

# Legislative Assembly of Alberta The 27th Legislature Third Session

## **Standing Committee on Health**

McFarland, Barry, Little Bow (PC), Chair Pastoor, Bridget Brennan, Lethbridge-East (AL), Deputy Chair

Forsyth, Heather, Calgary-Fish Creek (WA) Groeneveld, George, Highwood (PC) Horne, Fred, Edmonton-Rutherford (PC) Lindsay, Fred, Stony Plain (PC) Notley, Rachel, Edmonton-Strathcona (ND) Olson, Verlyn, QC, Wetaskiwin-Camrose (PC) Prins, Ray, Lacombe-Ponoka (PC) \* Quest, Dave, Strathcona (PC) Sherman, Dr. Raj, Edmonton-Meadowlark (PC) Taft, Dr. Kevin, Edmonton-Riverview (AL) Vandermeer, Tony, Edmonton-Beverly-Clareview (PC)

\* substitution for Dave Quest

### Also in Attendance

Chase, Harry B., Calgary-Varsity (AL)

## **Department of Children and Youth Services Participant**

Hon. Yvonne Fritz

Minister

## Support Staff

W.J. David McNeil	Clerk
Louise J. Kamuchik	Clerk Assistant/Director of House Services
Micheline S. Gravel	Clerk of Journals/Table Research
Robert H. Reynolds, QC	Senior Parliamentary Counsel
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Stephanie LeBlanc	Legal Research Officer
Diana Staley	Research Officer
Rachel Stein	Research Officer
Liz Sim	Managing Editor of Alberta Hansard

6:30 p.m. Wednesday, March 17, 2010

[Mr. McFarland in the chair]

### Department of Children and Youth Services Consideration of Main Estimates

**The Chair:** Good evening, everyone. I'd like to call this meeting to order, but before we do, I want to wish everyone a happy St. Patrick's Day for those of us that are not able to go out and celebrate with our neighbours.

I'd like to note that the committee has under consideration the estimates of the Department of Children and Youth Services for the fiscal year ending March 31, 2011.

I'd ask that we introduce ourselves for the record. After we've gone around the table, we'll have the minister introduce herself as well as her staff.

I'd like to note that pursuant to Standing Order 56(2.1) to (2.4) Mr. Prins is substituting for Mr. Quest this evening.

With that, on our left.

Mr. Prins: Good evening. Ray Prins, MLA for Lacombe-Ponoka.

Mr. Olson: Hello. Verlyn Olson, MLA for Wetaskiwin-Camrose.

Mrs. Forsyth: I'm Heather Forsyth, Calgary-Fish Creek.

Mr. Chase: Harry Chase, Calgary-Varsity. Top of the evening.

Ms Notley: Rachel Notley, Edmonton-Strathcona.

Mr. Horne: Fred Horne, Edmonton-Rutherford.

Mr. Lindsay: Fred Lindsay, Stony Plain.

Mr. Groeneveld: George Groeneveld, Highwood.

Mr. Vandermeer: Tony Vandermeer, Edmonton-Beverly-Clareview.

Ms Pastoor: Bridget Pastoor, Lethbridge-East, deputy chair.

The Chair: Barry McFarland from Little Bow. I'm chair this evening.

Minister.

Mrs. Fritz: Thank you. Yvonne Fritz, Calgary-Cross.

Mr. Chair, I'm pleased to introduce my staff that are here with me today. To my right I have Fay Orr, our deputy minister. Gord Johnston is to my left, the ADM for the ministry support services division. I have Shehnaz Hutchinson here at the table, executive director of financial strategies.

I'm going to ask my other staff to stand so that people can see who they are because I know many of you are new to my staff as well: Mark Hattori, ADM for program quality and standards division; Karen Ferguson, ADM, community strategies and support division; Lori Cooper, executive director, human resource management; Susan Taylor, acting executive director, executive director's office; and Trevor Coulombe, director of communications. Also, I have with me Jen O'Callaghan, my executive assistant.

Thank you, Mr. Chairman.

The Chair: Thank you, Madam Minister. For the record I'm going

to review the process here for the speaking order and time. Standing Order 59.01(4) prescribes the sequence as follows:

- (a) the Minister, or the member of the Executive Council acting on the Minister's behalf, may make opening comments not to exceed 10 minutes,
- (b) for the hour that follows, members of the Official Opposition and the Minister, or the member of the Executive Council acting on the Minister's behalf, may speak,
- (c) for the next 20 minutes, the members of the third party [Wildrose Alliance], if any, and the Minister or the member of the Executive Council acting on the Minister's behalf, may speak, and
- (d) any Member may speak thereafter.

With the concurrence of the committee the chair will recognize the members of the fourth party, the NDs. Following the members of the third party and for the next 20 minutes, the members of the fourth party and the minister or the member of the Executive Council acting on the minister's behalf may speak.

I would at this point assume, unless I'm going to hear otherwise, that the back and forth will be combined. No?

**Mr. Chase:** Three 10-minute shots and possibly a fourth 10 minutes, please.

The Chair: That's fine.

I will call for a five-minute break following the Official Opposition's time at approximately 7:45.

Committee members, ministers, and other members who are not committee members may participate. Department officials and members' staff may be present but may not address the committee. Members may speak more than once; however, speaking time is limited to 10 minutes at a time. A minister and a member may combine their time for a total of 20 minutes. Members are asked to advise the chair at the beginning of their speech if they plan to combine their time with the minister's time.

Three hours have been scheduled to consider the estimates of the Department of Children and Youth Services. If the debate is exhausted prior to three hours, the department's estimates are deemed to have been considered for the time allotted in the schedule, and we will adjourn. Otherwise, we will adjourn at 9:30 p.m.

Points of order will be dealt with as they arise, and the clock will continue to run.

The vote on the estimates is deferred until Committee of Supply on March 18, 2010, which is tomorrow.

I believe we are ready to go, Madam Minister.

**Mrs. Fritz:** Thank you, Mr. Chairman. I'm pleased to address the committee this evening. As you know, I've been in this ministry for eight weeks now, and I can tell you that I've thoroughly enjoyed it. I've learned a great deal.

I am here today, as you said, to discuss the budget and the threeyear business plan for the Ministry of Children and Youth Services. This plan reflects our Premier's commitment to protect the programs and the services that support our most vulnerable Albertans. I know that we've heard that often, but it's very true, especially for this ministry.

In the coming fiscal year, Mr. Chairman, our ministry will invest approximately \$1.1 billion in programs and services, and those programs and services directly support children, they support youth, and they support their families. While it's a reduction of 3.1 per cent, which is \$36 million, from the previous fiscal year, it is the second-largest budget in the ministry's history.

Through prudent budgeting we found efficiencies that do not impact front-line service delivery, and that includes a disciplined approach to discretionary spending and streamlining of administrative processes. At the same time, we've worked hard to maintain funding for core services and programs. It's critically important to know that about core services and programs because they make a meaningful difference in the lives of our vulnerable children and their families.

We are increasing support for families caring for children with a disability, and that's by \$5 million to almost \$120 million, and that's to help ensure that Alberta continues to be a leader in Canada, which currently we are in this program. We're also providing nearly \$163 million in support, and that's for our foster parents and our kinship care providers.

We are maintaining support for women and youth shelters, sexual assault centres, the protection of sexually exploited children, the Child and Youth Advocate, and the fetal alcohol spectrum disorder initiatives. We will continue to provide child care subsidies, and that's for our low- and middle-income families, Mr. Chairman. Also, we'll have wage top-ups. We'll continue to provide those as well to the child care operators to assist them in finding and keeping qualified child care staff.

We are preserving current funding levels for family and community support services. That assists municipalities and our Métis settlements and helps them in delivering their preventative social service programs.

It's important to know that no staff in the ministry – and I've heard this question often, whether or not staff will be laid off, Mr. Chairman – will be laid off as a result of Budget 2010. The reduction in full-time equivalents reported in the budget will be achieved, and the way they'll be achieved is through attrition and by not recruiting for vacant non front-line positions. We will continue to request exceptions to the hiring restraint, and we will fill front-line service delivery positions so they can continue with their important work helping Albertans.

Now I'd like to take a few moments, Mr. Chairman, to discuss our child intervention services budget. This budget has been reduced by 6.8 per cent to \$382 million. The safety and well-being of at-risk children, youth, and families have always been and will continue to remain a top priority for this ministry. There's a strengthened focus, and that focus is on measures that will result in positive outcomes such as increased permanency through adoption, private guardianship, and reunification with a child's family. Early supports for families experiencing problems, which are expected to reduce costs in child intervention services, are also a focus.

It's a good practice, I think, that's taking us down this path here with child intervention, and it's not the budgetary pressures, Mr. Chairman. All of our decisions are based on providing the right services at the right time to support vulnerable children and families. At the same time, we are refocusing prevention and early intervention supports, and that's to proactively address the factors that cause children and families to require intervention services in the first place.

#### 6:40

I thought you might like an example of that. Recently I attended an event at the Awo Taan parent link centre in Calgary, where the ministry announced the province-wide expansion of the positive parenting program. The positive parenting program is known as the triple-P program. It's based on 30 years of research. Triple-P provides parents with timely and tailored supports to help them address parenting issues before they escalate into more serious problems. A study of the program shows that providing families with access to quality parenting information and support can reduce child maltreatment. What really struck me when I went there and what's very striking about the Awo Taan program – and you'd be familiar with this, Member for Calgary-Fish Creek – is that it is very much run by the aboriginal community, but the cultural sensitivity was absolutely amazing with what they included in taking the positive parenting program for the moms and dads and for the grandmas and grandpas that were there and aunts and uncles and adapting it to things like the medicine wheel, to smudging, to prayers, to having the elders involved. They were involved there, too. We have five triple-P parent programs in Alberta that are directly focused on our aboriginal community, and I think that's just an amazing story, which is why I am very supportive of triple-P.

Now, speaking about child care, the ministry continues to be committed to improving Albertans' access to quality and affordable child care. It must be affordable. We plan to meet and surpass the space creation goal of 14,000 new spaces by the end of March 2011. Given the success in creating the child care spaces that Alberta families need, it makes sense to shift the focus to maintaining the spaces, and the budget reflects the fact that maintaining a space is not as costly as creating one. It just makes sense. That is why child care funding has been adjusted by 3.6 per cent to \$198 million. We will continue to monitor the need for child care spaces and support the creation of additional spaces for the most vulnerable children and families as necessary.

As I stated earlier, we are also maintaining child care subsidies, which assist approximately 17,000 low- and middle-income families, and we are also continuing to provide wage top-ups to assist child care operators with staff recruitment and retention. The Alberta Child Care Association identified that these two initiatives were the most important child care initiatives to maintain, and we're honouring that.

Our province also continues to be a leader in providing resources and supports to address family violence and bullying, and that budget is more than \$39 million. Agencies and support groups currently apply for grant funding through various ministries, including our community incentive fund, which is \$3 million. We are co-ordinating the process so that organizations will be applying through one ministry, Alberta Justice and Attorney General, to the safe communities innovation fund. We remain steadfast in our commitment to family violence prevention and bullying initiatives, and the ministry is still providing more than \$2 million to communities across Alberta to help them work together to provide family violence prevention initiatives and victim supports. The main focus is on direct supports and services to victims of family violence such as our women's shelters, our sexual assault centres, our safe visitation sites, and the expansion of outreach services for aboriginal and immigrant families.

Mr. Chairman, I want you and the members that are here this evening to know that we will continue to pursue innovative approaches to service delivery. Our research and experience show that it results in better outcomes for our children and our youth in care. We will work with agencies to ensure that the supports they provide meet the needs of the most vulnerable children, youth, and families and that it will be cost effective and done in an efficient manner. I think that when people wonder about going forward, because this isn't just about today but it's about going forward through mandated initiatives like the social-based assistance review and outcomesbased service delivery, our social programs are going to focus on aligning and integrating services so that Albertans get the right help at the right time.

Now, I think that the budget and the business plan make sense. I know that there are going to be many questions this evening about that, and we are here to learn, my staff and I, as to how we can

change things that people may bring forward if they're looking for other solutions. This really is about making the programs better, I believe, for the children, the youth, and the families that we serve, and for that I thank you.

Thank you.

**The Chair:** Thank you for a very timely presentation, Minister. We'll now turn it over to Harry Chase for 10 minutes.

**Mr. Chase:** Thank you very much. As I indicated, I will be going in 10-minute clumps. My goal is to put approximately 12 pages of questions onto the record, and it is not my expectation that even a significant number of them will be answered orally, but I do look forward to the written follow-up.

**Mrs. Fritz:** Can I just comment on that? Did I hear you say you're putting 12 questions or 12 pages?

Mr. Chase: Twelve pages of questions.

Mrs. Fritz: Twelve pages of questions?

Mr. Chase: Yes.

**Mrs. Fritz:** Okay. Now, I understood – and if you could just help me with this, Mr. Chairman – that tonight is about us answering the questions here at the table, right? Is that correct?

**Mr. Chase:** There's always been a follow-up. There's no way you could possibly answer all these questions, especially if I don't get started.

**The Chair:** Well, the questions are to be answered as much as possible, so really, I mean, a little common sense. If you've got that many questions, maybe you'd like to table some.

**Mr. Chase:** Well, as I say, I don't know if you've started my time, but I'd like to get on the record here.

**The Chair:** Get on with it. Hopefully, you'll give the minister the courtesy of answering a few.

**Mr. Chase:** With approximately \$14 billion left of the \$17 billion stability fund, there was no need to cut vital children's services. Last fall at the annual general meeting of the children and family supports association I kicked off a program entitled safe kids save dollars.

The millions of dollars that are taken up in legal fees that could have been part of the children's entitlement concerns me very much. Whether it's through legal aid, which, again, is taxpayer funded, or the payment for lawyers, prosecutors, and so on in the system, it involves millions of dollars in terms of frequently tearing apart families as opposed to putting them back together. Parents are disassociated from their children. Grandparents frequently are significant losers in the court process.

As the minister noted, there was a decrease of \$36 million in this budget. The most significant cut came from child intervention services, which saw a decline of approximately 26 and a half million dollars. The child care cut was \$7.5 million from the forecast in 2009-10. Prevention of family violence and bullying was cut by approximately \$2.7 million. The one highlight, as the minister noted, was an increase of \$5.3 million for family support for children with disabilities.

Significant cuts to the regions: region 3, Calgary and area, received a \$5.1 million cut; region 4, central, received a \$1.8 million cut; region 6, Edmonton and area, received a significant cut of \$8.1 million; region 7, north central, received almost a \$2 million cut; and region 8, the northwest, received a \$1.3 million cut.

Under the title Prevention, for family enhancement, protective services, page 78 of the estimates, there's a prevention programs cut of \$10.4 million. What programs and services are being cut due to this decrease?

At line 2.0.2, page 78 of the estimates, prevention of family violence and bullying is \$39.1 million. How is this money allocated between family violence and bullying-specific initiatives? What specific family violence prevention initiatives and programs will this money fund? Will the focus be on educational programs or in-home supports for families? What particular antibullying programs will this fund?

Strategy 1.4 on page 44 of the ministry business plan states that this ministry will "lead implementation of priorities in the crossministry Prevention of Family Violence and Bullying Initiative action plan." What exactly will this role entail? How exactly is this ministry working with other ministries on this initiative? How much funding is being provided by other ministries for this initiative? Are the funds being allocated by this ministry as part of its lead role in implementation? What specifically are the priorities of this crossministry initiative?

Line 2.0.4, fetal alcohol spectrum disorder initiatives. In 2009-10 \$18.1 million was spent on fetal alcohol spectrum disorder initiatives. What was this money used for specifically? The estimate for 2010-11 is \$18.3 million. What will this money be used for? What programs and strategies will it fund? What will the priorities be?

#### 6:50

Strategy 1.5 in the ministry business plan states that this ministry will work with other ministries to improve both prevention strategies and supports for children, youth, and families impacted by FASD. How will you work with other ministries? With which ministries? How will prevention strategies be improved in the next year? How will it be determined if these programs and strategies have actually improved? How will you measure this? This, unfortunately, is not included in the performance measures. How will supports for children, youth, and families impacted by FASD be improved? Again, how will you measure this?

Strategy 1.2, page 44, ministry plan 2010-2013, parent link centres. Strategy 2.5, page 46, ministry business plan 2010-13, triple-P to be delivered through parent link centres. Families to benefit from expansion of positive parenting program. Free customized support available through parent link centres.

How much funding will be dedicated to parent link centres? What line item is this included under? How much will be spent on the positive parenting program, the triple-P, in 2010-2011? How will it be determined if triple-P is having a positive impact on families and on the effectiveness of parent link centres? How will the increased emphasis on parent link centres not lead to further declines in inhome family support and enhancement services, that can be effective in preventing the need for protection services? Something that I will continue to maintain is extremely important is protecting children and supporting families while the family still has a chance of being intact. How does this support the ministry's goals regarding improved supports for families impacted by FASD, for example? What concrete results do you expect from parent link centres? Are there specific accreditation requirements for triple-P practitioners and other service providers in parent link centres? What are they? How are they monitored?

Line 3.0.3, page 78, estimates. Why was the line item for family support for children with disabilities moved from promoting the development and well-being of children, youth, and families in the 2009-10 estimates to preservation and protection in 2010-11? Is this a new direction?

Line 3.0.1, page 78, estimates, cuts to child intervention services. As I've indicated, this is the most dramatic cut. What specific programs were cut to make a decrease of \$26.5 million possible? How were the cuts to child intervention services made before the review of the child intervention system has been completed? How does this not undermine the purpose of the review itself? How will this not undermine the ability of the ministry to respond to and implement the recommendations handed down by the review panel?

The minister stated in the House on March 9, 2010, *Hansard*, page 363, that she will be monitoring child intervention services very closely to ensure that the cuts are not affecting services provided. What in particular will you be monitoring? What will it take for you to see that the cuts are having a negative effect on the services provided? Are there specific performance measures that you are focusing on? If, upon watching this closely, the decision is made that the cuts are in fact having a negative impact on the delivery of services, where will the minister find additional funding? Will it be through transfers from other areas of the children's services budget, or will it be through a supplementary supply?

Family enhancement, line 3.0.1, page 78, estimates. How much of the child intervention services estimate amount of \$378.6 million will be applied to family enhancement services rather than child protection services? What will the priorities for this money be? What specific services and programs for family enhancement will be a priority?

Prevention versus protection, page 78, estimates, sections 2, 3, and 4. Can the minister answer why again this year there is a greater financial focus on intervention services rather than on the promotion of healthy communities and preventative services? How can the minister justify this when, if you can prevent the circumstances where children will need intervention services, the cost of intervention will be saved? When will the ministry realize that putting money into the front end of social services will save money on the back end?

The Chair: Thank you, Mr. Chase.

We'll now revert to the minister for 10 minutes.

**Mrs. Fritz:** Thank you, Mr. Chairman. I have to tell you this, that there isn't any way that I'm going to be able to answer every one of those questions, and I won't be putting them in writing, and I won't be asking my staff to do that. There's opportunity in other venues that we have politically that the member could ask questions. I know, hon. member, that you must not have meant that at all, for the staff to do that kind of work. I thought this was about, really, an exchange of information. What I'm going to do, though, is answer some of the questions, that I'm hoping will be helpful to you.

You asked about legal services. The budget for legal services is 5 and a half million dollars. We do manage the legal risk within the ministry by ensuring that legal issues are identified, legal services are provided. The responsibility that you asked about for legal policy and strategic direction support to the ministry includes contract management, direct support in the negotiating of aboriginal settlements, management of ministry legislative development and regulatory review initiatives, and management of litigation activities involving the ministry.

On the funds that you had requested, the ministry entered into a legal services protocol with Alberta Justice whereby our ministry agreed to fund Justice for the provision of legal services, including legal representation for the ministry in child intervention matters in Edmonton and Calgary. Funding under the protocol, that you asked for: 2004-05 was \$1.502946 million, '05-06 was \$1.563063 million, '06-07 was \$1.524987 million, '07-08 was \$1.994357 million, and '08-09 was \$2.91169 million. In addition to the protocol funding to Justice, the ministry funds legal agents in areas of the province outside of Edmonton and Calgary. That's legal agents, hon. member, to represent the ministry in child intervention matters. Funding to legal agents: '05-06 was \$1.206755 million, '06-07 was \$1.452481 million, '07-08 was \$1.283767 million, and '08-09 was \$1.743035 million. There is more I could add, but I think that captures what you had been asking.

The other question that you were interested in that I thought was important was child care intervention. You'd asked about the reduction in child care. The budget reductions are about a strengthened focus, and that's some measures that will improve outcomes for children and youth. Those measures increase efficiencies in targeted areas such as earlier permanency, increasing number of children in family-based care, including children moving back home, and are expected to improve outcomes while reducing costs. There will be a continued use of services that are proven to be effective, such as family enhancement services to support families in averting crisis so that children do not need to be taken into care. Children in need of intervention services will not be denied service.

I think your question was surrounding the caseload per worker. That was one question you'd identified. The ministry recognizes that a strong workforce is essential in meeting the needs of our children and families. We are monitoring the staff vacancies on an ongoing basis. I did address that at length in my speech as well, Mr. Chairman. We will make changes as needed to ensure staff have a reasonable workload balance, allowing them to provide the best service possible to children and families. No front-line staff will be laid off, as I indicated previously, as a result of the budget.

FASD. I've had several meetings with people that are very involved in the community with FASD. We're doing outstanding work. I've been made aware through, you know, pediatricians that we're leading the way in Canada with our FASD program. We have 12 FASD service networks across the province. They provide assessment, diagnosis, prevention, supports, and services. The most recent conference, on February 8 and 9, focused on supporting families and caregivers. I also learned in the discussions I had, Mr. Chairman, that, really, it's about a lifetime of support for children and for people, and we have to recognize that. The intervention at different times in their lives is with various supports that meet the needs of the individual. We do provide intensive relationship-based support for women at risk of giving birth to children with FASD. That's well known in Alberta.

On child care I had said to a group earlier today as well – and this was about the child care spaces for rural Alberta – that we have developed 1,300 child care spaces in 62 communities in rural Alberta over the past year. We do have \$15 million for the development of further child care spaces that people can apply for. There are, of course, seven categories, that I know the member is familiar with, for child care. The decrease of 7 and a half million dollars, which is 3.6 per cent, is being realized through a review of the tool box of incentives offered in the creating child care choices plan, and we anticipate we will achieve the target of 14,000 by the end of March, as I said earlier in my opening remarks.

#### 7:00

This year we intend to consult with stakeholders to identify incentives that have achieved their objectives, not just ours, and that can be adjusted with minimal impact to the child care community. Also, Mr. Chairman, the question on family violence and bullying. Family violence and bullying: we know it's devastating – I think that's why the member has raised that question today – and has devastating consequences for Albertans. It's important that you know and that we around this table know that nine ministries work together for the prevention of family violence and bullying, and over \$59 million was provided across government in '08-09. No one at risk of imminent harm, male or female, is turned away from a shelter. If it's an emergency, there's alternate accommodation or crisis services that are found. Emergency financial help is given if needed, and if it's not, people are then referred to other community services.

We do have family violence prevention. You asked about the resources we had. We do have that in different languages, in multiple languages. There are six victim outreach pilots that have been developed in rural and urban locations to assist aboriginal and immigrant families impacted by family violence to access supports and services.

One transitional home I was in last week was in Calgary, Discovery House. When I'm mentioning about immigrant families, Mr. Chairman, what they've noticed in this area is that actually that trend is increasing. There's approximately 60 per cent now of women that are in transitional homes from our newly immigrant population over the past five years, but there's also cultural sensitivity training. They shared with me what that was about as well.

The parent link centres I did address in my speech. I spoke to Awo Taan about the aboriginal parent link centres and about why the triple P program is an important program, the positive parenting program. Actually, if you go back to the Alberta response model from 2001, that was one of the earliest strategies that they felt they had for early childhood intervention. The very earliest was through parent link centres. I can tell you that what I've observed is that I think there's even more need for parent link centres than we've had out there today with our 46 that are out there.

Also, Mr. Chairman, the question surrounding family, around the intervention piece that the member was interested in. That is an area that I, too, am focusing a lot of my time on and on the budget for the child intervention system. People often wonder: how many children do you have in care? There are over 8,000 children and youth in our care. Many do face significant challenges, and those challenges are, you know, either from being neglected or abused. Raising children and youth with complex needs can be very difficult, but we have seen very good success.

The staff has assured me that from the early starting of the Alberta response model of 2001 and what's been in place to ensure that protection and the family enhancement stream are being addressed, those areas like outcome-based service review, case practice models, there are a number of areas where the staff have said that they've noticed that as they put those into practice, the costs will be less overall because they're creating more permanency for our children and our youth that are in care.

Since the beginning of the foster parent and aboriginal caregiver recruitment campaign they successfully recruited a number of new foster homes as well as kinship care. Kinship care is more workable for people that are with our delegated First Nations agency. We know that steps have been taken to create improvement in the child intervention system overall, as I said to the member, and that is about the building blocks – and I call them that – that are being put in place.

Thank you.

**The Chair:** Thank you, Minister. Back to Mr. Chase for 10 minutes. **Mr. Chase:** Thank you. For the record, as a member of Public Accounts I believe that this three-hour budgetary process is a farce. We are discussing millions of taxpayer dollars per minute. In the name of transparency and accountability Albertans deserve to have their questions answered, their concerns addressed. The fact that the ministry has refused to place it on record, to provide written answers to questions not answered on the record is deplorable. This ministry's business is Alberta children's and families' well-being. No other department – and I'm talking about Education, Advanced Education, and Tourism, Parks and Recreation – has refused to provide follow-up written answers to questions not covered on the record, so I think we need to have a look at this process.

For the following line items listed on page 78 of the 2010-11 government estimates -3.0.3, family supports for children with disabilities; 4.0.1, family and community support services; 2.0.1, child care; and 3.0.1, child intervention services – could the minister provide the breakdown of the following? How much of each dollar spent in these programs goes directly to front-line staff doing the work compared to the amount spent on administration? How is the decision for how to distribute these funds made, based on what measures and priorities?

How does performance measure 5(a), the percentage of expenditures in the children-youth-families project and service category of family and community support services, reflect success in the eight strategies for achieving goal 5, that "communities are responsive to the needs of vulnerable children, youth and families," when it is only looking at money spent? I've already in question period indicated my concerns over outcome-based services that, I believe, have more to do with money than they do with service.

Foster and kinship care. On page 43, ministry business plan 2010-13, strategic priority 1 for your ministry discusses the need for recruitment and support of foster and kinship placements in the province. How much will be spent on recruitment of foster and kinship placements specifically in the next year? What line item is this included under in the estimates? What specific programs and strategies will you be implementing for recruitment of foster and kinship families in 2010-11? How do these differ from the strategies that were employed last year? How many foster and kinship homes were approved in 2009-10?

There has been an alarming trend where kinship homes have been loaded up. We saw the example of the five children given to the 21year-old aunt and then the one child dying while in her care because there were not sufficient support services for her.

Between March 2008 and March 2009 there was actually a decline of 24 fewer foster homes. What specific strategies and programs will be implemented in 2010-11 to address the issue of retention of foster families? How much will be spent on the support for foster and kinship families in 2010-11? What line item is this in the budget? What, specifically, will these funds be used for? Will there be an increase in financial support for these families? Will there be an increase in support programs available to foster and kinship placements? Will there be additional resources available to frontline staff to alleviate their caseloads so that they are able to dedicate more time and support to foster and kinship families?

Earlier you mentioned that staff losses would come through attrition, but when you look at the attrition and the previous freezes placed on this ministry, caseloads are increasing, and children's best interests are not being served as a result. How many foster and kinship homes in this province have more than their approved number of children at this time?

Strategy 2.2, page 45, ministry business plan, states that you will continue to implement recommendations from the kinship care review. What line item is this included under in the estimates? How

much will be spent on implementing the recommendations in 2010-11? As part of this, will the ministry be strengthening the application review process for kinship placements to ensure that the kinship home really is the most nurturing location for the child? What kinds of supports will be provided for these kinship homes to make sure that the transfer is successful? How will this be measured? What specific guidelines and qualifications will be implemented to ensure proper approval processes are followed whenever a kinship placement is considered?

### 7:10

I hope this isn't the case, but I frequently feel that kinship is considered: well, it's in the family, they already have the supports, and therefore they don't need as much external support as a foster family might require. But when children are loaded up, it becomes a concern.

Qualifications and retention of staff, page 42 of the business plan. Recruitment and retention of staff is one of the ministry's significant opportunities and challenges. "The ministry will be challenged to recruit and retain highly skilled staff members, in particular Aboriginal staff members, to support Aboriginal children in care." We know that there's an extreme number of aboriginal children, considerably larger than their proportion of the Alberta population, in care. How will you address this challenge? What are the specific initiatives that you will be implementing in the next year to recruit and retain skilled staff?

Page 44 of the 2009-2012 business plan. Recruitment and retention of staff is included in the significant opportunities and challenges section of both the 2009-12 and 2010-13 business plans. However, it was not included as a strategic priority in this year's business plan. Strategic priority 5 from the 2009-2012 business plan was to "build social service delivery capacity through a skilled workforce." It is clear that recruitment and retention of staff and capacity of the system remain serious issues in the children's services system. Why, then, was this not included in the 2010-13 business plan? How many vacancies are there in the ACYS at this present time? Will you provide a breakdown of vacancies by position and region in writing?

Page 85, government of Alberta fiscal plan 2010-13: full-time equivalent employment down 56 people, from 2,917 in 2009-10 to 2,861. There was a decline in full-time equivalent staff since 2009-10. What is being done to correct this? What positions are not being filled as they are considered nonessential? What is the process by which it is determined if a position will be filled or not? How is a determination of "essential" or "nonessential" reached?

When caseloads continue to increase and ever-increasing numbers of staff are on stress leave as a result, how can the ministry justify not filling positions and not creating additional spaces for front-line staff? How can the ministry reasonably expect front-line staff to accomplish all of the expectations as laid down in policy, many of which have been added within the last few years, and with regular changes to expectations and processes? In a member's statement last year I referred to this as change fatigue.

Will there be layoffs as a result of the 3 per cent cut to the budget? I think the minister has probably answered that and indicated that rather than layoffs it will be through attrition, so I've answered my own question. If no layoffs are planned, what specific programs and initiatives are being cut to make this major financial cut possible?

What mechanisms are in place to ensure that every individual working in the children's services industry in Alberta meets the minimum qualification requirement? Will the minister provide what the average wage difference is between government and agencies' workers? Will the minister answer why there is a discrepancy between government staff and staff of contracted agencies? What is the minister doing to address this discrepancy problem?

Is the minister concerned about accreditation for staff employed both by the government and by contracted agencies and the fact that there is a trend toward a decreasing standard for the people who work with our most vulnerable children, in part because agencies cannot afford to pay highly qualified staff? What is the minister going to do to address this problem?

Outcome-based service delivery. Can the minister explain what exactly outcome-based service delivery means? What does it mean for contracted agencies? How will outcome-based service delivery affect the funding structure under which funding is provided to contracted agencies, that this ministry so heavily relies on? What exactly will this mean for the way social services are delivered in the province? The explanation we previously received is that you've got six months to solve the child's problem. If you can solve it before six months, you can save the money. If it takes longer, you're on the hook.

#### The Chair: Thank you.

Minister, you have 10 minutes to answer 45 questions.

**Mrs. Fritz:** Thank you, Mr. Chairman. It's amazing when people talk about the staff workload and then come and read 12 pages of questions every 10 minutes. But as I said, I will answer them to the best of my ability. I think I pretty well answered all of them last round. Also, many of them were answered in my opening remarks.

The family support for children with disabilities program was established to support families who have children with disabilities by providing a wide range of supports and services. It strengthens a family's ability to promote the child's growth and development while continuing care for the child and addressing some of the extraordinary demands that they may be faced with.

Children and youth with autism spectrum disorder – people ask about this, Mr. Chairman, as well – make up about 28 per cent of the caseload, and the caseload is 2,367 children. More than 40 per cent of the budget goes toward children with autism. The current caseload is 8,498, which is an increase of 1 per cent from '08-09, a total of 8,423.

The question on administration: it's 3.7 per cent overall that's spent on administration for the ministry.

The program budget will provide an estimated \$45 million – this is back to the FSCD – or 37 per cent, for child-focused services; \$26 million, or 22 per cent, for specialized services for children with severe disabilities; \$11 million, or 9 per cent, for family-focused services; \$20 million, or 17 per cent, for out-of-home living arrangements; and \$18 million, or 15 per cent, for programming and administration. Additional funding of \$4.93 million will provide for caseload growth cost-per-case increase, including demand for services such as respite care and aides support, and will assist families with some of the extraordinary costs of raising a child with a disability. The cost per case is expected to increase by 1 per cent in 2010-11.

The area that was asked about regarding outcomes-based service delivery. Contracted agencies, of course, play an important role working with us to provide supports and services to vulnerable children, youth, and families. Those jurisdictions using the outcomes-based service delivery model have had great results. The member had asked about the results.

The agency funding that the member had asked about. There is \$53.5 million new funding for agencies since 2005-06. No new funding is planned for '10-11. Agency staffing levels are far more stable, Mr. Chairman. He asked about the breakdown of the \$53.5

million. Previously, in '05-06, it was \$12.4 million; in '06-07, \$8.5 million; in '07-08, \$10.6 million; '08-09 it was \$11 million; and '09-10 it was \$11 million as well.

The area of the staffing and workload. We've said this before and mean this sincerely: we really do have great respect for the work done by our staff. They have a very difficult job to do. We know that. We do commend them, just as everyone around this table does, really, for the excellent work they do. The safety and well-being of vulnerable children, youth, and families, as I said, is the number one priority. Our staff are working very, very hard in that area, Mr. Chairman. With our child and family services authorities directly we have approximately 1,600 staff that are delivering service there.

Our ministry, as I said, is monitoring staff vacancies on an ongoing basis, and that's to ensure that critical front-line positions are filled. To date all requests our ministry has made to recruit new staff have been approved. We're even fast-tracking that. We're taking away some of the measures that had been in place that we found a bit onerous. Over the last two weeks we're making it even quicker to hire front-line staff. That includes the child protection caseworkers, child and youth care workers at residential group homes, and support workers at group homes for children with disabilities. We've also redeployed non front-line staff who had the necessary qualifications and experience, and we've redeployed them as well to assist.

#### 7:20

The ministry has not seen a noticeable increase in the number of vacant positions since the hiring restraint came into effect. The current vacancy rate is less than 5 per cent as of January. We do have several ways to review staff workload. Staff are encouraged to raise concerns with their supervisors. They have a workload appeal process in place for staff who have concerns they feel aren't being resolved and a workload assessment model that has been developed with front-line staff and the AUPE to assist managers in determining the number of staff required and how to spread out the workload.

They've identified – and I've heard this before as well – paperwork volume as a challenge in their daily work. We have responded to that in streamlining their work and eliminating unnecessary forms. There were thousands, really, I understand, of tablets that were purchased for staff so that when they are doing casework with the family and then they write their notes, they just need to write it, Mr. Chairman, and the tablet recognizes their handwriting, and it's immediately put into Word for them. The staff are working very closely with the ministry as to how to make things much easier and what other types of tools they may need that may help make things easier.

The question on kinship care. Kinship care will remain an important part of our child intervention system. Evidence-based research in our own experience shows that kinship care results in positive outcomes for children and youth. Kinship has been a formal placement option in our child intervention system for five years, and this is really beneficial, especially in the aboriginal families and community. Their communities typically prefer this placement option, Mr. Chairman, which is important considering that 62 per cent of our children and youth in care are aboriginal.

Kinship care is supported by our Child and Youth Advocate. There was a kinship care review, as the member indicated. It found that overall our kinship care policies and practices are aligned with leading practice research into kinship care, and are comparable with policies and practices in other jurisdictions. The ministry did accept all five recommendations – there was a question about the recommendations – made by the review committee, and we believe that they've made the kinship care even stronger. With those recommendations the implementation that you had wondered about will be taking place, hopefully, by June of 2010. The five recommendations included doing criminal risk assessments more quickly, more frequent contact between caseworkers and kinship caregivers, clarifying the process for kinship care agreements between the ministry and caregivers, requiring that formal kinship care support plans be done in all cases, and enhancing orientation training by developing and implementing training that specifically addresses the unique nature of kinship care.

The area about foster care. That was a very strong review, that I have referred to in the Assembly, completed two years ago. The number of foster parents over the past six years had been decreasing, but over this last two years, Mr. Chairman, we've been able to fill in what the decrease was and add new foster parents as well. So that review is working. It's also been strong in the whole area, that I especially think about, of the screening process, which has been made very tight.

The screening of foster parents includes a number of things. I talk about the screening process, but it includes a home study, criminal record and child intervention checks, personal references, medical references, orientation for caregivers, a training session, environmental safety check, and compliance of health and safety legislation. It's very easy for us to sit here and listen to that when we read it, but it's really, really rigorous. If it's foster parents in a home or people that would like to be foster parents, if they have other people in their home that could be caregivers, they go through this exact same process. It's a six-month process for people.

We're currently in the fourth phase of the foster parent and aboriginal caregiver recruitment campaign. Phase 4 includes what the member would have heard of more recently, and that's A Child's Hope. That was in October 2009. This initiative provides information resources to assist with caregiver recruitment and encourages current caregivers to talk to the individuals and community groups about adoption, fostering, kinship care, and mentoring opportunities. Actually, mentoring is an area that's really growing within communities for children that require care and also as a preventative measure, Mr. Chairman. As part of phase 4 we also have initiated a needs assessment study to determine foster care placement needs.

**The Chair:** Thank you, Madam Minister. I apologize, but we have to move to the last 10 minutes for Mr. Chase.

**Mr. Chase:** Thank you. I'm concerned about the number of program beds that have been shut down in the last while. For example, the ranch was shut down. A hundred and thirty boys' and girls' Edmonton program beds were shut down, and because there's no whistle-blower legislation, contractors who raise concerns risk having their programs shut down. I've had people come and talk to me in my office about retribution.

Can you state definitely that hotel rooms are no longer being contracted to house kids in care? How much was spent on implementation of outcomes-based service delivery in 2009-10? We have heard that 61 children have been converted to outcomes-based service delivery in the pilot project this year. What exactly has this meant for the children and families involved? How will the minister be determining if the pilot project is a success? Will it be based purely on dollars spent? Note the development of an outcomesbased service delivery "in collaboration with the contracted agency sector and other key stakeholders to achieve and maintain positive results for vulnerable and at-risk children and youth." This is strategy 3.5 on page 47 of the ministry business plan, but again there's no performance measure associated with it. If you don't know where you're headed, how will you know if you got there? Will it require further training of staff, and if so, what? The Child and Youth Advocate. Does the minister not recognize that having an internal advocate who reports directly to the minister significantly compromises his ability to advocate for our most vulnerable population? Since, to the credit of the hon. member, Rachel Notley exposed the abuse that was happening such as facedown restraints, the child advocate's reports have been sanitized. Cases dealing with disabled children have not even appeared although there have been problems associated.

Will the minister recommend that the Child and Youth Advocate report directly to the Legislature so that the advocate will be free of political interference in doing his job and ensure the rights of Alberta's children are respected? Why will the minister not do as all other provinces in Canada have and make the advocate a truly separate body from the ministry as this approach encourages a more open and credible advocacy process?

Child and family services authorities, page 80, estimates. Why are there such significant cuts to both region 3 and region 6? How will these cuts in funding not have a significant negative impact on the regions' ability to deliver services when these regions are already stretched beyond both their financial and staff capacity? What are the total staffing numbers for the child and family services authorities? Can the minister provide the total staffing numbers for contracted-out agencies? What are the target staffing numbers for both the authorities in contracted agencies? What accountability does the minister have from the board of governors for the community boards? Does the minister determine or approve the amounts that the boards receive for governance? Will the minister provide the exact details of how many members are on each board and how much each member receives for all the 10 child and family services authorities?

Seven, aboriginal children. Aboriginal children in care is one of the ministry's significant opportunities and challenges. Aboriginal children are overrepresented in the children's services system, making up 63 per cent of all children in care while representing only 9 per cent of the total child population in the province; page 41 in the ministry business plan. However, aboriginal children are the fastest growing population in the province, growing at more than triple the provincial rate.

#### 7:30

Because the ministry focuses on the protection of culture and family, kinship care has been encouraged. Given that aboriginal children are so heavily overrepresented in the children's services system, what programs and supports are being initiated in 2010-11? How much of this budget is allocated for aboriginal-specific initiatives? Please provide a breakdown for how this money will be allocated across the province. How much will be for on-reserve versus urban supports?

Page 41, ministry business plan: "The ministry will build on its caregiver recruitment campaign to recruit more Aboriginal foster parents and, through a recent agreement with the Métis Nation of Alberta Association, develop a recruitment strategy for Métis foster and kinship homes." What does the recent agreement with the Métis Nation of Alberta Association on foster and kinship care consist of? Is this primarily a funding agreement? How much funding is the ministry providing for this? What line item is it included in?

Goal 4 of the ministry business plan: "The well-being and selfreliance of Aboriginal children, youth, families and communities will be promoted and supported." How does performance measure 4(a), the percentage of aboriginal children in foster care and kinship care who are placed with Aboriginal families, reflect the success of strategies 4.1, 4.2, and 4.3, which seem to focus more on prevention enhancement directed initiatives? How much funding does the ministry intend to provide to achieve this goal? What line item is this?

Jordan's Principle. What specific steps has the ministry taken to ensure that Jordan's Principle is applied to the children's services system here in Alberta? Aboriginal kids get caught between the feds and the province when it comes to providing service.

ISIS. How much has the ministry spent on the implementation of the intervention services information system to this point? Where is this included in the budget? When will implementation of ISIS be completed? How much will have been spent on ISIS by the time it's fully implemented?

Minister, I do appreciate your efforts, and I do appreciate the efforts of your staff to provide answers. I have received good reports from members within your ministry, front-line child care workers, about your hands-on approach, and I wish you well not only for your sake and your staff's sake but the sake of children and families of this province.

The Chair: Thank you. We'll now revert to the minister.

**Mrs. Fritz:** Well, on behalf of my staff and me, thank you for that recognition. I appreciate that very much.

In answer to your outcome-based service delivery questions about the pilot projects, they were established in Edmonton and Calgary. All regions will have pilot projects running by April 2010. The agencies involved in pilot projects expressed a high level of satisfaction already with their involvement in developing the new system. Under this system agencies are compensated for how services have made a positive difference for children and their families.

Where we're leading to with the pilot project. One of the outcomes that you were interested in is the lead agency model. The lead agency model, I can tell you, is already working. I met with one lead agency model last week in Calgary, and it was amazing the good work that they're doing in the Forest Lawn community with the families and the people that were involved, the caseworkers.

What's happening now is that the caseworker and the agency actually go to the home together, and a very in-depth assessment is done. Where the caseworker would have originally, perhaps, taken the child in that home into care immediately, with the agency working with the services and knowing the supports that are provided, they work immediately with the family with what's needed immediately, whatever that is, and then they also do care plans. This agency was meeting with 10 other agencies, people offering care to this family, and they know that they can cut that in half based on the duplication of what they've found in the care plan. I can't give you the outcome that you're asking for in relation to funding because you're looking for what the dollars are, and I don't have that information until the pilot projects are complete for the outcome-based service delivery model.

You did ask about children in care being in hotels and whether they're still using hotels to provide beds for children in care, and the answer to that is no, a definite no. That message has certainly been heard by people in the ministry.

Also, the whole area of advocacy. I know that the advocacy review, the advocacy area – I was very interested in what happened

with that advocacy review report. We did accept all 10 recommendations that were made by the committee to strengthen the advocacy system. Five of the recommendations are on track to be completed by the end of March 2010. The other five will be addressed by 2010-11. The recommendation of the review committee was that the advocate continue to report to the minister.

Well, I wondered, too: who was, then, on the review committee? It's a strong review committee. One of the individuals, Bruce Rivers, was the CEO for Community Living Toronto. He's a past president of the Child Welfare League of Canada, the International Forum for Child Welfare. He served approximately two years as chief executive officer for Community Living Toronto. He previously served nearly two decades as the executive director of the Children's Aid Society. He's a sessional instructor in the Faculty of Social Work at the University of Toronto. My point is that all on the review committee are very good, strong people with this type of background, and you would trust their judgment – I would, anyway – with what they indicated, that the advocate should continue to report to the minister.

Even though that recommendation was made, there was a memorandum of understanding that was made between the advocate and the Minister of Children and Youth Services which recognized the advocate's autonomy in carrying out their legislated responsibilities. That MOU ensured that the advocate had unfettered access to information and is unfettered in his ability to say what he needs to say to the minister and to ministry officials about the welfare and interests of young people who receive services under the enhancement act or Protection of Sexually Exploited Children Act, and that was signed in December of 2009. You know where you may be paying more attention to this, hon. member, in the near future is when the external review report comes out overall for the ministry. That may address some of your questions about the whole area of the child advocate.

Now, I also know of your strong interest, and I mean this sincerely because of knowing the good work you do out in the community, too – and I've said that before in the Assembly – especially in relation to aboriginal children in care and the aboriginal community. I share that with you for the aboriginal community. I can tell you that with the number of children that we have in care – your question was: how much of the funding is on reserve and off reserve for aboriginal children? On-reserve funding is through INAC, through the federal government, so I don't have an answer for you with that.

All I can tell you about our off-reserve funding is that our aboriginal children are cared for through our child and family services authorities. The child and family services authorities board has co-chairs; one is aboriginal and one is nonaboriginal. We have a budget of \$772.088 million for our child and family services authorities. When you know that 62 per cent of our kids in care are aboriginal, you can take some of that data and extrapolate from it. I don't have the breakdown for you that you were seeking.

You were also interested in how many kids in our homes and in kinship care are over the limit of what normally we have in a home. We do have level 1 and level 2 workers. For foster care, for example, the level 1 worker and the level 2 worker both have 24 hours of training. The level 1 worker has nine extra hours per year. The level 2 worker has 12 extra hours. Level 1 can have two children; level 2, four. But at times there is a request to have siblings remain together – it just depends – or there's a request for special-needs kids that they know can be in a home that has a very strong history of providing excellent care for the child that they're looking at putting into the home. I asked the department this question a couple of weeks ago. We currently have about a hundred homes out of our 2,500 foster homes that have a couple of children

over the capacity of those homes, but they, too, receive a lot of support from the ministry in order to assist the foster family with that care.

I want to go back, though, to your question about our aboriginal community children in care on reserve. I'm with you. I think that when we have a delegated First Nation authority and a child and family services authority both really looking after the same child, who we know may be in care with the CFSA one month and then maybe with the DFNA the next and then back with the CFSA, I'm with you. I think that there has to be a closer working relationship with the two, even though – and I know your point was the funding model – that funding model is completely different.

#### 7:40

Although we have culturally sensitive programs, what I'm hearing back from the community is that many times it's not beneficial to the child. We may think that we're being culturally sensitive through a CFSA to have a child go, you know, for a smudging or the prayers or whatever that is, but we know that the child may not benefit from that. We need closer working relationships with the aboriginal community to learn what is beneficial to the child.

The good news is that we have a lot of connection within the ministry with the aboriginal community. That connection is through an aboriginal liaison unit. For example, we have the parent link centres, as I said, the five parent link centres that address the aboriginal needs in the community. We have that. Also, in our own ministry we have a whole unit that's devoted to aboriginal care. I think that if we could take what we're learning from the outcomes of our children in care, if we could take that and then layer that with the high needs in the community, we would be more beneficial with our care.

In Health, for example, they have the healthy beginnings program. Healthy beginnings is for kids. Especially aboriginal kids would benefit from that program. Even earlier than that, the prenatal programs – and that's back to your question about FASD. If we had prenatal programs where the real teachings are about absolutely zero alcohol when you're pregnant – and this doesn't just relate to the aboriginal community – then you protect that baby. You protect their brain; they don't have a brain injury when they're born. Then you have nourishment, you know, as healthy beginnings teaches, in that first three years.

Our job here is to work more closely with other ministries. That would be Health, it would be Education, the programs I've heard you mention before in Education, especially in the Assembly, and it would be with Justice, through their safe communities program. All nine ministries that I discussed earlier have to work together, and we have to do a better job in how we connect. If we do that, we'll ensure the safety for our children in the community overall.

Thank you for your questions.

**The Chair:** Thank you, Minister. I think now would be the appropriate time to take a prompt five-minute break. We will call the meeting back to order in exactly five minutes.

[The committee adjourned from 7:43 p.m. to 7:48 p.m.]

**The Chair:** Thank you. We're calling the meeting back to order. Minister, if you're ready, we'll ask Mrs. Forsyth to please start her 10 minutes. Are you doing yours combined, back and forth?

Mrs. Forsyth: Yes.

The Chair: Thank you.

**Mrs. Forsyth:** I think Mr. Chase has asked quite a few questions to the minister. I want to start off, first of all, Minister, by thanking your staff, the unbelievably caring, compassionate, dedicated, hardworking staff that you're blessed to be able to work with. I had the opportunity a few years ago to have the same with them, and they continue to service the children in this province in very difficult conditions and very difficult times.

I'm going to start off with your ministry support services. I've been to several of these, and you're one of the only ministries that hasn't cut their support services, and I'm asking why. That would be 1.0.1, 1.0.2, and 1.0.3, which are your ministry supports. I wonder if you have an explanation for that.

**Mrs. Fritz:** For why the support services have not been decreased? They haven't been decreased because as the staff went through the line items – you're familiar with what they are – they saw that they were being utilized fully and that they were making a difference, especially as they were moving forward with all of what's in play, and there's a lot of change that's happened in the department. For what's in play, when I talk about that, I mean all these service models and the case review, the outcome-based service review, all of that that's in play.

Also, I know that you're looking at what the corporate administration consists of. That hasn't changed much when I say that they went through it and didn't see a need to decrease in that way. The variance is only \$974,000. The estimate for 2010-11 was \$17,996,000, and for '09-10 it was \$18,970,000. That's the variance.

Corporate administration. It's the ADM's office, ministry support services. It's legal services, that we commented on earlier, the financial strategies. It's HR, business strategies, the governance services, the intergovernmental initiatives, the information strategies – specifically, our corporate information strategies and resources – and the risk management and strategic initiatives.

The decrease is a result of the cost containment strategy, and that's through a focus on redeployment. It's on reduction in miscellaneous administration. You've heard this, I'm sure, from all ministries, but that's like hosting and travel and whatnot and suspending the achievement bonus program, freezing the salaries of non-union employees, and suspending the learning and wellness account.

Does that help?

**Mrs. Forsyth:** No. You know, I guess where I'm going here, Minister, is the fact that if we just look at your own office, for example, there have been no decreases, yet we're looking at some pretty heavy-duty things in your department. For example, child intervention services have taken a significant decrease, your regions 3 and 6. I know it's just pennies, but, you know, I think leadership starts at the top. When you're going to look at your child intervention services, that I'm going to ask you about later on, and some of the decreases that, again, went on to region 3 and region 6, to me it seems logical that you would look at your own office first.

Anyhow, I want to talk to you about child care and the Premier's mandate letter, that you've received from the Premier, on spaces. How are you doing on that?

**Mrs. Fritz:** I think that it's going very well. The mandate was for 14,000 spaces in child care. Then for child care, too, I know that you'll be interested in this about the spaces, and I was too; that is, that when spaces are created, the spaces created actually be net spaces. Each year you're going to have in the seven categories of child care a number of spaces that leave the system, or if you had a

licence for your child care day home and you sold it to me and I got a licence and you went and had another job or moved out of province or whatever, then I wouldn't count your spaces as new spaces. That's really important to understand when we talk about the 14,000.

If in a given year you have 5,000 spaces that go out the back door, these 14,000 take that into consideration. Overall, as of today, since the inception of the plan, we've created a total of 11,742 spaces, and they are net new as of December 31, 2009. So it's been a tremendous success, that creating child care choices plan, and the spaces.

**Mrs. Forsyth:** Okay. I want to ask you a question, and I'm getting a lot of correspondence on this. It's somewhat disheartening to me, so I'd like to hear your response on record so that I can explain to the people that are calling me. I'm sure you're familiar with the LEEP program. That's the life experience education program, that's coming under your child care. I really would like to talk to you about preschool and some of, I guess, what I would say are horrendous things that you're putting on the preschool people. You know, I think that's something that you as a new minister have to look at.

As the preschool people say to me, no one goes into any consideration about the life experience, only education. They've got 25,000 hours of experience, and now you're wanting them to take courses through Bow Valley for a cost to the preschool owners of over \$4,000, \$900 for a test. How do you balance that out? You may not be familiar with the problem, and I have no problem sending you some information. I know that they've been in constant contact with one of your staff.

#### 7:55

**Mrs. Fritz:** Well, what I can tell you about that is that our staff have met, you know, with the organization. I understood that you had as well, that they had contacted you. I don't know if you met with them directly but that they'd contacted you as well. The concern was about meeting, as you said, the child care licensing regulation, that that had to be met by September 2010. Right? That was the concern. This was the Preschool Teachers Association meeting that took place. I think the staff have met more than once from what I recall at the briefings I had. It was to ensure that 1 in every 4 staff members is certified at a minimum as a child development worker, and that was supported by the child care sector. That was in consultations almost three years ago, in 2007, and increasing the number of staff at higher certification levels would ensure that children would receive care from staff who have child development as an equivalent for education.

We've reviewed the concerns brought forward by the Calgary Preschool Teachers Association. We are working with them to find solutions that align with the intent of the legislation and meet the needs of the preschool sector, and options to meet the 2012 staff qualification requirements were provided to the operators. Those included having educational transcripts reassessed if a staff member believes they may have the education or course-hour equivalencies necessary to receive certification as a child development worker or a child development supervisor. Some staff with relevant education may not yet have asked for a reassessment of their certification level, so when you give them these comments, they may do that.

In recognition of an assessment completed by the international qualifications assessment service for individuals with foreign credentials, there is taking online credit ELCC, the postsecondary courses, for which the child care certification guide was provided, and participating in the Alberta life experience equivalency, the LEEP process. As you said, that was offered through Bow Valley college. The LEEP process addresses the members' concerns that competencies gained from work experience should be considered when certifying staff. Participation in the Bow Valley college ELCC certificate program is offered through weekend workshops. They're asking for an exemption to the staff qualification requirement that the program is working toward, but they may not be able to meet by September 2012 staff qualification requirements.

Now, there really was extensive dialogue. I did introduce the assistant deputy minister here, and I can tell you that they were pleased with the outcome of that. For the number of child care people that you may have thought would be at a meeting on that, it wasn't hundreds of people. Actually, it was very few.

Mrs. Forsyth: I'll speak further with Karen if I may.

I'd like to touch base with you on 3.0.3, which is family support for children with disabilities, which has been a huge success, obviously, and probably one of the most innovative things that are leading this country. One of the things I'm hearing is that you're looking at incorporating a means test.

**Mrs. Fritz:** Can you tell me more about that? What are they thinking by a means test?

**Mrs. Forsyth:** Based on how much the parents make. It looks like they say no.

**Mrs. Fritz:** I know. I hear that, but I want to hear it from you so that even later I won't be getting back and saying: oh, that wasn't right. So what are you thinking?

**Mrs. Forsyth:** Now, Minister, I know you're a very bright individual, so don't play dumb. Okay? A means test is how much a parent makes, and then you're looking at not covering them fully under the family support for children with disabilities, saying: "Gee whiz, you make \$200,000. You could pay for some of this."

**Mrs. Fritz:** Right. The answer, I know, to that is no, and the reason why I say that is because of some of the social-based service reviews that we're doing. I've heard that about means testing with other areas of the community overall, where people are becoming overly concerned that things will be means tested. In this area it's not going to happen. I appreciate you letting me know that's out in the community, though.

**Mrs. Forsyth:** It would be nice if you could send a letter to the people that are receiving the services saying that there is none. I'm sure it would put them at ease, especially when they're dealing with children with disabilities.

I'd like to ask you about your family violence information line. Since its inception how many families or individuals have utilized the family violence information line? Can you give us some numbers on that, please?

**Mrs. Fritz:** Now, I know the number I'd like to say, but I'm going to get that exact number from the staff. It's 6,100.

**Mrs. Forsyth:** Do you think that's successful? I'm not sure what it would have been previously and what it is now, but it's obviously something – you know, those types of numbers are quite high.

**Mrs. Fritz:** My understanding from the meeting I've held with the council for women that are in that area of shelters and with family violence and also with the other transitional agencies that I've visited is that the family violence information line is working. They

haven't asked for any additional change in that line. I know that it was launched in 2006, but even having said that, it's really creating the awareness out in the community that the line is even there. That's more my concern right now. Should the number be higher? It could be. I would think it could be.

**Mrs. Forsyth:** I want to touch on something that's touchy, and I know it's going to be touched on probably by the hon. member from Edmonton, and it's the foster care. I can only say that the foster parents in this province do an unbelievable, wonderful job. Unfortunately, with some very tragic incidents that have happened in the past, of course, everybody gets painted. It's like the bad apple in the barrel, and then all of a sudden everybody is painted like they're all bad apples. You touched briefly to the member in regard to the interview process, and you've spoken in the Legislature about the interview process and the stringent criteria to become a foster parent. Have you looked at changing that, tightening it up, anything like that?

**Mrs. Fritz:** I can tell you that I had those thoughts in the beginning of coming to the ministry, but now that I've read the foster care review and now that I know where the process is at – and I go back to that review report. I'm beginning to think, because of the questions that are coming to me, that I should send the recommendations out that were approved and that it would assist people with understanding the absolute extent of this rigorous process.

I'm having many people in the community – many – who pick up the phone when there are issues that are happening in this area, saying: you've really got to let people know that we went through this, this, this, this, and this to get to be a foster parent. What we really need is to have good people with the right intentions becoming foster parents, but to help us ensure that, I go back to the screening process. It's actually been made very tight.

**Mrs. Forsyth:** You know, I was called by reporters, and it's difficult to be negative when you've been in the system and you know the system and you know how hard these foster parents work to deal with these kids and the wonderful foster parents that I have just in my own constituency. I guess what needs to be put out there is the stringent process that these foster parents have to go through. They're not willy-nilly handed out from the department, saying, "Oh, yeah, you're going to be a foster parent, and you're going to be a foster parent," without any stringent process. I guess, to send an ease of comfort to Albertans, it would be important for you to let people know the stringent process that these foster parents go through. You know, unfortunately, there have been some awful things that have been happening, but that's not the norm.

**Mrs. Fritz:** I think for me what I'm considering is that knowing that this review was done two years ago and knowing that it can take at least six months, even when recommendations are approved, to start catching up with the process that was recommended and seeing the strength that it had, I still become concerned about the foster parents that were in place before the review. That's something that I'm still giving a lot of thought to.

I can tell you that even through the process once a foster parent becomes a foster parent, after that six-month window, there's a very stringent process of assessment in the home that continues. There are two people that are involved. There's a support worker for the foster parent, but there's the caseworker for the child. The interaction that they have is each of them once a month. For the caseworker that once a month is usually personal with the child or the youth. With the support worker it can be by phone with the foster What I think needs to happen, though - and I know you're interested in this, too - is that there has to be greater communication between the caseworker and the support worker because they're each doing their work, but at times they don't have the working relationship that we may think that they should have. So there's still a lot of improvement that needs to be made.

There's a six-month assessment, too, for new foster homes. People think that it's finished once – and we're the only people in Canada, I understand, that have that, the six-month assessment before the home is approved. The six-month assessment as well, any significant changes that could impact the foster family's ongoing willingness and ability: there are regulations. There are policies. There are caregiver standards and whatnot. If they're unwilling to do that, that home, then, isn't continued. That six-month assessment serves to identify any needed supports.

#### 8:05

**Mrs. Forsyth:** I know you're probably doing this, but I need to get some comfort with it. The tragic incidents that have happened in the past: were those new foster parents, or were they old foster parents? You've got this very stringent process for the new foster parents, not so much for the old foster parents because they've been established.

**Mrs. Fritz:** What I can tell you is that with the foster care system overall there are children in care when at times there are reasons why we need to become involved with internal reviews or case file reviews or a number of these different ways in which the system can be reviewed depending on the incident that happens. It can happen across the whole number of foster parents that we have, so I can't identify for you who is a new foster parent or who isn't, but I can say to you definitely that, yes, incidents do happen.

**Mrs. Forsyth:** Okay. I want to switch gears because I know my time is running out.

The Chair: You've got a minute.

**Mrs. Forsyth:** I want to talk briefly about the protection of sexually exploited children, something dear to my heart. When I was involved, we were apprehending the children off the street, but that's been changing dramatically. We've got cellphone sex. We've got a whole bunch of things going on. I need to know if the department is moving along with that and what you're doing differently from the PCHIP legislation, when we were apprehending the kids, to how we're dealing with them with taxis, how we're dealing with truck drivers, how we're dealing with the cellphone sex: all of that.

**Mrs. Fritz:** You know, that's one of the reasons why I was so pleased to see a member in the House bring forward the proclamation that the city of Edmonton recently did this past week in proclaiming the week around the area of sexual exploitation. They didn't identify children per se, but I can tell you that we know this: it's unacceptable. It's terrible. It's horrific. That's why the good work you did has made a real difference. We are a national leader because of that good work and we continue to be and we will continue to work hard.

One of the areas that you had been interested in was about the Internet. When you go on the Internet, it's really interesting.

The Chair: Thank you, Minister. I apologize for the interruption.

**Mrs. Fritz:** I'll tell you more about that, about what's available for kids.

**The Chair:** It's now the turn for Ms Notley for combined or 10 minutes.

Ms Notley: Oh, no. Combined.

The Chair: Thank you.

**Ms Notley:** Thank you. We'll try the combined thing. I've said this at the commencement each time that I've done estimates, and I think this – oh, celebratory day because it's the last day of estimates – would be about the eighth or ninth one that I've done. What I will do is: I have a lot of questions to ask, so I may interrupt you. I just want to put it out there that if I'm interrupting you, I'm not being rude or trying to get into a dispute. I'm just saying, "That's good; I want to move on to get a bit more information," or maybe I need to get clarification or specify that maybe you're answering a different version of what I was looking for, something like that. I'm just letting you know in advance.

**Mrs. Fritz:** Can I just ask a question? Mr. Chairman, how long do we have, then?

The Chair: Twenty minutes.

Mrs. Fritz: Okay. Thanks.

**Ms Notley:** There are basically three general areas that I want to try and get to tonight, two of which are related, and maybe I'll get to a fourth if I get more time. The first three are just sort of generally in the area of child intervention, subsequently in the area of foster care, which is obviously related to the first, and then the third is on issues related to child care.

Maybe I'll start at first with the issue of child intervention as has been identified, of course, by everybody who has spoken so far. There have been some notable cuts in this area. I want to just start by asking very, very quickly so I don't forget. You were just chatting with the last member and talking about the ongoing assessment that goes on with the foster families and the support worker and the caseworker – I'm not sure if those were the two terms you used – and the time they spent with the foster family. I just want to clarify: is that work coming out of the child intervention line item or the foster care support line item?

Mrs. Fritz: For the case work and the support work?

Ms Notley: Yes.

**Mrs. Fritz:** It's generally handled through the CFSA, and it comes out of the foster care line. Oh. I was saying earlier it's two. The foster care is out of the foster care support, as I said, but the caseworker, because it's with the child, is out of the child intervention line.

**Ms Notley:** Caseworkers with child intervention. Support workers with foster care.

Mrs. Fritz: Yes.

**Ms Notley:** Okay. That's helpful. Thank you. So we're going to be doing this sort of enhanced oversight out of a line item that's been

reduced, or part of that enhanced oversight is going to come from this line item that's been reduced. Okay.

First of all, there has been some talk about front-line workers and all that kind of stuff, and I'm just wondering if I can get from the minister, if you have that, the number of FTEs within your ministry that you would characterize as the front-line workers: the vacancies that are always filled, the FTEs that are never allowed to go unposted, all that kind of stuff, should those people leave. You say that there's a hiring freeze and all that kind of stuff, but you get exceptions to the hiring freeze whenever it involves a front-line worker. So I'm just wondering what the number is that we're using there.

**Mrs. Fritz:** I mentioned the number 1,600 earlier, and that is the number that's categorized as front line.

**Ms Notley:** Okay. Are there titles that are fewer than five that you can list off, like job titles, or are there too many for you to tell me the position titles for those people?

**Mrs. Fritz:** I think it would be people that are in HR for human services, child and youth care workers, FSCD workers, assessors, adoption workers, and caseworkers.

Ms Notley: Okay. Thank you. I appreciate that.

Now, you may not be able to because I have heard in the past that certainly there's a lot of debate that still goes on with this, but I'm wondering if you can tell me what number of current employees – well, particularly, I'm interested in this group, the 1,600 group, so if you can give me that information, that's great – are currently on some form of extended leave, whether it be LTD, mat leave, education leave, or sick leave.

**Mrs. Fritz:** That's a very interesting question. I asked my staff, and I haven't had the answer yet, so I'll see if they have it here because I was thinking of the comparisons when I was in nursing and where that would be, especially with what's going on now. It's 30 people, but that doesn't include mat leave.

**Ms Notley:** Okay, so plus mat leave. Are all of these positions posted and filled, or are they unfilled right now?

**Mrs. Fritz:** They're in the process of being filled if they're not filled, and we have, I think, about 90 positions that we've filled now or that are in the process of being filled. Yeah, over 90. I've been asked to be notified as soon as a position is available and about how it will be filled, and now we're fast-tracking that even quicker.

**Ms Notley:** Okay. Are there any that remain unfilled at this point? No, because you say there are only 30, right?

Mrs. Fritz: Oh, you're talking about these 30.

**Ms Notley:** I'm just talking about those extended absences, yeah.

Mrs. Fritz: Then I can't say.

Ms Notley: What I hear is that those ones are not typically refilled.

**Mrs. Fritz:** I could look into that for you, about the 30, and I'll definitely get back to you with that.

Ms Notley: I appreciate that.

**Mrs. Fritz:** You're not considering those 30 as the front line, right? I consider the 1,600 as front line and the 30 of the 1,600.

**Ms Notley:** Exactly. Right. Thirty within that 1,600 who are on some type of extended leave.

8:15

Mrs. Fritz: My understanding is that they're being filled.

Ms Notley: Okay. That would be great.

Mrs. Fritz: But I'll look into it.

**Ms Notley:** You probably know from your health care experience that that's not actually the practice.

Mrs. Fritz: I know. That's why I'm asking the question, too.

**Ms Notley:** I want to jump a little bit to the issue of the special case review. Before you were the minister, about this time last year, there was a serious injury – not ultimately a fatality, thank goodness – that occurred in Calgary with respect to a child in care. At the time the minister promised that there would be a special case review and that it would be made public. Where is that at?

**Mrs. Fritz:** My understanding from the discussions I had with the ministry was that special case reviews that have been called previously, before I was there, either are under special investigation or there was one other reason as well. The one you've mentioned apparently is still under police investigation.

**Ms Notley:** I see. It's been a year. Typically the police don't wait that long to lay charges. They haven't laid charges yet in it as far as I'm aware.

Mrs. Fritz: No.

**Ms Notley:** Is there some expectation about when that investigation will be complete?

**Mrs. Fritz:** No. I can't say when it would be complete. I would tell you if I knew, but I don't know that.

Ms Notley: Okay. Well, I guess we'll follow up.

We talked in the Legislature at different times about how it is the cuts in children's intervention would be accommodated. There have been different answers given. One, of course, related to the issue, which you've talked about again tonight, of this whole idea of prevention and getting in and supporting the family beforehand. My understanding of things is that most of the resources geared towards that particular task are ultimately found in item 2 of your budget, yet that budget is being cut.

I mean, clearly, we have a certain amount of emergent cases that you have to deal with as an emergent case. You have no choice when they come to your attention. If you're going to reduce those emergent cases, you have to still budget for dealing with those emergent ones and then start the work going forward in the hope that down the road you're going to be able to reduce them. But if you're reducing the money that is dedicated towards that prevention effort, how can we genuinely expect that you're going to have more success than you have had up till now? That child and family enhancement model has been in place since the act was introduced several years ago, and we haven't been successful at shifting the trends. How can we do it now with an actual reduction in funding in those activities? **Mrs. Fritz:** I can tell you that I think that the outcomes need to be measured in a way that is more telling about success and the way that the trend is going. You're absolutely right. When I refer back to that response model, it was put in place in 2001, and in that response model they had I think it was five pillars, like the differential response and the community connections and the placement overall. In each of those since that time there was the practice review – that's the casework practice model – and then they had the outcome-based service delivery. But for all of those, we don't have the measures that we fully need right now in place to determine their success.

I'm hearing from people that they're successful, but I can't say to you tonight that I could give you this to tell you that this proves the success. What I do know, though, is that when the ARM was put in place – it was whether children should go into protection or into the child enhancement stream – the very initial one with the differential response was that you needed to have a much better assessment of that family and that child. They're working towards that in a much stronger way.

It's been nine years, but it's just beginning with a lead agency model, where the lead agency goes in with the caseworker now. That length of time ensures better enhancement in having them into the right stream. Child intervention, when you refer to this, of course, is about the prevention. It's the protection and the permanency. It's those three. I don't have even enough to know about – except that through the positive parenting we have more data – what is the earliest prevention that is working and then the area that you're looking at, with protection.

**Ms Notley:** I guess that leads, then, to my next question. If that's one of the mechanisms to which you pointed to explain how it is that services to children in need are not going to be compromised by the reduction in the budget, how could you possibly point to that? You've essentially said that you don't have the measures in place and that you don't know how. We'll go into more discussion if I have time on this, but, I mean, the outcome-based stuff we know. Your pilot project hasn't even reported fully yet. You don't have your model yet. You're nowhere close to being able to rely on that as a mechanism for reducing costs. If you should choose to do that, which I would suggest you ought not to – but that's a different discussion – again I go back to: it doesn't seem to make sense that you can really realistically rely on that as an answer to the cuts in children's intervention services not being felt by the kids.

**Mrs. Fritz:** What I can say is this: in my eight weeks here, with what the staff has explained to me about why this child intervention reduction in the budget is one that can still achieve the outcomes that they're looking for through what they've put in place as practices, I can tell you I trust that information. But can I categorically say to you that I have, you know, data that shows me immediately, right now, that that's real? No.

I can also say to you, though, that better decision-making is happening right now because of these practices that are being put into place. When it's recent – for the casework practice model I think it was about two years ago that they began that model. Then the outcome-based delivery system is just more recent. The lead agency model is in place now. All of that's happening right now, and when I say that I'll monitor it, I will be doing that. If there's not sufficient funding there, we have other mechanisms to access funding through the processes we have overall with Treasury and whatnot.

Ms Notley: We'll have to leave this discussion because I have so

little time. I think, notwithstanding your trust in your staff, that we don't really have anywhere near enough information upon which to make these sorts of huge monetary, \$22 million cuts and cross our fingers and hope it works.

**Mrs. Fritz:** No, no. I just want to answer that a bit, too, though, because of what the staff have given me. They want you to know this as well. What they've told me a bit about: the caseloads are down by about 4 per cent. Permanency placements are up. There is increased kinship care. The files are all being dealt with, you know, in a very timely process. The assessment phase, that I had talked with you, about is being handled in a very personal way with both. Having said that, I say this again: I do trust the knowledge of my staff.

**Ms Notley:** But, I mean, even if that's true and you're seeing all that happening, notwithstanding the review, that is only two months old, on the kinship review, which in fact actually indicates that there is a lot of more work that needs to be done, a lot more time put into those by those very caseworkers who reside in the area of the budget that's going to be cut, notwithstanding that, even if it is getting better, it's just slowly getting better. It's not the time to cut \$25 million. But I don't want to debate because this is mostly about getting questions answered.

I want to flip to foster care. We talked about this. We talked about the numbers of foster families. You had indicated that you would be able to provide us with sort of the net number. We have the net number as of March '09 thanks to I believe it's the children's advocate annual report, or maybe it was yours; I'm not sure which. But we don't have the net numbers since. We know there have been new foster families that have come online primarily in the kinship care sector, but of course we lose them as they come on. We had that net of 40 in March 2009, which were entirely due to the kinship care program. Where is our net at now?

**Mrs. Fritz:** I can tell you that I thought your question was very good earlier about net number of spaces. There have been 900 spaces between kinship care and foster care that have been developed. As I was saying earlier, over the last six years, when foster care parents left the system, they weren't being replaced, so it was going down and down and down. Over the last year and a half to two years those spaces have been filled. That's what a part of the 900 is. Then the net spaces added onto that are approximately 122. That's in foster care.

The net kinship care. Although kinship care has doubled, I think, over the last year and a half or two years as well, the number in kinship care I think is about 385.

#### 8:25

Ms Notley: Okay. These are net?

Mrs. Fritz: Those are the net.

Ms Notley: At what point? As of January and February?

**Mrs. Fritz:** That's as of January. That's recent. But the good news is – and that goes back to your question, to why it was such a good question – that we are actually now seeing a net increase when for six years it wasn't being filled in. Now there's a net increase, which shows you that the foster parent recruitment campaign is working.

**Ms Notley:** Okay. It's not 900, but it's certainly more, and that's good.

Mrs. Fritz: And it's the way you spin the numbers, right?

Ms Notley: Right. Yes, I know. That's my concern.

Mrs. Fritz: That's why the net is really important.

Ms Notley: Yeah. That's great. I appreciate that.

Just quickly again. As of April 1, 2009, we have again as a result of your annual report the number of fatalities and serious injuries that occurred in that year up until that point. I'm wondering if you can provide to me as of March 1, 2010, the number of fatalities and serious injuries that have occurred to children in care.

**Mrs. Fritz:** I can. There are three fatalities and two serious injuries for a total of five.

**Ms Notley:** Okay. I'm assuming you do because certainly when I worked in this world in a different province, we did this as well: do you keep track of fatalities and serious injuries to children who are not in the care of the ministry but known to the ministry?

Mrs. Fritz: Yes.

**Ms Notley:** Are those numbers in that? Is that those numbers, too? This is in that whole group?

**Mrs. Fritz:** It's for children that receive protective services, and yes, it is.

**Ms Notley:** They receive protective services. What does that mean, to have received protective services?

**Mrs. Fritz:** It's the child intervention, the child enhancement, whatever is provided under the legislation.

**Ms Notley:** So it may be a social worker working with the family in some fashion while the child remains in the home?

Mrs. Fritz: It could be.

**Ms Notley:** Okay. The Member for Calgary-Varsity asked about the question of hotels, but I want to just put it to you in a slightly different way. First of all, I have heard that in some cases where the no-hotel policy has been very emphatically enforced, what has happened is that there have been cases where children have been kept in offices overnight because they couldn't go into a hotel. That may be purely anecdotal, but I guess my question is: can you tell me certainly that that is purely anecdotal, or is it possible that that is happening?

**The Chair:** Thank you. We're going on to the next 10 minutes. I am sorry; I apologize. It's the next 10 minutes for the next member. Verlyn Olson.

Mr. Olson: Thank you.

The Chair: Are you combining?

Mr. Olson: Yes. I'd like to combine.

First of all, thank you, Madam Minister, for being here and sharing all this information. I just want to say that I am really impressed with your great command of all of this information after such a short time in this portfolio. I'm sure it's challenging to take on a job like this, and obviously you're handling it with great skill. With any questions that I would ask, there is probably a very good chance that they've already been raised in one form or another, so I'll try to maybe go over some fresh ground to the extent that I'm able.

I've got a few kind of general questions first, but then probably most of my questions will deal in one way or another with First Nations, Métis, aboriginal issues. Just in terms of general questions it's my understanding from Statistics Canada information that Alberta has one of the fastest growing birth rates in Canada. We've got a very young demographic, and I know that there are, you know, plans for adding child care spaces. To what extent has your department been able to kind of look into the future a little bit and see where we might end up five years from now, 10 years from now? I know that this seems to be a constant game of catch-up. At least, that's my sense. For years it seems like governments across the country are trying to catch up in terms of child care spaces. When we're talking about 14,000 child care spaces, are we talking about that being where we need to be today? What's the plan in terms of where we want to be sometime down the road on a little bit longer horizon?

Mrs. Fritz: I think that's a very good question. The creating child care choices plan, as I said earlier, has been a tremendous success, but even knowing that the spaces that are being created - and I indicated earlier that we have measured those as net spaces - there's still funding this year. There's \$15 million for further space creation, and we'll be well over that 14,000 spaces. I also know that when we've had after school care and before school care, the uptake on that by the community has been huge. Often when a program is out there, it takes time for the community to catch up and say, "Where are we at, how do we get into that, and what's the subsidy, et cetera?" Anyhow, the uptake is much higher. So I know that the planning is in place not only for what we have in this budget this year but in future budgets, that we still will need to continue with creating spaces. We're doing very, very well, and we'll need to maintain the spaces we have because we always have spaces that are leaving the system.

**Mr. Olson:** Okay. Thank you. As I mentioned, maybe a little bit of background. I've been on a committee for the last year and a half working on issues relating to aboriginal workforce initiatives and have had the opportunity to criss-cross the province talking to First Nations leaders and Métis leaders, and there are some common themes in the discussions that we've had. Certainly, you know, it's noted everywhere we go that, again, aboriginal people are the fastest growing demographic in the province, the youngest population, so we have a great natural resource, I might say, in terms of workforce. Again, that was the focus of this committee.

When one looks at the challenges that the aboriginal people face, one is education. In fact, probably one of the predominant themes is education and training, so I have a few questions that relate to that. One of the things I wanted to ask is: what specific programs are available for children in care in terms of preparing them for postsecondary learning? You know, obviously, there's a responsibility to provide education. If we all agree that you need to get more than grade 12 or that at least that should be the goal, beyond preparing somebody or getting them through grade 12, for children in care is there any kind of programming or support that's available?

**Mrs. Fritz:** I had the opportunity when I was in Calgary at one of the centres – it was called hub for youth at risk, and that's offered through the CFSA. I was able to sit in a group meeting with youth

to listen to what their needs were. They have a number of people on the team. There were about 10 agencies that I met there that day as well, but one of the people that was there was a really passionate young woman. She gave me a brochure and a lot of detail and has since e-mailed me about it, that she feels it's really important for us to pay attention to in our ministry, and that's the advancing futures bursary.

#### 8:35

There were 561 students that accessed the bursary, which was a 14 per cent increase in the number of youth accessing the bursary over '08-09. Of those students, 53 per cent are in a diploma or degree program, which is a 3 per cent increase from last year, and 25 per cent are in a certificate program, which is a 3 per cent increase from last year, and 37 per cent are in upgrading. Sample student programs included bachelor's degrees, applied justice studies, arts, sociology, nursing. It was degrees like bachelor's degrees, from what I recall what she was saying. It was diplomas and also certificates. The one I recall her mentioning was about professional cooking for this one young man.

Those programs are programs that speak to how we can assist students to continue further, but the important part of this is that they are the ones that must apply. In that application process they may be successful, and they may not. But this young woman was saying to me: they're there to help them with that as well. Overall, too, students that are aboriginal students can apply for other assistance through programs that we have here in our departments through either postsecondary education scholarships or through the health department, related to health, which is for RNs and for dentistry, for LPNs, for any health-related field. It's significant dollars. It's millions of dollars overall.

**Mr. Olson:** Thank you. Just on the issue of training and support I maybe want to share one thing that we heard a lot out there, and that was the importance of not just the training but also the mentorship and support, particularly when, I think, now 63 per cent of aboriginal people live in an urban setting. So if people, for example, have left reserves and have moved to the big city to take training, there are many challenges in terms of housing and transportation and child care and so on. One of the things that's really important is some sort of mentorship and support. We heard that a lot. Again, for the young people whom you work with, I just want to encourage you to keep that in mind. I think it's not just about the dollars; it's also about support.

You raise another question that I just wanted to touch on a little bit, and that's the issue of kind of cross-ministry collaboration. I'm pleased to see that that is mentioned in your business plan in a number of places. I think we would all agree that we want to see lots of cross-ministry support. I have a couple of questions around that, though. Just from a financial point of view it's easy to create new programs. It's easy to layer on more programs. But there's also a danger of creating redundancies when other departments are doing the same thing or close to the same thing, and we start to maybe lose some efficiency and maybe not get the biggest bang for our buck. That, again, is something that I heard a little bit of, not specifically related to your ministry, of course; in fact, more so related to some other issues than employment and training issues.

We have the added complexity of the federal government being involved with respect to First Nations. To what extent is there any scrutiny of that issue, particularly when a budget is being prepared, so that, you know, maybe programs can be identified where either you should be getting out of the business because somebody else is doing it or vice versa? It's just to make sure that, as I say, we're getting the biggest bang for our buck and still delivering the service. **Mrs. Fritz:** Thank you. My staff did hand me something, when I was talking, about the advancing futures bursary program. I just wanted to go back to it to let you know because I had named the programs that that young woman had mentioned to me. The number of dollars for 2010-11 for the futures bursary funding is \$4,808,000, which is pretty significant and which I can see now even more so. I didn't realize it was quite that amount, but I can see now why she wanted to be sure that we, you know, made certain that we left that in place.

The mentoring partnership. Mentoring of youth is very important. I think that's because we know that today families tend to be much smaller although in aboriginal communities they're much larger. I know you were talking about mentoring overall, but families are much smaller. We have more single-parent families, fewer strong local community networks than were there a generation ago, and some communities have fewer institutions and activities to support their youth and their families. We all know that. All of the relationships that were traditionally formed for the foundation of a young person's health, development, and sense of self-worth may not be quite what they were previously. Without that strong foundation I think that young people can feel varying degrees of isolation, depression, rejection, loneliness, or uncertainty.

For me the mentoring program is one of the strongest programs that we could have because when you have people that take time for a young person – in the community they recognize that through a boys and girls club, for example; they have volunteers that will mentor their kids there. I know in the aboriginal community, too, that some of the elders mentor the young people, and they become very close. It can ensure success.

Some people even say that because we look at prevention when children are very young, even when a child is assisted with reading in school because the teacher can't spend as much time with them, they're assisted. I know my mom had done that with a very highneeds school for a number of years, and at times she used to say: I helped them through this. It would be whatever that child had asked her that day that came out of the blue, that just the depth and wisdom of a mom – at least, my mom – can give a child. Mentoring is extremely strong and necessary as a need out in the community.

But also overall on ministries, yes, there are nine ministries that are involved with this ministry. One of the areas that affected this ministry when I first started and saw had changed was that with the family violence budget there was a reduction in funding in the grant program area. I was concerned about: how could we remove that, and what would that mean? I know our acting director here, Susan, was very certain to let me know that it was okay because the safe communities program, which has \$178 million, I think, this year what had been happening through this ministry and safe communities, because safe communities was fairly new, was that people were applying for the same funding into the two ministries. That's why when you look at safe communities dollars right now, a number of them have gone through to domestic violence and to bullying programs. Now it's easier for the community as well not to duplicate all the work they're doing in the funding. The safe communities side will be definitely looking at those proposals, and there are significant grant dollars there for that.

Another one that comes to mind for me, too, based on your question about the ministries, is the social-based assistance review that we're doing and what that can mean with, hopefully, not duplicating services, but where the changes we make will actually assist people overall.

# 8:45

**Mr. Olson:** Well, that's good to hear. I'm encouraged by that because, you know, again, the more efficient we can be in getting

money to the people who actually are supposed to be receiving the service rather than kind of churning it up inefficiently – that's great.

Now, I have another question that relates to the federal government. This one I want to just refer to if I can find it in your budget. I think it was page 85, statement of operations. If you can just help me to understand how the revenue and expenses balance here. There is a line item under revenue in the statement of operations for the department, services on First Nations reserves, \$17 million and change, actually almost \$18 million. That's a transfer from the federal government that comes for us to provide services on reserve, I assume?

**Mrs. Fritz:** Yes. That's what we bill back to the federal government for the services that we've provided on reserve. That's my understanding. Remember how I was saying earlier that kids can be in one or the other? It's for the kids that are off reserve that are normally on reserve.

**Mr. Olson:** Okay. Is that just an in and out, like a net zero number? There is no offsetting expense that's stipulated for First Nations, so I assume that that number, the \$17.8 million, is in those expenses.

#### Mrs. Fritz: Yes.

**Mr. Olson:** So you don't keep kind of separate numbers to verify whether the services we're providing are actually worth more or less than the \$17.8 million?

**Mrs. Fritz:** My understanding is that the billing takes place based on agreements with INAC. That's when I was mentioning earlier about the differences in funding for aboriginal children. This is exactly as you see it for what's put forward with what comes back.

**Mr. Olson:** Okay. Thank you. Bear with me. How much time do I have left?

## The Chair: A minute.

**Mr. Olson:** Just a quick comment. Again, I was pleased to see some reference in the business plan to recruiting more aboriginal foster parents and so on. I'm just wondering if you'd give us 30 seconds of comment on aboriginal people in your department, aboriginal employees and to what extent your department is making that a priority given the number of aboriginal young children who are clients of the department.

**Mrs. Fritz:** We do have a number of aboriginal people in the department. I'm going to ask our deputy if she can help me with where they would be. I know that for me, out in the community is where I've been, you know, with the different centres like the parent link centres and the aboriginal women's shelters and with Siksika with their FASD. I've been there and just out in the community to see what's in place. The aboriginal youth suicide prevention strategy, that's through our children and youth initiative. But the number ... [interjection] Oh, they don't keep track.

**Mr. Olson:** Yeah. People wouldn't necessarily self-identify, I guess.

Thank you.

**The Chair:** Thank you. Now we'll switch over to Ms Notley, please. **Ms Notley:** Thank you. I'm wondering if we could maybe go back to where I was. I think I got the question out right before the time ran out about whether or not you could assure me that there had been no children in care in offices overnight over the course of the last two or three months.

Mrs. Fritz: Can you help me with what you mean by "in offices"?

**Ms Notley:** Basically, where there was no place for them to go. They were not allowed to go into a hotel, so they were kept in offices.

Mrs. Fritz: But what kind of an office?

Ms Notley: Like a government office.

Mrs. Fritz: So here?

Ms Notley: Well, an office like here.

Mrs. Fritz: Do you mean with a caregiver?

Ms Notley: Yes. But in an office, basically.

**Mrs. Fritz:** I will look into that. For me, what I've been learning is that emergent care, when it happens in a home, a worker can go to that home, and depending on the hour of the day when that takes place – let's say it's in the middle of the night. With everything that's surrounding that, depending on the circumstances – especially when I was visiting with a crisis team and the people that go out, I don't know if the worker kept that child with them for a couple of hours, so they were with them when they went to their office. I can't comment on that.

**Ms Notley:** No. I'm saying staying overnight because there was no bed, shall we say.

Mrs. Fritz: I'll look into that further.

**Ms Notley:** Okay. Same thing, just to sort of reverse the way the question was asked before, with respect to hotels. I know there has definitely been a lot of direction that the hotel practice should cease. Can you tell me absolutely that in the last two months there's been no child that's stayed in a hotel overnight?

**Mrs. Fritz:** What I can tell you is that I've been told there haven't been. I also know this, and we all know this around this table with the depth of wisdom we have now: you may know of somebody that that actually happened to, and we should be talking about that. I don't know. I've been told that there haven't been. Can I guarantee that, though, categorically? I can't say that.

**Ms Notley:** Okay. I want to just go back really quickly to a couple of other issues before we go on to the next section. Just with respect to the three fatalities and the two injuries: can you give me the dates that each of those occurred?

Mrs. Fritz: I don't have that with me.

Ms Notley: Can you provide it to me afterwards in writing?

Mrs. Fritz: I'm being told that I can.

Ms Notley: Okay. I'd appreciate that. Thank you.

This is more of a confirmation just because I was thinking over our discussion, and I just want to make sure that I clarified. The 1,600 workers who you'd identify roughly as front line – and you gave me a list of their titles, which I much appreciate – just to confirm what I think I heard: there are no unfilled positions in there except for possible leaves of absence that have not been filled that would max out to 30. Is that correct?

**Mrs. Fritz:** What my understanding is when I have asked the question – and I ask it often – is that the front-line positions are being filled. There's a process in the filling of a front-line position. If somebody leaves – and we may not learn about it for a day or two or even a week in some cases – then we begin the process immediately to fill that position. I know there's a very serious concern that the hiring freeze has affected that. I can tell you that it hasn't.

But can I say to you: did somebody leave work this morning? That's the way, you know, the questions are. Like, for me, I'm wanting to tell you the way it really is. So can I say that somebody left work this morning, because they had resigned or for whatever reason but left work, and we're filling it? I can't tell you that.

**Ms Notley:** Let me make it simple. How about this: basically, you've got 1,600 people, and there are no positions that have been vacant without being posted for more than three weeks outside of those 30 leave of absence ones that we spoke about?

**Mrs. Fritz:** What I'm going to do is look into that for the threeweek window and see. But what I want to be really certain that you do know is that front-line positions are being filled, and they're being filled quickly, and the staff know that as well. It's out there with the staff, too.

I know that several months ago . . .

**Ms Notley:** I just want to say to you that I'm not talking about it actually being filled. I'm just talking about it being posted - right? - just to be clear.

Mrs. Fritz: Is your question: are front-line positions posted?

Ms Notley: Right.

**Mrs. Fritz:** So are you wondering if they're being hired through the back door and they're not posted?

**Ms Notley:** Oh, no, no, no. You know, if someone leaves to go to a different job and there's a permanent vacancy. I'm just clarifying. I'm not suggesting that it has to be filled in three weeks. I'm just saying that a posting has gone up within three weeks. If you find it easier to tell me within a month, that's fine, too.

**Mrs. Fritz:** Okay. I'll get you that information. But I would think so, yes.

**Ms Notley:** Okay. And if it's not the case, if you could give me the information about what it is.

### Mrs. Fritz: Yeah.

**Ms Notley:** Okay. I just wanted to clarify that because I didn't think I was clear in terms of the conversation. I always find that when I go back and read *Hansard*, I realize I didn't ask the question clearly enough.

Mrs. Fritz: Yeah. Okay.

**Ms Notley:** Okay. To go back to foster care generally, we talked about the new numbers. What I think I hear you telling me, then, based on my understanding of what the net numbers were in March of '09, is that we have roughly, give or take, about 340 new kin care homes above and beyond what had been in place as of March '09. How many total kin care homes do we have now?

## 8:55

**Mrs. Fritz:** Actually, I'm reading the number. It was 381 kinship homes as of November '09, and the total I'll ask my staff for. I'll just ask my staff to get that.

**Ms Notley:** Okay. If you could. The context in which I'm asking the question is just simply this: going back to the recommendations, I think that any reasonable reading of the recommendations is that there's a lot more staff time that needs to go into supporting these new homes, in terms of assessment and oversight and training and support on an ongoing basis. Depending on whether we're looking at roughly 340 new families plus whatever additional services have to be provided to what was there before then, my concern goes back to what we're actually looking at in terms of budget numbers and how it is that that service can be provided within the context of a reduced budget because we're needing to respond to that to do more work.

**Mrs. Fritz:** My understanding is that through the lead agency model the duplication of service that had been occurring has decreased. There's funding freed up there. There's funding freed up just through the whole assessment process and encouraging family enhancement and that children that had been placed in group homes, that that's no longer as prevalent because of more permanency for kids. So a child in a group home was approximately – it was very expensive. It was in the thousands. It was about \$15,000 a month, but foster care is about \$1,400 a month. So that difference is supposed to assist with cost reduction.

**Ms Notley:** I see, but what we're actually doing, though – there are several questions that arise from that. First of all, we're actually asking for more work to be done. If you're going to implement the recommendations of the kin care report, more work must be done, so you've got an upward pressure there if you're going to do it. Even if you were staying at zero and you were managing to find savings, you'd still have a problem.

Now, in terms of how you're finding savings, I have a real concern about that. I think we've kind of canvassed already why I have concerns about whether the lead model and the outcome-based services and the prevention stuff is really a realistic way to anticipate achieving savings.

However, the final one that I had been concerned about, which you'd mentioned before, is this notion of the cost savings between a group home and a foster care home. I'll tell you that I've spoken to a lot of social workers – a lot of social workers – who have said that they don't put kids into group homes until they have reached the point that they can't be placed elsewhere, and that the kids in the group homes need to be there because they have very challenging needs which can't be accommodated in the typical foster home. So you put that child at risk by taking them out of the group home, and you also put the other foster kids at risk when you place that kid back into a foster home, often is the case.

When that piece first came out in our discussions, I was contacted by a number of very concerned people within the field who said that that's exactly the kind of thing that they were worried about and exactly the kind of thing that's going to lead to the kinds of things we were seeing last summer where, you know, kids who were 17 or 18 were in bad situations. Primarily, I'm thinking about them, for themselves, whether they're engaged in, you know, petty crime, whether they're hurting themselves, whatever. The key is that they are not getting the care and the support they need. I certainly know that if I was a parent of a child who needs to be in group care, I would be apoplectic if suddenly I was finding that they were being put into foster care because you presumably didn't put them into group care at the beginning if they could be accommodated in the foster care system.

**Mrs. Fritz:** It's interesting what happens when you say things like this, what people are telling you and, really, what I'm hearing from the people that actually really know around me. I trust what they're saying.

Ms Notley: I'm just talking to social workers.

**Mrs. Fritz:** Well, I didn't have one social worker call me, just so you know, after that – and I know they're calling you – not about that situation in the way that you're describing it. I have had my staff be very clear with me that for a child that's in a group home, once they've had their needs met in whichever way that was, they're put into permanent placement. Many of those are reunified with their families. It just depends. If it was a behavioural modification, it just depends on what the issue was. You talked about self-harm. You know, did they receive the psychological therapy they required? Did they receive the health care they needed? Did they have it set up with the whole wellness model that they have for them? Did all that occur so that they don't need to be in a group home, that they can be in a permanent placement? That is when, you know, it does change for people. They don't go into a group home as a permanency model.

**Ms Notley:** I absolutely agree that that's the case, but I assume what was happening before was that, based on the wellness and the best interests of the child, they were transitioning into permanency or into some other arrangement already based on what was in their best interests. So with the idea now that suddenly we have the capacity to save money because we're going to transfer more, did we suddenly have a significant reduction in the acuity of the kids in group care? You know what I mean? Like, it doesn't make sense.

**Mrs. Fritz:** No, I don't, actually. I'll tell you. That's why I go back to this, when I talked earlier about: this has been a decade of change. It's been nine years, that Alberta response model, when I discussed with you about the permanency and the family enhancement, and then it moved to 2004, when the family enhancement act was actually put in place, and now it's moving to that there are processes that are being enacted. We go back to that lead agency model because that's the most recent one. All of that's coming into play, and it's assisting the system overall. So when you say that kids are being put into group homes now and suddenly removed, that's not so.

**Ms Notley:** Well, I'm just going on what you were saying, Minister, because you were suggesting that one mechanism of saving the money that's been cut is that the kid that's in the group home now can cost the system a lot less if he or she is moved into a less expensive setting. What I'm saying is that I don't understand why we would suddenly, out of the blue, have the capacity to move these

kids from this very expensive setting into a much less expensive setting. Presumably, they were in the more expensive setting because that was what was in their best interests. I find it hard to believe that there would be such a profound shift that just happened to coincidentally coincide with the need for a budget cut.

**Mrs. Fritz:** You see, the premise that we're working from that's different is that you're thinking that this is being done because of cost. That is one of the outcomes, that the cost is reduced because that youth or that child or whoever has been moved into permanency placement. I'm not working from that premise. It isn't about cost when they move from a group home to a foster care home. As I explained earlier, we now have more foster care homes, and we have more kinship care. The caseload is down by 4 per cent and has been for two years. We're seeing that trending now, but it's because of these good programs that are coming into place.

When I talked with you about youth hub for youth at risk, that's new, and it's being successfully implemented. Youth are being helped in a much different way. They're being helped far more quickly with much better programs, very qualified staff, and for good reason they're able to move into a home with either a foster parent or even through adoption or be reunified with their families. The programs in place for families, too, are better.

**Ms Notley:** Okay. I think we're going to have to just agree to disagree on the timing of this, but what I would like from you is if you could provide for us the number of group homes and the number of spaces in those group homes as of April of 2009 and then that same piece of information for now, just the number of group homes and the number of spaces in those group homes across the province. I can't remember if I asked this question last year or not.

Mrs. Fritz: I don't know. I didn't look at your questions.

**Ms Notley:** The reason is that I'm not sure if they were able to provide it at the time or if they had to send it afterwards.

Mrs. Fritz: I'll get that to you, that information.

Ms Notley: Oh, afterwards. Okay. Thank you.

Let's talk a bit about foster care and foster compensation. I'm wondering if you could provide to me just a quick rundown of the per-child payment to foster parents based on the level that each child is assessed at and maybe a quick note on what the criteria are for each of those levels. Is that too much? I have a general sense of what they are, but I don't know how many different levels there are.

**Mrs. Fritz:** You'd like to know how much foster care parents are paid per child?

Ms Notley: Per day.

Mrs. Fritz: The average?

Ms Notley: No, not the average.

Mrs. Fritz: For all the foster children, what we paid to them?

**Ms Notley:** No. Just on the different levels. My understanding is that children are categorized into different levels, depending on their needs.

Mrs. Fritz: That's pretty detailed, Mr. Chairman.

<sup>9:05</sup> 

**Ms Notley:** For instance, it's \$12.50 for level 1. What's level 2? Are there more than two levels? How many levels are there?

Mrs. Fritz: I don't know the answers to that.

Ms Notley: Could I get that?

Mrs. Fritz: Yeah.

**Ms Notley:** Then just the only question I will ask if you could answer it here: is there any plan to adjust the compensation provided to foster parents taking care of special-needs children?

Mrs. Fritz: Not this year.

Ms Notley: This 2010-11 year.

Mrs. Fritz: Yeah.

**Ms Notley:** Okay. Are there any plans beyond that, or have there been any previously?

**Mrs. Fritz:** In the overall deliberations and working with the Foster Parent Association and knowing what the need is out in the field, that's always definitely discussed, but your question was for now.

**Ms Notley:** So for '09-10 and for '10-11 we will not see any cuts to payments for special-needs or any kind of higher need foster care.

**Mrs. Fritz:** No. There's no reduction in the budget, and the foster care budget overall, as you saw, has been increased by I think \$900,000.

Ms Notley: It's .5 per cent.

**Mrs. Fritz:** Overall the budget has increased, and there is no plan for reduction in the funding that's provided.

#### Ms Notley: Right.

Okay. We've talked about kin care. Now, respite dollars. Is there any change in the availability of respite dollars for foster parents?

Mrs. Fritz: No.

Ms Notley: Okay. Then moving over to child care.

I'm not sure how much time I've left myself now. How much do I have?

The Chair: You have 25.

**Ms Notley:** Okay. Well, really quickly, then, with child care. You talked about the 11,742 net spaces. Can you give me a breakdown of what type of spaces each of those are for child care? You talked about the 11,742, and I'm just looking for a breakdown in terms of daycare, preschool.

**Mrs. Fritz:** Yes, I can. I'll read it quickly into the record for you, Mr. Chairman. Daycare program, 3,740; preschool program, 1,289; group family child care, 10; innovative child care, 117; out of school care, for which I told you earlier there's really been an uptake, 4,251; family day home approved, 838; other, which is kin child care subsidy cases, 1,497. That's a total of 11,742. **Ms Notley:** Okay. Do you know the following information about the rates that are being charged? In those cases I'm just looking at, I guess, the family approved day home and the 3,740 number that you gave me. Those are the new ones, but whichever. For the ones that are full-time child care for children that are preschool and under, what is the average fee being charged? [A bell sounded]

#### The Chair: Thank you, Ms Notley.

We'll now move to Dr. Raj Sherman, followed by Fred Lindsay.

**Dr. Sherman:** Thank you, Mr. Chair. We'll go back and forth, 20 minutes.

Minister, it's an honour to be here and ask you a few questions on a very important issue. A concern all of us have and especially me, being an inner-city doc, is population health. The biggest challenge that our health care system is going to face is not the seniors; it's actually their kids and their grandkids. One hundred per cent of our kids eat too much salt. Our kids walk 4,500 fewer steps than their European counterparts. Our childhood obesity rate has gone from 20 to 22 to 24 to 27 to 28 to 29 per cent. We have a record number of young people getting adult diabetes and hypertension. Younger people are having heart disease much earlier on.

When you get these illnesses, you have them for your whole lifetime. You have to manage them for a whole lifetime. It's actually the management of chronic disease that's going to be one of the biggest economic issues, that's going to be an economic tsunami for our country. We know that by looking at the United States. Health care is one of the things that has bankrupted many of the major corporations. The health of the population has a significant impact on the economic productivity of the labour workforce. Now, that's just a global view of what's happening with many of our children in this country and in North America.

In Alberta per se, on the mental health side 60,000 of our kids are seeking mental health services. Half of mental health presents by age 14. The number one cause of death in Alberta under the age of 44 actually isn't car accidents. For young people under 44 it's actually suicide. Despite what we've done in mental health and prevention and whatnot, the rate hasn't changed. Maybe it's a good thing that we've done a lot of work across the country. Perhaps the rate might have gone up.

Here is a very sobering statistic. Our low-income young mothers between the ages of 15 and 19 are having babies at 11 times the rate of high-income young mothers. Eleven times the rate. You've got young women not finishing their education; babies having babies, essentially. I saw a 43-year-old great-grandmother at work a few months ago. For a lot of these kids, babies that are having babies, their eating habits probably aren't that great. Many of them smoke; many of them drink; many of them do drugs. So you've got these education and poor lifestyle issues.

I was at a parliamentarians' conference at Harvard, and the medical evidence there was that the health of the mother preconception determines the genes that are turned on and off in the child. It said that in 18 to 24 months these lines become divergent, depending on the environment that these children are in. There are stressful environments, which are okay. I think stress is healthy. Then there is tolerable stress, where if you have a good, supportive environment around you, things end up being okay. But then there are toxic stressful environments, where the stress just never abates. Depending on the environment that a child is placed in, the most vulnerable environment is when those two cells unite, when the child's life starts in the womb and then when the baby is born.

Now, specifically, one of the issues I want to talk about is the most vulnerable of the kids and the sickest of the kids. Alcohol use

during pregnancy is one of the leading causes of birth defects and developmental delay in Canada. With fetal alcohol spectrum disorder, or FASD, issues resulting from alcohol consumption during pregnancy have significant social and economic impacts on society and significant impacts on the suffering of a child. Many of these effects include physical, mental, behavioural, and learning disabilities that have lifelong implications. I've heard numbers that a child with FASD costs us a million dollars a year. I don't know if that's true or not. That's a rumour that I've heard. You might be able to correct me on that.

I was just doing literature research here. The prevalence rates are 1 to 2 out of 1,000 for the community, but among certain isolated northern communities and sometimes specifically the aboriginal community the numbers are from 25 to 200 per 1,000, the numbers that are quoted here. I don't know if any of these are accurate or not.

So a few of my questions. Really, part of the problem here is that many of my colleagues in the medical profession underdiagnose. The awareness is out there. There is difficulty accessing primary care. What are your approximate numbers of how many Albertans, how many Alberta children, maybe specifically how many Alberta children in custody are affected by FASD, and are these numbers increasing or decreasing over the years?

### 9:15

Mrs. Fritz: Is that the question?

Dr. Sherman: Yes, that's the question. A long preamble.

**Mrs. Fritz:** Well, as I said, I met recently with a renowned pediatrician, an individual who's working with FASD in a clinic here in Alberta. They indicated to me the seriousness of moms drinking when pregnant, as you mentioned, and that even in the very first stages of conception it can have a devastating effect. It's known as FASD. They also said that they're looking forward to working with the federal government through Health Canada. We're leading the way in this whole area of FASD in Alberta. They're looking forward to doing more research in the area, and through our research dollars we dedicate \$18 million towards FASD.

Do I have a number of how many children have FASD that are in care? That's a very difficult, complex number to get. The way that they explained it to me – and because you are a doctor working in emerg, you've seen many things over your lifetime. So did this pediatrician. She said that in all her years, those 35 years of working, going to delivery rooms where the children could have very emergent needs – if people had consumed alcohol in pregnancy, that can happen right at the very start, when they're born – and then working in the nursery, she's only been able to diagnose two cases of FASD at birth.

Also, as the child moves through the spectrum of life, it's very difficult to diagnose FASD. Even in the modules that they're learning, they're still increasing, she said, the parameters so that they can actually identify FASD. So it's not a statistic where you can go and categorically say the four determinants of FASD, where you can say: this number of children have FASD, and they are in care.

The other interesting statistic. She did say that she could see as well – you know with what you do because I know you're still working in emerg now and then – that if a mom has one child with FASD and then continues to drink with each pregnancy, if she has five kids, each child progressively is going to get far worse on the scale of what the issues are for that child and youth, depending on the mom's care during pregnancy. So you were saying: what happens with children with salt and obesity and those kinds of

things? She said that with this mom other things - it's the poverty, the nutrition - get worse, but also with each pregnancy you know that each child will be.

So I don't have that clear answer. It's too complex.

**Dr. Sherman:** In fact, I wasn't able to find any numbers on the website here as well, the national website.

In Manitoba the numbers that are alluded to here are that 110 out of 1,000 kids in care have FASD. According to the numbers in British Columbia, 233 out of 1,000 of the youth in psychiatric inpatient assessment units have FASD issues. So as these young people age, it's really either criminalization or incarceration in mental health institutions or in jails. It ends up being a major problem. The costs for treatment are immense for the rest of their lives.

The solution, really, is that this is the one diagnosis in medicine, I think, where an ounce of prevention is worth about a million bucks a year if that million dollar figure is correct. So the question is: if you have youth that are pregnant in care in the province and, secondly, just youth in general who are pregnant, what are we doing to just increase the awareness of the dangers of alcohol use to prevent FASD?

**Mrs. Fritz:** It's really working through Health as well, but we have excellent programs. I mentioned the healthy beginnings program earlier, about the nourishment for people that are very low income or very young that would need to be assisted with what would assist their baby to being as healthy as possible. What I found interesting earlier when you mentioned low income: you never did talk about low birth weight. That is a real issue, too.

The parent-child assistance program provides mentors to help women who have given birth to children with FASD to obtain housing, employment, in-home supports, et cetera. Your question was more along prevention, before people become pregnant, so it was more about the prenatal care, right?

#### Dr. Sherman: Yeah.

**Mrs. Fritz:** That care would come through, as I said, the programs within Health. They do recognize the moms, and they assist them in a very good way. If a mom goes into the program – let's say she has a little one that has FASD and she knows she's pregnant again – they actually assist her by giving her food, giving her transportation dollars, helping her in ways that can make a real difference to that person.

We do have a 10-year strategic plan as well that will reduce and prevent FASD births. Those are the awareness and prevention activities that educate and inform Albertans overall about the risks of drinking alcohol while pregnant and the effects of FASD, services that increase overall awareness about a healthy pregnancy.

We do have, though, about 23,000 Albertans that we know have FASD, but I still can't tell you the number as it relates to care. I was just handed a note here that the number of children born with FASD, according to the health agency of Canada, is 360 a year in Alberta.

**Dr. Sherman:** Right. One of the most difficult things is, actually, for a family to have a child with something like this from a very young age. We know, as you mentioned, the effects with subsequent children, but there are significant effects on the children that you had before you have a child with FASD. What kind of supports do you have for the families? Having an ill child at the best of times is very trying during these difficult times. Having a child with FASD: many of these problems just simply don't get better. What kind of

supports do you have for families? We want to help them stay together, to help them cope, and to get some respite care so they have some time to themselves and time for the other children.

**Mrs. Fritz:** There is significant support for the families with FASD through funding. I go back to what the pediatrician had said about lifespan and about how it can change quickly, just even from month to month, as they go through growth spurts. It can change within a year or two years, depending on the management of the intervention that's needed through the department, but there are significant supports.

We have trained and supervised our case managers or case workers in the department, when they are doing their home visits and the intervention, to assist that family at the stage that they are with their child. Families need things like housing support, employment support, support when the children are in school. They're just pointing out to me about our 12 FASD service networks that provide direct support and services to people that are living with FASD and their caregivers.

As I was going to say, there's support even through our diagnostic clinics. We have 20 clinics providing assessment, the diagnostic services. Once they know what the actual – people think that all children with FASD experience exactly the same thing. They're all completely unique. Once the diagnostic clinics assess what their need is, then support and services are provided through the good work that we do through the department if the child is in care.

**Dr. Sherman:** Thank you. I'd like to go along the same line of early childhood development and move into the area of family violence and addictions, addictions other than alcohol. Family violence is something that I see a lot of at work. In fact, regrettably, I would say that I see at least one abused spouse, usually the wife, every shift that I work in the emergency department. Many times these are young mothers who have young children. For a child growing up in that type of environment, as we had talked about earlier on, this is one of these toxic environments that really affects the emotional and even physical development of that child.

Addictions to drugs and other substances, to gambling, and smoking have a profound effect on a family, especially those children. The question is: how do you protect these children and youth that come from these very difficult circumstances? Being born into a family this way, trust is a big issue for these young people if their parents are in this environment. It's really difficult for these young people to trust anyone on this planet if their parents are treating them this way. What kinds of measures are available for them in terms of counselling, coping, and rehabilitation for their parents? Really, it's all about protecting the family. So what sorts of measures can you tell me you take to protect these kids in the families?

#### 9:25

**Mrs. Fritz:** It would depend. As I said, early assessments are done in the home with the caseworker and with the lead agency now; they're both at the home. It depends on what has happened within the home and what the needs of that family are in supporting that family. When I say that, I can tell you that with families that are experiencing family violence, there are many issues. I mean, we can go in, and we can support through prevention, through protection, and through permanency for a child. We can do that, whether it's the protection stream, as I said, or the family enhancement model, right?

There are many socioeconomic issues that underlie what you're talking about in such a broad way for families. As to the socioeconomic issues that we can't address, they're not about our child intervention area or our childcare area, but for women that are experiencing family violence, we do have over \$39 million that's being committed directly for family violence and in that area of our program. We do have women's shelters, we have sexual assault centres, safe visitation sites, and outreach services just to specifically address the needs of women and men that experience family violence.

We have \$2.8 million in funding this year that came to us from the safe communities task force, and that was to expand programs and services to support parents with family violence, that area of prevention; \$1.6 million was for expanding supports for Albertans impacted by family violence, particularly for aboriginal and, as I said, immigrant communities. There are outreach services. There are prevention resources in multiple languages; interpretation is done for people in over 170 languages. There's training for front-line responders. There's a million dollars that we announced a couple weeks ago for the triple-P, the early prevention program.

I'm getting handed all these messages, but I can tell you a lot more about it later because, really, there is extensive assistance out there for the family with the assessment that we do and with how we assist the family and the child.

**Dr. Sherman:** Minister, I'd just like to acknowledge the heroic efforts of all the front-line staff that work in your ministry because over 18 years God knows how many kids I and my colleagues have had to apprehend when they show up to us in the front lines, whether they come from an abusive environment. For us it's one of these must report: we by law have to report this. Our hospital is the centre for child psychiatry, and many times these kids don't necessarily have psychiatric issues, but they have behavioural issues.

**The Chair:** Thank you. I'm sorry to interrupt, Dr. Sherman. I apologize for the interruption, but I must advise the committee that the time allotted for this item of business is completed.

By the way, a written response by the office of the minister to questions deferred during the course of this meeting can be tabled in the Assembly by the minister or through the Clerk of the Legislative Assembly for the benefit of all MLAs. A copy to the committee clerk would also be appreciated.

I want to thank everyone and remind committee members that the vote on estimates for Children and Youth Services will be on Thursday, tomorrow, the 18th.

**Mrs. Fritz:** Mr. Chairman, I just wanted to be able to thank you and to thank the committee members. Also, about what you said about written questions, I will respond to those that I committed to here.

One clarification: I said \$15,000 for a group home. It's \$8,000. I wanted to clarify that as well.

**The Chair:** It's the chairman's prerogative on this night of wearing the green, a little proverb: castles were built one stone at a time.

Pursuant to Standing Order 59.01(2)(a) the meeting is adjourned.

[The committee adjourned at 9:30 p.m.]

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