Ombudsman Saskatchewan Annual Report 2017

Ombudsman Saskatchewan

Promoting Fairness

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Ombudsman Saskatchewan
Promoting Fairness

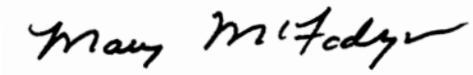
April 2018

The Honourable Mark Docherty
Speaker of the Legislative Assembly
Province of Saskatchewan
Room 129, Legislative Building
2405 Legislative Drive
Regina, Saskatchewan S4S 0B3

Dear Mr. Speaker:

In accordance with subsection 38(1) of *The Ombudsman Act, 2012*, it is my duty and privilege to submit to you the forty-fifth annual report of Ombudsman Saskatchewan for the year 2017.

Respectfully submitted,



Mary McFadyen Q.C.
OMBUDSMAN

Vision, Mission, Values and Goals

Vision

Our vision is that government is always accountable, acts with integrity, and treats people fairly.

Mission

Our mission is to promote and protect fairness and integrity in the design and delivery of government services.

Values

We will demonstrate in our work and workplace:

- fairness, integrity and accountability
- independence and impartiality
- confidentiality
- respect
- competence and consistency

Goals

Our goals are to:

- Provide effective, timely and appropriate service.
- Assess and respond to issues from a system-wide perspective.
- Undertake work that is important to the people of Saskatchewan.
- Demonstrate value to the people of Saskatchewan by making recommendations that are evidence-based, relevant and achievable.
- Be experts on fairness and integrity.
- Educate the public and public servants about fairness and integrity.
- Have a safe, healthy, respectful and supportive work environment.

Ombudsman's Message

I am pleased to present Ombudsman Saskatchewan's 2017 Annual Report, highlighting our progress and activities during the year.

Mary McFadyen, Q.C.
Saskatchewan Ombudsman

Ombudsman Saskatchewan's role is to receive complaints from the public about the way they have been treated by provincial and municipal government entities. In simple terms, when the Legislative Assembly passes legislation, it is to be put into effect or administered by provincial ministries and agencies, and by local governments. Our mandate is to ensure that provincial and municipal governments and agencies are carrying out their mandates fairly and reasonably. *The Ombudsman Act, 2012* gives us wide powers of investigation. It confirms our independence and impartiality – qualities that are necessary for us to effectively carry out our mandate.

We received 4,288 complaints in 2017, including 3,298 within our jurisdiction. Most were resolved informally by referrals to appropriate avenues of appeal or review, coaching, or facilitated communications. If a complaint is not resolved informally, we can formally investigate and make recommendations aimed at correcting the issues we uncover. We made 26 formal recommendations to provincial and municipal government entities. This report includes investigation summaries and examples of some of the complaints we dealt with.

This was a year of challenges and opportunities for Ombudsman Saskatchewan. It was our second year taking complaints about Saskatchewan's 778 local governments and their more than 4,000 council members. Notably, the municipal sector accounted for 17% of the complaints we received within our jurisdiction. We received 572 complaints about municipalities. The other 83% of complaints this year were about provincial ministries, agencies, Crown corporations and publicly-funded health entities.

Ombudsman Saskatchewan has had jurisdiction over provincial entities since 1973. With this long history, provincial ministries, agencies, boards and Crown corporations have come to understand our role and cooperate with us. They recognize that we all have the same goal: to improve government services and program delivery. We feel all public sector employees, whether at the provincial or municipal level, want to do a good job and serve citizens well. Despite this, some municipalities have been less forthcoming with us than provincial entities during our inquiries. We know this is because we are still new to them. We will continue to reach out to municipalities and other agencies to explain our role and what to expect when we call. Another thing we have noticed is that not everyone who brings us municipal issues realizes we cannot remove a council member from office or quash a council's

decision. The Ombudsman does not replace the role of the courts. Our goal is to help make government decision-making more transparent, accountable and fair by recommending improvements to administrative processes – such as encouraging municipalities to implement fair and effective complaint-handling processes at the local level.

On a personal note, I want to thank all the staff at Ombudsman Saskatchewan for their dedication and hard work. Over the last 5 years, the number of complaints to our Office has increased significantly. Our mandate has expanded a great deal. My staff have done a great job handling these challenges. It is important that all citizens know that Ombudsman Saskatchewan is here to help, free of charge – that there is a place they can turn to if they feel they have not been treated fairly when receiving government services.

Complaints

When people believe a provincial or municipal government entity has been unfair to them, they are often able to raise the issue themselves and work out a resolution with the entity – but sometimes resolutions do not come about so easily. Policies may be applied too rigidly, clear explanations may be lacking, and people on both sides may have stopped listening to one another.

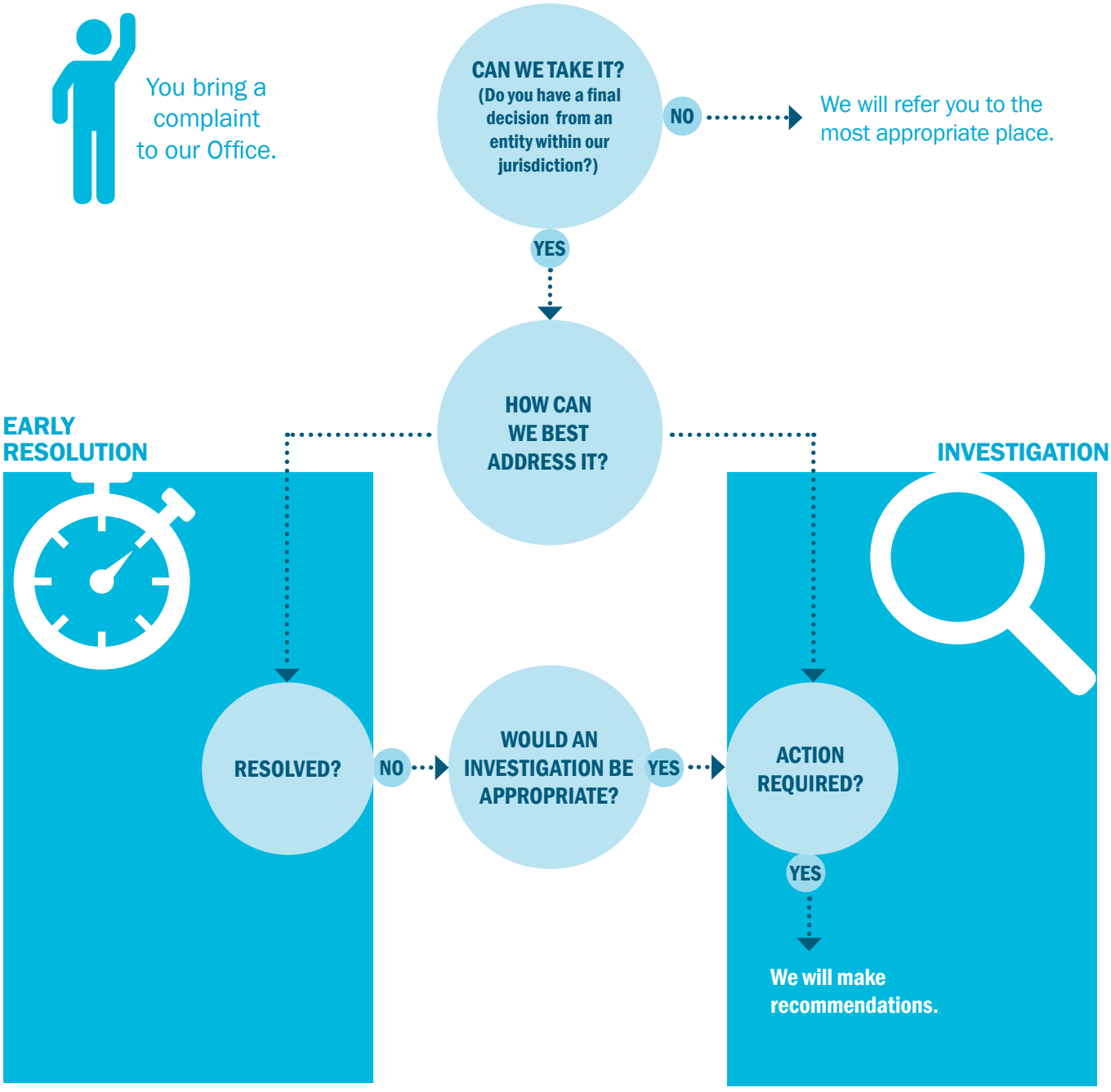
When people contact us, we listen and try to find out, as soon as possible, whether we can take the complaint. If we can't, we refer them to the most appropriate place. For complaints within our jurisdiction, we often provide initial support. For example, we may refer people back to the government entity to try to work it out with them or to appeal the decision. If they receive a final decision and still think it is unfair, there may be a role for our Office.

Whenever possible, we use our early resolution process to resolve problems informally. If that doesn't work or would not be appropriate, we may assess the complaint for investigation. Following an investigation we will determine whether to make recommendations to the government entity. For an overview of this process, see our flowchart on the next page.

The rest of this section provides complaint examples and statistics for 2017. They demonstrate the kinds of complaints people brought to us and the ways we resolved them, and the results of our investigations.

Names have been changed in the case examples to protect the confidentiality of those involved.

Our Complaint Process



Social Services

Complaints Received

MINISTRY OF SOCIAL SERVICES	2017	2016	2015
Child & Family Service Delivery	111	139	117
Housing Programs and Finance	49	59	62
Income Assistance Services Division - Community Living Service Delivery	11	9	9
Income Assistance Services Division - Saskatchewan Assured Income for Disability	170	145	126
Income Assistance Services Division - Saskatchewan Assistance Program	394	385	410
Income Assistance Services Division - Transitional Employment Allowance	123	104	54
Income Assistance Services Division - Income Supplement Programs - Other	36	25	26
Social Services - Other	12	3	10
TOTAL	**906**	**869**	**814**

Complaints about Social Services increased by 4% in 2017. Types of complaints included benefits denied or delayed, calculation of benefits, housing issues, and communication concerns from parents with children in care.

A complaint that resurfaced this year was the amount of time people had to wait on hold when they called the Social Services Client Service Centre. These long wait times can have a significant effect. For example, people who are receiving the Transitional Employment Allowance have to call in to report how many jobs they have applied for. We had calls from people whose benefits were cut off or delayed because they were unable to report to the Service Centre. We have previously raised this issue with Social Services, and they took steps to reduce wait times. There were significant improvements for a while, however, we then started receiving complaints again about wait times. We will continue to monitor this area.

As with wait times, we often contact Social Services when we receive several complaints about the same issue. We meet on a regular basis throughout the year with Social Services officials to flag emerging issues and point out existing issues that still need work. It is also an opportunity for them to provide us with updates about changes to their policies and procedures. This helps us to ensure our staff are knowledgeable when receiving complaints.

Case Examples

Investigation

NO GUARANTEE

MyStore is a retail business with an apartment on its property. The manager, Melanie, contacted us because Social Services' denied its claim against a security deposit guarantee.

Some months earlier, MyStore had rented the apartment to Ned, who was on social assistance. When a security deposit is required, Social Services issues a guarantee letter so the landlord can make a claim if necessary when the tenant moves out. Before Ned moved in, Melanie completed and signed the landlord portion of his move form for Social Services. On it, she checked the box that indicated a security deposit was needed and that the guarantee should be issued to MyStore. Melanie said Ned's social worker then called her to ask whether a security deposit was required and whether Ned could move in right away. She said yes to both.

A couple of months later, Ned's friend, who was also on social assistance, moved in with him. Melanie told us there were problems, including unpaid rent. MyStore applied to the Office of Residential Tenancies and received an order of possession, so Ned and his friend moved out. MyStore then submitted a claim to Social Services for rent arrears, cleaning, and removal of garbage and furniture.

Social Services denied the claim, stating that there was no guarantee in place. When Melanie asked why, Social Services told her that the guarantee had not been issued because she had not responded to two requests for the required address information and that she had waived MyStore's right to a security deposit. We investigated whether this was fair and reasonable.

Did Melanie provide the required address information?

Melanie said Social Services didn't ask her for any additional address information. When we checked with Social Services, they had no records of making these requests. Melanie did recall having a phone conversation with the worker in which she confirmed that the store and apartment were on the same property.

Social Services told us that the missing information they needed was a letter from the owner of MyStore. When a social assistance client wants to rent from a landlord that is not already set up in Social Services' system, the social worker verifies the landlord's information, then requests that a payee code be set up. Once this is done, a letter of guarantee is sent to the landlord.

Social Services told us that part of the verification process is to use the address to check to see who is the registered owner of the property. If the person on the move form is not the registered owner, the worker must ask for more information. Specifically, Social Services' Payee Request Requirements say that if there is a property manager, the legal owner must send a letter to say that the manager can act on their behalf and to confirm who should receive payment in the event of a claim.

We found that, based on the wording of the requirements, a letter from the owner would only be needed if cheques are to be made payable to a third party and not to the owner. Since the move form stated that the payment was to be made to MyStore, which was the registered owner of the property, a letter should not have been required.

Social Services doesn't record calls to landlords. However, a note on Ned's file made shortly after his move form was submitted said the move form indicated that a damage deposit was required and that Ned's address and needs were updated and verified with the city and landlord. A separate note said that the worker submitted a payee request.

In short, we could not find any evidence of Social Services requesting address information from Melanie and even if Social Services did, it is clear from its Payee Request Requirements that it did not need this information to assign the MyStore a payee code and issue the guarantee.

Did Melanie waive MyStore's right to a security deposit?

When Melanie received the claim denial, she called to ask why. The Security Deposit Unit checked further and emailed the case workers to say that it looked like a guarantee ought to have been issued; that a payee had been requested, but not set up.

Ned's worker responded, saying a note on file indicated she had spoken with Melanie, who had advised that Ned was a good tenant and she trusted him to pay his rent every month. The worker took this as Melanie's reason for not sending any more information. The unit then interpreted this as Melanie having waived the right to a security deposit.

Melanie told us, while she had agreed that Ned could move in, she did not tell the worker that MyStore no longer needed a security deposit.

We found that Social Services' reasons were not fair or reasonable. We made the following recommendations:

1. The Ministry of Social Services pay the complainant to satisfy its claim for payment under the security deposit guarantee that Social Services should have issued to it.

   Status: Accepted

2. The Ministry of Social Services make information readily available on its website that outlines the process landlords (landowners, third-party property managers, and subletting tenants) must follow to have Social Services issue a security deposit guarantee to them.

   Status: Accepted

3. The Ministry of Social Services introduce and ensure all its staff comply with the practice of accurately documenting all its verbal and written communication with its clients' landlords and prospective landlords on the client file.

   Status: Accepted

Investigation

A LONG AND WINDING ROAD

Nicole contacted us because she disagreed with Social Services' decision to deny her request for funding under the Cognitive Disability Strategy (CDS) for her daughter, Megan. Nicole said that there was also a delay in processing the application, she wasn't given enough information about the appeal process, and she was not given meaningful reasons for the application and appeal being denied.

Megan has several cognitive disabilities and needs assistance in most areas of her life, including caregivers for all her personal needs. She and her family are clients of Social Services' Community Living Service Delivery (CLSD) program. When she was five, Megan went to elementary school, but could only attend for three hours every other day and had trouble adjusting. At the end of the school year, Nicole decided to homeschool her.

In July, Nicole's CLSD worker helped her prepare an application for CDS Flexible Funding for speech therapy, travel costs to medical appointments and enhanced respite (in addition to what CLSD was already providing).

Over the next 20 months and for various reasons, the request was held, submitted, reviewed, sent back for more information, revised, resubmitted, considered, denied, reconsidered, recommended for approval, and denied. During this time, a policy change had occurred, and the speech therapy portion of the request had been removed.

The decision letter said the enhanced respite was denied based on the policy and gave no reason for denying the travel costs for medical appointments. It said the decision could be appealed to the CDS Cross Ministerial Appeals Committee (CMAC) but did not explain that there was a 30-day deadline, which had passed before Nicole actually received the decision letter. Her appeal was initially rejected for being late, but was eventually considered and then denied.

Our investigation into Nicole's complaint considered two main questions.

Was the application process fair, reasonable and timely?

We found Nicole was not involved in – or even made aware of – several key aspects of the application process. Reasons for denials were not always provided or they were inaccurate. As a result, she was left out of several key decisions. When she was involved, she was not always given the right information. We found that the process took too long and CDS did not consider all the relevant information, but did consider irrelevant information. For example:

- Nicole was unaware of the first denial and did not get the decision letter.
- Nicole did not get the second denial letter until more than three months after it was issued.
- Nicole didn't know why the travel costs for medical appointments were denied, so she didn't know how to try to convince CDS to change its decision. Meanwhile, this delayed her exploring other options.
- The final denial letter said her respite request was denied because, "As per policy, a respite request for CLSD clients is not provided through Cognitive Disabilities Strategy." This policy came into effect after Nicole submitted the application. The letter did not explain why the policy applied and more importantly, CDS told us the denial was actually based on a different reason: Nicole's decision to homeschool Megan. Without this explanation, she could not provide relevant information in support of her application and appeal.
- CDS failed to consider that even if Megan had continued to attend school, she would only have been there 6-9 hours a week, that there was a high need for respite regardless of whether Megan was homeschooled, and that the family had challenges accessing respite.

CDS told us that it regretted not sending decision letters directly to Nicole after each decision and that it had already made changes to that process.

Was the appeal process fair and reasonable?

We found that Nicole was left out of or uninformed during the appeal process, while the original decision makers at CDS appeared to have a better opportunity to make their case. As a result, CMAC did not consider all the relevant information. It was also possible for a reasonably-informed person to conclude that the process could be biased. Finally, CMAC provided inadequate reasons for its decision. For example:

- Some of the CDS decision makers attended the appeal meeting, presented information and were available to answer questions, but Nicole did not have the same opportunity.
- A CMAC member contacted Megan's former school division for information which was used to make the decision. Nicole did not know and was not given an opportunity to provide contrary or alternative information.
- CMAC told us its main focus with the respite request was whether there was an unmet need. Since Nicole was not told the real reason her application was denied, she did not have an opportunity to focus her appeal accordingly.
- CMAC did not consider how few hours Megan would be in school, the types and quantity of supports she would have received at school, or the family's high need for respite, whether Megan was homeschooled or not.
- One of the CMAC members supervised the CDS employee who made the original decision. In our opinion, a reasonable, informed person may think that the member could not review the CDS employee's decision in a fair and open manner and could be seen to be biased.
- CMAC's decision letter said only that the original decisions about respite and travel costs were being upheld. This left Nicole with the same misconceptions she had formed based on the inadequate reasons that were given before the appeal.

Based on our findings, we made the following recommendations:

1. The Ministry of Social Services should review the complainant's CDS application for travel expenses and additional respite again, considering all relevant information and providing the complainant with an opportunity to submit information related to the need to homeschool their daughter.

   The application should be reviewed in a procedurally fair manner. The Ministry should ensure that anyone involved in the original decision

making process or appeal is not involved in the reconsideration of this application.

Status: Accepted

After reviewing Nicole's CDS application, Social Services accepted the respite portion and funded Nicole back to the date of the original application.

2. The Ministry of Social Services should collaborate with all the members of the CDS Cross Ministerial Appeals Committee to review and amend both the Cognitive Disability Strategy funding application process and the appeal process to ensure they each meet the minimal requirements of procedural fairness, including ensuring:

    a. Any individuals involved in making the original decision and in deciding any appeals are free of bias and can be reasonably seen to be free of bias, including ensuring that no one involved in making the original decision is involved in deciding the appeal of the original decision;

    b. Applicants and appellants are given notice that a decision is going to be made, provided with the information being used to make the decision, and given an opportunity to review the information and provide an explanation or alternative information;

    c. All decision letters include a statement of the decision, a summary of the information relied upon to make the decision, an explanation of how any contradictions in the information considered were reconciled, and all other relevant reasons for the decision; and

    d. All decision letters are drafted and sent directly to applicants by the decision maker within a reasonable time after the decision is made.

    Status: Accepted

3. The Ministry of Social Services should review and update both the Cognitive Disability Strategy application and appeal forms to include a consent to the collection of personal information that permits both the Ministry of Social Services and the Cognitive Disability Strategy Cross Ministerial Appeals Committee to share personal information with other agencies and collect additional personal information from them for the purpose of considering applicants' requests for Cognitive Disability Strategy funding.

    Status: Accepted

Early Resolution

GRANTING AN UNUSUAL REQUEST

Midge contacted us because she was having trouble getting Social Services to complete part of a form for her son's Registered Education Savings Plan (RESP).

When Nathan was born, Midge opened an RESP account to save for his future education. Based on his exceptional medical and support needs, Midge had eventually placed him into the care of Child and Family Services. She continued to contribute to his RESP, which would normally be eligible for grants from the federal and provincial governments. She learned, however, that this could only happen if the Ministry of Social Services provided its business number on a certain form to confirm that this was indeed Nathan's RESP account. Midge contacted Social Services. Her request was not a common one and at first she was told no, but eventually a supervisor agreed and put her phone number on the form – but the form was rejected because this was not the kind of business number that was required. Midge again asked Social Services for help with the form, but was told that no more would be done.

Time was starting to run out for the grant deadline and Midge didn't know how to resolve the problem, so she contacted us. When we called Social Services, we were initially told that there was no such number and that nothing more could be done. We looked into the matter further. We talked with another branch of the Ministry and learned that there was a business number. Social Services contacted the investment company directly and provided the number. This solved the problem and the form could now be properly submitted and the grant money added to the RESP.

Status: Resolved

Early Resolution

NOW THAT THE MONEY IS GONE

Mitchell contacted us because he did not think he should have been denied the Saskatchewan Assured Income for Disability (SAID) benefits.

Mitchell was receiving SAID benefits when he was in a motor vehicle accident. He received an injury settlement from SGI, so his SAID benefits were terminated and he was expected to live on the settlement money in addition to his Canada Pension Plan (CPP) benefits. However, Mitchell had loaned almost half the SGI settlement money to a family member who never paid it back and could no longer be reached. He told us that he had spent the rest of the money on furniture and treatments. Mitchell had a cognitive disability, was in a wheelchair and now had no money and no place to live. He told us that, at one place where

he had been staying, his belongings and documents had been thrown out. As a result, he had not filed his income tax and his CPP benefits had also stopped.

He applied to go back on SAID, but was declined. His appeals at the regional level and to the Social Services Appeal Board (SSAB) were also declined. Social Services determined the SGI payment and CPP benefits should have lasted Mitchell for 40 months, so he would not be eligible for SAID benefits until that time had passed.

We looked into the matter and found that, while policy had been followed, it also allowed for discretion. We discussed with Social Services whether a discretionary decision would be appropriate in Mitchell's case, given his vulnerability and the hardships he was facing. They decided that, due to Mitchell's cognitive disability, they could use discretion and agreed that he could begin to receive SAID benefits again, provided he would agree to a trusteeship arrangement where Social Services would manage his funds. This would restore some stability for him, while protecting him from those who might try to borrow money that he could not afford to lend.

Status: Resolved

STUCK IN THE MIDDLE

Early Resolution

Norman contacted us because he had been paying his tenant's utility bills and believed that Social Services should reimburse him.

A new tenant, Mark, had moved in several months earlier. Mark was receiving social assistance. He could not apply for power and energy services because of past arrears and these utilities were not included in the rent. Norman told us that he and Mark had checked with the case worker, who told them that Social Services would pay for the power and energy. Norman understood this to mean that when the power and energy bills came in, he should pay them and would then be reimbursed.

Each month, Norman dropped off the bills at Social Services, but was not reimbursed. When he phoned Social Services about it, he was told that due to privacy concerns, they could not give him any information except that Social Services would not be responsible and that he would not be able to collect the money from them.

After Norman called us, we contacted Social Services. They told us that they do not normally pay third parties for utility bills, but recognized that the situation did not seem fair to Norman. They reviewed their

policy and found a section that would permit them to pay a third party for utilities if the tenant was unable to handle his own finances. Social Services then made arrangements to reimburse Norman for the utility bills he had paid. They also took over paying the utilities so Norman would no longer be stuck in the middle.

Status: Resolved

Early Resolution

HOW MUCH IS ENOUGH?

Myron contacted us because he thought his Transitional Employment Allowance (TEA) benefits had been discontinued unfairly.

Myron was living in a northern community, a 45-minute drive from the nearest Social Services office. He had no wood for heat and was out of groceries. He said the reason he was given for his TEA benefits being cut off was that Social Services had not received his job search report and that to stay in the program, he had to submit 30 resumés per month. He told us he had phoned in his last job search report and thought that was sufficient. There were very few jobs in his community, so he was faxing his resumés to communities quite far from home. The nearest fax machine was at the Social Services office. He said it was not easy to travel in and fax out 30 resumés each month.

We called Social Services and spoke with a supervisor. She said the realities of life in the north are often different than in the south and these circumstances should be considered. She said she was familiar with the area and knew of additional resources that may be helpful to Myron. She reviewed the file and told us that Myron was doing what was required to stay in the TEA program. She contacted him to discuss his situation further, reinstated his benefits, and included funds for wood.

Status: Resolved

Corrections

Complaints Received

MINISTRY OF JUSTICE - CORRECTIONS AND POLICING	2017	2016	2015
Pine Grove Correctional Centre	104	84	53
Prince Albert Correctional Centre	116	156	110
Regina Correctional Centre	318	341	351
Saskatoon Correctional Centre	261	320	256
White Birch Female Remand Centre	8	8	7
White Spruce Provincial Training Centre	5	5	2
Adult Corrections – Other	20	10	14
Corrections & Policing – Other	13	8	13
TOTAL	**845**	**932**	**806**

Although Corrections complaints are down 9% in 2017, they are still 18% higher than the average of the last five years (717). About 25% of our calls are about health care and another 25% are about security ratings and placements. Other issues include phone and mail access and programming. We continue to work with people on a case by case basis to identify their issues and determine the most appropriate next steps.

In addition, we meet regularly with Corrections officials. This gives us the opportunity to raise issues or trends that we are seeing, and possibly have them addressed without launching formal investigations. For example, we had some concerns with the complaint process within correctional facilities. Sometimes the director's written decision in response to an inmate complaint did not, in our opinion, provide meaningful reasons. We also receive complaints from inmates about their written complaints getting lost. We raised these issues with Corrections, and they agreed to take steps to improve the process, including providing more detailed reasons for decisions. As well, correctional facilities will start using triplicate forms so inmates will be able to keep a copy and can prove that their complaint was submitted. Another issue we raised this year was access to phone privileges and when those privileges were removed. As a result, Corrections developed a policy to deal with this issue. For more details, see our case example, "Putting Limits on Restrictions." These are examples of raising and resolving issues informally, which we try to do whenever we feel it is appropriate.

Once again this year, we raised the issue of the importance of ensuring that video records are consistently available and of good quality. Although we have made recommendations about this subject before, we had two files this year where we were hindered in fully investigating a matter because the video record was unavailable or incomplete. One of these investigations is summarized in this section and the other is in our Public Interest Disclosure Commissioner annual report.

Case Examples

Investigation

REASONABLE RESTRAINT?

Norma complained to us about her treatment while in custody at the White Birch Female Remand Unit (White Birch), an adult facility located on the same property as the Paul Dojack Youth Centre. White Birch is a part of the Regina Correctional Centre (RCC) and is therefore governed by its policies and procedures. Norma told us she had been placed in a WRAP restraint for a prolonged period and left to lie in her own feces for several hours. The WRAP consists of a shoulder harness, an ankle binding, and a blanket with straps that encircles and restrains the legs.

One night at about 11:30 p.m., Norma said she had an allergic reaction and was having trouble breathing. Corrections officers contacted the Assistant Deputy Director of Operations (ADDO) who instructed them to monitor her every 30 minutes. One of the officers told us that Norma appeared alert and was not showing any signs of distress. Over the course of the night, Norma's behaviour escalated, including kicking the door, asking to go to the hospital, threatening to harm another inmate, trying to flood the cell by plugging the toilet, threatening to harm herself, and sticking her head in the toilet. Corrections officers called the ADDO and requested assistance from youth workers from Paul Dojack. At 2:53 a.m., they placed Norma in handcuffs and leg irons. At 3:08, the ADDO entered Norma's cell and spoke with her.

After asking the youth workers about their processes and receiving approval from the Assistant Deputy Director, the ADDO instructed corrections officers to use a WRAP restraint, which was available and used at the youth centre. At 3:15 a.m., the youth workers assisted the corrections officers in placing the WRAP on Norma. She continued to struggle as the corrections and youth workers went in and out of her cell to adjust the WRAP and to speak with her. At 3:49, they placed a helmet on her to prevent head injury and the youth workers advised the corrections officers to sit in the cell with her. Corrections officers told us they monitored her by checking every 15 minutes.

Norma continued to struggle and to bang her head on the wall and floor, hard enough to break the visor on the helmet. The corrections officers continued to monitor her, shining a light in about every 15 minutes and entering at times to adjust the helmet, tie her hair back, talk to her or move her to the center of the cell, since she kept trying to move into the camera's blind spot. After checking her toes at 6:42 a.m., corrections officers left the overhead light on and no one entered her cell again until 8:18. We were told that visual checks continued every 15 minutes, but none of the checks had been logged. At 7:27, when she moved, a wet spot was visible at the back of her pants. She told us she had soiled herself.

At 8:18 a.m., the Assistant Deputy Director of Programs (ADDP), corrections officers and youth workers entered and removed the WRAP without incident. Norma had a shower, was given clean clothes, her medication, and made a phone call. The ADDP said she consulted the nurse and medical assessment was deemed unnecessary.

Our investigation considered two main questions.

Was the decision to use physical restraint reasonable?

Under *The Correctional Services Act, 2012*, a staff member can use a reasonable degree of force to prevent injury or death to a person, among other things. Based on the information we reviewed, including the video, the decision to use physical restraints on Norma was to prevent self-injury, therefore the decision was reasonable.

Was the device used (WRAP) authorized and was its use reasonable?

Physical restraints can only be used on an inmate in prescribed circumstances and in accordance with specific rules. The device must be approved by the head of corrections and any use longer than four continuous hours must be authorized by the director.

In this case, approval was sought before placing Norma in the WRAP. Except for White Birch, all other adult correctional facilities have a restraint chair, which is an approved physical restraint device. It was not available at White Birch. Given that the WRAP was available and approved for young offenders, the ADDO told us his goal was to keep Norma safe and with respect to the WRAP, he "thought if it was good enough for a 12-year-old child then it should be ok for a 38-year-old woman."

In determining if the use of the WRAP was reasonable in this case, we looked at whether it was done in accordance with the Young Offender Program's Use of Restraint Equipment in Secure Custody policy. It was not. For example, the policy states that a resident placed in the WRAP

shall remain under constant supervision and staff shall remain alert for unusual physical symptoms. We were told by a youth worker that this means a worker typically sits in the cell by the door and checks on the person every 10-15 minutes. These checks are recorded in a log. The youth workers told us they instructed the corrections officers to sit by the cell door, actively monitor Norma and document these checks in a log. Based on when the light shone in, we could see from the video that visual checks were done every 10-15 minutes until 6:42, though corrections officers did not always enter. From 6:42 to 8:18, nobody entered the cell and we could not tell whether anyone looked in. In our opinion, the corrections officers' actions did not amount to constant supervision as required by the Young Offender Program policy.

That policy also states that all such incidents are to be videotaped. In this case, the video recorded the restraint being placed on Norma and being taken off, as well as some activity, but was limited in that there was no sound and there was a significant blind spot by the cell door. Our Office has previously commented on and made recommendations about improving the quality of video recordings when restraints are used in provincial correctional centres. These recommendations were accepted and need to be implemented.

In the youth policy, restraint equipment is only to be used as long as needed for the person to regain and commit to acceptable control of their behaviour. In adult provincial correctional centres, approval from the director is required for someone to be in restraints for more than four continuous hours. Norma was restrained for five hours, with no permission sought from the director to extend the four-hour maximum.

When we asked the corrections officers if Norma had asked to use the washroom and they said no. They also did not ask her, in the course of five hours, if she needed a washroom.

In determining whether the WRAP was appropriate for use on adults, the Ministry told us that the WRAP produces a swaddling effect that results in calming the subject. While this may be the case with young offenders, the video of the incident and Norma's behaviour after being placed in the WRAP does not support this statement. It did not calm her, and she was still able to move around the cell and was banging her head on the floor and wall hard enough to shatter the visor on the helmet.

Based on the information we reviewed, we found that the use of the WRAP restraint was not authorized and its use on Norma was not reasonable. At the time of our investigation, Corrections was working on a draft directive to allow use of the WRAP on adult women at White Birch.

We had some concerns with the draft and, based on our investigation, we made the following recommendations:

1. The Ministry of Justice - Corrections and Policing, review its Regina Correctional Centre's procedural directives on the use of restraints specific to White Birch Remand Unit, including the use of the WRAP, to ensure that they address the needs of adult female inmates, including having reasonable time limits on how long an inmate can be placed in restraints, how the inmate will be monitored and checked, ensuring the inmate's basic human dignity is preserved, and ensuring that the directives are in keeping with *The Correctional Services Act, 2012* and *The Correctional Services Regulations, 2013*.

   Those procedural directives should include instructions for staff on how to properly and accurately video-record the use of restraints, including that the video should include audio; that all staff actions are properly documented, that the recording of the use of any restraint is properly stored, and is retrievable.

   Status: Accepted

2. The Ministry of Justice - Corrections and Policing, send the complainant a written apology for failing to respect her dignity and ensuring she had reasonable access to washroom facilities.

   Status: Accepted

MY PART IN THE APPEAL
Saskatchewan Witness Protection Program

Investigation

Mackenzie contacted us about being terminated from the Saskatchewan Witness Protection Program. The program protects prosecution witnesses who may be at risk because he or she is a witness in a criminal proceeding. This program is different from the federal program in that it only protects people for a limited amount of time – typically until they testify in court.

Mackenzie met with the director and was deemed to be eligible for the program. The director explained the conditions to her, and she acknowledged that if she did not abide by the conditions, she could be kicked out of the program. The approval committee approved her entrance into the program.

Mackenzie repeatedly breached the conditions of her admittance to the program. The director gave her several chances to stay in the program, if her conduct changed. Eventually, after she breached the conditions again, the director gave Mackenzie a termination notice that outlined the reasons and said the decision could be appealed to the approval committee. Mackenzie did not think the decision was fair, so wrote an appeal letter. A few days later, the director gave Mackenzie notice that the approval committee had denied her appeal, and she was out of the program.

People in a witness protection program are typically away from their home province, their work, and their family and friends, so it is not unusual for them to rely heavily on the program. Removing them from the program early has a significant impact, so it is important that the decision and appeal be fair. Our investigation considered two main questions.

Was the director's decision reasonable?

We reviewed the events, communications and decisions that led to the director issuing the termination notice. We found that Mackenzie understood the terms of the agreement and was informed of the factors that eventually led to the notice of termination. Based on this and the aims of the program, we found that the director had made a reasonable decision.

Was the appeal process fair?

In preparation for the appeal, the director gave the approval committee a package that included the appeal letter, the termination notice, the agreement, and several other documents. The director attended the committee meeting, presented information and answered questions. Mackenzie did not know what was in the package and did not have an opportunity to provide alternative information to the committee or answer questions. Even if it was not feasible to for Mackenzie and the committee to meet in person, they could have connected by phone.

The approval committee upheld the director's decision, but did not provide any reasons. The director advised Mackenzie that the approval committee denied the appeal based on the termination package – but since Mackenzie did not have access to the package, this explanation was not meaningful.

We made these recommendations:

1. When the approval committee reviews the director's decision to terminate a protected person from the Saskatchewan Witness Protection Program, the protected person should be given all the information that the approval committee is going to consider in making the decision, and a reasonable opportunity to provide additional or alternative information for the approval committee to also consider.

   Status: Accepted

2. The protected person be given the same opportunity as the director to participate in the approval committee's decision-making process.

   Status: Accepted

3. If the approval committee decides to affirm the director's decision to terminate a protected person from Saskatchewan Witness Protection Program, the approval committee should provide meaningful reasons that the director may provide to the protected person when giving the protected person notice of the approval committee's decision.

   Status: Accepted

PUTTING LIMITS ON RESTRICTIONS

Early Resolution

We received complaints from 19 inmates at the Regina Correctional Centre who had been given restrictions on their phone communications – some for as long as a year. Often, these restrictions mean that the inmate cannot use the phone except for very limited purposes, such as calling a lawyer or the Ombudsman. We noticed inconsistencies in the way phone restrictions were applied – for example: what behaviour would result in limits on phone use, what sort of limits would be in place and how long they would be in effect.

While correctional centres need to be able to prevent communications that would lead to banned substances entering the centre or gang-related activity, they also need to apply the rules fairly and provide opportunities for decisions to be reviewed. We found that the regulations made reference to communications restrictions, but there was no policy to spell out the details.

We raised this matter with Corrections. They developed a policy. During the drafting process, we commented on it and provided several suggestions to make sure decisions to restrict or ban phone communications were more procedurally fair, with checks and balances.

Status: Resolved

Early Resolution

ABSENCE APPLICATION

Saskatoon Correctional Centre

Noah contacted us because corrections staff would not submit his application for an authorized absence (AA). To apply for an AA (and based on the nature of the offence), Noah first had to serve one third of his sentence, which he had done.

They told him that they would not submit the his application because he had appealed his conviction to the Court of Appeal.

The policy states that "an offender shall not be eligible for an authorized absence until all known outstanding charges, including Crown Appeals" have been dealt with. In Noah's case, the Crown had not appealed – Noah had appealed, and it did not seem fair that his appeal was treated in the same way as if the Crown was appealing. When we raised this point with the Correctional Centre, they agreed with this and accepted his application.

Status: Resolved

Municipalities

Complaints Received

MUNICIPALITIES	2017	2016	2015*
Cities	127	114	6
Towns	97	94	5
Villages	88	82	7
Resort Villages	29	35	2
Rural Municipalities	209	156	10
Northern Municipalities	16	18	3
Other / Not Disclosed	6	7	0
TOTAL	**572**	**506**	**33**

*The Ombudsman received jurisdiction to take complaints about municipalities on November 19, 2015.

In 2017, complaints about the municipal sector increased by 13% compared to 2016. Common complaints were about water and sewer services, drainage problems, police services, parking enforcement, gravel, and council member conduct (allegations of conflicts of interest or code of ethics violations).

Although cities represent 60% of Saskatchewan's population, they only accounted for 22% of the municipal complaints we received. In general, we found that we received more complaints about municipalities with smaller populations (such as towns, villages, resort villages and rural municipalities), and those complaints tended to be more serious than the complaints we received about cities.

Of the 572 complaints we received, 149 were about council member conduct. All but one of those complaints involved municipalities with smaller populations. In over 50% of those 149 complaints, the complainant was either an employee or former employee of the municipality, or a fellow council member. Our goal for the upcoming year is to encourage and help smaller municipalities to have effective and administratively fair complaint-handling processes in place to address complaints from their own council members and staff, as well as their citizens.

POPULATION DISTRIBUTION	POPULATION*	%
Cities	655,313	60%
Towns	149,717	14%
Villages	42,587	4%
Resort Villages	4,721	Less than 1%
Rural Municipalities	176,535	16%
Northern Villages and Hamlets	11,942	1%

*Population information from Statistics Canada's "Saskatchewan Population Report: 2016 Census of Canada."

Case Examples

Investigations

THREE CONFLICT OF INTEREST INVESTIGATIONS

On November 7, 2017, we published three summaries of investigations into alleged conflicts of interest of council members of rural municipalities. At the same time, we took the opportunity to remind all council members about what a conflict of interest is and how to deal with one. Here is a brief overview of the investigations. The summaries are available on our website.

RM of Grayson No. 184

A council member who managed a family construction company participated in the council's decision to rezone land to allow for the development of a campground. The construction company had worked for the developer in the past and the council member had given the developer an estimate to build the campground for over $500,000. The council member did not declare his conflict when the council dealt with the development permit application. He took part in public meetings about the development and voted to approve the changes to the RM's zoning bylaw. Just days later, the company started work on the campground. We found that the council member should have known that participating in these decisions gave him an opportunity to further his private interests. Because he did, ratepayers could not be sure he had acted in the community's best interests. The Ombudsman gave a draft report of her findings to the RM and the council member to review. The council member then resigned from council, so it was unnecessary to make any recommendations.

RM of Orkney No. 244

The RM needed a waterworks operator. A council member agreed to do the work until someone was hired. Nobody responded to the RM's ad, so he had done the work since 2008. He was at the meeting when the council first appointed him and at meetings when his invoices were approved. We found he was an independent contractor, so he did not violate of section 112 of *The Municipalities Act*, which says council members cannot be municipal employees. However, we found that under the version of the Act in place in 2008, the member should have declared a pecuniary interest, not participated in the initial decision to hire him, and followed the conflict of interest procedures whenever the council voted on his invoices. We recommended that the council vote again on whether the council member should continue as waterworks operator, that he take the appropriate steps to deal with his conflict, and that all declarations of conflicts of interest be properly recorded in future council meeting minutes. The RM accepted these recommendations.

RM of Beaver River No. 622

Contrary to *The Municipalities Act*, the RM's Council Procedures Bylaw, and the RM's Gravel Testing Policy, council members participated in discussions and decisions to test for gravel on leased Crown lands when they were in a conflict of interest and did not take steps to deal with their conflicts. One council member participated in the decision to check for gravel on land he leased himself and two others participated in a decision to test for gravel on land leased by their close relative. At first, we thought these council members were not fully aware of the conflict of interest rules, so we recommended that the council take conflict of interest training and pass a bylaw to adopt improved procedures. However, the RM did not accept these recommendations, because they believed the council members had done nothing wrong.

THE MISSING METER

Early Resolution

Nelson had a problem with his municipal water bill and with flooding in his yard. He told us he was also banned from the municipal office.

Nelson told us that he had reported a problem with his water meter a few years ago. His municipality removed the meter and never replaced it. Since then, his water bills had gone up a lot and he didn't know if they were accurate. He didn't understand why others had water meters and he did not. He also told us that his neighbour agreed to have the municipality pile snow on her yard when they are clearing the streets. When the snow melts, his yard floods. He said the municipality refused to pump away the water, even though they helped others. Although Nelson mentioned other issues, he said that what he really wanted was to be able to improve his relationship with the municipality.

We decided to see if we could help facilitate a resolution. We contacted the administrator and learned that the municipality had switched to a flat rate for water – so even though some people still had water meters, they were not being used for billing. She also told us there was no bylaw about pumping flooded yards – though they try to help older residents when needed. Nelson's yard was in a low spot and he had been talking about building up the dirt. When he understood why the municipality wasn't helping him, he said he would build up the grade himself.

Finally, we asked the administrator about his ban. She said that although he had been told he was banned during a verbal exchange, there is a process to ban someone and this had not been done. She said it was fine for him to come in to pay his bills and discuss other issues. When we told him he was not banned, he said he was very happy with this.

Status: Resolved

Early Resolution

THE OTHER MISSING METER

Myles called us because he did not think his municipality had properly resolved issues with his water bill and with large trees near his home.

The municipal office called Myles to say that his water bill would be much larger than normal. He was certain he had not used that much water, so asked if the municipality's foreman could test his meter. The foreman found the meter was not working properly, so replaced it with a new one. Myles asked him to take the old meter with him, but he refused.

Myles asked the municipal office if his water bill could be reduced. He was told the old meter would need to be tested, but by then he had thrown it out. The matter went to council, where they agreed that he would need to bring in his old meter. Since he could not, his request was denied.

Myles checked a local bylaw. It said if a resident complains of a faulty water meter and pays a fee, the matter will be investigated. If the meter is found to be over-registering, the fee will be returned and the water bill adjusted accordingly. Myles called the municipal office to ask why they didn't tell him about the bylaw when he first contacted them. They admitted it was an oversight.

Myles was also concerned about some large trees that were on municipal property. He said they dropped a lot of leaves on his property, which plugged the stacks on his house and caused sewer gas backups. He was worried large branches could break off and damage his home. He wanted one tree in particular to be cut down.

We contacted the municipality to seek an informal resolution to Myles' issues. They said they were open to reconsidering his point of view, which council considered at its next meeting. Given the circumstances, they agreed to adjust his water bill and although they would not cut down the tree, said they would consider any trimming that may be needed as part of their regular process.

Status: Resolved

Health

Complaints Received

HEALTH MINISTRY, AUTHORITIES AND AGENCIES	2017	2016	2015
MINISTRY OF HEALTH			
Drug Plan and Extended Benefits	12	17	12
Health - Other	13	19	23
TOTAL - MINISTRY OF HEALTH	**25**	**36**	**35**
SASKATCHEWAN CANCER AGENCY	**3**	**0**	**1**
HEALTH AUTHORITIES			
Saskatchewan Health Authority	4	-	-
Athabasca Regional Health Authority	0	0	0
Cypress Regional Health Authority	2	4	3
Five Hills Regional Health Authority	5	8	13
Heartland Regional Health Authority	1	5	3
Keewatin Regional Health Authority	5	2	0
Kelsey Trail Regional Health Authority	1	7	4
Mamawetan Churchill River Regional Health Authority	0	2	2
Prairie North Regional Health Authority	4	9	8
Prince Albert Parkland Regional Health Authority	4	13	3
Regina Qu'Appelle Regional Health Authority	17	30	23
Saskatoon Regional Health Authority	30	41	42
Sun Country Regional Health Authority	1	3	5
Sunrise Regional Health Authority	5	17	11
TOTAL - HEALTH AUTHORITIES	**79**	**141**	**117**
HEALTH ENTITIES...			
... in the Cypress Health Region	0	1	2
... in the Five Hills Health Region	2	4	5
... in the Heartland Health Region	4	5	7
... in the Keewatin Health Region	0	0	0
... in the Kelsey Trail Health Region	1	2	0
... in the Prairie North Health Region	5	3	2
... in the Prince Albert Parkland Health Region	4	3	4
... in the Regina Qu'Appelle Health Region	10	28	42
... in the Saskatoon Health Region	20	34	35
... in the Sun Country Health Region	3	0	2
... in the Sunrise Health Region	6	11	10
TOTAL - HEALTH ENTITIES BY REGION	**55**	**91**	**109**
TOTAL	**162**	**268**	**262**

Case Examples

Investigation

CONCERN-HANDLING PROCESS
Regional Health Authority

Nola and Marie contacted us about the way a health authority responded to concerns about their mother's medical treatment just prior to her death. They did not think the concern-handling process was reasonable or fair.

Nola and Marie contacted a regional Quality Care Coordinator (QCC) with their questions and concerns. The QCC arranged for them to meet the region's Senior Medical Officer (SMO). After the meeting, they still had questions, so the QCC invited them to submit them in writing and offered to arrange for the physician to reply.

Nola and Marie asked nine specific questions about their mother's care in a letter. The QCC was away when it arrived, so another staff member sent it to the physician, saying that it was confidential and for quality improvement, and asked that he respond to them directly. Instead, the physician wrote to the SMO, who then met again with Nola and Marie and the QCC. Nola and Marie were not allowed to see the physician's letter and did not think their questions were answered. The QCC directed them to the College of Physicians and Surgeons for their concerns with the physician and to us for their issues with the concern-handling process.

The College of Physicians and Surgeons conducted an independent review that addressed the substance of their nine questions. We investigated the way the health authority handled Nola and Marie's concerns, including its specific guidelines for handling concerns related to physician care. We found that the health authority did not explain these guidelines to Nola and Marie and did not fully comply with its own processes.

The QCC was to summarize their concerns in a memo to the physician. The physician was to provide a response to the SMO, who was to determine what other review steps, if any, were needed. The SMO was to then respond to the QCC, who was to draft a written response which, once reviewed and approved, was to be provided to Nola and Marie.

We found that the health authority gave Nola and Marie a reasonable expectation that they would get a written response to their written questions. They were justifiably disappointed when they did not get to see the physician's letter. But since under the health authority's official guidelines, the physician's response was to be confidential, the health

authority was not in a position to provide it to them. And since it refused to follow through with its guidelines and provide Nola and Marie with a final, approved written response, we found that the health authority did not provide them with a meaningful response to their questions nor an explanation for why this did not happen.

We made the following recommendations:

1. The Health Authority, in accordance with its "Guidelines for Handling Concerns Regarding Physician Care", provide a reasonable and complete written response to the complainants, addressing their questions and concerns.

   Status: Accepted

2. The Health Authority provide clear, widely-available public information generally explaining its concern-handling processes and outlining the differences between its process for handling general concerns and its process for handling concerns about physician care.

   Status: Accepted

CAN I CHALLENGE YOUR DECISION?
Regional Health Authority

Investigation

Nina contacted us because she disagreed with a care home's decision not to call an ambulance when her husband, a resident in the home, showed signs of a stroke. She was also not satisfied with their response to her questions.

One morning, Nina received a phone call from the home to say that her husband was having some symptoms, which she thought sounded like stroke symptoms. Twice before, prior to entering the home, he'd had similar symptoms. Both times, she had called the ambulance and he had been admitted to hospital. When she arrived at the home, she expected that he would have been promptly assessed by a physician. The physician had been called, but did not arrive until nine hours later. After a brief assessment, he told her that her husband had suffered a mini-stroke and left. Her husband was not taken to hospital. Nina was concerned about her husband, but was hesitant to ask questions or to challenge what had happened.

A note made by a staff member three days later shows that there was a "family request to send the resident to hospital for check up," but nothing to indicate what became of it. Nina remembered asking why her husband had not been sent to the hospital, and that the staff member

got the facility physician who said the home could do as much for her husband as the hospital could. About two weeks later, her husband passed away of pneumonia, which had developed after the stroke.

Nina contacted the health authority with concerns about the care provided to her husband. The health authority decided to review the matter, but did not let Nina know. She contacted our Office. Since we are an office of last resort, it would have been premature for us to investigate before the health authority completed its review. We asked the authority to work with Nina to resolve her concerns.

When its review was complete, a Quality Care Coordinator (QCC) arranged for Nina, her daughter and a friend to meet with health authority officials and the facility physician. Although the health authority did not think there were significant issues with the clinical care provided by the physician, the meeting raised more questions for Nina, so the QCC arranged for her to meet with the staff of the home. Still not satisfied after this meeting, Nina contacted our Office.

We investigated whether the services provided to Nina's husband met the standards prescribed in the health authority's Practitioner Staff Bylaws and the Ministry's *Program Guidelines for Special Care Homes* (Program Guidelines) – specifically, standards for medical quality assurance, informing residents and families of their rights and responsibilities, and concern-handling procedures. We did not consider the clinical decisions of the facility physician since this would be outside our role.

Although the health authority's review did not find care deficiencies, it confirmed that the physician should have been more diligent in responding to the call to attend to Nina's husband. When he did not arrive within a reasonable time, the staff should have alerted the Nurse Manager – also, staff should have followed up with Nina to make sure all her questions were answered, and she was comfortable with the decisions that had been made and the information she had been given.

Nina and the staff could not remember all the details of that day, but it was clear that Nina was uncertain about whether she could make (or participate in making) decisions about her husband's care. She mistakenly believed that she had to defer to the facility physician or care home staff, otherwise her questions might negatively affect her husband's care. She did not know that she could get a second opinion about her husband's medical needs or that she could advocate for what she thought needed to happen.

This type of information ought to have been provided to her and her husband when he was admitted to the care home, but it was not included in the resident handbook or the admission agreement. Nina

should have been clearly informed about her rights and responsibilities related to the services of the facility physician.

The health authority's concern-handling process was reasonable and generally complied with the Program Guidelines, but it was not followed until later on and not when the events first happened.

We made the following recommendations:

1. The health authority should provide clear and explicit written information to residents and families in the care home describing:

    a. the medical services available from the facility physician;
    b. their rights and responsibilities in regards to these medical services;
    c. their rights and responsibilities should they decline these medical services and elect to continue with their community doctor (including the actions required of community doctors wishing to enter the facility);
    d. how they can access a second medical opinion (should one be desired); and
    e. how they can request ambulance services in a possible emergency.

    Status: Accepted

2. The health authority should ensure all staff in the care home:

    a. are knowledgeable about residents' and families' rights regarding the facility physician's services; and
    b. upon admission, have explicit and documented conversations with residents and their families about the services of the facility physician, including their rights and responsibilities in regards to it and staff's willingness to answer questions and discuss any concerns with residents or their families' regarding facility physician services.

    Status: Accepted

Early Resolution

NEAR HOME AND FAMILY
Regional Health Authority

Max contacted us because he was concerned that his mom, Nancy, would be moved to a long-term care facility in a community away from home.

Nancy was in the hospital in her home community. The hospital wanted to move her to long-term care, but there were no spaces in her community, so the health authority wanted to place her in a long-term care home more than 50 km away. This placement would be temporary until other spaces came up, but there were no guarantees where she might have to move after that.

Nancy's husband, Melvin, still lived at home but could no longer drive. Max didn't want his mom to be placed in a community where she didn't know anyone and where Melvin couldn't visit her regularly. Max was disappointed that he had been unable to work out a resolution where she could live at home with assistance from Home Care, but he acknowledged that her health was too fragile for that option.

After talking with Max, we made arrangements for him to meet with a senior leader at the health authority. Max discussed his concerns and they talked over the options. Max said that if there were no spaces available for his mom in her home community, he would rather see her placed close to him.

The health authority was able to accommodate this and moved Nancy to a long-term care space in Max's town. They agreed that in the longer term, the best solution would be for her to live in her home community where Melvin would be able to visit her every day, so she was placed on a wait list for a space there.

Status: Resolved

Crown Corporations

Complaints Received

CROWN CORPORATIONS	2017	2016	2015
CROWN INVESTMENTS CORPORATION OF SASKATCHEWAN	**0**	**1**	**0**
eHEALTH SASKATCHEWAN	**9**	**10**	**14**
FINANCIAL & CONSUMER AFFAIRS AUTHORITY	**3**	**5**	**9**
GLOBAL TRANSPORTATION HUB AUTHORITY	**1**	**2**	**0**
PHYSICIAN RECRUITMENT AGENCY OF SASKATCHEWAN	**0**	**0**	**1**
SASKATCHEWAN CROP INSURANCE CORPORATION	**6**	**7**	**6**
SASKATCHEWAN GOVERNMENT INSURANCE (SGI)			
Auto Fund	52	35	43
Claims Division - Auto Claims	63	79	89
Claims Division - No Fault Insurance	35	38	46
Claims Division - Other / SGI Canada	16	23	34
Other	9	25	17
TOTAL - SGI	**175**	**200**	**229**
SASKATCHEWAN LIQUOR AND GAMING AUTHORITY	**2**	**1**	**1**
SASKATCHEWAN TRANSPORTATION COMPANY (STC)	**1**	**1**	**3**
SASKENERGY	**48**	**46**	**32**
SASKPOWER	**100**	**86**	**81**
SASKTEL	**32**	**39**	**43**
SASKWATER	**0**	**1**	**0**
WATER SECURITY AGENCY	**19**	**12**	**16**
TOTAL	**396**	**411**	**432**

**NOTE: Crown corporations about whom we received no complaints in 2015-2017 are not listed in this table.*

Case Examples

Investigation

BY METER, LINE OR LOT?
SaskPower

Mel contacted us because he disagreed with the amount SaskPower rebated him for costs he incurred to pre-service a subdivision with primary power distribution facilities.

Mel developed a commercial subdivision. He installed primary distribution facilities for the lots, but additional work would have to be done to make the service usable to SaskPower customers.

When Mel first contacted SaskPower about his plans, he talked with a business manager. He understood the business manager to have promised him $1,500 per installed meter. Later, when we talked with the business manager, he said he told Mel that the rate was $1,500 per service line, regardless of how many power meters were installed on each line. There was nothing in writing to confirm this verbal agreement.

As Mel's work progressed, he received rebate cheques from SaskPower for some of the lines he installed. Some of the cheques indicated they were for a "lineshare rebate." These cheques represented rebates of $1,500 per line on each lot except for one: a lot with two lines on it, for which SaskPower only paid him for one line. SaskPower later told us it did not offer to pay Mel another $1,500 for the second line on the lot even though he was eligible for it because he had accepted $1,500 "with no dispute," but that SaskPower would be willing to pay him for it.

Mel disagreed with the payouts and contacted SaskPower. A second business manager tried to address his issues and wrote in an email that he would pay him $4,500 for three more lots, but that the rebates available for another five lots were still being reviewed.

About a year later, Mel sent SaskPower calculations showing the rebates paid to him and what he believed was still owing. He figured out the number of meters installed based on what the occupants of the lots told him and by counting the number of visible meters. He believed he had been significantly underpaid and that he should receive $1,500 for each meter.

A third business manager contacted him and followed up with an email to say how much the next payment to him would be and that SaskPower would need to check on the additional amounts Mel requested.

Mel said he didn't hear from SaskPower again until six months later when he received a letter from a director that spelled out how many lots he had developed and, at a rate of $1,500 per lot (not line), how much SaskPower had paid Mel. According to the letter, SaskPower would be paying him the remaining $6,000 it owed him. Mel contacted the director to once again explain that the initial verbal agreement was for him to receive $1,500 per meter and that he would not be cashing the cheque for $6,000. He also contacted our Office.

We found that SaskPower did not follow its former rebate policy nor its current guidelines. Although Mel believed SaskPower agreed to pay him per meter, there was no evidence it did. We found that SaskPower agreed to pay him a flat rate of $1,500 per installed line (which a customer begins to use within five years of the installation). Although we acknowledge there was no consensus about what SaskPower would pay Mel, we found it reasonable to expect SaskPower to honour its understanding of what it was prepared to pay: $1,500 per primary distribution line installed and used within five years. This meant that Mel was entitled to a second rebate for the lot that had two lines installed.

We made the following recommendations:

1. SaskPower pays the complainant $1,500 for each eligible primary distribution line he paid to have installed in the subdivision for which SaskPower has not already paid him.

   Status: Accepted

2. SaskPower take steps to ensure that developers, its customers and its staff understand its policy of offering rebates for the construction of electric service facilities, and, in cases where its staff exercise discretion to deviate from the policy, that SaskPower ensures that the rebate applicant and the staff involved document and agree on the basis upon which rebates will be paid.

   Status: Accepted

Investigation

MISSING PIECES

SGI

The Office of the Public Guardian and Trustee contacted us on behalf of Nell, because they thought SGI had unfairly denied her claim.

Nell felt ill so was admitted to hospital. While she was in the hospital, her vehicle was in an accident. It was unclear who had been driving. A few days later, Nell was released from hospital.

SGI had been looking into her vehicle claim and wanted to sort out several inconsistencies in the information they had received. She met with them, but refused to provide information and cut the interview short. A few weeks later, Nell was re-admitted to hospital on the same day she was scheduled to meet with SGI. She missed the appointment.

SGI's legislation requires that any person who was involved in an accident or knows about it to provide relevant information to SGI. Since Nell did not cooperate in one interview and missed the next one, SGI sent her a registered letter, denying the claim. When the letter arrived at her home, she was not there to receive it, so it was sent back to SGI.

During her time in hospital, it was determined that Nell did not have the capacity to manage her own affairs. The Public Guardian and Trustee officially became the guardian of her property. She was then transferred to a care facility.

A trust officer with the Public Guardian and Trustee learned that Nell had a claim with SGI. The officer contacted SGI to learn more and was told that the claim was denied because Nell had been uncooperative and had not provided required information. SGI said the 30-day deadline to appeal this decision had passed.

The trust officer thought it was unclear how Nell had been uncooperative and did not know what information she was supposed to have provided. The trust officer did not think it was fair for SGI not to allow an appeal when Nell had been unable to receive or respond to the denial letter. She also questioned what state Nell might have been in when she refused to answer SGI's questions. SGI confirmed that its decision was final, so the trust officer contacted our Office on Nell's behalf.

We opened an investigation into whether SGI had followed a fair process. We conducted interviews with SGI and the trust officer, and we looked at several pieces of documentation, including SGI's denial letter. The letter did not state what the appeal process would be if Nell disagreed with SGI and did not mention any time limits for an appeal.

We contacted SGI's Fair Practices Office to review the case with them and they acknowledged that there were several unusual factors, including Nell's health, her inability to receive the letter, and the lack of appeal information in the letter, even if she had been able to receive it. Before we completed our analysis and findings, SGI decided that paying the auto claim was appropriate in this case, so made payment to the Public Guardian and Trustee on Nell's behalf.

Status: Resolved

Early Resolution

UNPLUGGED

SaskPower

Matthew called us because he did not think it was fair that his power was disconnected without notice when he had been making the agreed payments to clear his debt to SaskPower.

Matthew is a senior with limited means. Some tenants had left him with a large unpaid power bill and a fire in his home had left him with additional expenses. At that time, he had received a disconnection notice from SaskPower and had contacted them. Since he could not pay the full amount, it was agreed that he would pay $200 a month and a load limiter was installed, which allowed a reduced supply of electricity to power a few essential devices or appliances.

This was important to him because he had been diagnosed with a breathing disorder and his doctor had prescribed the use of an air purifier and a CPAP machine to help him breathe at night. The load limiter allowed enough power for him to use these appliances and heat up his meals. For the next five months, he made his $200 payments and one month paid $400. His power was then disconnected without notice.

When Matthew contacted us, he said he didn't understand why he was disconnected and just wanted to re-establish the agreement that he had before. When we contacted SaskPower, they told us that they had been getting tougher with delinquent debts and since it was no longer winter, they had been making some disconnections. They agreed that Matthew's situation was complex and said they would review it.

After reviewing his file, SaskPower said that if Matthew could pay a portion of his debt as a lump sum, they would reconnect his power with the load limiter and he could pay $210 monthly until the debt was paid off. A family member was able to help him with the lump sum payment and his power was reconnected.

Status: Resolved

Other Ministries and Entities

Complaints Received

MINISTRIES	2017	2016	2015
ADVANCED EDUCATION	**6**	**8**	**12**
AGRICULTURE	**3**	**11**	**3**
CENTRAL SERVICES	**0**	**1**	**2**
ECONOMY	**4**	**12**	**4**
EDUCATION	**6**	**5**	**5**
ENVIRONMENT	**17**	**14**	**12**
EXECUTIVE COUNCIL	**0**	**1**	**0**
FINANCE	**2**	**4**	**4**
GOVERNMENT RELATIONS	**8**	**4**	**5**
HIGHWAYS AND INFRASTRUCTURE	**7**	**16**	**8**
JUSTICE (OTHER THAN CORRECTIONS)			
Court Services	8	18	20
Maintenance Enforcement Branch	38	34	41
Public Guardian and Trustee	28	19	11
Office of the Public Registry Administration	1	3	3
Office of Residential Tenancies / Provincial Mediation Board	50	58	50
Justice - Other	25	21	19
TOTAL - JUSTICE (OTHER THAN CORRECTIONS)	**150**	**153**	**144**
LABOUR RELATIONS AND WORKPLACE SAFETY	**10**	**15**	**28**
PARKS, CULTURE AND SPORT	**4**	**2**	**3**

BOARDS	2017	2016	2015
AGRICULTURAL IMPLEMENTS BOARD	0	1	0
FARMLAND SECURITY BOARD	0	0	1
HIGHWAY TRAFFIC BOARD	5	5	9
LABOUR RELATIONS BOARD	2	0	1
SASKATCHEWAN MUNICIPAL BOARD	2	1	1
SASKATCHEWAN SOCIAL SERVICES APPEAL BOARD	6	3	8
SOCIAL SERVICES REGIONAL APPEAL COMMITTEES	0	0	1
SURFACE RIGHTS ARBITRATION BOARD	1	0	1
WORKERS' COMPENSATION BOARD	87	88	126
COMMISSIONS			
APPRENTICESHIP AND TRADES CERTIFICATION COMMISSION	0	2	0
AUTOMOBILE INJURY APPEAL COMMISSION	3	4	1
PUBLIC SERVICE COMMISSION	1	3	1
SASKATCHEWAN HUMAN RIGHTS COMMISSION	15	8	19
SASKATCHEWAN LEGAL AID COMMISSION	59	44	42
SASKATCHEWAN PUBLIC COMPLAINTS COMMISSION	13	11	11
TEACHERS' SUPERANNUATION COMMISSION	0	0	1
AGENCIES AND OTHER ORGANIZATIONS			
ANIMAL PROTECTION SERVICES OF SASKATCHEWAN	1	3	3
EMPLOYMENT ACT ADJUDICATORS	0	0	2
SASKATCHEWAN ASSESSMENT MANAGEMENT AGENCY (SAMA)	2	4	1
SASKATCHEWAN POLYTECHNIC	3	8	6
TECHNICAL SAFETY AUTHORITY OF SASKATCHEWAN	0	2	1
TOTAL: OTHER MINISTRIES AND ENTITIES*	**417**	**433**	**466**

**NOTE: Ministries and other government entities about whom we received no complaints in 2015-2017 are not listed in this table.*

Case Examples

Investigation

A QUESTION OF ELIGIBILITY
Public Service Commission (PSC)
Ministry of Finance, Public Employees Benefits Agency (PEBA)

Marilyn contacted us because she did not think it was fair that her benefits under the Public Employees' Extended Health Care (EHC) Plan were terminated without notice. The EHC Plan provides health care benefits to government employees who are members of the Saskatchewan Government and General Employees' Union (SGEU).

In the 1990s, when Marilyn was an SGEU member, she was in a car accident while at work. Since then, she has been on an indefinite leave of absence and receiving Workers' Compensation Board (WCB) benefits. She also had access to benefits under the EHC Plan. Technically, Marilyn had also been eligible for benefits under the Long-term Disability (LTD) Plan, but because she was already getting WCB benefits, she could not also receive LTD benefits. In 2003 or 2004, her eligibility for LTD benefits lapsed because she did not provide updated medical information when asked. Because she was not actually receiving LTD benefits at the time, this was not concerning to her.

In January 2016, the Public Employees Benefits Agency (PEBA) told the PSC that employees who were not eligible for LTD benefits, were also not eligible for EHC benefits. This prompted the PSC to find out how many other EHC recipients were on indefinite leaves of absence, receiving WCB benefits, but not LTD benefits. The search identified 30 people.

On June 22, 2016, PEBA submitted an information item to the EHC Plan's Joint Board of Trustees, saying that because the 30 employees were no longer eligible for LTD benefits, their EHC benefits should end. The Board voted unanimously to end their EHC benefits. On June 28, 2016, the PSC gave Marilyn notice that her EHC benefits were ending on June 30, 2016. Marilyn contacted us.

The Joint Board is not within our jurisdiction, but PEBA and the PSC are. While we could not review the Board's decision, we could review the information that the PSC and PEBA provided to the Board for it to make the decision, and the way employees were notified of the decision. We found that the information provided to the Board was wrong. The EHC Plan says benefits continue as long as disease or injury prevents an employee from performing the regular duties of his or her job – regardless of whether the employee continued to be eligible for LTD benefits.

We also found that the process was unfair. Marilyn got notice just two days before her EHC benefits ended. She also had no idea PEBA and the PSC were thinking about terminating her benefits. Providing adequate notice is necessary for a fair process. It enables those who will be affected by a decision to know that the decision is being made and to make submissions about it before it is made. She and the others who were similarly affected by the Board's decision did not have these opportunities.

PEBA told us that if the people knew in advance that their benefits might be ending, they would have an opportunity to "queue up" before their benefits ended. We found this to be unreasonable. The value in guarding against this risk was overshadowed by the unfairness of not allowing those affected to participate in the decision being made about them.

We also found that the letter Marilyn got was unclear. It did not say the Board made the decision and did not provide accurate reasons why the Board made the decision in her specific case. We made the following recommendations:

1. The Public Service Commission and the Ministry of Finance should determine whether the complainant is, in fact, disabled within the meaning of the Extended Health Care Plan for Saskatchewan Government and General Employees' Union (SGEU) members, without reference to the SGEU Long Term Disability Plan eligibility process and, if so, recommend to the Joint Board of Trustees that the complainant's eligible status under the Extended Health Care Plan be reinstated retroactively to July 1, 2016.

   Status: Accepted

2. The Public Service Commission and the Ministry of Finance should develop and implement a fair process to govern how they provide information and recommendations to the Joint Board of Trustees for decisions that may affect the rights and interests of employees, including ensuring employees that may be affected by the decision receive:

   a. Adequate notice of the proceedings and the issue to be decided.
   b. Disclosure of all the information being placed before the Joint Board of Trustees.
   c. An opportunity to respond and present their case.
   d. Adequate reasons for the decision.

   Status: Accepted

3. The Public Service Commission and the Ministry of Finance should consult with the SGEU, the Great West Life Assurance Company and any other participants in the Extended Health Care Plan to ensure the plan text and all employee-facing information about the plan, including the employee information booklet, is clear about what, when and to whom evidence of an employee's disabled status must be submitted by the employee to establish their eligibility for Extended Health Care Plan benefits.

   Status: Accepted

4. The Ministry if Finance should share our final report in this case with the Joint Board of Trustees.

   Status: Accepted

Investigation

A QUESTION OF OWNERSHIP
Animal Protection Services

Noreen contacted us because she believed that the Society for Prevention of Cruelty to Animals (SPCA) had improperly seized a horse that she said belonged to her.

Midnight, a stallion, was being boarded at a local stable. Noreen's relative, Marty, had been paying the boarding fee. Marty had other animals at his home, which the SPCA seized under *The Animal Protection Act, 1999.* The SPCA charged Marty under the Act and learned that he also had signed an undertaking in another province and was under conditions not to purchase or have control of any animals. They then received a tip that Marty had another animal that was being boarded. They seized Midnight and gave him to a caregiver under the authority of the Act.

Marty contacted us to complain that Midnight was improperly seized. When he said Midnight belonged to Noreen, we asked if Noreen could contact us directly. She did and told us that Midnight used to belong to Marty, but that she had bought him some time earlier and he was in good condition, so she thought he should not have been seized. She said she was losing revenue she would have made from breeding fees.

Our investigation considered whether the SPCA acted within its authority when it seized Midnight and later gave him to a third party.

When we received Noreen's complaint, Animal Protection Services of Saskatchewan (APSS) had become the agency funded by the Ministry

of Agriculture to provide animal protection services in Saskatchewan under *The Animal Protection Act, 1999*.

The Act gives the animal protection officers of the funded agency the authority to seize animals that are found in distress if the person responsible for the animal does not promptly take steps to relieve the animal's distress or if they cannot be found. The Act also allows the animal protection officer to deliver the animal into the custody of a caretaker and to give or sell the animal if the person responsible for the animal cannot be located and notified within three business days, or if located and notified, does not pay or enter into an agreement for the expenses incurred with respect to the animal.

In this case, according to the APSS, Midnight had been seized based on information that Marty had failed to comply with the conditions of an undertaking. However, an animal protection officer has no legal authority to enforce the Criminal Code, including seizing an animal based on an alleged breach of an undertaking related to criminal charges or convictions. Records from the time of the seizure indicate that Midnight was in good condition, so the SPCA did not have grounds to seize him and no authority to give him away.

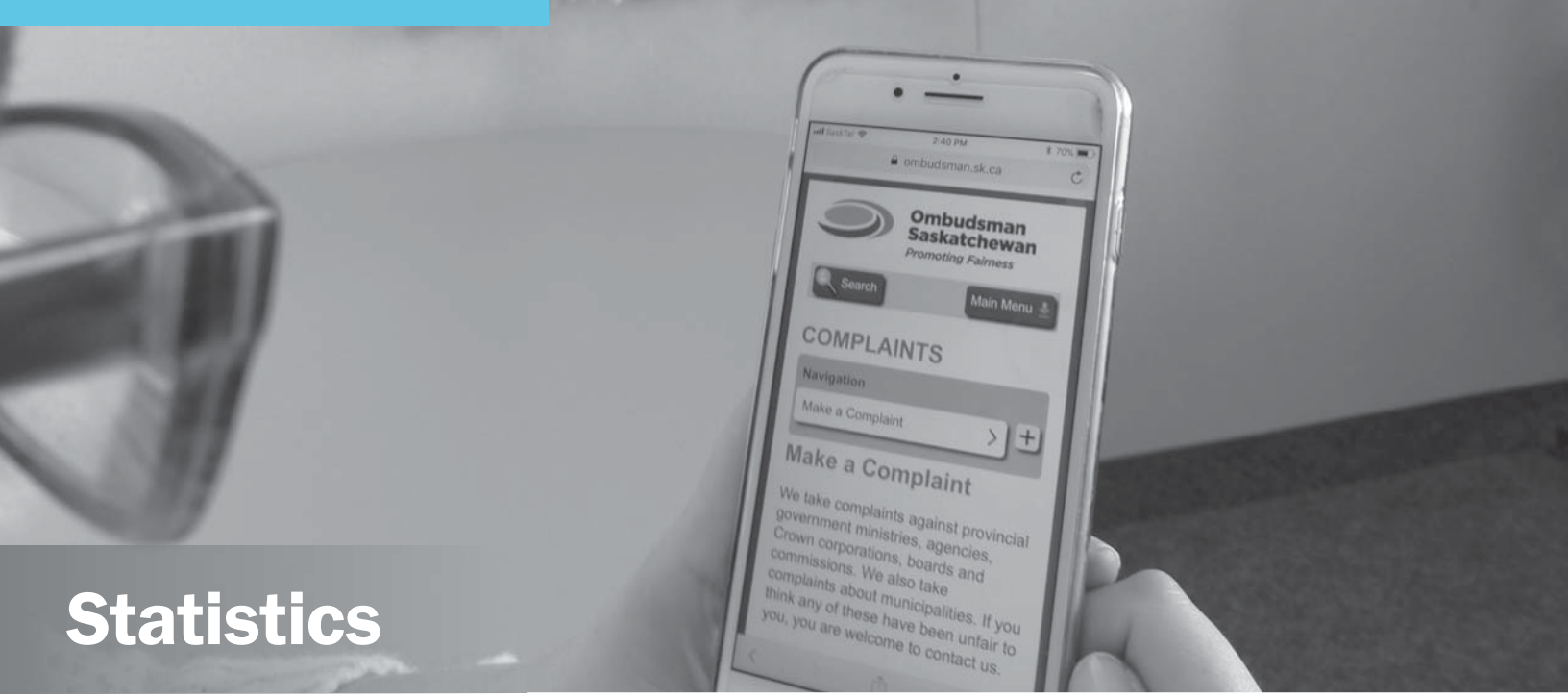
The APSS acknowledged this and said it had since adopted a practice that clarifies the role of animal protection officers when seizing an animal, but that these had not been developed as a written policy or procedure.

When we checked to see if Noreen was indeed Midnight's owner, we found some conflicting evidence. Although Noreen produced a handwritten bill of sale between herself and Marty, this information had not been registered with the applicable breeders' association. Marty had taken the lead in making arrangements for Midnight's care, in paying the boarding fees, and in contacting our Office and the APSS. At times he referred to Midnight as his. When we interviewed Noreen about Midnight, she did not seem to know much about him or where he had been boarded. We concluded that there was not strong enough evidence of Noreen's ownership to recommend any compensation to her.

We made the following recommendation:

1. Animal Protection Services of Saskatchewan Inc. develop written policy and procedures outlining animal protection officers' authority and responsibility to seize animals under *The Animal Protection Act, 1999*, and their role in assisting police agencies in the enforcement of court conditions or orders involving animals.

   Status: Accepted



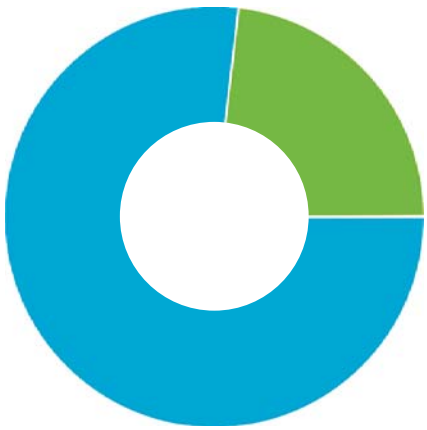
Statistics

Receiving Complaints

Most complaints we receive fit within our jurisdiction, but a significant number do not. In those instances, we take the time to redirect the person to the most appropriate office or service.

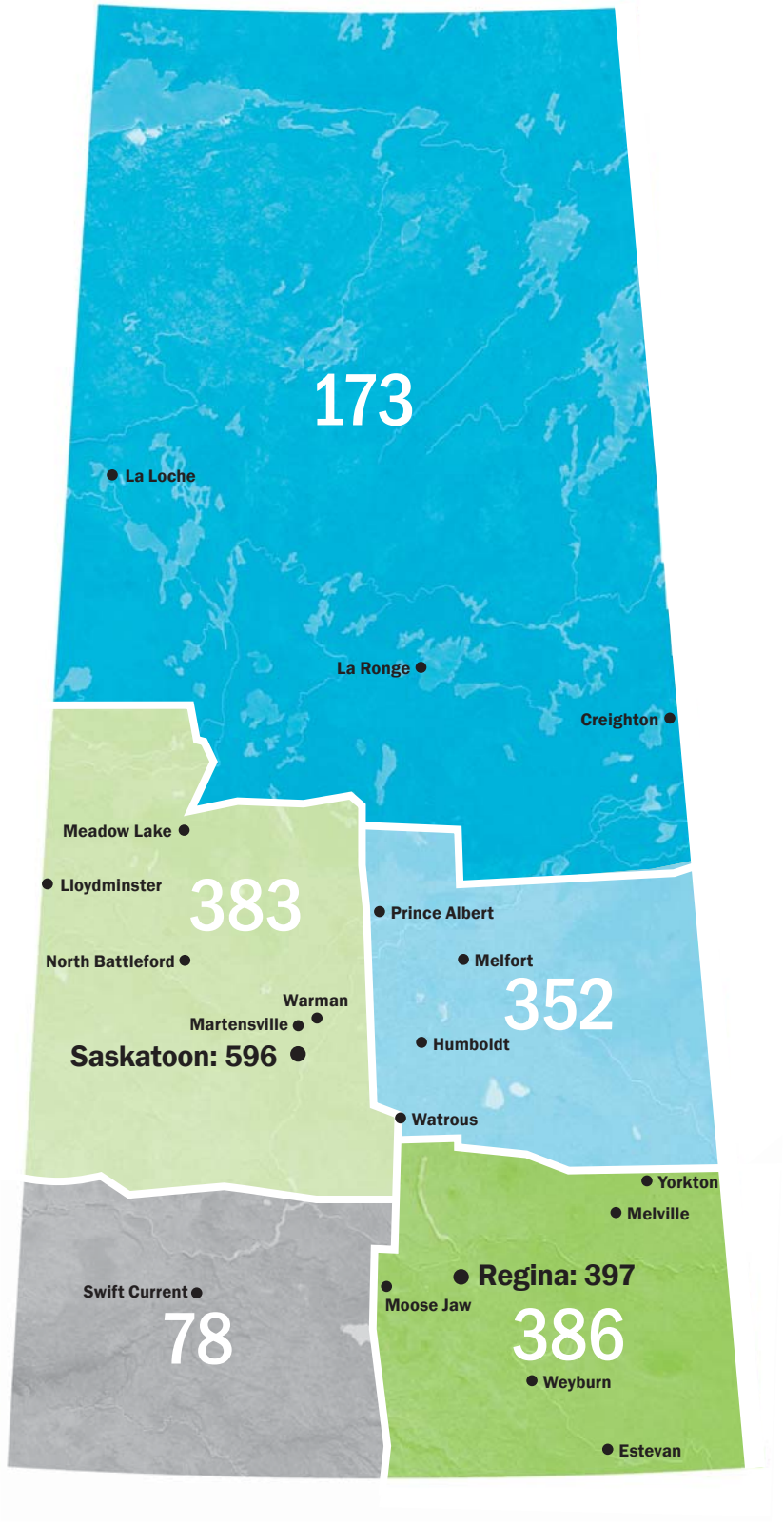
In 2017, we received 4,288 complaints: 3,298 that were within jurisdiction and 990 that were not.

COMPLAINTS RECEIVED



- Within Jurisdiction: 3,298
- Outside Jurisdiction: 990

COMPLAINTS BY REGION



This map provides an overview of the complaints we received within our jurisdiction, separated into five regions, plus Regina and Saskatoon. Complaints received from inmates in correctional centres have been counted separately since they do not necessarily represent the home communities of those complainants.

Regions & Larger Cities

North	173
West Central	383
East Central	352
Southwest	78
Southeast	386
Regina	397
Saskatoon	596

Other Locations

Correctional Centres	812
Out of Province	49
Unknown	72

TOTAL Complaints

TOTAL	3,298

HOW COMPLAINTS WERE RECEIVED

- Phone: 3,942
- Internet Form: 162
- Letter: 56
- Walk-in: 100
- Email: 28

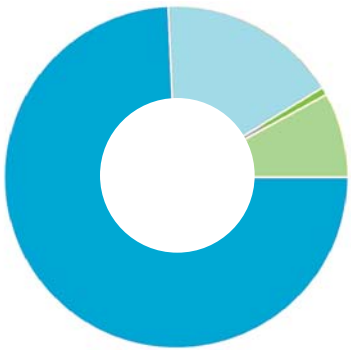
COMPLAINTS RECEIVED OUTSIDE JURISDICTION

TOPIC	COMPLAINTS RECEIVED
Consumer (including landlord/tenant)	371
Courts/Legal	70
Education	16
Federal Government	170
First Nations Government	17
Health Entities Outside Our Jurisdiction	44
Police Complaint	35
Private Matter	82
Professional	55
Other	130
TOTALS	**990**

Closing Complaints

Each complaint is unique and there are many possible outcomes. However, we have grouped outcomes into the four categories defined below. Please note that not all complaints are closed in the year they are received, so the number received in a year will not necessarily be the same as the number closed. Also, some complaints contain multiple issues, each of which may be closed with a different outcome.

COMPLAINT OUTCOMES



- Initial Support: 2,583
- Resolved: 590
- Recommendations Made: 26
- No Further Action: 279

Initial Support
We provided basic support, such as a referral to an appeal process, an advocacy service, or an internal complaints process. At this stage, we encourage people to call us back if their attempts to resolve the matter do not work out.

Resolved
These complaints were resolved in some manner. For example, an appropriate remedy may have been reached or a better explanation provided for a decision.

Recommendations Made
This represents the total number of recommendations made on closed files.

No Further Action
There was no further action required on these files. For example: there was no reason to request the government entity to act, there was no appropriate remedy available, or the complainant discontinued contact with our Office.

TIME TO PROCESS CASES

The time it takes to complete and close a case varies, depending on the circumstances and the amount of work required. Many can be closed within a few days, while others may take several months. Overall, our goal is to complete most cases within six months.

	TARGET	ACTUAL
Files Closed Within 90 Days	90%	96%
Files Closed Within 180 Days	95%	99%

Public Education and Outreach

In 2017, we continued to educate the public about our Office through our website, presentations, informational booths and mobile intake. The latter is a more personalized way to reach out to communities by making a presentation and taking complaints in person. We were invited to make several presentations for municipal entities and hosted webinars for municipalities, which included information about dealing with conflicts of interest. We estimate 125 people participated.

We also provided education to public sector employees, including orientation for corrections workers. We made presentations to constituency assistants from both parties about our role and when to refer people to us.

A more in-depth form of education is available to public sector employees through our "Fine Art of Fairness" workshop. Topics include the Ombudsman's role; fairness; power, rights and interests; and how to make and communicate good decisions. In 2017, we revised and updated our participant workbook and slides, which were well received. With the addition of participants from the municipal sector, attendance has increased and we plan to make more workshops available in 2018.

Finally, we exchanged knowledge with the broader ombudsman community. For example, one of our Deputy Ombudsman was co-director of the Osgoode/Forum of Canadian Ombudsman (FCO) certificate program which helps train ombudsman staff across Canada.

"FINE ART OF FAIRNESS" WORKSHOPS
Open to All Provincial and Municipal Entities
Melfort
Prince Albert
Regina (2)
Saskatoon
Weyburn

By Request
Highway Traffic Board
Ministry of Advanced Education, Universities and Private Vocational Schools Branch
Ministry of Agriculture, Livestock Loan Guarantee Program
Ministry of Parks, Culture and Sport, Appeals Board
Ministry of Social Services (3)
Office of the British Columbia Ombudsperson

PRESENTATIONS ("OMBUDSMAN 101" AND MORE...)

City of Estevan Council Members
Constituency Assistants, Saskatchewan Party
Constituency Assistants, Saskatchewan New Democratic Party
FCO-Association of Canadian College and University Ombudspersons (ACCUO) Conference
Global Gathering (Citizenship Class), Open Door Society, Saskatoon
Ministry of Social Services (2)
Osgood / Forum of Canadian Ombudsman (FCO) Certificate: Essentials for Ombuds (2)
University of Saskatchewan, Prison Law Class
Provincial Association of Resort Villages of Saskatchewan (PARCS)
Radius Community Centre, Saskatoon
Sunrise Health Region
West Central Municipal Government Committee

PRESENTATIONS FOR CORRECTIONS WORKERS

Pine Grove Correctional Centre
Prince Albert Correctional Centre
Regina Correctional Centre (2)
Saskatoon Correctional Centre (2)
Youth Workers & Probation Officers, Saskatoon
Probation Officers, Regina

BOOTHS AND EVENTS

University of Regina Career Days (2)
Saskatchewan Seniors' Mechanism Conference 2017
Saskatoon Council on Aging – Spotlight on Seniors
Saskatchewan Student Leadership Conference

WEBINARS

"The Ombudsman's Role in Reviewing Complaints About Municipalities" (3)

MOBILE INTAKE

Weyburn
Melfort

Staff and Budget

Staff

Regina Office

Rahil Ahmad
Assistant Ombudsman

Sherry Davis
Assistant Ombudsman

Paul Dawson
Assistant Ombudsman

Leila Dueck
Director of Communications

Karin Dupeyron
Complaints Analyst

Stacey Giroux
Executive Administrative Assistant

Jennifer Hall
Assistant Ombudsman

Pat Lyon
Assistant Ombudsman

Stephanie Pashapouri
Complaints Analyst

Will Sutherland
Assistant Ombudsman

Greg Sykes
General Counsel

Harry Walker
Complaints Analyst

Saskatoon Office

Christy Bell
Assistant Ombudsman

Jeff Cain
Assistant Ombudsman

Renée Gavigan
Deputy Ombudsman

Adrienne Jacques
Complaints Analyst

Ryan Kennedy
Executive Administrative Assistant

Sherry Pelletier
Assistant Ombudsman

Shelley Rissling
Administrative Assistant

Andrea Smandych
Manager of Administration

Lindsay Mitchell
Assistant Ombudsman

Niki Smith
Complaints Analyst

Kathy Upton
Complaints Analyst

Rob Walton
Assistant Ombudsman

Budget

	2015–2016 AUDITED FINANCIAL STATEMENT* (RESTATED)	2016–2017 AUDITED FINANCIAL STATEMENT*	2017–2018 BUDGET**
REVENUE			
General Revenue Fund Appropriation	**$3,151,907**	**$3,371,104**	**3,981,000**
Miscellaneous	-	-	-
TOTAL REVENUE	**$3,151,907**	**$3,371,104**	**3,981,000**
EXPENSES			
Salaries & Benefits	**$2,437,205**	**$2,616,787**	**3,075,000**
Office Space & Equipment Rental	**$310,243**	**$292,526**	**353,100**
Communication	**$51,529**	**$54,479**	**63,400**
Miscellaneous Services	**$98,012**	**$97,341**	**162,200**
Office Supplies & Expenses	**$39,888**	**$22,583**	**27,600**
Advertising, Promotion & Events	**$58,608**	**$66,512**	**67,800**
Travel	**$52,324**	**$55,132**	**60,800**
Amortization	**$72,009**	**$70,446**	-
Dues & Fees	**$23,565**	**$47,456**	**67,000**
Repairs & Maintenance	**$37,289**	**$36,445**	**104,100**
Capital Asset Acquisitions	-	-	-
Loss on Disposal of Capital Assets	-	-	-
TOTAL EXPENSES	**$3,180,672**	**$3,359,707**	**3,981,000**
ANNUAL (DEFICIT) SURPLUS	**($28,765)**	**$11,397**	-

*These columns are based on our audited financial statements, which follow our fiscal year (April - March) and our annual report follows the calendar year. The audited financial statements are available on our website at www.ombudsman.sk.ca.

**Due to the timing of this report, 2017–2018 numbers reflect the budgeted amount rather than the actual.