

MINUTES
COMMUNITY SERVICES COMMITTEE
REGIONAL MUNICIPALITY OF OTTAWA-CARLETON
CHAMPLAIN ROOM
6 MAY 1999
1:30 P.M.

PRESENT

Chair: A. Munter

Members: D. Beamish W. Byrne, L. Davis C. Doucet, D. Holmes, H. Kreling
A. Loney, M. McGoldrick-Larsen

CONFIRMATION OF MINUTES

That the Community Services Committee confirm the Minutes of the 15 April 1999 meeting.

CARRIED

PRESENTATION

1. FINAL REPORT OF THE PROJECT TEAM
MONITORING ONTARIO WORKS

- Co-ordinator, Community Services Committee report and Executive Summary dated 26 Apr 99
- Report, "Plain Speaking: Hope and Reality," April 1999 issued separately

The Committee heard from Joan Gullen, Resource Person for the Project Team, who noted the report before Committee is an informative document that provides good, qualitative and can be utilized to develop effective strategies.

Notes: 1. Underlining indicates new or amended recommendations approved by Committee.

2. Reports requiring Council consideration will be presented on 26 May 1999 in Community Services Report No. 30.

Karen Graham, Advocate and member of the Monitoring Ontario Works Project Team, began by thanking all those participants who shared their experiences of Ontario Works. She went on to say the picture emerging across Ontario is that people who want to work are having their expectations raised but not met. This same message is being conveyed through the Task Force on Poverty and through people who are participating in various training programs.

Susan Learoyd, representing the Social Planning Council, described the methodology behind the study, calling it qualitative in nature. A broad range of individuals participated, and research questions were carefully worded. Some key findings are as follows:

- at the outset participants believed Ontario Works would help them find employment: many are disappointed with the fact they had not improved their circumstances over 6 months of participation in the program;
- the lack of information and consistency in accessing supports to employment (child care, money for clothing) were reaffirmed as critical issues;
- few participants felt they had gained new skills through the community placements and this appears to have been the perception throughout the Province. Work fare is primarily seen as being driven by pressures to reduce welfare costs.

Ms. Graham highlighted the first six (6) recommendations put forward by the Project Team, noting these are systemic in nature and relate to provincial legislation. She pointed out that Ottawa-Carleton has had considerable success in developing voluntary work programs, for example Opportunity Planning and many others.

Ms. Hélène Perrault, a Project Team member representing the Task Force on Poverty, presented the next five (5) recommendations which focus on providing comprehensive information about, and supports to, Ontario Works participants.

Ms. Linda Lalonde, a Project Team member representing the Anti Poverty Project, highlighted three recommendations that speak of the need to actively challenge stereotypes about people on social assistance and of the requirement to identify specific training geared to current labour market needs.

Mr. Ken Clavette, a Project Team member representing Labour Community Services, spoke about the need for a mechanism or forum where clients can safely express their concerns and provide ongoing feed-back on their experiences in the Ontario Works Program without fear of reprisals.

Ms. Sue MacLatchie, representing the Coalition of Community Health and Resource Centres, concluded the presentation by highlighting the following areas of further research:

- examine Ontario Works rules, regulations and practices that discourage people from acting in ways consistent with the goals of Ontario Works (sale of assets, support from family and friends being deducted from monthly benefits);
- examine and document participants' experiences in the Employment Placement and Self-Employment components of Ontario Works (rates of success in helping people find and maintain employment);
- examine the impact on specific groups of individuals (sole support parents, new Canadians, clients over a certain age);
- track the number of people who leave welfare, why they leave, what happens to them.

Speaking to the recommendations, and in response to a question from Councillor D. Holmes, Barbara Carroll, Researcher, said it would be simplistic to say the Region of Ottawa-Carleton can address all the recommendations. In reality, more than half the seventeen recommendations involve cooperative measures. Linda Lalonde posited that the RMOC can however take action on all the recommendations. Ken Clavette wanted to give recognition to the work done in the past, expressing pride in the fact the Region has treated people with respect and has not been in any way abusive of its clients.

A number of public representatives were heard and their comments may be summarized as follows:

Ms. Joanne Finn, said workfare has been tried and failed and is failing again. She posited that persons receiving Family Benefits and those on disability are better off than those involved in Ontario Works. Ms. Finn said the Harris government is "poor bashing" and this is going on because there are no effective opposition parties.

Linda Lalonde said the Committee will hear many of the same comments it heard from Ontario Works participants from other groups such as the Task Force on Poverty. She spoke about the ongoing stigmatisation of welfare recipients by the provincial government, saying the Province has also been criticized by the United Nations Covenant on Civil and Political Rights for its policies. Ms. Lalonde circulated documentation in support of her thesis, and concluded her presentation by saying that training programs were not producing the desired results.

Grace McCaffrey informed the Committee she has complained to the Regional Chair about the process followed by the Project Team. She put forward the view the Interim Report presented in October 1998 was pre-conceived. In addition, the Region is not anxious to take on the implementation of workfare because workfare is not working. She pointed out that her name does not appear on the list of Project Team members and she posited that not all participants were given the same opportunity to comment and nor was there the same acceptance of their input.

Elizabeth Tucker from the Carlington Community Chaplaincy, spoke in support of the seventeen recommendations put forward, as they stem from the personal stories on Ontario Works participants. She requested that language support be built in to any future programs and that the suggestion about the full amount of the National Child Benefit being retained be carefully examined.

Sue Clark, a social activist, read out a list of all agencies participating in Ontario Works and she said they should be ashamed of themselves for participating in what she called a slave-labour program.

Councillor D. Holmes presented a Motion calling for an examination of the further areas of research and asking that the Social Services Department report back with an action plan on the seventeen recommendations contained in the report. The Councillor said the report emphasizes that, to work, the program needs significant investment in individuals and a growth economy. She was pleased to see recommendations coming forward and she expressed the hope Council would agree to implement the strategies proposed by the Project Team.

Councillor C. Doucet echoed earlier comments about the excellence of the work done. He said he felt the fundamental problem is that there is not enough money in the system.

Councillor W. Byrne said she thought the report had been difficult to produce, as there is a high level of frustration, despair and the hopes of participants for meaningful employment have been dashed. She spoke in support of the Action Plan, expressing the hope some concerns could be addressed other than through an infusion of money. Councillor Byrne wondered why successful voluntary employment programs such as Opportunity Planning and the Supports to Employment Program had been eliminated since programs such as these have an important role to play.

Councillor A. Loney posited now is the time to be heard, both individually and collectively. He said the staff report will assist Council in identifying what measures can be implemented and how this can be done in an organized way.

The Committee Chair, A. Munter, made reference to the LEAP Program, noting that \$4,500 is allocated for supports to employment per participant, whereas Ontario Works, allocates only \$500 per year. He posited this is an implicit admission that Ontario Works will not deliver results without huge changes. Chair Munter pointed out that most Committee members do not support the program, however, it is a mandatory program and efforts are being deployed to make it work. He thanked all those present and all those who participated in the preparation of the report.

The Committee then considered the following Motions:

That Council receive the Final Report of the Project Team for Monitoring Ontario Works for information.

CARRIED

Moved by D. Holmes

That the Areas of Further Research outlined in Section 4 of the Report, as well as Recommendations 1 through 17 of the Monitoring Ontario Works Action Plan be referred to the Social Services Department for a report back to the Community Services Committee, defining strategies to deal with each of the recommendations.

CARRIED as amended

HEALTH

2. CANADIAN PUBLIC HEALTH ASSOCIATION
90TH ANNUAL CONFERENCE

That the Community Services Committee recommend the attendance of Councillor A. Munter at the 90th Annual Conference of the Canadian Public Health Association.

CARRIED

3. ASSOCIATION OF LOCAL HEALTH AGENCIES
1999 ANNUAL CONFERENCE

That the Community Services Committee recommend the attendance of a committee member or members at the Association of Local Public Health Agencies 1999 Annual Conference.

DEFERRED

4. LAND AMBULANCES HEALTH SERVICES YEAR 2000

DIRECTIONS DOCUMENT - PHASE II

At the outset the Committee Chair, A. Munter, clarified the intent is to Table the report to 17 June 99 to allow for additional public consultation. Chair Munter introduced the Director, Land Ambulance Health Services, Joanne Yelle-Weatherall, who presented the report.

Ms. Yelle-Weatherall provided a brief history of the events of the last year where the focus was on what the community needed as opposed to who would provide the service. Having been given a Council directive to secure the best service at the most reasonable cost, staff undertook the following activities:

- a best practices review of high-performance ambulance systems in North America
- interviews, research and developing contacts with some of the best minds in the business
- discussions with paramedics and dispatch operators across North America.

In the Fall of 1998 staff obtained Ministry of Health raw call data which confirmed that response times were poor and survival rates were low. This was followed by an Independent Audit of Response Times where it was ascertained it was essential to have full control of the dispatch function if improvements were to be made to the system.

Speaking to the March 23rd provincial announcements, Ms. Yelle-Weatherall pointed out that, while there have been no changes to the legislation, the 30th September 99 deadline has been extended to 30 September 2000. Assumption of service prior to the year 2001 will not be considered early assumption and existing operators will not automatically be extended.

Ms. Yelle-Weatherall informed the Committee there are indications the Ministry of Health is considering pilot projects on dispatch throughout the Province. Delegates to the May 18th meeting of the provincial AMO/MOH Task Force will hear a presentation on the Price Waterhouse Coopers report, a report commissioned by the Ministry of Health to look at the governance around dispatch. Staff will share this information with the Committee.

Ms. Yelle-Weatherall said the recommendation is that Council proceed with Option 3 because, at the moment, staff cannot give advice on who is best qualified to provide the best service at the most reasonable cost. The Request for Proposal (RFP) will provide a full system design and will provide detailed information on the cost and the quality of the service received. In addition, a full system design will provide the Region with a contingency plan to protect public health. In the event Council selects a private-sector operator, the design plan will protect Council in the unfortunate event of an operator default. Ms. Yelle-Weatherall added that in order to contract with the private sector, Council will need to be a skilled buyer and staff will have to know as much as, or more

than, the contractor. A full system design will provide a guide to monitor the contractor on day-to-day basis.

Ms. Yelle-Weatherall concluded her presentation by describing the next steps, i.e., extensive public consultation, possibly a public open house or meeting and the preparation of a report, summarizing the results of the consultation for 17 June. Upon Council approval and the receipt of an official response on dispatch, staff would proceed to the RFP, evaluate the submissions and report to Committee and Council for approval.

In reply to a question from Councillor J. Legendre regarding dispatch, J. Yelle-Weatherall clarified that the RFP would be designed assuming the Region has control of this essential function. Councillor Legendre inquired why staff are not recommending that an outside consultant assess the bids, in order to be absolutely correct and to ensure a "level playing field". J. Yelle-Weatherall replied that one of the reasons for tabling the report is to get additional feedback and the use of an outside consultant could be brought forward as an option. The Medical Officer of Health, Dr. R. Cushman, said that primary in the development of criteria will be the external consultant and bids will be evaluated and graded in a number of areas. Dr. Cushman pointed out there are no external consultants in Ontario, and the farther one goes to locate them, the less they will know about the Ottawa-Carleton area and about municipal government structures. Staff hope to put together a process that will ensure the bids are evaluated in the best way possible.

Councillor A. Loney asked whether staff were aware of the rumour the Harris government, if re-elected, would scrap the ambulance service download. J. Yelle-Weatherall replied staff have heard this rumour several times over the last year. Dr. Cushman pointed out there exists the Toronto model, with a 50/50 split, and given the amount of interest generated by this subject, the model may be adopted locally.. Councillor Loney emphasized the importance of this matter given that the cost of setting up ambulance services in Ottawa-Carleton was estimated at between \$20 and 25 million. He suggested the final numbers may be dramatically different and Council may want to await a provincial decision rather than speed up the process.

Councillor M. McGoldrick-Larsen asked when staff expect to know the final composition of the Bid Preparation Team. Having been informed that this information would be provided by June 17th, the Councillor said she would feel more comfortable if the balance in the Team were a little different. She suggested that staff go outside the Corporation to recruit a contract lawyer, a financial policy researcher and an administration person, positing this would give more impartiality to the team. Dr. Cushman agreed with this was a good suggestion, however he noted there are issues of trust implicit in making use of in-house resources.

Mr. René Berthiaume, Rural/Metro Ontario began by expressing strong support for the report recommendations. He noted that fairness has been the hallmark of the actions of regional staff all along and there is an expectation the Committee will pursue this objective

approach. He said he was confident regional staff will ensure there is clear separation between the Bid Team and the Bid Review Committee to ensure a level playing field. Mr. Berthiaume also expressed concern about the composition of the Bid Evaluation Committee. He pointed out that three of the proposed four external ambulance experts have in-house backgrounds and only one has experience with a public/private partnership model. This imbalance may result in undue influence and bias towards in-house services. Furthermore, as the Committee has an even number of members, it may end up being deadlocked in its deliberations. In order to avoid deadlock and to increase community participation in the decision-making process, Mr. Berthiaume suggested that a representative from a community association such as the Ottawa-Carleton Board of Trade be added to the Committee. To ensure that neither in-house nor public/private partnership can exert undue influence, only one of the three members with in-house background should be designated as a voting member of the committee; the remaining members could be designated as non-voting members or expert consultants.

Mr. Berthiaume concluded by saying that Rural/Metro Ontario management and its team of Paramedics are eager to compete for the privilege of providing performance-based ambulance service to the people of Ottawa-Carleton. He was encouraged to hear that Ontario is considering pilot projects for dispatch because this will allow the Region to move forward with its plans. He tabled with the Committee a copy of his letter to the Medical Officer of Health, dated May 3, 1999, and a copy Rural/Metro's press release on the need for transparency in the selection process¹.

Brian Moloughney, Ontario Public Service Employees Union Local 413, began by saying the Region has been reviewing land ambulance services for 16 months: to-date, the process has been open and all stakeholders have come forward. He expressed the view that public models of service delivery are cost effective and are the preferred choice. He spoke about Region and the Province having Conflict of Interest Guidelines, and he posited that one member of the Bid Evaluation Team, Dr. Justin Maloney, Director of the Base Hospital, appears to be in violation of those principles. Mr. Moloughney indicated that OPSEU would forward an objection in principle and make application that it also have representation if Dr. Maloney is allowed to continue. He concluded his presentation by saying he was confident the Region is moving towards a decision and that a public model will be the choice.

¹ Documents on file with the Regional Clerk.

The Committee then considered the staff recommendations:

That the Community Services Committee receive and Table the following:

- 1. That the report entitled "Land Ambulance Health Services Year 2000 Directions Document - Phase II" be tabled to the meeting of 17 June 99, to allow for additional public consultation.**
- 2. That staff be directed to prepare a Request for Proposal, in which the two private sector operators and the Region of Ottawa-Carleton will be asked to submit a proposal.**
- 3. That the next steps in the process, as outlined in Annex A, be approved.**

TABLED to 17 June 99.

5. EARLY POST PARTUM DISCHARGE POSITION PAPER

In reply to a question from Committee Chair A. Munter about the Healthy Babies Program, the Medical Officer of Health, Dr. R. Cushman, indicated there have been recent, encouraging announcements, and the Department wants to review the entire area. Staff will report back as soon as possible on the gap between need and service.

Councillor L. Davis pointed out there are many other resources available to serve this clientele, and she questioned whether the Region has to deliver the program. Dr. Cushman indicated that hospital stays are so tight they are measured in hours, not days, and there is ample data to indicate the program is useful.

Chair Munter told of receiving very positive feedback about the Well Baby Drop-In Program and of being told how it decreases the need for visits to doctors' offices. Councillor M. McGoldrick-Larsen expressed a desire to have the program expanded to South Nepean, calling it community building at an early age. Councillor W. Byrne pointed out that many new mothers have neither family nor friends to fall back on, and these programs represent a contact, as well as fairly immediate access to health care professionals.

That Community Services Committee recommend Council receive this report on the Health Department's response to the Ontario Public Health Association's (OPHA) Early Postpartum Discharge Position Paper.

RECEIVED

HEALTH/SOCIAL SERVICES

6. REGIONAL RESPONSE TO A PUBLIC HEALTH APPROACH TO
REDUCING CHILD POVERTY AND ENHANCING RESILIENCY

That the Community Services Committee recommend Council:

- 1. Continue to support the involvement of Regional Health and Social Services in community initiatives to reduce child poverty and enhance the resiliency of poor children, and continue to provide programs to enhance positive parenting and parent-infant interaction such as parenting and early intervention programs.**
- 2. Lobby the Province to review the adequacy of social assistance rates, for example by using a market basket approach to ensure the basic needs of the poorest families are adequately met.**
- 3. Lobby the Province to ensure adequate funding be provided for Healthy Babies, Healthy Children to meet actual needs of families.**
- 4. Lobby the provincial and federal governments to increase capacity for licensed quality child care spaces**

CARRIED

SOCIAL SERVICES

7. FUNDING TO SUPPORT FAMILIES AND CHILDREN- 1999 NATIONAL
CHILD BENEFIT (NCB) FUNDING RECOMMENDATIONS

That the Community Services Committee recommend Council approve the allocation of \$500,000 for Funding to Support Families and Children for 1999 as recommended by the Allocations Committee and as described in Annex A.

CARRIED

8. PROPOSED INDEPENDENT REVIEW OF THE HEALTH DEPARTMENT
- Co-ordinator, Community Services Committee report dated 29 Apr 99

The Committee agreed to substitute the following Motion for the one contained in the staff report:

THAT the Chief Administrative Officer, in consultation with the Medical Officer of Health, prepare the terms of reference for an independent review of the Health Department's structures and operations, with particular regard to how the department can meet the requirements set out by the Ontario government mandatory public health guidelines; and

FURTHER THAT this review build on the work already done in the Corporate Review - Health Department (1996), Internal Audit Department's Review of the Health Department (1997) and Health Department Administrative Support Resources review (1998) and that the terms of reference, budget and timelines for this review be submitted to Community Services Committee and Council for approval.

CARRIED as amended

ADJOURNMENT

The meeting adjourned at 3:40 p.m.

CHAIR

CO-ORDINATOR