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Chair

Mr. Ken Boshcoff

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● (1900)

[*English*]

The Chair (Mr. Ken Boshcoff (Thunder Bay—Rainy River, Lib.)): Welcome, everyone. *Bienvenue*.

We'll call this meeting to order. We have a quorum of three members.

Welcome, Minister Dryden, to our subcommittee. We're honoured to have you here. When you are ready with your presentation, you may begin at your convenience, please.

Hon. Ken Dryden (Minister of Social Development): I'll start by just introducing the officials who will be sitting here. Susan Scotti is the assistant deputy minister, social development sectors branch; Donna Achimov is an acting assistant deputy minister of service delivery; Susan Williams is director general of CPP disability; and Ross MacLeod is director general of service delivery.

[*Translation*]

I thank you for having invited me to appear before the subcommittee, which has always cooperated actively with persons with disabilities, legislators, departments and public service officials in order to improve the life of Canadians with disabilities.

I strongly hope to continue this cooperation with you because, as we all know, we still have a lot of work to do.

I would like to tell you about our achievements in terms of the Canada Pension Plan Disability Benefits Program, because we are making great progress. I would also like to tell you about the work that we are doing in the area of disabilities.

[*English*]

We all know that achieving the full inclusion of people with disabilities is a major challenge. It cuts across all levels of governments, non-profit agencies, and the private sector. It calls for changes in attitudes, in physical facilities, in employment, and in training. It touches almost every aspect of society.

We also know where we need to put our efforts. Several years ago, the federal and provincial and territorial governments identified together that full citizenship for people with disabilities could be achieved through leadership and action in the areas of employment, income, and disability supports. That framework, entitled *In Unison*, was an important milestone. We continue to build on this in everything we do.

Your predecessor committee rose to the challenge of *In Unison* with its June 2003 report called *Listening to Canadians: A First View of the Future of the Canada Pension Plan Disability Program*. *Listening to Canadians* was drawn not only from the views of witnesses who appeared in person, but in addition from 1,700 Canadians who took part in the first online consultation of any parliamentary committee in this country, and one of the first in the world. As an in-depth study of all aspects of CPPD, *Listening to Canadians* made suggestions for both practical short-term changes and for setting a vision for the longer term. It stands as a benchmark, both in terms of parliamentary democracy and in its contribution to this program, which touches the lives of so many Canadians.

As you know, the government, in its response in November 2003, committed to accept a majority of the recommendations. Today I am pleased to present the first progress report on the government response to *Listening to Canadians*.

I know you will want the opportunity to go over this report in detail. My officials are available at any time to answer any questions you might have after you've had the chance to read it. But I would like to take this opportunity to draw your attention to one of the achievements highlighted in the report, as I think it is an illustration of the progress that is being made.

First, you know that CPPD is a large and important program that last year paid out $3.13 billion to more than 290,000 beneficiaries and their 87,000 children. Moreover, an additional 60,000 Canadians apply for benefits each year. As the largest long-term disability insurance program in Canada, CPPD, as legislated, has a very specific role: to provide vital income support for the most severely disabled people who have been contributing to CPP and who can no longer regularly work at any job.

CPPD is and was intended to be only one of several disability income programs in Canada. Indeed, some CPPD beneficiaries also receive income support from other programs, public and private, which often take CPPD benefits into account. You also know that changing the CPPD can be a complex and lengthy process. As Minister of Social Development, I can take the lead, especially in areas of administration and client service, but substantive changes to the CPPD require working collaboratively with the Department of Finance and with the provinces and territories. The two levels of government are joint stewards of the CPP, and changes require the consent of Parliament as well as of two-thirds of the provinces with two-thirds of the population.

The significant change to the CPP legislation I would like to highlight was enshrining into law on January 31, 2005: the automatic reinstatement of CPPD benefits. Automatic reinstatement supports CPPD recipients who try to go back to work. It does so by ensuring that their benefits can be reinstated for up to two years after they start a job if they find they cannot continue working because their disability has recurred. This was one of the key recommendations in *Listening to Canadians*, and it's a very important step.

It's important in that it recognizes that people with severe disabilities face major obstacles when they try to return to work and that this is a challenging, uncertain experience for both the person with the disability and also for the employer. It provides to persons with disabilities a flexible financial safety net and an important psychological safety net. Simply, but crucially, it gives persons with disabilities a chance to take a chance.

● (1905)

The feedback from beneficiaries in the disability community is very strong. We know it is already working. The progress report details some other advances we are making. Officials from Social Development Canada would be happy to provide a technical briefing and answer your questions at a future date.

Let me turn now to some of the other work we are doing. CPPD was not created and was never intended to meet the needs of all Canadians with disabilities. These needs require a range of income benefits and disability supports and services. My department does not have sole responsibility in this area, nor does the federal government. The federal government has a variety of programs and instruments on disability that include income measures, employment and learning programs, community development initiatives, and information and knowledge initiatives.

At SDC these include: the $223 million multilateral framework for labour market agreements for persons with disabilities, through which SDC provides funding for provincial programs and services to help working-age adults with disabilities to prepare for, find, and keep employment; the $30 million Opportunities Fund, which assists people with disabilities in their efforts to prepare for, obtain, or maintain employment or to become self-employed; the social development partnerships program, disability component, which aims to increase the capacity of the disability community to promote the social well-being of people with disabilities; and the CPP disability vocational rehabilitation program, which is designed to help clients reintegrate successfully into the labour market.

The federal government also provides income support measures such as employment insurance sickness benefits, Canada study grants for post-secondary students with permanent disabilities, and tax measures such as the disability tax credit, the medical expense tax credit, and the caregiver tax credit.

We all know there is more work to be done. To do this, I will be working more closely with my federal colleagues in Finance, Transport, Health, and Skills Development. At the provincial and territorial levels, I am working with ministers responsible for social services on the development of a paper setting out some short- and long-term options on disability income and supports.

In addition, one of our biggest challenges is to mobilize all of the players involved to engage on this issue. So in the last few months I have been meeting with a full range of disability organizations and with many individuals with disabilities to hear their views, their experiences, their visions. All of this is part of a longer-term plan I am pursuing towards the goal we all share: the full inclusion of persons with disabilities in Canadian society. This committee can play a very important role as well, just as it has in the past.

April 17 marked the 20th anniversary of the coming into force of section 15, guaranteeing equality rights under the Canadian Charter of Rights and Freedoms, regardless of race, national or ethnic origin, colour, religion, sex, or mental or physical disability.

We can work to improve the programs we offer. We can work more effectively with the provincial and territorial governments. We can work more collaboratively within the federal government itself. We all need to find ways to do better—federal government, provinces, and territories. We need to find a way to encourage Canadians to make disability a greater priority.

What new approaches do we need to take? Would a Canadians with disabilities act, like the U.S. act, make a significant difference? I would like to hear your views on this. You might even do a very close and careful examination of it to imagine its possibilities if it was introduced in Canada.

I just returned from some OECD meetings in Europe. In short, I know of no government anywhere in the world that is satisfied with where they are in the area of disabilities. I would like to work with you on how we can do better.

I am happy to take your questions. Thank you.

● (1910)

The Chair: Merci, monsieur le ministre.

Ms. Skelton.

Mrs. Carol Skelton (Saskatoon—Rosetown—Biggar, CPC): Thank you very much, Mr. Minister. Thank you for coming after a long day.

I have numerous questions. I would like to start out asking you about the Navigating the Waters program. Funding was scheduled to end March 31 of this year, but many, including the North Saskatchewan Independent Living Centre, have asked for reconsideration. Could you tell me what decision has been taken in this regard?

Hon. Ken Dryden: As you know, we have funded significantly CAILC over the last number of years. I forget the amount of money exactly. It's $5.8 million that we have funded them to, and for good reason—as you know, they do good work. In the last call for proposals, 17 different organizations were asked to submit proposals. They all submitted proposals. An independent panel reviewed their proposals. Nine of the proposals were accepted. The CAILC proposal finished thirteenth.

The way I understand CAILC, the way I know them, the way I've seen them work, I would suspect that CAILC will be back as a part of all this in the next go-round. Since the time their application was not accepted this time, we have been working with them on the next call for proposals—which is out there—and the response will be coming up quite soon.

Mrs. Carol Skelton: What are you doing with these people who are not getting help now, and they're not in the program—they don't have the benefits of the program?

Hon. Ken Dryden: Do you mean those who have received the benefits in the past?

Mrs. Carol Skelton: Yes. What are you doing with them?

Hon. Ken Dryden: I know some transition efforts were made.

Mrs. Susan Scotti (Assistant Deputy Minister, Social Development Sectors, Department of Social Development): Other organizations are picking up....

Mrs. Carol Skelton: You stated in testimony to the main committee that they didn't meet the requirement, and you also stated that decisions were made according to priorities. That kind of bothers me. It leaves the impression that independent living isn't a priority of yours. When you were last asked that question, you didn't have an answer for it. Do you have an answer now?

● (1915)

Hon. Ken Dryden: What I recall is that there was a look for...I know the phrase was something like innovative proposals. All I can do is list to you the groups that received funding and give you an idea of who they are. It isn't a matter of not looking to support independent living, clearly. It was strictly a matter of the proposals that were made. The independent panel looked at them and decided CAILC's proposal wasn't as good as it has been in other years.

Mrs. Carol Skelton: I would like three things then. I would like the names of the independent panel. I would like to know how many grants were given for independent living. I would like to know which ridings the grants went into, if that's possible, across Canada.

The focus of our committee so far has been on Parliament Hill and the public service. I sometimes look at us and think maybe we're so focused on Parliament Hill, and the buildings and everything, that we're forgetting what's going on outside this little bubble here on the Hill.

What do you personally feel needs the most improvement for the disabled in Canada?

Hon. Ken Dryden: I think that what is needed the most is for us to go from.... When I was speaking with Peter Julian not too long ago, the way I put it was that about 20 years ago, before the Charter of Rights, many more people with disabilities were out of sight, either in institutions or homes, and there was much less of a public experience with people with disabilities. They were more out of sight and more out of mind, without the understanding of what the life of a disabled person isn't, but also not realizing what it could all be.

What has happened or improved in the last 20 years is that there's a greater instinctive awareness of people with disabilities, and you don't need to make the case as much for persons with disabilities. What is still lacking significantly is persons with disabilities being front of mind when decisions and plans are being made. Once the shortcomings are pointed out, then people realize, oh, yes, right, I forgot.

What we need to do is to move people from being completely out of mind to now being in the back of mind and then being much more towards the front of mind.

Mrs. Carol Skelton: While we're talking about that, I would mention that I've written to the transport minister and asked about the problems the disabled are having on the smaller jets Air Canada is flying; a lot of disabled people can't use those planes, especially on the prairies. I know our own colleague, Steven Fletcher, cannot fly in the small regional jets.

Have you ever audited the airline companies in this country for their compliance with the disabled? Have you ever looked at that?

Hon. Ken Dryden: I'll ask the people at the table with me.

Mrs. Susan Scotti: That would be a responsibility of the Ministry of Transport, as part of their responsibilities for regulating the transportation sector.

● (1920)

Mrs. Carol Skelton: But is it not your responsibility to look after the disabled people in this country and to be their spokesmen, so that you should be putting pressure on the transport minister to do that?

Hon. Ken Dryden: We should be aware of what the life of a disabled person is, including in the way in which you described, and then to be a voice for people and persons with disabilities.

Mrs. Carol Skelton: It's something I wanted to bring up for you to be aware of, that it's a huge problem in this country, because we have a lot of people who cannot fly right now because of the airline industry. It's a huge problem, and I just wanted to make sure you were aware of it.

It was interesting to hear you talk about a national disabilities act, something we Conservatives brought forward and accepted as a policy at our Montreal convention. I'm glad to hear you say that, because I think it is something we need in this country. I appreciate it.

Hon. Ken Dryden: Again, I don't know the merits of it; I know some of the arguments for it. Your subcommittee will obviously have lots of things to think about in terms of where your priorities are, but it certainly might be something you might want to consider having a very close look at, to see how it works, how well it works, and whether it would be as applicable in this country. Take a good, close look at it.

Mrs. Carol Skelton: Okay.

Disabled Canadians are treated unfairly across this country because of the provincial clawbacks and the clawbacks in different jurisdictions. What are your thoughts on that, and how are you working to achieve fairness for all disabled Canadians?

Mrs. Susan Scotti: There's a significant amount of work under way right now with our federal-provincial-territorial colleagues to look at the wide array of income and support programs available to persons with disabilities, and to look at how they work with the federal programs. A paper has been developed, which is being finalized by the federal-provincial-territorial working group, and will be available to the federal-provincial-territorial forum in the spring. We're expecting that the paper will identify some opportunities to enable the programs to work together a little bit better.

Mrs. Carol Skelton: Good. Thank you.

The Chair: Monsieur Vincent.

[*Translation*]

Mr. Robert Vincent (Shefford, BQ): Thank you, Minister, for being here today. I have a couple of questions for you.

First, who is best suited to assess the case of a person who has had an accident, to assess his or her disability and to determine whether it is in fact a severe and prolonged disability? Who can make that assessment?

Ms. Susan Williams (Director General, Disability Benefits and Appeals, Department of Social Development): Let me put this question in a larger context. I believe that, the way you are asking the question, you imply that a meeting is held in order to obtain the medical doctor's advice which is presented together with the application for disability benefits. This obviously provides medical data and gives some weight to the disability benefits application. Then there is the work done by the official—in our service, it is generally a nurse—who makes an assessment of the information, both about the person and any information that the employer requires, as well as any medical information necessary in order to assess the capacity of that person to work in any capacity, and not only to do the work that he or she was doing before being disabled.

So it is not a question of whether a doctor has a more detailed knowledge of a medical condition. After all, we are not asking Canada's doctors to do the job of our officials. It is not the same thing at all. If you are interested, I can offer you a briefing on the work done by our officials, because I believe that their work is misunderstood. What we are asking doctors to do is to provide us with some concrete data and details about the medical condition of the person. We try to assess these data, as well as personal information such as age, knowledge of another language, transferable knowledge, training possibilities, anything that could give that person the opportunity to receive some training and to obtain another job than that he or she was doing before.

We are asked rather often whether a nurse must have a better knowledge of the medical condition than a doctor. I do not believe that it is the right question. If you wish, I offer you a briefing session.

● (1925)

Mr. Robert Vincent: If I understand correctly, the steps are the same as for a group insurance. The doctor states that the gentleman is no longer employable and that he cannot work anymore. However, in the same file, a nurse can decide that while he can no longer do the job that he was doing before, he still can hold another job. Let's take the example of a person who would have had both his legs cut off. That person could work in a factory as a gate keeper, sitting there and opening the gate on request. That person is employable because he or she is able to push a button. I do not believe that this way of seeing things is reasonable. If a doctor makes a statement, I do not understand that a nurse can say, based on a report, that the person is still employable.

I find that disturbing.

Ms. Susan Williams: According to the standards of our program, it is not up to the physician to make a decision. In the case of a severe and prolonged illness, the physician's task is to provide medical data on the medical condition of the patient. It is his area of expertise. He is not an expert in our program's standards or rules.

Mr. Robert Vincent: I can understand that up to a point, but there is still something that I do not understand. If the doctor states that the person can no longer work because of such an illness, how...

You are the one who is asking the physician—these forms exist, I have seen them—to determine whether a person is able to work, to tie his shoe laces, to cook his meals, to do this or that in spite of his illness. If the doctor states that the person is no longer capable... Your nurses go that far.

The physician ponders the question of whether the person is able to work or not. After the physicia has established his diagnosis and stated that the person is no longer employable, the person goes to see a nurse. The nurse then overturns the doctor's diagnosis and decide that the person is still employable. To avoid the person getting benefits, they then try to find another job for him.

Ms. Susan Williams: No, sir. It is up to the person himself or herself to assess whether or not he is capable of tieing his shoe laces, etc., and then to fill up the form, and not to the doctor.

We try to collect all data, all information that can be useful to us. I can assure you that our goal is not to reject everyone's application for disability benefits. Quite the opposite, we must give them to those who are entitled to them.

Mr. Robert Vincent: And yet it is not what we see in reality. Rather, we hear it said that the doctor makes a diagnosis and that he is the person who fills up the forms requested by your department. Then, once the form is filled up, the person believes that he cannot work anymore because the doctor told him that he was not capable of doing so. Then the person meets with a nurse who, without making any change to the initial diagnosis, takes an opposite view from the doctor's findings.

Also, I was reading your first status report. It says here that when a client goes back to work, his benefits will be automatically reinstated if he stops working less than two years after the benefits were cut off. This means that the man can work for two years. If he works for more than two years, he will not automatically receive the benefits that he was receiving before going back to work when he quits working again. Why two years?

● (1930)

Ms. Susan Williams: I wouldn't want to take up the minister's time.

[*English*]

I was just saying that I don't want to be taking your role in answering questions.

[*Translation*]

It has been established this way in the legislation. In more than 90 per cent of cases that we have studied, in exactly 95 per cent of cases, if I'm not mistaken, the inability for the person to keep on working became apparent during the first 24 months. It is the reason why we have chosen this 24-month delay.

We are following very closely this aspect of the issue in order to determine whether it would be necessary to make a change to this period.

Mr. Robert Vincent: As far as I am concerned, the period should be indeterminate. A person who has previously received benefits should not have to qualify a second time after returning to the labour market. This period could be three, four, five or even six years.

Ms. Susan Williams: In our view, it is better than nothing, sir.

Mr. Robert Vincent: The problem is that the person is required to submit a new application.

Ms. Susan Williams: No, not necessarily.

Mr. Robert Vincent: I read in this document that the automatic reinstatement allows clients whose benefits were stopped because of a self-reported return to work to have their benefits reinstated if they are unable to continue working because of a recurrence of the same or a related disability within two years of the date their benefits ceased.

If the person works for more than two years, he or she must go back to see a doctor and to see the same nurse. That could change all the data.

Ms. Susan Williams: That is true.

[*English*]

The Chair: Thank you for those. Merci.

[*Translation*]

Mr. Robert Vincent: Thank you.

[*English*]

The Chair: Ms. Dhalla.

Ms. Ruby Dhalla (Brampton—Springdale, Lib.): Thank you very much to the minister and your colleagues for coming down. I think the information is helpful.

I want to just elaborate on an issue raised by one of my colleagues across the table. As a health care provider and as someone who has worked with a number of individuals who've had disabilities, I have experienced at first hand a difficulty in signing off on forms stating that the individual is disabled, and then having that ruling overturned by medical adjudicators. Health care providers, having worked with patients, have a long-term relationship with patients. We know where they're at if they do go through a rehabilitation program, how far they progress, and what their limitations are—their limitations at home, their limitations in terms of going back to work, and what they're able and unable to do. Those questions are asked very clearly in the forms. We try to identify it as well as possible; then the individual gets a response back from the medical adjudicator saying they are not entitled to all or a portion of the benefits.

What grounds do the medical adjudicators have for overturning physicians' decisions?

Ms. Susan Williams: I should clarify. There are no partial benefits, so there wouldn't ever be a decision that you're not entitled to a portion of the benefits.

Basically, as I was suggesting to your colleague, we don't ask any of the medical professionals who provide medical information to do our job of making an adjudication decision on any of the applications. As administrators of the plan, we make those decisions ourselves. All we're asking for is medical information, which we weigh with other information we get, including personal information, possibly employment information about somebody's work history, and information on somebody's capacity to be retrained for other occupations. We weigh all this and make a decision on whether somebody meets the criteria of the legislation. Those criteria are that they have a severe and prolonged disability, according to the meaning of the legislation; it is a very particular meaning, and not necessarily the meaning you might give it in plain language. “Severe” means you are unable to do any job, not just the job you previously had; it's not severe in terms of the nature of the medical condition, which is what might be expected.

It's perhaps worth just taking a step back. If we were not to be doing our own administration, we would effectively be asking medical professionals to be doing the administration for it, which wouldn't necessarily be a sound way of managing public money. Putting it another way, we would be effectively rubber-stamping every application for Canada Pension Plan disability benefits, because it's rare that we get an application that doesn't have a supporting medical report with it.

● (1935)

Ms. Ruby Dhalla: Yes, but the concern among physicians is that they've been educated in a certain realm and have the ability to make certain decisions in regard to a patient's health care, and some of those decisions are being overturned.

Within your particular department, do you have physicians on staff with whom the adjudicators consult?

Ms. Susan Williams: We have adjudicators, but they don't consult on this. Your physicians are not making decisions on our plan and they are not making decisions on our legislation.

Ms. Ruby Dhalla: They make decisions about the patient, though.

Ms. Susan Williams: No, they're making decisions on eligibility for benefits, which is a different matter. They're making decisions on our program. When physicians are providing medical information, they're not making decisions knowing the details of our program. It's a rare doctor out there who's an expert on our program, and that's not in fact what we're asking for. Providing a device that somebody meets the requirements of our program, without that specialized training—and it's a highly complex program—is not necessarily something that's determinative.

Hon. Ken Dryden: Just to pick up on that, I would think the way in which a system would work best would be to ask people to work in their area of greatest expertise, so you are looking to that physician, that medical opinion. In an ideal circumstance it is a physician who knows that patient very well and who can offer a very good medical assessment in a way that might extend somewhat further than that.

That said, that is not the final determinant. The final determinant is to take the information in and then apply it in a work context, and not just in terms of the work context of what the person has done, but in a much broader work context, a work context the physician probably wouldn't have great knowledge of.

Ms. Ruby Dhalla: A suggestion would be to have physicians on staff. They know the medical conditions best. The people who are adjudicating know your particular system and the process. If everyone works collaboratively, you'll be helping the patient, or the individual applying for the benefit, who is the ultimate consumer of the product. Helping Canadians is paramount to all the stakeholders involved.

In regard to CAILC, you mentioned that other groups have received funding. When you provide funding to organizations that are helping a variety of disabled Canadians, do you expect these organizations to rely on the federal government as their sole funding source?

Hon. Ken Dryden: No. I'll read you a list of the nine organizations that would have received funding, based on the independent review: the Canadian Mental Health Association, the Canadian Council on Social Development, the Neil Squire Foundation, the Canadian Council on Rehabilitation and Work, the National Network for Mental Health, the Learning Disabilities Association of Canada, the Canadian Association of the Deaf, LinkUp Employment Services for Persons with Disabilities, and the Canadian Paraplegic Association.

The average amount would be around $600,000, maybe $500,000. These organizations are of a size and character that would enable them to receive money from lots of different sources.

● (1940)

Ms. Ruby Dhalla: With respect to CAILC, there has been quite a bit of concern about their funding not being renewed. To my knowledge, they have not obtained additional funding sources. They've relied on the federal government as their major funding source. I think the department has provided CAILC with help to prepare proposals to access additional funding in the future.

Hon. Ken Dryden: Yes, that's true. I can't stress enough the good and historic relationship with CAILC. The way we understand the last call for proposal was that it was an anomaly. It wasn't something we adjudicated. We had an independent panel reviewing, and they were part of a selected group of 17 that were asked to apply.

Given their past history, the work they do, and the fact that we have been working with them on a subsequent call for proposal, I'm sure they will have a very good future. The proposals have been delivered and the announcement will come quite soon.

Ms. Ruby Dhalla: Your department has to be congratulated for helping organizations like CAILC in preparing them for possible funding sources and helping many disabled Canadians.

You said that you deal with disabled Canadians over a multitude of departments. Can you tell us how your department is working in collaboration with the others to spearhead some of the initiatives you've mentioned?

Mrs. Susan Scotti: We have what we call a horizontal responsibility for disability issues across the federal government. We meet regularly with representatives of other government departments to look at opportunities that can be put forward to further our objectives and in the context of the responsibilities of other government departments.

We have a senior-level committee at the ADM level and a working-level committee at the director general level. It's through these kinds of discussions that opportunities are identified and collaborative work and efforts are furthered.

Ms. Ruby Dhalla: Could you tell us what those goals are?

Mrs. Susan Scotti: One of the goals, when we look at the transportation sector or housing policies, is to identify the opportunities that exist for ministers who are going to be bringing proposals forward to cabinet to change policies or to seek additional funding. We're always looking for ways to leverage some opportunities for persons with disabilities in the context of those proposals.

The Chair: Thank you.

Monsieur Julian, s'il vous plait.

Mr. Peter Julian (Burnaby—New Westminster, NDP): *Merci beaucoup, monsieur le président.*

Thanks very much for coming this evening. I know it's late and I appreciate your availability.We're not going to let you off the hook, though, on CAILC. I'm going to follow up on Ms. Skelton's comments.

You mentioned nine organizations, including CAD and the CMHA, the Neil Squire Foundation, CPA, and a number of others. I have two questions: one, are there any for-profit providers; and two, what are the dollar amounts for those nine organizations?

Hon. Ken Dryden: I can give you the dollar amounts. These would be the accurate dollar amounts?

Mrs. Susan Scotti: Yes, we can give you those.

Hon. Ken Dryden: In terms of the for-profits, I'd have to ask.

Mr. Peter Julian: Yes, you just read out the list. If you want to give us the numbers, that would be great.

Hon. Ken Dryden: The Canadian Mental Health Association sent $498,000...$500,000; I'll round these slightly.

Mr. Peter Julian: Sure.

Hon. Ken Dryden: The Canadian Council on Social Development, $223,000; Neil Squire, $887,000; the Canadian Council on Rehabilitation and Work, $752,000; the National Network for Mental Health, $900,000; the Learning Disabilities Association of Canada, $575,000; the Canadian Association of the Deaf, $183,000; LinkUp, $670,000; the Canadian Paraplegic Association, $300,000—and that was six months' funding—

● (1945)

Mr. Peter Julian: It was $600,000 annualized, yes.

So it's fair to say that the—

Hon. Ken Dryden: And there are no for-profits.

Mr. Peter Julian: I didn't think so. I just wanted to double check on that. It's fair to say, though, that the CAILC proposal was actually a higher dollar amount than any of these that were awarded.

Hon. Ken Dryden: Actually, no. Their proposed number...well, close. It was just under $900,000. What I should say is that five of the proposals that were accepted were proposals for an amount larger than the amount that CAILC proposed.

Mr. Peter Julian: My understanding was that the CAILC amount was $950,000.

Hon. Ken Dryden: Well, I have here $888,000. And all the other proposals...I mentioned five. Five were for a million dollars or more.

Mr. Peter Julian: Among the proposals that were accepted?

Hon. Ken Dryden: That were accepted, yes.

Mr. Peter Julian: So the dollar amount of what was actually provided was less than what was in their applications.

Hon. Ken Dryden: That's right. In all those cases it was for a lesser amount. For some of the other cases.... Well, I guess for all of the cases it was at least for a slightly smaller amount.

Mr. Peter Julian: Now for the RFP process, did your ministry provide any guidance or assistance to RFP proposal writers—organizations—who were approaching the ministry to respond to the RFP? Did your ministry provide any assistance or guidance?

Mrs. Susan Scotti: Can I ask George to answer this?

The Chair: Could you please identify yourself?

Mr. Georges Grujic (Director, Programs, Department of Social Development): My name is Georges Grujic, director of programs at ODI.

Yes, we did a number of things. We had a meeting after the first set of call for proposals, the initial ones, and then we went through the guide and applications. So we took input from the organizations and did an improvement in terms of the application and guide. We had a pre-meeting with the organizations before it went for a call for proposals, we went through the guide and the application again with them, explaining the criteria evaluation, and we went through that option.

All the organizations had an opportunity to call the Opportunities Fund to ask any questions about it. We cannot do the applications for them, but if they have any questions, we can provide that information.

So throughout the process, until the final application is put in, we do provide information or answer questions they have.

Mr. Peter Julian: Okay. So organizations that are in good faith going through the process are working closely with the ministry and getting guidance and assistance from the ministry.

Mr. Georges Grujic: If they choose to ask those questions.

Mr. Peter Julian: So if an organization does not succeed, it would be due to one of two factors. Would you not agree? It would either be because the ministry assistance was not as good as it could have been or because the dollar amounts were restrictive. So even organizations that were presenting good proposals were rejected because there weren't sufficient resources to meet the demand.

Hon. Ken Dryden: Georges can answer more fully, but my first reaction to your two criteria is that they are quite limited criteria. The third, and the most obvious, is that it didn't meet the criteria. It wasn't up to the standard of the other applications.

Mr. Peter Julian: The organization worked with the ministry, received guidance from the ministry, and put in a proposal.

Hon. Ken Dryden: Yes.

Mr. Peter Julian: Obviously, it's an organization that has a terrific track record. You've said so yourself.

Hon. Ken Dryden: That's right. All 17 presumably have that kind of a track record or they wouldn't have been asked to submit the application. They were all requested to make applications.

Mr. Peter Julian: Would it have been possible for all 17 applicants to receive funding?

Mr. Georges Grujic: The funding allowance is $5.2 million. That's all we have in terms of funding. We have a criteria, and we have to weigh the criteria. They're scored against whatever the criteria is. As you go through the funding levels, and as we negotiate to see what dollars we have to play with in terms of the $5.2 million, at the end, you have a cut-off in terms of the possibilities of putting organizations in place.

Recognizing that we pick the best in terms of the merit of the proposals, a lot depends on the organization's ability to provide a proposal that can address the criteria. We evaluate those. They're all balanced against that aspect of it on that end of it. There is a limited amount of funding. There has to be a cut-off somewhere at a certain point.

● (1950)

Mr. Peter Julian: Okay. We have great need that's identified by terrific organizations, a number of which did receive funding, though it may have been partial funding. The problem here is really a lack of resources. I would submit to you that $5.2 million is insufficient, given the need and the demand across the country for these kinds of services.

Minister, I would ask you to look at that amount and, given the basis of need, respond to the comments by Ms. Skelton and myself that this is a program that should be funded and the ministry should be taking a second look at it. If the resources are insufficient to meet the need, then particularly in the case of a record federal surplus, I think we should be looking at responding to the need, rather than setting an artificially low limit.

The second series of issues I want to deal with in the few minutes that remain is on Canada Pension Plan disability program. I believe the average benefit is $750 a month. My question is this. What is the benchmark poverty line across the country for average revenue right now for a single individual, for example? What is the poverty line index?

Ms. Susan Williams: I can't answer on the poverty line.

Mr. Peter Julian: Okay.

Mrs. Susan Scotti: You know it varies from region to region across the country.

Mr. Peter Julian: Yes, I do. There's also a benchmark nationally.

Ms. Susan Williams: You're asking about the Statistics Canada cut-offs for low income. I don't happen to have that at my fingertips.

Hon. Ken Dryden: The question is a good question, and the right question. Again, it was never intended for CPPD to be the only program that exists. A large number of people who receive CPPD also receive other assistance.

It is like the way in which we would do senior support. CPP is not intended as the only one. There are CPP, OAS, RRSPs, and various other ways of meeting the income needs of Canadians. It's the same in terms of disabilities. It isn't intended to be one program, with all of the provincial programs as well.

Mr. Peter Julian: There are about 290,000 receiving benefits across the country. Do we know how many of those 290,000 have the CPPD benefit as basically the only benefit they receive? In other words, their income level would be approximately $750 or a bit more a month.

Ms. Susan Williams: No. We know that a quarter of them also get private disability insurance.

Mr. Peter Julian: But do we know for how many this is the only benefit they would receive to live on?

Hon. Ken Dryden: It sounds like no.

Ms. Susan Williams: No.

Mr. Peter Julian: You don't know.

Ms. Susan Williams: No, we don't.

Mr. Peter Julian: The next question is following up on Monsieur Vincent's question on the number of people who are rejected each year. In your opening remarks, Minister, I believe you made reference to 60,000 applications annually. How many of those are rejected?

Hon. Ken Dryden: I think it's about 30,000. About 30,000 are added on and 30,000 are rejected.

Mr. Peter Julian: So 30,000 people are rejected. Do we have any kind of tracking on those 30,000 to know whether they have any income support at all or any alternatives?

Ms. Susan Williams: No, we don't.

The act passed by Parliament allows us to spend money on benefits and on the administration of the act. Once we've rejected a claim under the act, they cease to be our client.

Hon. Ken Dryden: The only thing I would add—and I don't know how you do this, about adding an extra minute, but there was more—

The Chair: There's a second round.

Hon. Ken Dryden: Okay.

Just in response to—

Mr. Peter Julian: The minister will be leaving.

Hon. Ken Dryden: No, no.

Mr. Peter Julian: On our schedule it says you are leaving.

Hon. Ken Dryden: The extra couple of minutes I take up now I'll add on later.

What I need to stress, and it was why I made it so clear in the opening remarks, is that this was never intended to be an all-encompassing program. The CPPD was never intended to be the only or necessarily the major program. It is what it is, and it should be judged on the basis of what it is and not on what it isn't, because there are other things that are also intended to be what they are. So just because 30,000 people out of the 60,000 are rejected doesn't mean it is inappropriate. Yes, it would be good to know what happens to those 30,000 people, but it is not necessarily inappropriate that those 30,000 are not accepted as well. CPPD is for severe and prolonged disability; it is for the inability to work. So, again, it is what it is and not just what it isn't.

● (1955)

Mr. Peter Julian: I have a supplementary to it.

The Chair: You will on the next round.

We're going to hop around a few things here.

How much funding does CAILC get this year altogether? They still get funding of some sort.

Mrs. Susan Scotti: It's $1.6 million.

The Chair: So it's not like they've been cut off.

Mrs. Susan Scotti: No.

We've been continuing to support them through what is considered a transition period to enable them to—

The Chair: So even though they didn't qualify for the program, they still got how much money?

Mrs. Susan Scotti: They got $1.6 million.

The Chair: That's hardly an unsuccessful grant application.

How many of the other—

Hon. Ken Dryden: They wouldn't have received a grant under this particular program. They would have received money—

Mrs. Susan Scotti: Through the social development partnerships program.

The Chair: Right. We're trying to get that straight, that there isn't a zero sum here.

Hon. Ken Dryden: I would just restate that we know how good the work is that they do. That has been proven over time. We have responded to the good work they do and have done over time. There's no reason to believe they're in any different position now and less capable of doing good work into the future. We expect that the next time they make an application and a submission, it will be better and it will be adjudicated more successfully for them.

The Chair: Are any of the other eight unsuccessful organizations protesting their failure to make the cut?

Hon. Ken Dryden: Probably. I don't mean to be facetious there, but I assume that every organization would. They believe in themselves; they believe in what they have submitted a proposal for. They would believe that it would be more important than anybody else's, so I'm sure they're at least very disappointed.

The Chair: How does either the political arm or the administrative arm determine...? We get correspondence from many new organizations with similar goals and parallel client lists. Is this process you do to determine that there's a service to be provided—you can't fund everybody, I would presume, because there seem to be more organizations.... The question then is, is the service being delivered by those nine organizations that the 17 had applied to do?

Hon. Ken Dryden: Judging by the list of the others, certainly, to some extent, no. I think some of the headings of the organizations—the National Association of Friendship Centres, the Canadian National Institute for the Blind, the Mood Disorders Society, the Canadian Hard of Hearing Association, the Canadian Association for Community Living, Career Edge, the African Canadian Disability Community Association—those were the other ones. In some cases, I'm sure some of what they do is being done by some other organizations, but typically, as we all know, in areas like this each group has their own most specific clientele. I would assume in this case as well.

● (2000)

The Chair: Is the federal role in funding such organizations permanent or perpetual? It seems to me some of these would be more or less provincial domains for some of the service provisions.

Mrs. Susan Scotti: In some instances they are. In fact, we are looking at whether there is a marriage between some of the provincial programs and some of what was being done for CAILC clients.

The Chair: My other committee is operations and estimates, and essentially if it's a provincial domain and the federal government has become involved somehow, obviously the process of disentanglement is rather difficult, and there's some kind of regular funding dependency. Is there a balance of provincial-territorial-federal-municipal from which people get their source funding? It seems the federal government is being more and more relied on to provide these services, which are essentially in provincial health domains.

Hon. Ken Dryden: I can only provide a general answer to that. In areas like this, anybody who works in the area or has experienced the area knows that you're really looking for every source of funding you can come up with. The need is a great disrespecter of jurisdiction. Whichever level of government, whichever source of funding might be available, is something you are looking for and looking for assistance from. If the federal government decided not to continue in this area, I would certainly suspect that the provinces and the municipalities wouldn't be able to find a way of filling that gap. I think we're all filling gaps in that particular way.

The Chair: How is the auditing and the performance measurement undertaken of these? How do we know...?

Mrs. Susan Scotti: We have regular audits of all of the projects that are funded. We have a contribution arrangement with the organizations that specifies that certain outcomes have to be achieved, so we measure the results of the proposal against those outcomes that are set out in the contractual arrangement with the Government of Canada.

The Chair: Ms. Scotti, how large is your department?

Mrs. Susan Scotti: In my particular area of responsibility I have five directorates with about 650 people.

The Chair: How do you as a leader convey a sense of urgency and set a pace to be in the true sense of the public service delivering these services to the client base? Do you feel that you as a department are racing around, or is it more tortoise or turtle?

Mrs. Susan Scotti: Some days we race a little more than others. We'd like to pride ourselves on service excellence. The client is at the centre. We do work extremely closely with our client organizations and our regional offices across the country in establishing service standards. My colleague on the service delivery side might want to talk a little about the work that is done in delivering benefits in particular. We monitor the work we do very closely, and we have an extremely close feedback loop with our client organization, so I think we know and hear from them when we're doing well and when we're not doing that well.

● (2005)

The Chair: My concern is—and someone may respond in the time remaining—is it a front-of-mind mindset your department has, of moving the disabled agenda into everybody else's front of mind? Do you see yourselves in that role as a federal department?

Hon. Ken Dryden: Yes, I think the biggest challenge in the area of disability is to try to move it to front of mind. I think in all the other ways.... You can add programs, you can improve programs, you can do lots of things in those ways, but the bigger breakthroughs come through that public front-of-mindedness. That's when things really begin to change, and that becomes part of the challenge and the task. That's part of what I meant in my opening remarks. Again, as you go through doing what you're doing in your subcommittee, I hope you think about that.

Every area needs a trigger, every so often, to generate the push. I think the Charter of Rights offered it 20 years ago. I think it made more difference than anything else, probably, in the area of disabilities. Technologies have helped, and the rest of it, but what's the next one? What is the next that gives that kind of push? I think that's what we're searching for.

That's part of the reason I'm doing these round tables around the country—to hear people tell their stories, tell their very personal stories. Then, of course, on a day like that you hear 50 different things people think are important and critical, but okay, let's work through the 50. Chances are there are two or three that, if addressed, will make some significant difference; if we do the other 47, they won't really matter a heck of a lot. I think that's our task.

The Chair: Thank you.

We'll start on the second round.

Now, your time schedule, Mr. Minister—

Hon. Ken Dryden: I did promise Mr. Julian, because I stole a bit from his time. Is that all right, if...?

The Chair: Well, Mr. Julian is still at twelve and a half minutes compared to some other people, so I'll let him go first, if that's all right with the other members.

Go ahead; take your five minutes now.

Mr. Peter Julian: And the minister will be leaving afterwards?

Mrs. Carol Skelton: That's quite a bit of time.

Mr. Peter Julian: I appreciate the opportunity. Maybe we could just do a quick two-minute round for each of us?

The Chair: Sure.

Mr. Peter Julian: If you're willing to stay for another 10 minutes, my two minutes—or two cents' worth—is this. If we're seeing, with disability supports, that half the people who apply are falling off the map, I think it's clear there's a problem.

In my community, homelessness has tripled, and it's estimated 50% of those people who are homeless in the lower mainland of British Columbia are actually people with disabilities.

The other issue is food banks. We've seen an increase in food banks across the country. Again, in my area we've seen an increase as well, and the estimation is that 40% of those who rely on food banks to make it to the end of the month are people with disabilities.

I think we're starting to see where the smoking gun is. If 30,000 people a year are being rejected from CPP disability benefits, and if there is no tracking mechanism to show where those people are going, we have a problem. I would urge you, Minister, to look into the consequences of the current CPP disability program—first for those who have the benefits but are earning far below the poverty line, and second for the 50% of Canadians who are rejected every year. Where are they going? Are they out on the street? We don't know, and I think that's a problem, so I would urge you to look into that.

Hon. Ken Dryden: Clearly a question we don't have an answer for is where those 30,000 go.

Go ahead, Ms. Williams.

● (2010)

Ms. Susan Williams: Some of those people are able to go back to work. There may be a number of reasons why they don't meet the criteria. Some of them return to work. Some of them have other family sources of income. Some have private sources of income. Some of them can be on social assistance with a number of other sources of income.

Mr. Peter Julian: But we don't know for sure.

Ms. Susan Williams: No.

Mr. Peter Julian: I could say they're all in a food bank lineup and they're all homeless. You could say that they all have another source of income and they're okay. The reality is, we don't know.

Ms. Susan Williams: I don't think they're okay but—

Mr. Peter Julian: But we're both speculating. Neither of us know.

Hon. Ken Dryden: In the conversations we have about poverty at these OECD meetings, the approach of every one of those countries was an employment approach. It was saying that most of the people, by far, who are under poverty lines in all of these countries are people who live on one-family incomes.

So it's one-family incomes by virtue of a single-parent family. Disability is often a factor, whether it is a younger person, and one of the parents is a full-time caregiver, or an adult person who may not be able to work and who may have a spouse who's working. But clearly that was what was so much the focus in these sessions, and so much of the strategies had to do with employment. Clearly, that is something we need to push at the extremes of it.

How well can we do in terms of employment of persons with disabilities in that way? A number of the people you're talking about—at the food banks, the homeless, and those who are below the poverty line.... I think at least one of the keys, and that would be with all of these OECD countries, is the single family income as opposed to the double family income.

The Chair: Thank you very much.

Do you want to start again, Ms. Skelton?

Mrs. Carol Skelton: Well, Mr. Minister, as the mother of a disabled son who couldn't get his CPPD, who is still under a doctor's care, who was told he wasn't eligible, and I see it every time I talk to him, I think your department needs to get its priorities straight. When a doctor says that someone who is disabled, is disabled, they should be able to get support from this government.

I have a real problem when your deputy minister says you have 30,000 people rejected every year and hardly any of those don't have a doctor's certificate saying they are disabled. I have a problem with that, when we have adjudicators saying these people aren't disabled.

I know my son is disabled. Usually when these people come in and apply, they're very ill. They have families to look after and everything. He was not able to go to that appeal board. He just couldn't do it. Where is the fairness in this? You say you want to move ahead with this whole issue of disabilities. If we have people on the street—in my own city of Saskatoon, disabled people are on the streets. They're at the food bank. We see it all the time. I just have a problem with it.

One thing I want to ask, though, sir, before I leave, because we're talking about the precinct here, the House of Commons, is this. Is your office fully accessible to the disabled?

Hon. Ken Dryden: I don't know the answer to that. I haven't had somebody with a disability test out my office to tell me that it isn't.

Mrs. Carol Skelton: Could I get Mr. Fletcher to come to your office and see if it's suitable for him? Would you mind doing that?

● (2015)

Hon. Ken Dryden: No. I'd like to know.

Mrs. Carol Skelton: Okay. Is your constituency office accessible?

Hon. Ken Dryden: I think it isn't at the moment because it's undergoing renovations. I know it did have an elevator. It's one of those three-storey walk-ups.

Mrs. Carol Skelton: Will you check for us, please?

Hon. Ken Dryden: Yes, I will check.

Mrs. Carol Skelton: Thank you very much, sir.

The Chair: Thank you.

We'll welcome representatives from the Forum for Young Canadians. They are here with MPs from their ridings, who are at the function next door. Welcome.

Monsieur Vincent, s'il vous plaît.

[*Translation*]

Mr. Robert Vincent: Thank you.

As my colleagues, I find absurd that 30,000 people are rejected. But there is something that is even more absurd. You know that $750 a month represent $9,000 a year. If anybody knows about the poverty line, I can tell you that to be forced to live with $9,000 a year is to be terribly poor. That is not a lot of money. You can certainly find in the street some people who receive $750.

Some other solutions will have to be found and some plans will have to be made. It is all very good for us to be here today discussing all of this, but if our arguments are not being heard, nothing will be done. I do not believe that a person with a disability who is not able to work can live decently with $750 a month.

We agree on one point. A medical doctor states that a person is disabled and cannot hold a job. When that person comes to you afterward, you tell him that there are lots of jobs that he could hold and you refuse him the benefits. Then we have a problem. What do we do with this person? If his physician tells him that he is not able to work, and if he then goes to your department and is being told that his application is rejected, what will that person do? What can she do with her life? She will receive benefits from her province, or else they will get rid of her in another way. If she is eligible, she will receive $750.

You told us, Minister, that perhaps some of these people have disability insurance. However, only a small fraction of people can afford to have a separate insurance. What will all the people who do not have such an insurance do? What can we do for people who are receiving only $750?

Also, is there a predetermined total budget in your department for Canada Pension Plan Disability Benefits? Is there an amount that is already established for the current year, or is this voted every year?

[*English*]

Mrs. Susan Scotti: There's no bottom line. There's no limit.

[*Translation*]

There is no annual limit. It depends on the number of persons who are

[*English*]

eligible for the benefit.

[*Translation*]

Mr. Robert Vincent: For you, is it normal that these people receive $750 a month?

[*English*]

The Chair: I'm sorry, Monsieur Vincent, your first question was well over two minutes.

[*Translation*]

Mr. Robert Vincent: I asked three questions and I have had one answer. I would like to have an answer to the other questions.

[*English*]

Hon. Ken Dryden: There's one question that I think we all need to ask ourselves. This is an area of provincial and federal jurisdiction. When we look across the country, I'm not sure there are any jurisdictions that are models for this.

In your province of Saskatchewan, everybody is facing the same challenges. I think it's something that requires some thinking about. Again, listening to the OECD countries, everybody is struggling with the same thing. Nobody is doing as well as anyone thinks they should. Why aren't we doing better? Why aren't we doing better in B. C.?

Mr. Peter Julian: I can tell you that one.

Hon. Ken Dryden: You can. But again, when governments change, in fairness...there have been lots of different governments across the country in different provinces. The end results haven't been fantastically different with those changes in government. It's easy for us to find answers in that, but I think the answer is far more significant than that. That's what we need to be focusing on.

That's why I go back to the basic point that we still haven't brought it to the front of mind enough across the country. At the front of mind, that starts to get the different jurisdictions doing a better job, doing a better job in Saskatchewan. Why can't the Government of Saskatchewan do better?

● (2020)

Mrs. Carol Skelton: My son doesn't live in Saskatchewan.

Hon. Ken Dryden: The question is the same. Wherever he lives, why isn't he doing better in that jurisdiction?

Mrs. Carol Skelton: Well, he's—

The Chair: Order.

Ms. Dhalla, please.

Ms. Ruby Dhalla: We have an effective chair.

Again, I want to add my comments to those of my colleagues. In regard to adjudicating, every individual is doing what he or she knows best. The physicians are diagnosing their individual patients with severe and prolonged disabilities, if, in their medical judgment, they have that. I agree with you, in a sense, that it's not the physician's responsibility to be an administrator of the program, but I do think, as we look towards new models, Minister, that there must be much more of a collaborative effort.

When you look on the ground for the individual who is disabled and has been denied, this should not be the only source, but at times it may be. Crucial decisions are being made in regard to the lives and livelihoods of these individuals. I think working in more of a collaborative effort, somehow, is going to benefit all the stakeholders involved.

I just want to follow up with Susan. She was going to elaborate on some of the initiatives—to end off on a positive note—that are being undertaken on some of the goals in collaboration with the other departments. Would you just let us know? We have certain benchmarks and targets that committees establish—

Mrs. Susan Scotti: We don't have benchmarks and targets. We're working as part of a longer-term strategy to look at what those benchmarks and targets might be.

We can give you some identification of some of the specific issues the working group is looking at right now, in writing.

Ms. Ruby Dhalla: Yes, that would be helpful.

Thank you.

The Chair: On the development of Service Canada and one-stop shopping for service for Canadians, how involved has the department been in the development and in ensuring we will do this process right from the beginning?

Ms. Donna Achimov (Acting Assistant Deputy Minister, Service Delivery, Department of Social Development): It's my pleasure to answer that question, as one of the senior officials responsible for looking at the service delivery aspects in Service Canada.

You asked about top of mind. I have to assure you, most sincerely and passionately, that when we looked at our priorities—we have worked extremely closely with Ms. Scotti and the department—the disabled community is number one on our list. We are working very horizontally, and we are looking at concrete actions with our colleague departments, to speak very specifically.

In terms of listening to what Canadians are saying, where we... because of very legitimate reasons, we pass them off to other departments. I can give you a couple of examples. We'll be looking at the integrated disability adjudication service offering, which deals very closely with Social Development Canada and the Canada Revenue Agency. Those disabled clients who apply for CPP disability will, in the future, no longer need to apply separately with CRA for the disability tax credit. Our service delivery staff are being taught how to take the time, how to probe, how to make sure people are absolutely walked through the process.

We're committed. Minister Dryden has challenged us on more than one occasion in terms of the importance of not letting someone slip through the cracks, of not taking the silo mentality of saying, we're sorry, this is no longer our jurisdiction, but actually to probe and to be very proactive. We're working with other jurisdictions as well to look at the commonalities in other provinces. Seniors and persons with disabilities are absolutely top of mind when we start looking at joining up other programs and services.

● (2025)

The Chair: At government operations and estimates yesterday we were presented with a graphic that showed essentially an incomprehensible web of no, go there, go there, go there—and then reversing.

Ms. Donna Achimov: That's right.

The Chair: I just wanted to get it on the record for this committee that we'll be watching.

Ms. Donna Achimov: If I may conclude, I'll just say it took us a great deal of time to map out that incomprehensible web so we could follow those threads. It absolutely took us time to be able to figure out where people are left off, where there is that pass-off, where there isn't that connectivity. It's our starting point in terms of being able to disentangle that web and being able to work collaboratively in terms of ensuring seniors and persons with disabilities are taken care of. We look forward to reporting back on that.

The Chair: Thank you very much.

We will continue this meeting. I'll need about seven minutes because I want to spend some time with my student. Ms. Skelton will chair.

Mrs. Carol Skelton: Oh, really?

The Chair: We have some other small things, because there are some other issues with some of the other delegations. I'll be back shortly.

Thank you very much for your presentations.

The Vice-Chair (Mrs. Carol Skelton): Ladies and gentlemen, I would like to get started, because we don't have much time left.

I would like to start again with Mr. Vincent.

[*Translation*]

Mr. Robert Vincent: Are those questions on the same subject?

[*English*]

The Vice-Chair (Mrs. Carol Skelton): Oh, yes, most definitely, sir.

Ten minutes.

[*Translation*]

Mr. Robert Vincent: A little earlier, the minister told us that when a person with a disability can no longer work, his family can take care of him. We are then talking about informal caregivers. To start with, these people are not being paid. If I am not mistaken, they are only entitled to a $1,500 tax credit. How will a person who was working and who can no longer work be able to earn a living?

I come back to the same question because I would like to go to the bottom of it and I would like us to do more for these people. If a person becomes disabled, receives $750 a month and if his or her spouse or another person must stay at home to help, what will this person do? How could this person earn a living? If she needs someone to take care of her at home, what will she pay that person with? With this $750 a month allowance?

Ms. Susan Williams: Perhaps it should be underlined that the amount received as a beneficiary of disability benefits is linked to the amount paid to the Canada Pension Plan. It is not the amount that would be necessary to cover the cost of living. These are two different things. It's like an insurance premium: you pay a premium to the Canada Pension Plan and you receive an amount that is proportional to what has been paid. A person who has paid for 30 years would probably receive the maximum, while someone who has paid for only four or five years would probably receive the basic amount plus a very small amount, which would obviously not be adequate. As the minister said earlier, we are not trying to determine an amount that would meet the needs of a disabled person.

I know that this does not fully answers your question.

● (2030)

Mr. Robert Vincent: Indeed, it does not answer it.

Ms. Susan Williams: You are asking the disability benefits program to give something that it is not able to give. That is not what the federal and provincial governments have created.

Mr. Robert Vincent: I understand your point of view. However, how much would this person who has worked for 30 years, as you said, and who overnight suffers from a neurodegenerative disease and who is no longer able to work receive? That person will receive $750.

Ms. Susan Williams: That person might be eligible to tax credit.

Mr. Robert Vincent: Do you know the amount of the tax credit? It is $1,500!

What can you do with such an amount? Someone must take care of that disabled person and must be paid to do it. Where will the money come from? Would you be able to pay the rent, the food, the clothes and miscellaneous expenses with $750 a month?

Moreover, 30,000 persons are losing their benefits. It is quite possible that several individuals among these 30,000 people are in need of them. What do these people live with? Where are they? Do they exist?

I believe that you have no answer to our questions. Your program has rigid and specific standards and does not extend further.

When we examine the situation of these persons with disabilities, you have no answer, you have nothing to offer. They are disabled, they are being left to care for themselves, they do not have any value for society. We give them small amounts so that they are able to eat and if they don't have enough money, they will have to go to food banks or anywhere else.

These people are abandoned. Do you realize that?

Ms. Susan Williams: No, these people can turn to the provinces and apply for welfare benefits.

Mr. Robert Vincent: Yes, but welfare benefits are reduced by the amount that you are allocating.

Ms. Susan Williams: Yes, but—

Mr. Robert Vincent: These persons have no way out.

[*English*]

Mrs. Susan Scotti: I think you have to look at the fact that, as the minister indicated, the CPP disability program is one element of a broader program of supports and services for persons—

[*Translation*]

Mr. Robert Vincent: There are no other elements, Madam. If there are, name them for me.

Mrs. Susan Scotti: There is one.

Mr. Robert Vincent: Which one is that?

Mrs. Susan Scotti: There are fiscal measures for

[*English*]

caregivers that were in the recent budget. If a person is supporting a child or another person with a disability, there are certain tax benefits that are available.

It's maybe true the amounts are not enough and the system does not work well enough together. That is a challenge; I acknowledge that it is a huge challenge. It's one of several challenges that need a very concerted, collaborative effort between the federal and provincial governments. That doesn't reassure you in terms of answers, but it's an acknowledged challenge, one we are working on.

[*Translation*]

Mr. Robert Vincent: Do I still have some time? I imagine there must be at least two minutes left.

[*English*]

The Chair: Did you start at six minutes?

[*Translation*]

Mr. Robert Vincent: How much time did we have? Five minutes?

Mr. Peter Julian: You all had five minutes.

Mr. Robert Vincent: Okay.

[*English*]

The Chair: Your time is over, Monsieur Vincent.

[*Translation*]

Mr. Robert Vincent: Ah, I have used up all the time that was allocated to me.

The Chair: Who is next?

Mr. Peter Julian: It should be Ms. Dhalla.

[*English*]

Ms. Ruby Dhalla: I wanted to follow up with Donna. You had mentioned, in regard to service delivery, some of the initiatives you're undertaking. If you could, please elaborate for us. I think we were cut off because we were near the end of the presentation earlier.

Ms. Donna Achimov: Thank you very much.

Yes, I explained that we were beginning to take a look at what some of the priorities are and how we group some of the services. I talked a little bit about what we're doing with CRA, which is certainly a natural partner in terms of some of the eligibility in the applications. Again, we're working very closely—absolutely hand in glove—to take the feedback that we are getting on the phones, in person, and in the mail to work with our policy and our program counterparts.

We're looking at opportunities to simplify application forms, to assist people who don't have the ability on their own to complete the forms. We're looking to do that in ways that either support individuals directly or through third-party associations that are supporting these individuals. Hand in glove, we're working on outreach opportunities, and we realize we're not expecting people to come into our offices. That's part of the challenge.

On Ms. Skelton's comment in terms of inabilities, in terms of very personal circumstances, we are looking cooperatively at working and going into communities and into residences and into organizations where we can provide that proactive outreach, and we're looking at ways to do that across all of our channels.

Although the Internet is not necessarily the only activity or the only venue that is channelled or targeted to the disabled community, we're finding that we're able to put a lot of information on for caregivers and third-party groups. We're taking a great deal of effort—not a single website goes on the Canada site that is not accessible to persons with disabilities. All of the material going up on the Canada site is available in alternate format. Accenture, a world-class e-government solutions organization, has just rated the Canada site and the Government of Canada as number one in the world for taking care of those particular issues. It's not just putting applications online. It's looking at making sure the support is there on the phone, in other channels, and in alternate formats.

With our forms, our publications, what we are trying to do in Service Canada is to gather in one place the logical component and the bundling of information, so when one individual calls or asks for a piece of information, we automatically, proactively offer the basket of other activities and other information so that somebody doesn't have to leave us and go elsewhere. We're trying to do that in as many ways as possible in alternate formats and to put those bundles together in ways that they make sense.

● (2035)

Ms. Ruby Dhalla: Thank you.

[*Translation*]

The Chair: Is that all?

Mr. Julian, please.

Mr. Peter Julian: Thank you.

I agree with Mr. Vincent. I will not repeat exactly what he has said, but I do want to say that $9,000 a year is far from enough. It is important to start doing a follow-up of these people who have applied for these benefits, in order to know exactly what their situation is.

We have the feeling that some questions are being asked, but no follow-up is ever made. Consequently, we do not have the statistics or the data required to determine exactly what is the situation of these people. Not having the answers that we need makes things difficult for us. We are asking you to do some follow-up so that we may have answers in a few months.

[*English*]

I did want to come back to the issue of vocational rehabilitation and to know what the budget envelope is for vocational rehabilitation programs. What is that budget envelope composed of? What types of programs?

Minister Dryden referred to the voc rehab programs.

Ms. Susan Williams: There's $5.2 million for vocational rehabilitation and return-to-work plan services.

Mr. Peter Julian: The voc rehab programs are entirely encompassed by the RFPs that we were discussing?

Ms. Susan Williams: It's a totally separate thing.

Mr. Peter Julian: Okay. This is another $5.2 million.

Ms. Susan Williams: Yes, it's nothing to do with that. That's $5.2 million out of the Canada Pension Plan disability program.

I did want to go back and perhaps add one point to the discussion of the adequacy of the amounts of the benefits of the Canada Pension Plan and underline that of course this is entirely funded by employer-employee contributions. Changing the benefit levels would of course have an impact on the contribution rates, and any changes to that would of course require the consent of not just the federal government but of two-thirds of the provinces with two-thirds of the population. It would have a direct impact on the amount that is paid in contributions to the Canada Pension Plan. This is one of the reasons there's been a reluctance in the past couple of rounds—the triannual review process—to make any changes to benefit levels, and there were some recommended indeed in the report of your predecessor committee.

● (2040)

Mr. Peter Julian: Ms. Williams, you'd agree with me that if we did the statistical follow-up and we did find out that of people who were on CPPD, the majority of them are living under the poverty line and are having to go to food banks to make ends meet, that would provide the political impetus to perhaps make those changes.

The problem we have is that we're dealing with smoke. We don't know what the results are of the fact that the benefit levels are so low and that the rejection level is so high. We don't know. There's no statistical analysis of what that means. That's what I think we're urging around this committee, to get that information so that we know what the actual impacts are.

If it's true that everyone is doing fine, which I doubt enormously, there probably wouldn't be a political will to make changes. If it's true that a lot of people are having a lot of difficulties, which I think would be the result of finding that information out, I think there would be more political will to make those changes.

Ms. Susan Williams: I have a couple of points on that. One is that it's not a simple matter to track 30,000 people a year, but we did indeed try to do some sort of study of people who had been refused in the past, to find out what had happened. We were in fact refused permission to track these people and their income by the Privacy Commissioner, because they were not our clients and it was an invasion of privacy to try to get tax information, which was the easy way of trying to find out what was happening to them to see if in fact there were these sorts of problems.

So it's not a simple matter to find out what has happened to people after you've refused them. We no longer have any legal authority to possess or retain any information past the point where we've made an administrative decision on their file. When I was saying that we don't have a responsibility for them or have a right to have anything on them, it's not a trivial point.

Mr. Peter Julian: When did the Privacy Commissioner indicate that? In what year?

Ms. Susan Williams: This was a couple of years ago. We can get you the information. We had wanted to do a research study because we were concerned about what happens to these people. Do they go back to work? What indeed are the outcomes? We wanted to do some sort of study, and we were in fact turned down.

So it's not necessarily an easy matter to get this information. We'll look into this, but—

Mr. Peter Julian: The other side of this are people who are actually clients of CPPD, who are recipients of CPPD.

Ms. Susan Williams: But we have the data on the ones who are recipients. That's not a problem.

Mr. Peter Julian: No, but I did ask how many of them are living solely from CPPD benefits.

Ms. Susan Williams: But there, you see, this is not information we have on their files. We would have to go to them and ask them, what other sources of income do you have? This would be information that we wouldn't necessarily have a right to have, and we don't have a right to go and match their tax returns and get this information off their tax return.

Mr. Peter Julian: But you do know that one quarter of them receive private insurance coverage.

Ms. Susan Williams: We know that information at the time of their application to us, which they fill out as part of their application, a box, the ticks, that shows they have a private insurance policy. So we have that information at the time we process their application.

We have a certain amount of information on file, but once they're in pay, we don't then have information on other sources of income, which indeed can change over time—family income, and so on.

Mr. Peter Julian: But when they make the initial application, you would know if they had other sources of income even at that time.

Ms. Susan Williams: Up to a certain point, but we don't do a comprehensive family income...and we don't know the level of it. We don't probe extensively into the income level, because the way the programs works, if you've contributed, if you meet the eligibility criteria, you're entitled. It's not a needs-based or a means-based program.

You could have an income from clipping bonds or from lottery wins of millions and it's irrelevant. Your entitlement is based on meeting the eligibility criteria. It's not like social assistance, where you have to prove need or you have to prove you don't have assets. All that really doesn't matter. So we don't collect it. We don't need it, and it's not appropriate for us to have it. That's why we don't have it.

As sort of a principle of administration, we don't collect and keep information that we don't need to have on people. So it's not a simple matter for us to go and get it on thousands of people. When we try to do research, we have to figure out what we need for the research. We have get the approval of the Privacy Commissioner. We have to figure out how to get the information.

Often the simplest way is to try to do a match through the tax system, but there are great safeguards erected around matching tax data, legitimately. If we can provide a legitimate reason, then we do this. We try to mask personal information so that we can get the research results without knowing the information that we don't need to know about people. Then we can get, say, individual income, but that doesn't necessarily give us the family income picture. So there's a lot that you don't necessarily know, and there would be a lot you wouldn't know about, say, employment outcomes, and so on and so forth.

It's complicated. I'm not trying to be uncooperative and suggest that we aren't going to try to find out the information, but it's not necessarily all that simple.

● (2045)

Mr. Peter Julian: But you have—

The Chair: I'm going to give you a couple of minutes of mine, so why don't you take another minute and a half just to do that.

Mr. Peter Julian: Thank you, Mr. Chair, that's very kind.

This is a very interesting discussion.

Ms. Susan Williams: I was going to say if you want us to come and brief you on the kinds of research things we look at and the sorts of things we can and can't do, we're happy to do that.

Mr. Peter Julian: Well, I think it would be interesting for the committee to know what applications you may have made in the past to the Privacy Commissioner, to know more about that, and what types of income or employment information comes out of the application process.

So those are two long—

Ms. Susan Williams: It's relatively limited, but some.

The Chair: Just continuing on with this, first of all, we will accept your offer to return, because clearly this is a matter of pretty important substance for us.

Off the top, if we have 60,000 applicants a year and 30,000 for one reason or another are not accepted—the minister used the word “rejected”—are we to assume there is still some kind of base measurement of validity for acceptance?

Obviously, if 30,000 people are being added to the program every year, to that extent it is working and the process is following its proper course.

Ms. Susan Williams: I'm not sure I entirely understand the question.

The Chair: Well, if there are 60,000 applicants and 30,000 are accepted, then....

Ms. Susan Williams: Yes, that's certainly working for—

The Chair: So we're now focusing on the reason that 30,000 people are denied.

Is it your opinion that they are all quite eligible, and we're just arbitrarily drawing a line and saying they don't qualify?

Ms. Susan Williams: No.

The Chair: There must be some other factors—potential fraud, or that they may be healthier than they claim to be, something like that?

Ms. Susan Williams: It's very often around the interplay of the contributions and when the person became disabled. To be entitled to the benefits you have to have made contributions in four out of the last six years. The rules become way more complicated than that when you get into them, but to simplify it, it's four out of the last six years.

Under the late applicancy provision you can effectively have your application backdated, looked at as if it had been submitted at an earlier point in time. So if you submit an application and you don't meet the criteria right now, we'll look at it and see when you last had contributions in four of the last six years. But then you have to prove you were disabled at the point in time when you last met the contributory eligibility criteria and that you've met them continuously since then.

Many, many applicants are disabled now, they definitely have a severe and prolonged disability now, but they last met the contributory eligibility criteria at some point in the past when they didn't meet the medical eligibility criteria. That's very often what happens. We have doctors who passionately tell us that their clients have severe and prolonged disability, and they do now, but their minimum qualifying period, as we call the date in which they last met the contributory eligibility criteria, might have been, say, December 1, 1998, so they cannot be given a benefit because they don't meet the criteria of the program.

That is more common than you know. That's one of the most common reasons that people get turned down for the benefit. That's basically a function of the way the program is designed.

The Chair: So is there a set period of time that you can apply again?

Ms. Susan Williams: No. And we have people who apply over and over again. But basically, in the absence of new facts, which have a very specific legal definition, the result is the same. We do have people who apply over and over again and go through the appeal process over and over again with the same outcome. It's their right. It imposes quite a lot of inefficiencies in the administrative system, but it's people's right.

● (2050)

The Chair: Okay.

It seems the nature of the questioning we have tonight is that we are looking toward a means of either simplifying that or making it more expansive to include more people.

What would that step entail?

Ms. Susan Williams: That would require Parliament and the provinces changing the program, and it would—

The Chair: Provincial changes, did you say?

Ms. Susan Williams: The federal government and the provinces would have to agree to change the program.

The Chair: Okay, that's the agreement process.

Ms. Susan Williams: And if you expanded the program to bring in more people, that would undoubtedly increase the costs, so you would likely be looking at paying more than the current contribution rate.

The Chair: I'll let you have my last 30 seconds for your informational question, Ms. Ruby Dhalla.

Ms. Ruby Dhalla: In regard to medical adjudicators overturning judgments, I know there are a number of other criteria that are looked at. Could you provide our committee with some of the information as to what those grounds are?

Ms. Susan Williams: Okay. Instead of using “grounds”, I'd like to rephrase it as this. What do our adjudicators look at in reaching their decisions on eligibility? I'd be happy to provide that.

The Chair: Thank you.

Did you have one last supplemental question?

Mrs. Carol Skelton: Yes, I do. I didn't get a chance. I was taking over in the chair.

The Chair: I see. Okay. Then we'll give you the full five minutes and 14 seconds.

Mr. Robert Vincent: There's an advantage to being vice-chair.

Mrs. Carol Skelton: Yes, you can see it's a problem.

Ms. Williams, could you tell me how many people you have in your department?

Ms. Susan Williams: In my directorate I have about 132 or 133.

Mrs. Carol Skelton: So you're basically rejecting 600 people a week, if there are 30,000 rejected every year. So there are about 600 application forms that go through those people?

Ms. Susan Williams: No, I don't do any processing in my area. It's done in the regions. Donna would be able to—

Mrs. Carol Skelton: Mr. MacLeod, I was going to ask you what you did. We never—

Mr. Ross MacLeod (Director General, Income Security Programs, Department of Social Development): Sure. Well, I've mostly been quiet since I've been here.

Mrs. Carol Skelton: You're very lucky, because we would have been asking you all the questions.

How many people do you have in your department?

Mr. Ross MacLeod: I'm responsible for all of the processing of the Canada Pension Plan and the old age security program, and in total that's over 2,000 people.

On the number of people who work on CPP disability for me, there are 300 staff in regional offices and about 30 in Ottawa who work on the actual adjudication process that's done. And the throughput of applications you have described would be reviewed by that number of people over a year.

Mrs. Carol Skelton: If we take the numbers that we have per week, it's about 600 people per week who are being rejected from the disability program, and you have 30 people doing that.

Mr. Ross MacLeod: No. We have 300 staff working in regional offices around the country. We have another 30 or so in Ottawa who mostly work on follow-up on files, and so on. Occasionally they do work on initial applications. So the total workforce would be about 330.

Mrs. Carol Skelton: So if we averaged it out, it would be about two files per person in the regional offices then.

Mr. Ross MacLeod: Yes.

Mrs. Carol Skelton: How many regional offices are there in Canada?

Mr. Ross MacLeod: We have 11 offices around the country. We have nine that process CPP disability.

Mrs. Carol Skelton: Nine? And you have offices all over Canada, or just nine in Canada?

Mr. Ross MacLeod: We have 11 in total and we have nine that process CPP disability.

Mrs. Carol Skelton: Where are those processing offices?

Mr. Ross MacLeod: There's one in B.C., in Victoria; there's one in Edmonton, Alberta; the one in Winnipeg does Saskatchewan and Manitoba. We have three in Ontario—Chatham, Timmins, and Scarborough. We don't have one in Quebec because the Régie des rentes du Québec takes care of their pension plan. We have one in Fredericton, New Brunswick. We have a processing centre in Charlottetown, P.E.I., but it doesn't do CPP disability. We have one in Halifax, Nova Scotia, and one in St. John's, Newfoundland.

Mrs. Carol Skelton: I look at my own province, the province of Manitoba. How do people who are disabled get to this office for their appeal? Does someone from your office go to these people?

● (2055)

Mr. Ross MacLeod: There are a couple of stages to this. One is the initial application, which is typically sent in by mail, and that's processed. And then the evidence that comes in with it is processed by mail, and frequently there's contact with the clients, and so on, to validate all that.

If there is an appeal process, that is run on Susan's side, which I'd ask her to....

Mrs. Carol Skelton: Would you explain that?

Ms. Susan Williams: If you're talking about the arm's-length appeal, the Office of the Commissioner of Review Tribunals and the Pension Appeals Board have hearings all over the country—especially the OCRT—and in a large number of locations. And they'll basically have them in local communities and in accessible centres. They'll make arrangements. They'll pay for transportation and they'll arrange them at a time convenient to people.

Mrs. Carol Skelton: I'd like to know how much it costs the Government of Canada, or your department, every year to have these appeals all over the country. How much is spent on this every year, please?

Mrs. Susan Scotti: You might want to invite the Office of the Commissioner of Review Tribunals and the Pension Appeals Board to come before the committee to talk to you about the appeals system, because they do operate at arm's length from us.

Ms. Susan Williams: They should be answering all these questions.

Mrs. Susan Scotti: They operate at arm's length. For administrative purposes, they're attached to the department and receive their funding from the department, but they operate the appeals system independently of the department.

Mrs. Carol Skelton: Cool, and you have no say over their budget?

Mrs. Susan Scotti: Our comptroller—

Mrs. Carol Skelton: The comptroller has control of them?

Mrs. Susan Scotti: Well, he doesn't control them but works with them in establishing an appropriate budgetary level for the work they do.

Mrs. Carol Skelton: Oh, interesting.

Thank you, Mr. Chair.

The Chair: It was a very good suggestion.

Thank you very much. It was a very, very productive session this evening. We appreciate that.

We have a small item to discuss.

Mrs. Carol Skelton: I'll make a motion that we have the Mexican delegation attend.

The Chair: The Mexican delegation would like to come back. They were cancelled before, and apparently they now have permission to come. We have to invite them again.

Mr. Peter Julian: When is that?

The Chair: That's for May 11.

Mr. Peter Julian: May 11 is a Friday.

The Chair: No, it's a Wednesday. We have someone already for that day, but we could have them for a half session, or an hour as opposed to a full two hours.

Mrs. Carol Skelton: I was just going to say that the aboriginal affairs committee met with the New Zealand delegation yesterday morning. Could we have breakfast with them, or something like that? Of course, that's for Wednesday.

The Chair: We have the hour available, because the Senate representative hasn't responded, so it will fit nicely.

Mrs. Carol Skelton: Okay.

We've got some important witnesses we need to hear.

Mr. Peter Julian: If we're assuming that potentially we've only got three sessions left, I think May 11 would be a good day to have them.

The Chair: No matter what the speculation is, we assume we'll be conducting business.

Mr. Peter Julian: I would support that.

The Chair: We'll try to find these other people and get them as soon as we can.

Thank you. The meeting is adjourned.

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