delivery that can only be addressed by the province taking an integrated approach to addressing barriers.

✓ **Building on transformations underway, MCCSS is designing tools to support an integrated human services system.**

✓ **Leveraging opportunities for change to move from an *individual program* view to a *systems* perspective**

Where we've been	Where we are	Where we're going
Spring & Summer 2021	*November 2021*	*Winter 2022*

- The Ministry worked with Deloitte to engage with ministry and municipal partners to develop a shared vision for system development in Ontario and articulated through a Human Services Maturity Model.

- The Maturity Model describes the desired end state of a seamless human services system where services are delivered effectively and efficiently to meet individual needs, whether directly provided by government or our community partners.

- The Ministry will be sharing the final draft maturity model and guidance to support its use with partner ministries for refinement.

- The Maturity Model:
✓ Defines the characteristics of a mature human services system.
✓ Support individual partner ministries and municipal service managers with building a new mindset on how to approach integration.

- MCCSS to work with partner ministries and municipalities to test and evaluate integration efforts and develop an Integration Lens and associated toolkit.

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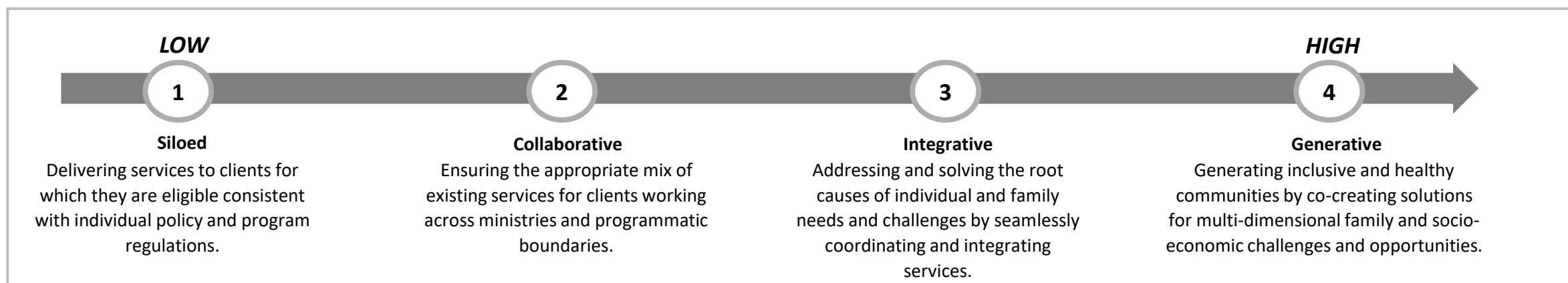# Using a Maturity Model to Help Shape Integration

What is it?

The HSI Maturity Model creates a platform; to identify opportunities for coordination across transformation programs including service design, and the build of digital enablers so they promote integrated client journeys and better outcomes. This is a foundational piece of work to support the creation of an Integration Lens.

Why Use the HSI Maturity Model:

- ✓ Is a tool to support organizations in making transformations in complex and changing environments
- ✓ Describes different stages along a spectrum, moving towards a shared end-goal
- ✓ Allows for assessment of current state and evaluates impacts of program/system design
- ✓ Helps identify which areas may be prioritized for change
- ✓ Supports decision makers by outlining how options for change will advance maturity along the spectrum
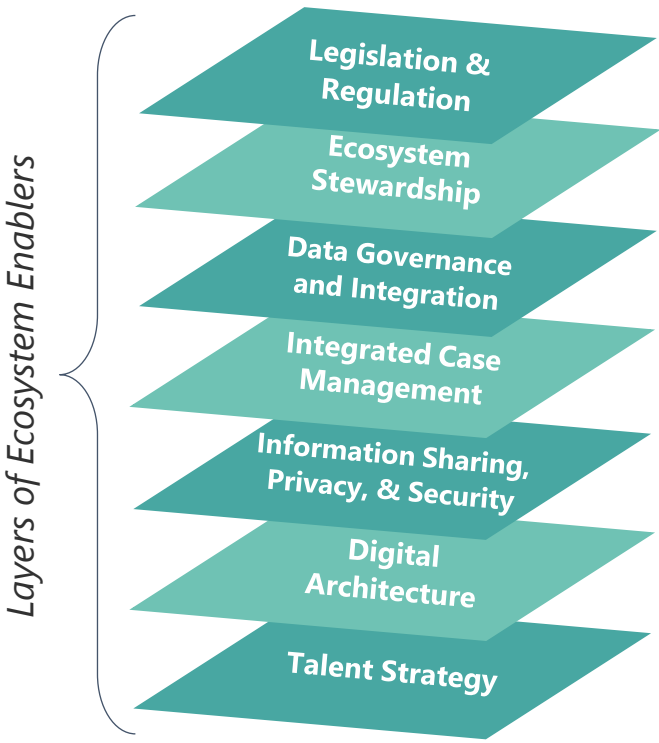- ✓ Uses an equity lens to ensure the needs of all through adequate services, supports and resources

LOW   *HIGH*

1 — **2** — **3** — **4**

Siloed	**Collaborative**	**Integrative**	**Generative**
Delivering services to clients for which they are eligible consistent with individual policy and program regulations.	Ensuring the appropriate mix of existing services for clients working across ministries and programmatic boundaries.	Addressing and solving the root causes of individual and family needs and challenges by seamlessly coordinating and integrating services.	Generating inclusive and healthy communities by co-creating solutions for multi-dimensional family and socio-economic challenges and opportunities.

PMHSC November 2021

Ontario

Continuing to Design the Steps to Achieve Our Shared Vision

Building on key feedback from partners, development of all layers, stages and elements of the HSI Maturity Model, were driven by the foundational principle of equity, reflecting equity in addressing the needs of all through services, supports, and resources, and in fairness in the distribution of opportunities.
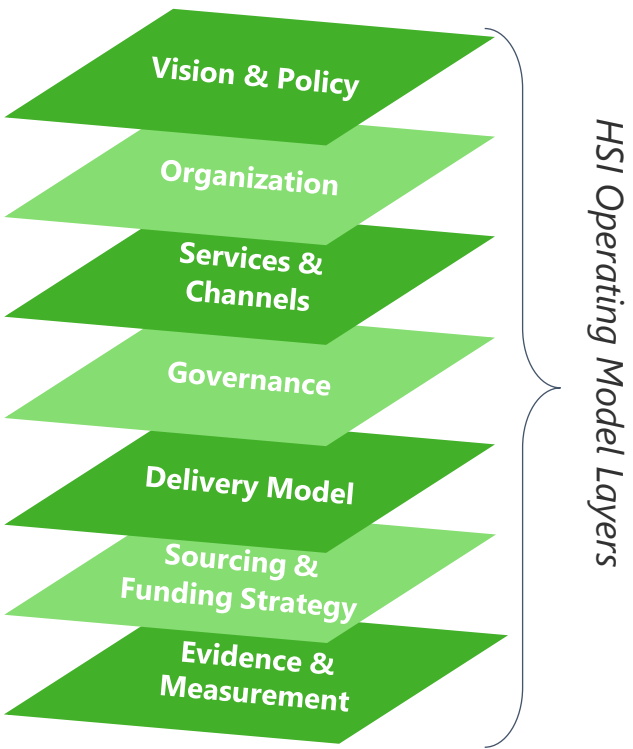
Ecosystem Enablers are key features which span multiple layers of the Operating Model which are necessary to ensure the health of the ecosystem

An Operating Model seeks to explain how an organization operates and delivers services and/or value to its clients.

Layers of Ecosystem Enablers
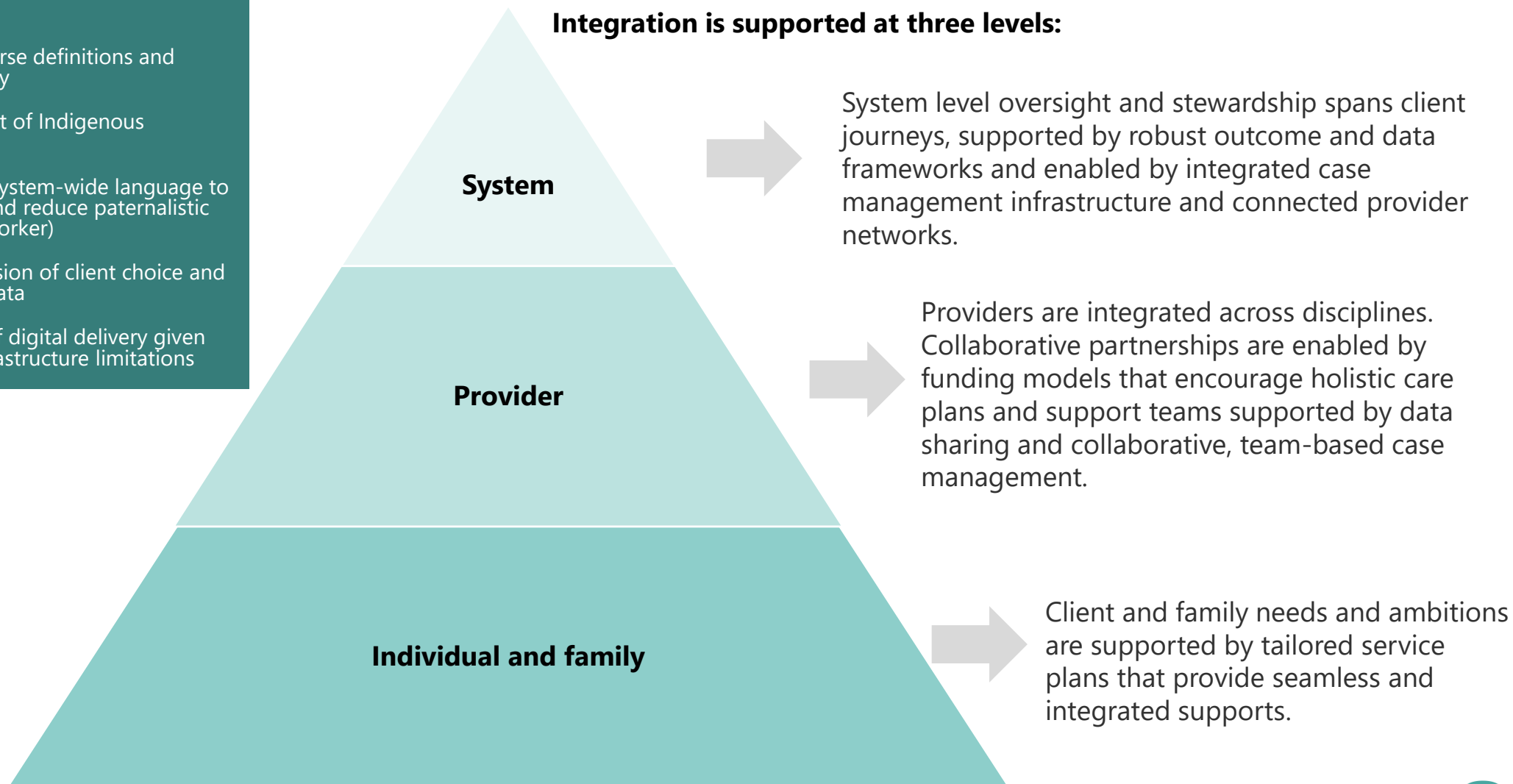
- Legislation & Regulation
- Ecosystem Stewardship
- Data Governance and Integration
- Integrated Case Management
- Information Sharing, Privacy, & Security
- Digital Architecture
- Talent Strategy

Using the vision developed by all partners, as described in the "generative" stage of the Maturity Model, MCCSS staff worked to develop descriptors and key characteristics of each preceding stage of maturity

See Appendices A&B

HSI Operating Model Layers

- Vision & Policy
- Organization
- Services & Channels
- Governance
- Delivery Model
- Sourcing & Funding Strategy
- Evidence & Measurement

Sample Layer

Layer	Siloed	Collaborative	Integrative	Generative
Integrated Case Management	Case management systems are siloed and comply with individual policy and program regulations	Ensuring the appropriate mix of integrated case management to create a seamless experience for clients working across ministries and programmatic boundaries	Integrated Case Management seeks to address and solve the root causes of individual and family needs	Integrated Case Management provides a seamless client centered experience through unified eligibility measures and single client identifiers as a result of collective action across the ecosystem

Building a Shared Vision of a Human Services System In Ontario

Future Integration Considerations Identified:

- Consideration of diverse definitions and perspectives on equity

- Need for engagement of Indigenous stakeholders

- Development of ecosystem-wide language to ensure consistency and reduce paternalistic language (e.g., caseworker)

- Implication and inclusion of client choice and client ownership of data

- Current constraints of digital delivery given rural and remote infrastructure limitations

Integration is supported at three levels:

System

System level oversight and stewardship spans client journeys, supported by robust outcome and data frameworks and enabled by integrated case management infrastructure and connected provider networks.

Provider

Providers are integrated across disciplines. Collaborative partnerships are enabled by funding models that encourage holistic care plans and support teams supported by data sharing and collaborative, team-based case management.

Individual and family

Client and family needs and ambitions are supported by tailored service plans that provide seamless and integrated supports.

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Next Steps

- MCCSS envisions the HSI Maturity Model as a significant, future-vision tool to assist with the development of an integration lens and associated tools.

- Implementation of aspects of the Maturity Model will be advanced through the work of Social Assistance Recovery and Renewal and Employment Services Transformation (EST), and evaluated.

- MCCSS will engage with the Provincial Municipal Human Services Collaborative members to provide updates as work on the Integration Lens and other potential tools, progresses.

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APPENDICES

Appendix A: HSI Maturity Model – Ecosystem Enablers Summary

Layer	Siloed	Collaborative	Integrative	Generative
Legislation & Regulation	Regulations are developed in siloes and are generally inflexible	Regulations seek to support and incentivize enabling clients to be able to work across ministries and programmatic boundaries	Regulatory requirements are seamlessly coordinated and are supportive of addressing and solving the root causes of individual and family needs and challenges	Regulatory requirements are deeply rooted in risk based approaches and provide flexibility to meet the changing needs across the ecosystem
Ecosystem Stewardship	System is comprised of individual policy and program regulations and minimally managed at the ecosystem level. Service system planning is being conducted in silos	Some ecosystem considerations are managed across ministries and programmatic boundaries	Ecosystem is managed and supported to address the root causes of individual and family needs	Ecosystem enables the optimal design and delivery of human services by enabling prevention, early intervention and provision of appropriate supports to clients at the right time
Data Governance & Integration	Data governance and integration are siloed and comply with individual policy and program regulations	Data governance and integration exists across ministries and programmatic boundaries	Data governance and integration is established seeking to address the root causes of individual and family needs and challenges	Data governance and integration exists across the ecosystem and is governed by policies and standards that preserve integrity and promote consistency, allowing the deployment of information on a real-time basis
Integrated Case Management	Case management systems are siloed and comply with individual policy and program regulations	Ensuring the appropriate mix of integrated case management to create a seamless experience for clients working across ministries and programmatic boundaries	Integrated Case Management seeks to address and solve the root causes of individual and family needs	Integrated Case Management provides a seamless client centered experience through unified eligibility measures and single client identifiers as a result of collective action across the ecosystem
Information Sharing, Privacy & Security	Data security systems and processes are siloed and comply with individual policy and program regulations	Ensuring the appropriate mix of data security and integrity systems to support collaboration across ministries and programmatic boundaries	Data security and integrity supports addressing and solving the root causes of individual and family needs	Data security systems involve information sanitization processes that focus on ensuring the privacy and protection of personal data through robust business rules and databases
Digital Architecture	Digital architecture capabilities are siloed and comply with individual policy and program regulations	Digital architectural capabilities are established across ministry and programmatic boundaries	Digital architecture supports addressing and solving the root causes of individual and family needs and challenges	Digital architecture capabilities are utilized to streamline

Workflow to ensure a reliable and accessible client experience across the ecosystem |
| Talent Strategy | Workforce development is siloed and comply with individual policy and program regulations | Ensuring the appropriate mix of talent strategy development across ministries and programmatic boundaries | Integrated talent strategy development enables addressing and solving the root causes of individual and family needs and challenges | Talent Strategy development reflects an adaptive leadership mindset through the utilization of multi-disciplinary teams and shared accountability to ensure coordination of care across the client journey |

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Appendix B: HSI Maturity Model – Operating Model Layers Summary

Layer	Siloed	Collaborative	Integrative	Generative
Vision & Policy	Program objectives are siloed and focus on individual policy and program level regulations	Shared objectives/vision is identified across ministry and programmatic boundaries. Some policies are in place which supports/enables clients working across ministries and programmatic boundaries	Shared policy and objectives seek to address and solve the root causes of individual and family needs and challenges	Policy objectives, vision and outcomes are aligned and co-designed at all levels within the community resulting in a framework that is preventative and responsive to operational realities across the ecosystem
Organization	Organizational structures are siloed and comply with individual policy and program regulations	Ensuring the appropriate mix of organizational structures and cultures for clients working across ministries and programmatic boundaries	Addressing and solving the root causes of individual and family needs and challenges by seamlessly coordinating and integrating organizational capabilities	Organizational culture and capabilities are strategic and rely heavily on co-development of service standards and utilization of shared goals and strengths to respond to systemic shifts
Services & Channels	Services and channels are siloed and comply with individual policy and program regulations	Ensuring the appropriate mix of services and channels for clients working across ministries and programmatic boundaries	Addressing and solving the root causes of individual and family needs and challenges by seamlessly coordinating and integrating services and channels	Service and channels are adaptive, flexible and customized allowing for the seamless delivery of supports and solutions to community and human services challenges
Governance	Governance systems and processes are siloed and address individual policy and program regulations	Ensuring the appropriate integration of governance systems and processes across ministries and programmatic boundaries	Seamlessly coordinating and integrating governance systems and processes seeking to address the root causes of individual and family needs and challenges	Governance systems and processes are adaptive and intentionally able to meet changing community and human services outcome needs through responsive decision-making and clear accountability mechanisms
Delivery Model	Delivery models are siloed and comply with individual policy and program regulations	Ensuring the appropriate mix of delivery models to support clients working across ministries and programmatic boundaries	Addressing and solving the root causes of individual and family needs and challenges by seamlessly coordinating and integrating delivery models	Delivery models are co-designed across the ecosystem and enable the sharing and deployment of information and services across the client journey
Source & Funding Strategy	Sourcing and funding strategies are siloed and are based on individual policy and program regulations	Ensuring the appropriate mix of sourcing and funding strategies across ministries and programmatic boundaries	Addressing and solving the root causes of individual and family needs and challenges by seamlessly coordinating and integrating sourcing and funding strategies	Sourcing and funding strategies are localized and rooted in integrative and predictive approaches that prioritize prevention and responsiveness
Evidence & Measurement	Evidence-based decision making is siloed and is based on individual policy and program regulations	Ensuring evidence-based decision making is enabled with evidence shared across ministries and programmatic boundaries	Addressing and solving the root causes of individual and family needs and challenges by seamlessly coordinating and integrating evidence-based decision making	Evidence-based decision making reflects clearly defined and measurable outcomes informed by predictive analysis

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Ministry of Children, Community and Social Services

Ministère des Services à l'enfance et des Services sociaux et communautaires

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Social Assistance Programs Division

Division des programmes d'aide sociale

2 Bloor St. W, 25th Floor Toronto ON, M7A 1E9

2, rue Bloor Ouest, 25e étage Toronto ON, M7A 1E9

January 20, 2022

MEMORANDUM TO: CMSM and DSSAB Chief Administrative Officers and Commissioners

FROM: Aklilu Tefera
Assistant Deputy Minister, Social Assistance Programs Division (SAPD)

Nelson Loureiro
Executive Director, Social Assistance Transformation, SAPD

SUBJECT: Social Assistance Renewal: What We Heard - Staff and Client Engagement Findings

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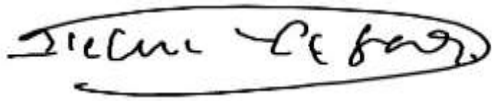
Throughout 2021, in collaboration with you, we engaged both provincial and municipal social assistance staff as well as clients on our vision for social assistance transformation. We know it is important to close the loop with staff about what we've heard and how their feedback is being used to inform the design of a new service delivery operating model and so we are attaching a summary outlining the main themes that we heard from these engagements.

The attached summary captures the main themes of what we heard — both the opportunities presented by a new model for social assistance and some of the critical success factors that staff are telling us are essential to making it work. Staff want to know, among other things, that the new system will provide client pathways that work, that people will be supported through change, and that the system will be effectively resourced. We also heard from clients about how important it is to have services and supports that are adaptable to their individual circumstances.

As we are taking these valuable perspectives into account, alongside the significant co-design work that has taken place over the past year, we look forward to communicating more about the path forward in the near future.

We invite you to share this summary in your organization to continue our commitment to sharing information across the system. You may wish to make minor adjustments to customize the content that fits your local contexts, and a PowerPoint version can be provided for this purpose upon request to SA.Renewal@ontario.ca.

Sincerely,

Aklilu Tefera   Nelson Loureiro
Assistant Deputy Minister   Executive Director
Social Assistance Programs Division   Social Assistance Transformation

Copy:

- CMSM and DSSAB Ontario Works Administrators
- Ontario Municipal Social Services Association (OMSSA)
- Northern Ontario Service Deliverers Association (NOSDA)
- The Association of Municipalities of Ontario (AMO)
- City of Toronto
- Lindsay Jones, Director, Social Assistance Strategy and Transformation Branch

What We Heard: Staff and Client Engagement Findings

Social Assistance Renewal
REPORT: JANUARY 2022

To request this information in an alternative format, please email
SA.Renewal@ontario.ca

MINISTRY OF CHILDREN, COMMUNITY, AND SOCIAL
SERVICES(MCCSS)

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SA Renewal Engagement and Co-Design Journey

By engaging broadly to understand people's diverse perspectives on the current system and the process of change, together we are pushing forward towards a system that better meets the needs of clients. The below report summarizes key insights from staff and clients. Although every suggestion may not get incorporated into the initial plan for a renewed operating model, we trust that the healthy exchange of ideas will allow us to continue to evolve and iterate this model over time.

February 2021: launched a **Vision for Social Assistance Renewal**

Since then, an **unprecedented amount** of engagement has taken place across the system

This presentation provides an overview of the **key themes** voiced by staff and clients in response to specific questions related to developing a new operating model in 2021 engagements

These themes emerged quickly and were consistent throughout the engagement process, informing discussions at PMSAEC* **co-design tables for a future model of social assistance**

Engagement will remain a key focus going forward, as we move towards deepening our understanding of how a new model can work

*PMSAEC=Provincial-Municipal Social Assistance and Employment Committee

1

How We Engaged

Collaboration is essential to the co-design process. ODSP and Ontario Works staff are the experts on the needs of their clients, the details around how to effectively navigate their program, and the supports available at a local community level. Similarly, client engagement is a top priority to bring the voices and needs of those with lived experience and those directly affected by social assistance to the fore.*

Staff

- Municipal and provincial staff engaged separately at the local office and team level, but received the same engagement material and discussion guides.
- Local teams responded to discussion guides on these topics:

  1. Understanding the Vision for Social Assistance Renewal
  2. Mapping the stages of the client journey through the social assistance system
  3. Services we plan to offer to clients at various points of the client journey

Clients

- Engagements were conducted online, by phone, and in-person
- Led by volunteer caseworkers, case managers and other frontline staff at both the provincial and municipal level
- Clients were asked several questions focusing on these four topics:

  1. The caseworker-client relationship
  2. Types of supports needed
  3. Communication channels for receiving service
  4. General improvements they would like to see

* See appendices for more details, including # of people we engaged and demographic information

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What provincial and municipal staff said

April to August 2021

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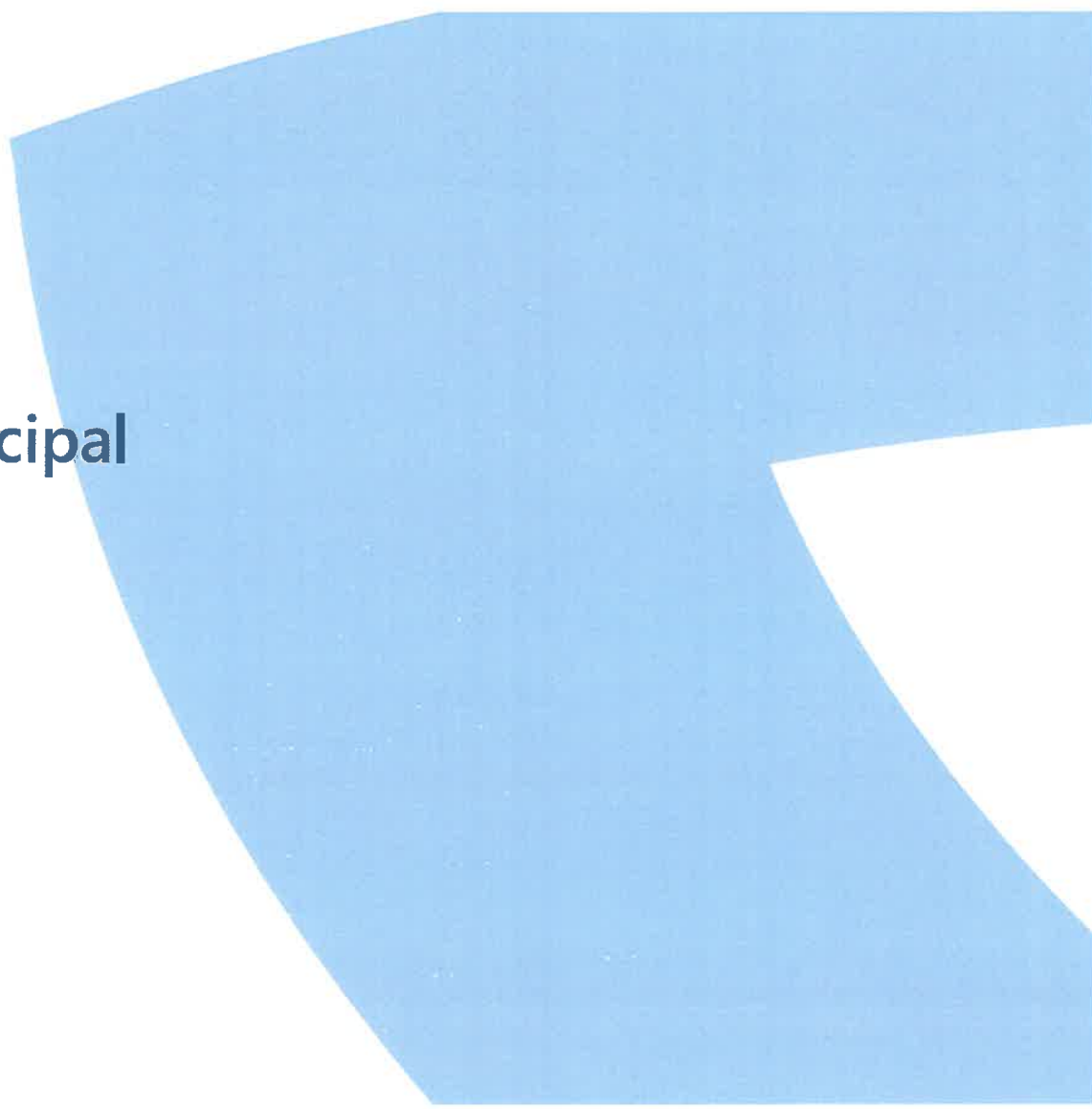
1. Opportunities presented by new vision

- *What is one way the new model could help us to better help clients?*

- *What changes to the current program would be a priority to make the process easier for clients and improve the client experience?*

A better client experience

Opportunities related to how we work together across the system

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4

A Better Client Experience

Staff reflected that this is an opportunity to make it easier for everybody to receive the help they need, in alignment with their **own individual needs and at their own pace** (being thorough where there are complex needs that require ongoing attention, and fast where there are urgent needs that require immediate action). However, some said that we serve clients well now, and that they wouldn't want to lose that. It is imperative that vulnerable clients who need more support don't get lost in the transition to the new model.

WHAT THIS LOOKS LIKE

A. PERSONAL ATTENTION

- More supportive face-to-face time with clients who want it, separating the administration of their financial assistance from other types of stability supports

- With more time freed up from administrative tasks, caseworkers can develop better relationships with clients and obtain adequate knowledge of the client's specific situation to properly assist

B. SUPPORTING CLIENTS TO GET ACCESS TO NEEDED SERVICES

- With a focus on improving system navigation, we can connect clients to the right supports in their communities

- Currently, clients can struggle with finding information on services and supports, as there is no clear path for help

C. RIGHT-SIZING SERVICE BASED ON CLIENT NEEDS

- Allows different approaches from client to client based on their personal barriers and the complexity of their needs. For example,
    - o cases where clients are self-employed, are incarcerated, or have a child, spouse or dependent adult
    - o clients requiring accessibility supports (e.g., language support, technology, mobility issues, hearing)

D. EMPOWERING CLIENTS

- Clients will feel increasingly supported and involved in their own progress

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Opportunities related to how we work together across the system

Beyond the client view, we also saw opportunities in the way we organize and get work done to address challenges in the current system, e.g., high caseloads that don't allow time to give clients the same level of personal attention.

Staff feel that clients would benefit from centralized intake, and that the specialization of staff roles will make it more efficient to connect clients to the right supports and build relationships, as long as it's clear to clients where they have to go to get what they need, and that they are supported through the transition to a new service model.

WHAT THIS LOOKS LIKE

A. SPECIALIZATION

- Centralize teams for distinct purposes, e.g., one team to determine initial eligibility and one to review ongoing eligibility

- Opportunity for staff to specialize in certain demographic groups or functions (e.g., a team focused on youth, a centralized team focused on self-employment and business reviews) and become subject-matter experts on complex cases, reducing the expectation that they need to have deep knowledge on the full range of cases

- Some expressed concern that specialization may cause duplication and confusion for clients

B. STREAMLINING AND STANDARDIZING

Streamlining and standardizing processes will help us address current issues in the system where:

- Clients struggle with not receiving funds in a timely manner to cover urgent expenses

- There are lengthy and complex intake and ongoing financial eligibility processes

- Information is not always effectively communicated to clients, resulting in missing information/incorrect forms

- Clients find themselves telling their story multiple times for different services, as many services in the system operate in silos and do not communicate

- Many clients approach ODSP caseworkers to receive emergency supports, but caseworkers cannot deliver them, so clients need to be referred elsewhere

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2. Recommendations and success factors

Looking at a future-state client journey map and service listing, staff discussed:

- *What are your top three suggestions for making specific steps in this journey positive and successful for clients?*
- *What services might be missing?*
- *Will these services help our clients make more progress?*

Staff identified that success of the new model depends very much on whether certain recommendations and success factors are met.

THEME 1

Create a seamless client experience

THEME 2

Do digital right

THEME 3

Support staff and clients through change

THEME 4

Make changes beyond the realignment of how we deliver services

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Create a seamless client experience

Staff suggested that we focus on creating a seamless client experience, with a system that is easy to navigate, allowing for self-service where it makes sense, and extending support where it's needed.

WHAT THIS LOOKS LIKE

A. SINGLE POINT OF CONTACT

- Provide a single point of contact, or a "primary caseworker" that can build a relationship with clients and guide them through the end-to-end process and navigate services effectively

- Have one place, like a 'hub,' where people can access stability supports and connect to a caseworker, to make services more accessible for clients without added confusion about where they need to go

B. CLEAR AND COORDINATED CASE MANAGEMENT

- Apply a clear and coordinated case management approach that ensures clients will not be bounced around between Centralized Financial Assistance, stability supports, Employment Ontario, etc. This will reduce the burden of clients having to tell their stories repeatedly, or navigate to different areas for different services, which may cause undue stress and confusion.

- Consistency in service delivery should be prioritized—for example, ODSP payment dates should be at the start of the month to align with Ontario Works and better meet client needs.

C. FLEXIBILE AND PERSON-CENTRED POLICY

- Increase access to discretionary funds for clients who have unique needs or circumstances.

- Have more flexible eligibility rules and legislation so staff can more quickly and effectively tailor services to clients' needs, and simplify policies related to income, assets and benefits.

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Do digital right

Staff said that the introduction of technology offers the promise of liberating them from some administrative, manual tasks so that they can focus on high-impact activities, but that we need to be careful about how we automate. They were also supportive of the opportunities that centralized applications provide to ensure program integrity (e.g., to reduce fraud).

WHAT THIS LOOKS LIKE

A. AUTOMATE WITH CAUTION

- To ensure a positive client experience, tasks that are automated should be carefully considered (e.g., staff were wary of tasks like eligibility decisions becoming automated and automatically communicated)

- Any risk-based and automated approaches need to be accurate and effective, supported by manual processes, where needed, to address more complex cases

- Some expressed concern that automation could jeopardize program integrity

B. PROVIDE ACCESSIBILITY OPTIONS

- Clients who are unable to access or use technology and digital tools must have alternative methods of accessing services (e.g., in person or through community support) through all stages of their journey

- If we are adding more technology-based channels, it would be helpful to increase internet access and technology funding for low-income individuals

C. ENSURE PROGRAM INTEGRITY

- Staff should continue to make financial eligibility decisions, with an increase in third-party checks available for caseworkers – this would provide more information to base decisions on and decrease the risk of granting ineligible individuals

- Any self-declaration process must be validated by a human to reduce ineligible clients accessing financial assistance

Ontario

9

Support staff and clients through change

Staff have expressed understandable concerns regarding job security and their roles in the future model, and that proposed changes may be highly disruptive for staff and clients.

Staff have highlighted the importance of clear and timely communication, transparency, and change management to promote careful and successful transitions to a new delivery model.

Staff have also been keenly interested in how a potential future model will be tested and evaluated prior to expansion.

"Client success reflects staff success"

-OW caseworker

10

WHAT THIS LOOKS LIKE

A. CLARIFY "WHAT THIS MEANS FOR ME"

- Such a large-scale change has brought about significant concerns and fears for staff roles in the future, leaving staff feeling like they do not have a clear picture of what the future will be and hindering their efforts to engage as fully as they would have liked with the content provided.

- Staff want to see descriptions of any changes to roles and responsibilities and clarity around job security.

B. COMMUNICATE AND ENGAGE

- Staff want to be asked for advice before decisions are made and be provided with sufficient time for thoughtful feedback, as they are the subject-matter experts on providing service to clients.

- Staff suggest that all co-design efforts should put clients first. This means that any changes to social assistance should directly address client barriers, tailor services to clients' needs, and provide services as efficiently as possible. We need to avoid or mitigate scenarios where change may impact clients negatively, both to transition to a new model and understand the change.

C. PROVIDE TRAINING

To **prepare for this change,** provide training on:

- helping caseworkers with difficult client discussion scenarios
- awareness building of community supports
- early identification and planning
- stability support techniques
- how to transition clients

We also need to provide:

- opportunities for staff to become specialized in certain client groups or functions
- cross-training in both Ontario Works and ODSP programs
- training on crisis intervention and immediate services that are available

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Make changes beyond realignment of services

This wasn't a blank page exercise but a very focused set of engagement discussions on how we can flesh out a particular vision for social assistance transformation that was itself based on many years of research.

However, the engagements were also about better understanding people's diverse perspectives on the current system and on the process of change, with a special emphasis on understanding the client perspective.

Some themes emerged that go beyond the parameters of the social assistance renewal vision.

WHAT THIS LOOKS LIKE

A. AVAILABILITY OF BENEFITS AND CLOSE CONNECTIONS TO SERVICES IN COMMUNITY

- Increase resources to support clients, e.g., housing, mental health supports, medical, dental and transportation, and education

- Factor in local issues and differences in supports available in urban vs. rural settings

- Fund stability support activities (e.g., so referred services are available and wait times for various benefits are reduced or eliminated)

- Create opportunities (e.g., trade apprenticeships) by developing deeper partnerships with employers

- Establish better connections with community partners to facilitate referring clients to agencies that provide different types of stability supports

- Consider the loss of medical benefits, etc., when exiting social assistance, which prevents some clients from leaving the program – look at increasing post-exit supports so individuals can be more fully supported and successful upon exit

B. FINANCIAL SUPPORT THAT GROWS OVER TIME

- Consider increasing financial support to cover clients' basic needs, such as shelter and food, that will support their ability to move to greater independence and, where possible, employment

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What clients said

In July-August of 2021, 506 participants were engaged across Ontario Works and ODSP with 71% of responses coming from Ontario Works clients. The four key topics explored were:

1. The caseworker relationship
2. The type of support
3. The communication channels
4. Final reflections

"It put a smile on my face to have any branch of my Government actually ask me how they can do a better job of providing me with a service. I'm much more used to the Government 'telling' me what I want. Thanks for listening to us."

● ● ● ●

1. The caseworker relationship

Which, if any, would you prefer in the future? Why?

Using these descriptions as thought starters (facilitator, connector, coach), is there any kind of assistance that you would have liked to receive from your caseworker that you didn't?

THEME 1

Clients need dynamic relationships with caseworkers that fit their own dynamic lives

THEME 2

Clients want a caseworker that is available, engaged, and in tune with resources relevant to them

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Clients need dynamic relationships with caseworkers that fit their own dynamic lives

When asked to select the caseworker style that they would like to see in the future, across a 'facilitator', 'connector', or 'coach', clients were often most interested in a caseworker that could shift based on changing contexts and needs. For those new to social assistance, clients opted for a 'coach.' On the opposite side of the spectrum, for those who knew what they needed, clients preferred a 'facilitator.'

Clients want a caseworker that is available, engaged, and in tune with resources relevant to them

When asked about additional resources they would like to receive from their caseworkers, clients mentioned they wanted a reliable caseworker relationship that offered comfort and continuity. Clients also wanted their caseworkers to provide them with additional referrals and community resources.

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2. The type of support

What are the top two areas you feel you could have used more support or 'coaching' on?

Within each of those, what kind of help did you need most?

What is the easiest part of the program to access?

What is the most confusing or hardest part to understand or access?

THEME 1

All programs are accessible if clients have the support they need when they need it

THEME 2

Areas where clients are satisfied with ease of access

THEME 3

Areas where clients require additional support

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All programs are accessible if clients have the support they need when they need it

Respondents varied in their descriptions of which parts of the program were easy or difficult to access, but by looking across the data, we parsed out what made something *feel* accessible and conversely, what made something *feel* difficult to access or understand.

Services and supports should be adaptable and responsive to individual circumstances (accessible and suitable):

- Information should be easy to find and use, especially for simpler tasks such as scanning local service provider information

- For more complex or intensive needs, such as making decisions about service plans, clients require timely access to a knowledgeable caseworker

Areas where clients report greater ease of access

- Financial Assistance
- Employment Resources
- Digital Channels
- Interactions with a Caseworker

> **Note:** While many respondents felt they had access to a caseworker, there were also many comments (notably in ODSP) that many feel they do not have adequate access.

Areas where clients require support navigating resources

- Housing and Shelter
- Medical Support and Supplies
- Mental Health and Addiction
- Employment Counselling
- Education and Training

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3. Communication channels

Which parts of the journey, if any, would you prefer to do digitally?

Which, if any, need to be done in-person and/or over the phone?

Which, if any would you like to be able to do fully independently

THEME 1

Clients want access to reliable repositories to learn about processes & resources

THEME 2

Conversations help clients build bonds, but they would rather save in-person meetings for major milestones

THEME 3

Clients strive for independence, but they do not want to get there on their own

Ontario ▽

COMMUNICATION CHANNELS | THEME 1

Clients want access to reliable repositories to learn about processes & resources

Clients are more likely to leverage digital channels when it saves them time or is seen as a "browsing" type of activity. For example, clients were interested in reducing travel to a physical location wherever possible and were interested in researching things like employment opportunities online.

COMMUNICATION CHANNELS | THEME 2

Conversations help clients build bonds, but they would rather save in-person meetings for major milestones

Experienced clients would rather rely on phone calls for routine checks or ad-hoc questions, keeping in-person chats for key moments like establishing goals or filling in a new application for the first time.

COMMUNICATION CHANNELS | THEME 3

Clients strive for independence, but they do not want to get there on their own

Most respondents appreciate having the ability to contact their caseworker when completing more complicated tasks (e.g. researching resources, resolving quick questions or having them review forms before submission).

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4. Final reflections

If you could wave a magic wand and change one thing about social assistance, what would that thing be?

What is the biggest piece of advice you would like to give the Ministry, as it works to improve the social assistance services?

THEME 1

Caseworker support can be life-changing

THEME 2

Provide information as a baseline and guidance when they need it

THEME 3

Let clients choose communication channels that work for them

THEME 4

Funds that match current, increased prices

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Clients want their experience to be heard and to be treated with dignity at all times

Caseworker support can be life-changing

Clients recognize the importance of building a positive relationship with their caseworkers. Clients appreciate caseworkers who respond to their specific needs and are able to adapt their style and communication preferences accordingly.

Provide information as a baseline, and guidance when they need it

Transparent and understandable resources can build trust; confusing information encourages distrust. Some clients want to search information repositories individually; others want access to information plus guidance.

Let them choose communication channels that work for them

Most clients prefer a mixture of digital and personal interactions. Many respondents enjoy the time savings offered by digital channels, but they also worried about their peers who may struggle accessing new resources due to lower digital literacy and/or financial, mental or physical limitations.

Funds that match current, increased prices

Clients found the funds they receive today to be insufficient, especially with recent increases to rent, medical and other living expenses. As a result, clients are often forced to choose between equally critical expenses.

Ontario

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What's Next

We are using the insights captured here to inform a new operating model. Given the breadth of dialogue and range of groups we're engaging with, the new model may not reflect precisely what everyone has in mind right from the beginning, but it will give us a new working model to begin testing, which we're anticipating implementing incrementally beginning in 2022. Over this time, we will continue to engage with partners, subject-matter experts, frontline staff, clients and other groups for advice and feedback to fine-tune and adjust our model through collaborative, inclusive and flexible approaches, learning as we go, and using data to inform decision-making.

Move towards releasing a new operating model and testing it with more **focused engagement on technical aspects** (early to mid-2022)

Continue to help staff, clients and other system partners stay closely informed and more deeply understand work that's underway
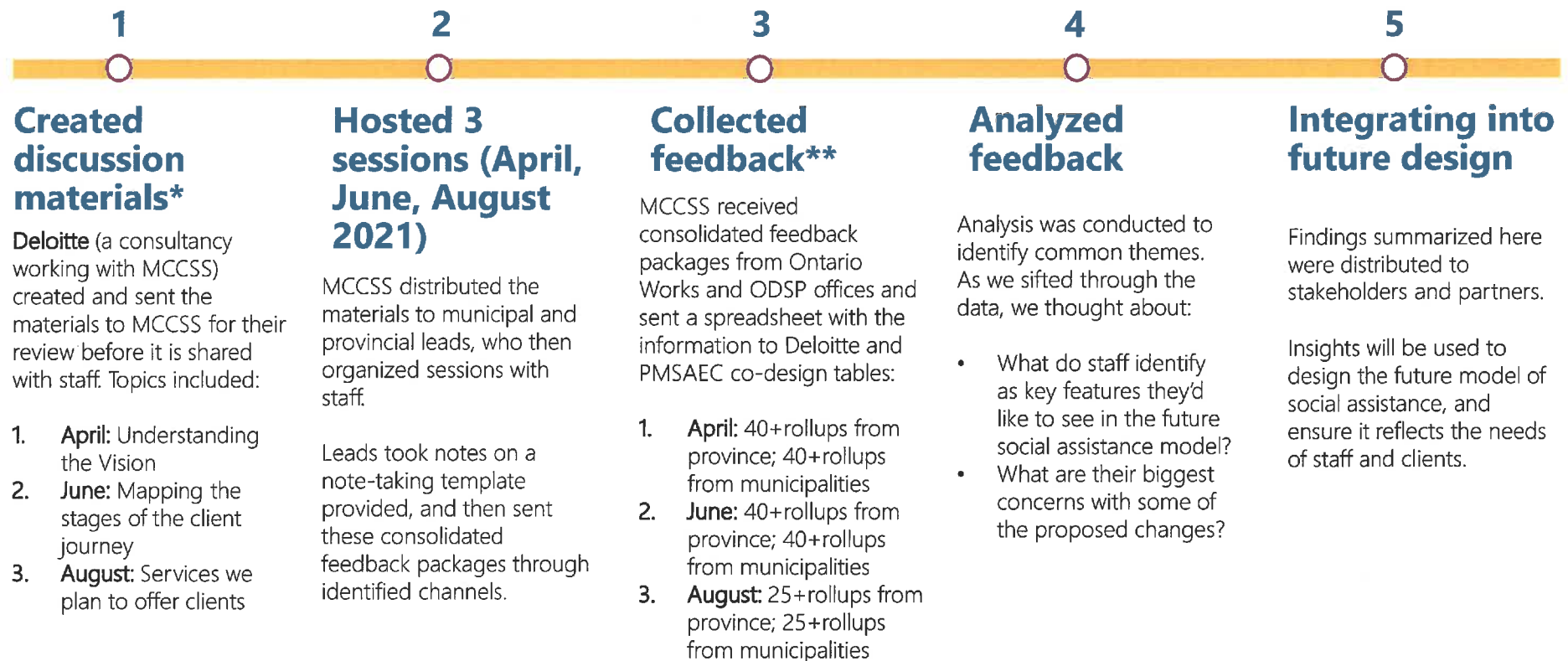
Deepen knowledge of client experiences, with a strong focus on the voices of clients in under-represented regions and socio-demographic groups

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Appendices

1. *How we engaged staff*
2. *How we engaged clients*
3. *How we arrived at our insights*

How We Engaged Staff

1

Created discussion materials*

Deloitte (a consultancy working with MCCSS) created and sent the materials to MCCSS for their review before it is shared with staff. Topics included:

1. **April:** Understanding the Vision
2. **June:** Mapping the stages of the client journey
3. **August:** Services we plan to offer clients

2

Hosted 3 sessions (April, June, August 2021)

MCCSS distributed the materials to municipal and provincial leads, who then organized sessions with staff.

Leads took notes on a note-taking template provided, and then sent these consolidated feedback packages through identified channels.

3

Collected feedback**

MCCSS received consolidated feedback packages from Ontario Works and ODSP offices and sent a spreadsheet with the information to Deloitte and PMSAEC co-design tables:

1. **April:** 40+rollups from province; 40+rollups from municipalities
2. **June:** 40+rollups from province; 40+rollups from municipalities
3. **August:** 25+rollups from province; 25+rollups from municipalities

4

Analyzed feedback

Analysis was conducted to identify common themes. As we sifted through the data, we thought about:

- What do staff identify as key features they'd like to see in the future social assistance model?
- What are their biggest concerns with some of the proposed changes?

5

Integrating into future design

Findings summarized here were distributed to stakeholders and partners.

Insights will be used to design the future model of social assistance, and ensure it reflects the needs of staff and clients.
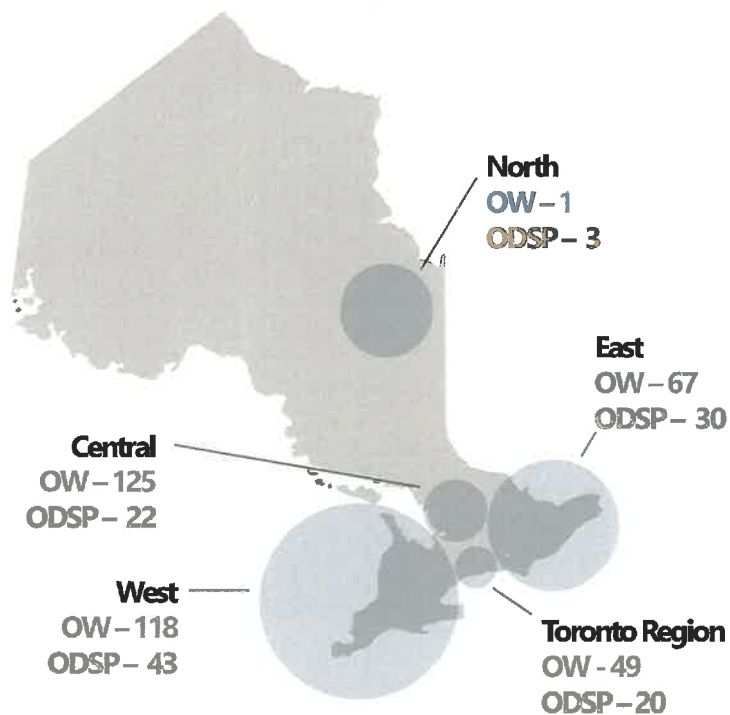
*For copies of these discussion materials, see the Social Assistance Renewal section of the SA Extranet

**Note: All feedback was anonymized. Name, contact info and other personal details were not shared.

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How We Engaged Clients

We engaged with **506 clients across over 18 Ontario Works (OW) and 18 ODSP offices**. The breakdown below describes the regional distribution of participating clients based on voluntary responses to the post-engagement survey.[1]

Participants by Region

North
OW – 1
ODSP – 3

East
OW – 67
ODSP – 30

Central
OW – 125
ODSP – 22

West
OW – 118
ODSP – 43

Toronto Region
OW - 49
ODSP – 20

- Most participants were **OW recipients**, with **at least 360** declaring their participation in the program; meanwhile, **118 declared receiving ODSP**. At least 9 clients participated in both OW and ODSP.

- Most participants resided in the **Central and West Regions.**

- This engagement had limited participation from residents in the **North Region**. Future engagements will ensure these voices are captured, as they will provide additional insights into the unique concerns of the area and its Indigenous and rural communities.

[1] The demographic data on this and the next two slides was collected through a voluntary, post-engagement survey completed by a total of 419 respondents. The survey questions and categories were developed by the Ontario Digital Service to be used as standard demographic variables.
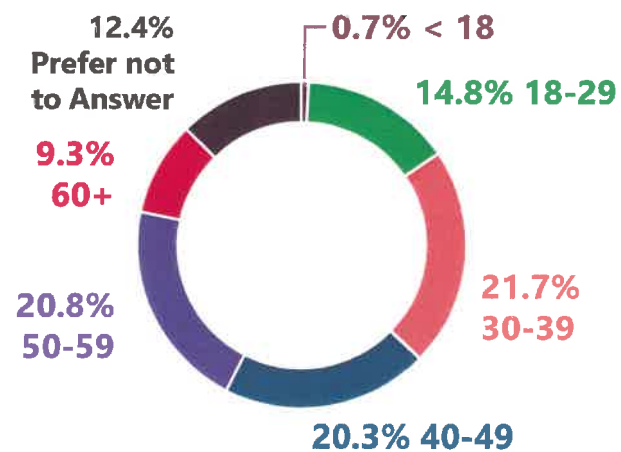24 Facilitator counts from discussions reported a total of 506 clients participated in the engagement.

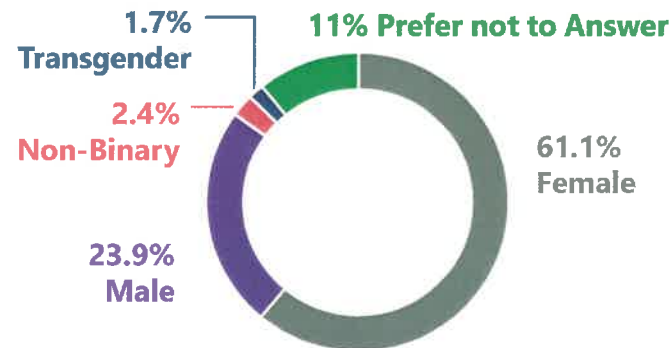**Ontario** 🔱

How We Engaged Clients (Continued)

The breakdown below describes client age, gender and sexual orientation demographics based on voluntary participant responses to the post-engagement survey.

- Most participants identified as **female**
- 60% of all participants were between **30 and 59 years old**
- Most participants identified as **straight** or **preferred not to disclose** their orientation
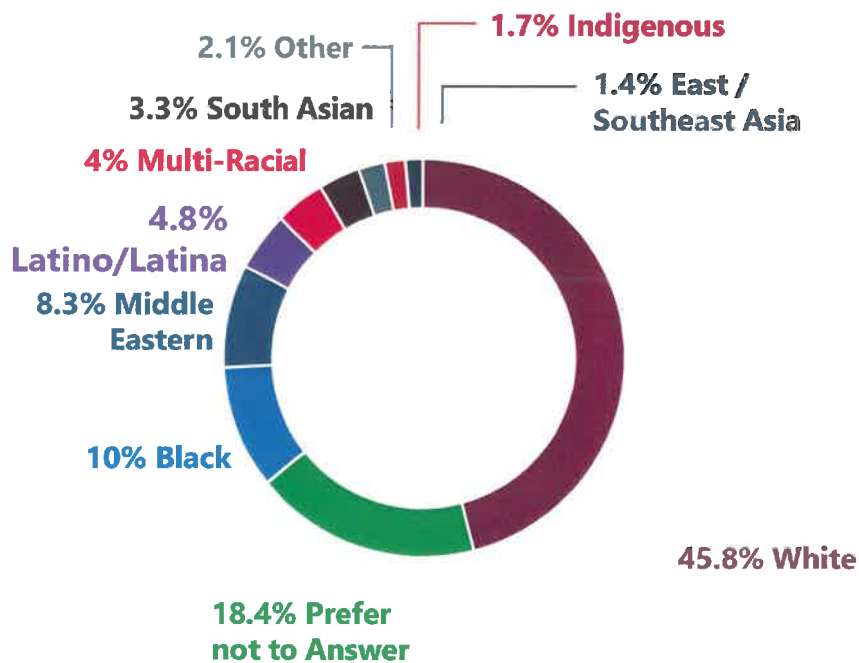
Age

12.4% Prefer not to Answer
0.7% < 18
14.8% 18-29
9.3% 60+
20.8% 50-59
21.7% 30-39
20.3% 40-49

Gender

1.7% Transgender
11% Prefer not to Answer
2.4% Non-Binary
61.1% Female
23.9% Male

Sexual Orientation	
Straight	49.4%
Prefer not to Answer	29.3%
Asexual	6.7%
Bisexual	5.5%
Questioning	3.1%
Gay	3.1%
Pansexual	1.4%
Lesbian	0.7%
Two Spirit	0.7%

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How We Engaged Clients (Continued)

The breakdown below describes racial, disability, First Nations status and citizenship status demographics based on voluntary participant responses to the post-engagement survey. Note that clients could select more than one applicable answer for all categories on this slide.

Racial Background

63.7% of clients stated they had a disability; 36.3% of clients did not state a disability

2.1% Other

1.7% Indigenous

3.3% South Asian

1.4% East / Southeast Asia

4% Multi-Racial

4.8% Latino/Latina

8.3% Middle Eastern

10% Black

18.4% Prefer not to Answer

45.8% White

Number of Clients Per Disability Category

Mental / Psychological	99	Flexibility	34
Pain	77	Hearing	19
Mobility	59	Drug / Alcohol Dependence	17
Memory	46	Seeing	17
Learning	43	Developmental	16

First Nation Status

None	325
Prefer not to answer	73
First Nations	18
Métis	5

Citizenship Status

Canadian (by Birth)	56%
Prefer not to answer	18.6%
Canadian (naturalized)	15%
Permanent Resident	7.4%
Refugee	2.9%

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3. How We Arrived at Our Insights

For both client and staff engagements, we looked at each response separately, pulled out common themes that emerged across responses, and summarized accordingly.
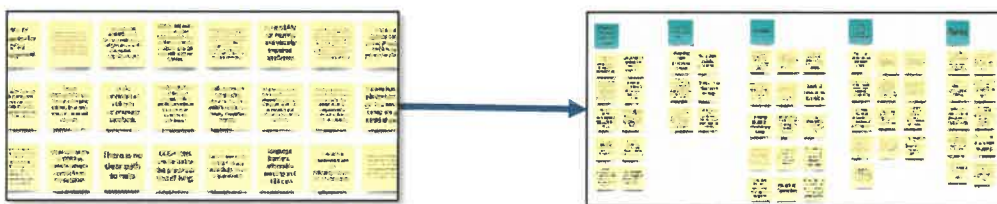
1 **Analysis**

We started by pulling together all of the raw data—reviewing and sorting comments based on similarity.

2 **Synthesis**

Next, we grouped the data by thematic clusters, titled each theme, and found homes for any outliers.

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CHILD CARE AND EARLY YEARS REPORT
Prepared by: Judy Mulvihill, Manager of Child Care and Early Years Division
Prepared for: Community Services Committee
February 9, 2022

INFORMATION

1. **Inclusion Services Statistics [Strategic Plan Goal # 1 (a)]**

    The following chart indicates Inclusion Services statistics for February 2020, before the COVID-19 pandemic as a comparison against the monthly statistics for 2021.

Month and Year	Feb 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21
Children served	168	173	169	171	170	173	177	182	174	175	175	176	175

2. **Licensed Home Child Care Statistics [Strategic Plan Goal # 1 (a)]**

    The following chart indicates the County of Renfrew Licensed Home Child Care program statistics for February 2020, before the COVID-19 pandemic as a comparison against the monthly statistics for 2021.

Month and Year	Feb 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21
Children served	30	19	18	19	20	15	15	15	14	18	15	15	15
Open homes	7	4	4	4	4	3	3	3	3	3	3	3	3
Children on waitlist	39	64	66	71	78	59	66	67	77	77	82	86	91

3. **Licensed Child Care Statistics [Strategic Plan Goal # 1 (a)]**

    The following chart indicates statistics for licensed child care in Renfrew County for February 2020, before the COVID-19 pandemic as a comparison against the monthly statistics for 2021.

Month and Year	Feb 20	Jan 21	Feb 21	Mar 21	Apr 21	May 21	Jun 21	Jul 21	Aug 21	Sep 21	Oct 21	Nov 21	Dec 21
Licensed capacity	1762	1764	1764	1764	1764	1764	1764	1764	1764	1764	1764	1764	1764
Operating capacity	1390	1117	1109	1143	1208	581	577	1056	1062	1246	1265	1269	1364
Children served	1558	828	851	898	900	491	483	810	844	1105	1099	1142	1219
Children served, receiving Fee Subsidy	471	328	331	331	322	317	314	321	323	343	326	327	327

*Emergency Child Care not included in the above statistics. Emergency Child Care operated from January 4, 2021, to January 22, 2021, and again from April 19, 2021, to June 30, 2021.

4.   **Ministry of Education Updates [Strategic Plan Goal # 3 (b)]**

Attached as Appendix CC-I is a memorandum dated January 13, 2022, from Holly Moran, Assistant Deputy Minister, Ministry of Education, Early Years and Child Care Division, regarding the Ministry of Education Updates. As a result of the announcement made on January 12, 2022, the government confirmed that all schools would re-open on January 17, 2022.

Emergency Child Care ended on Friday, January 14, 2022, and the County of Renfrew successfully placed 230 children of the 268 available spaces.

5.   **Rapid Antigen Tests Licensed Child Care [Strategic Plan Goal # 3 (b)]**

On Wednesday, January 19, 2022, over 1,500 Rapid Antigen Test kits were delivered across Renfrew County to community based licensed child care centers. The Ministry of Education, in partnership with Ministry of Health and Ministry of Government and Consumer Services, provided these kits for symptomatic use. School based licensed child care centers received their kits on site at the school they are based in.

RESOLUTIONS

6.   **Hourly Rate for Resource Teachers [Strategic Plan Goal # 2 (a)]**

Recommendation: THAT the Community Services Committee recommends that County Council approve an increase to Resource Teachers capped rate of $16.00

per hour plus mandatory benefits, to $18.00 per hour plus mandatory benefits, effective January 1, 2022.

Background

The County of Renfrew, Child Care and Early Years Division, provides funding to licensed child care centers to pay for Resource Teachers. This funding provides enhanced supports for children who require enhanced inclusion support. The Resource Teachers are hired and trained by each child care agency, and monitored by the Inclusion Services staff.

Effective January 1, 2022, minimum wage rates increased from $14.35 to $15.00 an hour. The additional hourly rate will support recruitment and retention of qualified staff. The last pay increase was March 2018. It is expected that this pay increase will impact the Inclusion Services budget by approximately $60,000, which will be mitigated with 100% provincial and federal funding.

7. **Professional Development Training [Strategic Plan Goal # 3 (b)]**

Recommendation: THAT the Community Services Committee recommends to County Council the approval of Shelley Moore, George Couchie, Lorrie Baird, and Anne Marie Coughlin, providing professional development training to EarlyON and Licensed Child Care Providers throughout 2022, utilizing capacity funding.

Background

Since 2017, the County of Renfrew has partnered with Lorrie Baird to lead professional training which has afforded us many opportunities to build a culture of reflective practice, foster strong relations in the community, build capacity within the integration team and grow pedagogical leadership in the early learning sector.

Shelley Moore consults locally, provincially and beyond. Her presentations include school, district and provincial professional development days throughout British Columbia, as well as various leading conferences throughout North America. Her interactive presentations are constructed based on contexts of specific schools and communities and integrate theory and effective practices of inclusion, special education, curriculum and technology.

George Couchie owns and operates Redtail Hawk Training & Consulting, an Aboriginal company located in Nipissing First Nation outside of North Bay, Ontario. Mr. Couchie has 12 years experience designing and delivering award winning Native Awareness Training Programs and Initiatives to youth, members of the Ontario Provincial Police, government employees, and teachers.

Due to the cost associated with these training modules approval is being sought. The training proposal for 2022 will cost up to $43,000. Funding will be paid for with 100% provincial Capacity Funding which is to be utilized for staff training and development.

The following chart provides the training topics and cost analysis:

Presenter	Topic	Date	Total Cost
Shelley Moore	The Infrastructure of Inclusion (Three-part series being offered twice)	February to April	$15,000
Shelley Moore	Coaching Session	February to April	$1,000
George Couchie	Cultural Mindfulness (half day sessions)	April 5 and 6, 2022	$5,000
Lorrie Baird	Deepening our Role as Leaders in the Classroom (Four- part evening series)	May to June	$7,000
Lorrie Baird and Anne Marie Coughlin	Creating a Culture of Reflective Practice – The Role of the Pedagogical Leader (Five-part evening series)	October to November	$15,000
Total			$43,000

Ministry of Education
Early Years and Child Care Division

315 Front Street West, 11th floor
Toronto ON M5V 3A4

Ministère de l'Éducation
Division de la petite enfance et de
la garde d'enfants

315, rue Front Ouest, 11e étage
Toronto ON M5V 3A4

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TO: Child Care Licensees

FROM: Holly Moran
            Assistant Deputy Minister
            Early Years and Child Care Division

DATE: January 13, 2022

SUBJECT: Ministry of Education Updates

Thank you for your continued dedication and commitment over the last two weeks as the school system pivoted to remote learning and child care operators quickly adapted to the provision of emergency child care for school-aged children.

As announced on January 12, 2022, the government of Ontario has confirmed the return of in-person learning for all publicly funded and private schools starting January 17, 2022, with enhanced health and safety measures in place. These new measures include the deployment of additional rapid antigen tests and establishing school-based vaccination clinics.

These measures build on the updated and additional health and safety measures in schools and child care centres, including those that were put in place on the advice of the Office of the Chief Medical Officer of Health (OCMOH) and announced on December 30, 2021:

- Updating the COVID-19 school and child care screener and asking students, parents and staff for screening and monitoring of symptoms, including daily onsite confirmation of self-screening.

- Providing non-fit-tested N95 masks for staff in schools and licensed child care settings as an optional alternative to medical/surgical masks, and additional supply of high-quality three-ply cloth masks that are strongly encouraged and free for students.

As we adapt our pandemic response to the evolving health environment, based on advice from the OCMOH, I am providing an update on some of the health and safety measures that will continue to keep child care environments as healthy and safe as possible.

1

We ask that you continue to reinforce and communicate the importance of these measures to children, parents/guardians, staff, and providers.

Before and after school child care programs will reopen in alignment with the return to in-person learning on January 17, 2022 and the provision of emergency child care for school-aged children will end on January 14, 2022.

Enhanced Health and Safety Measures and Guidance

In follow up to the health and safety measures communicated on December 30, 2021, the ministry, based on the advice of the OCMOH, is providing further updates to enhance guidance to child care programs.

New and updated measures and guidance will supplement and build on the existing health and safety measures to ensure as safe and healthy a child care environment as possible, as outlined in the [Operational Guidance for Child Care During COVID-19 Outbreak](#).

1. Vaccination

With the rapid spread of the Omicron variant and schools re-opening next week, there is a strong need to get children, staff and providers vaccinated as soon as possible. Vaccination continues to represent the most effective strategy to protect Ontarians from COVID-19, and vaccination rates for staff/providers and eligible children continue to rise. As of January 10th, 2022, 47.0% of children aged 5-11 have received a first dose of the COVID-19 vaccine, and 82.6% of youth aged 12–17 are fully vaccinated with two doses of the COVID-19 vaccine.

As Ontario's vaccine rollout continues, we are increasing efforts to encourage greater uptake of vaccination for children aged 5-11. The ministry is asking school boards to continue to work closely with their Public Health Units (PHUs) to support planning for COVID-19 vaccine clinics and take the lead in outlining the importance of getting vaccinated as a means to support schools staying open and keeping staff, children and communities safe.

Children

To support greater uptake of vaccination for children 5-11, PHUs and local school boards are encouraged to work together to plan for vaccine clinics that are targeted towards this population.

We ask that child care programs serving children aged 5-11 support planning efforts for clinics where possible, including communication to families.

Licensees are encouraged to share documents and other information with families, such as the Ministry of Health's [COVID-19 Vaccine Information Sheet: For Children (age 5-11)](), [COVID-19 Vaccine Information Sheet (age 12+)](), sample [COVID-19 Vaccine Children/ Youth (Age 5-17) Consent Form]() and other resources available at [https://covid-19.ontario.ca/covid-19-vaccines-children-and-youth]().

Staff/Providers

The ministry has been working over the last few weeks to support enhanced and ongoing access to vaccination, particularly boosters, for education and child care staff.

Licensees should continue to promote booster dose opportunities for all staff and providers.

Vaccination Disclosure Monthly Reporting

As a reminder, the ministry has requested information from all programs related to the number of staff and providers who have received their third dose of a COVID-19 vaccine. This information will support evidence-based decision making around vaccination in the child care sector and data collection in future months.

The survey can be accessed at the following link, and information must be submitted by January 28, 2022:

[https://forms.office.com/r/7tyczCrJAm]()

When submitting this information, please note that you do not need to submit cumulative information. For January's reporting, please submit the total number of staff/providers that have received a third dose as of the date of submission.

For subsequent data submissions, you will only be required to submit the number of additional individuals who have received a third dose since your last submission.

2. New guidance for schools/child care and local public health

Per the government's announcement on December 30, 2021, in response to the evolving situation related to the COVID-19 Omicron (B.1.1.529) variant of concern (VOC), the Ministry of Health has provided interim public health guidance on case, contact, and outbreak management for schools and child care settings, including updated guidance for enhanced screening using polymerase chain reaction (PCR) and rapid antigen testing (RAT) (contingent on provincial supply).

For further information please review new guidance [COVID-19: Interim Guidance for Schools and Child Care: Omicron Surge Guidance]() which is now available on the Ministry of Health's (MOH) website.

3. Reporting

As you are aware, the Ministry of Health recently made changes to the provincial case, contact and outbreak management approach, resulting in an end to routine notification of confirmed cases to families in schools and child care settings. In addition, on the advice of the OCMOH, the ministry has suspended public reporting of COVID-19 cases in child care.

To support ongoing monitoring and transparency related to COVID-19 impacts on child care, the ministry is encouraging licensees to monitor absenteeism rates in their programs.

Given the widespread transmission of the Omicron variant and changes to the provincial testing approach, child care operators will no longer be routinely notifying families of positive cases or if an individual is absent due to symptoms associated with COVID-19.

If absenteeism rises to a defined level in a child care program (approximately 30% above baseline), licensees are expected to send a template notification to families and staff/providers in the affected child care setting, signed by the local medical officer of health, with information on public health measures for families and staff/providers to follow (e.g., monitoring of COVID-19 symptoms). Licensees are encouraged to reach out to their local PHU in this scenario to get access to the required template.

When a PHU receives information from a school principal or child care operator regarding absenteeism, or other required reporting under the [Health Protection and Promotion Act, R.S.O. 1990, c. H.7](#), guidance outlined in the following documents and related protocols and guidelines should be followed:

- [Ontario Public Health Standards: Requirements for Programs, Services, and Accountability](#)

- [Infectious Diseases Protocol, 2020](#)

- [COVID-19 Integrated Testing & Case, Contact and Outbreak Management Interim Guidance: Omicron Surge](#)

Further information is being shared by the OCMOH to all local PHUs.

Serious Occurrence Reporting

Given recent changes to reporting, the ministry intends to seek approval to amend the serious occurrence reporting requirements set out in regulation. Should this change be approved, licensed child care programs would no longer be required to report confirmed cases of COVID-19 to the Ministry of Education.

However, until further notice, please continue to report serious occurrences for confirmed cases in accordance with O. Reg 137/15. Licensees should continue to follow existing reporting practices and a confirmed case should be identified as an individual

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who has tested positive for COVID-19 on a laboratory confirmed PCR test.

To continue to support ongoing monitoring and transparency related to COVID-19 impacts on child care, licensees are also required to report program closures related to COVID-19. For child care centres this represents any closure impacting the entire program. For home child care agencies, this represents any closure impacting an entire home child care premises. Both voluntary and public health ordered closures must be reported.

If a serious occurrence for a confirmed case has been submitted, the closure should be included as part of that report. However, for closures where there are no confirmed cases, licensees are to report under the "Unplanned Disruption of Service" category in the Child Care Licensing System.

Additional information will be provided should reporting requirements change.

4. Testing

The ministry has been working closely with the Ministry of Health and the Ministry of Government and Consumer Services to expand access to rapid antigen tests in child care programs.

Building on existing efforts to date, the ministry will be providing two rapid antigen tests per person for symptomatic use per the revised symptom screener.

These tests will be available for symptomatic testing of staff, providers, and infant, toddler and preschool-aged children in licensed child care. Children in before and after school programs are expected to access rapid antigen tests through their school.

Starting the week of January 10, 2022, school boards and municipal service system managers will begin receiving shipments of rapid antigen tests.

For programs co-located with publicly funded schools, tests will be made available through the school/school board. For community-based programs, tests will be made available through the local service system manager. Please do not reach out to your school or service system manager at this time.

Please note that licensees will be required to de-kit boxes in order to provide two rapid antigen tests per individual.

Children, staff, and providers will be required to actively screen each day, regardless of access to testing and to isolate if symptomatic, regardless of vaccination status and/or test access.

The two rapid antigen tests provided are to be used when individuals are symptomatic. Tests for children should be sent home with families to complete testing at home.

As per the [COVID-19: Interim Guidance for Schools and Child Care: Omicron Surge Guidance](#), if two consecutive rapid antigen tests, separated by 24-48 hours, are both negative, the symptomatic individual is less likely to have COVID-19 infection, and the individual should isolate until symptoms are improving for at least 24 hours (or 48 hours if gastrointestinal symptoms are present).

Further details, including the type of rapid antigen tests being provided, de-kitting instructions and distribution will be provided shortly.

5. Masking

Staff/Providers

Further to the commitment to provide child care staff and providers with the option of a non-fit-tested N95 mask, shipments of these masks have been processed and deliveries to all programs will be made this week.

If you have not yet received your shipment, please check to see if you have received a Purolator delivery notification and follow the instructions provided. If you are not able to make arrangements to pick-up your masks within five business days, they may be returned to the ministry.

While the guidance remains that all staff/providers must wear a medical/surgical mask, the ministry will also be providing staff/providers with the option of a non-fit-tested N95 mask. Consistent with advice from the Ministry of Labour, Training and Skills Development and the Office of the Chief Medical Officer of Health, all staff/providers should be provided with an allocation of one non-fit-tested N95 mask each day.

Replacing a mask is driven by factors including but not limited to:

- When it is no longer tolerated or accepted;

- When the filtering part of the mask is wet;

- When the mask has lost some of its integrity: relaxed elastic, damaged filtering part; and

- When there were potentially infectious droplets splashing onto the mask.

Please be advised that to further protect the longevity of the non-fit-tested N95 masks, these masks should be restricted to indoor use. If wearing a mask while outside, staff/providers should switch to a medical/surgical mask.

While staff/providers are to be allocated one non-fit-tested N95/day, to the extent there may be occasional damage, licensees will be provided with a small margin for spoilage.

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Children

On December 30, 2021, the government also committed to expanded access to free high-quality three-ply cloth masks for children.

If you would like a supply of these masks for your program, please submit an order through the following link:

https://forms.office.com/r/V38FJeq57T

Additional details on shipment of these masks will be provided to those programs who submit orders.

6. HEPA Filter Units

As indicated in the memo sent on December 30, 2021, the Ministry of Education is working with the Ministry of Government and Consumer Services to deploy standalone HEPA filter units to the child care sector.

To support the distribution of HEPA filters to the sector, the ministry recently requested additional information from licensees. A memo was sent to all licensees on January 10, 2022 providing a link to an online form. Please take some time this week to fill out the survey. Any programs that do not respond before January 18, 2022 risk not receiving a HEPA filter unit.

Please note, licensees located in schools are not required to provide information through this survey if they operate in shared space (e.g., the space used by the child care program is used by the school during the day). Licensees who operate programs in their own dedicated space co-located with a school are still required to submit information.

The ministry will continue to work with the OCMOH and local PHUs to adjust health and safety requirements and update guidance as required, based on the public health environment.

Thank you for your ongoing partnership as we work to continue to keep child care safe and open in the months ahead.

Sincerely,

Holly Moran

c: Consolidated Municipal Service Managers and District Social Services
      Administration Boards (CMSMs and DSSABs)

      First Nations with Child Care Programs