

GTA COMMUNITY LEGAL CLINICS' TRANSFORMATION PROJECT

VISION REPORT MOTION

The Board of Directors of South Etobicoke Community Legal Services has received the Vision Report for the GTA Legal Clinics Transformation Project. SECLS has played and will continue to play an active role in the discussions to transform and improve the clinic system in the GTA. However, any improvements should be based on resolving the inequities in the funding of the Peel/Dufferin and York regions as a separate issue from the question of the best and most efficient model(s) for all clinics in the City of Toronto.

We are committed to building on what has worked in the clinic system and to transform and improve services to our community.

To that end we agree that the following transformational principles are critical:

- a) Any clinic model developed must be client and community centred and governed by a community Board of Directors
- b) There be a continuation of a full range of community legal clinic services, including direct client services, law reform and public legal education
- c) It is imperative that we increase our connection to our respective communities. To that end we must implement policies and processes that reflect our firm commitment to increase community development work
- d) Core areas of legal service should be more consistent across the City of Toronto
- e) Resources for community legal clinics should be equitably distributed among the low income population of the City of Toronto
- f) In order to achieve our objectives, community legal clinics should be well funded enough to be capable of transforming our service delivery processes and flexible enough to respond to changing demographics and service population needs
- g) Additional funding for the City of Toronto general service community legal clinics will be required for the equitable distribution of resources

Nevertheless we have the following concerns regarding the process and conclusions reached to date:

- a) We do not agree that closing 14 general service community legal clinics and replacing them with 3 or more larger clinics will necessarily better serve the low

income communities of Toronto and before any consideration of this type of transformation is considered we believe that additional time is needed:

- to discuss and assess the merits of working in teams, how those teams can be organized (whether through the recommended “model” clinics or agreements with other clinics) as well as the number of support staff that are required in community legal clinics
- to discuss and assess whether the recommended “model” clinic is the only way to meet the principles and objectives outlined in the Vision Report;
- to discuss and assess the feasibility and effectiveness of creating access points in Toronto before closing 14 community based clinics and establishing larger clinics;

b) In addition we believe that:

- other alternatives and options to transforming the clinic system in Toronto must be discussed and considered in depth;
- any transformation process must take into consideration the various types of existing clinics (non-profit, with charity status, co-op, Hub based, unionized staff, etc.) as well as programs funded by non-LAO sources currently run by different clinics and how these might be impacted by the recommendations of the Vision Report;
- a more in-depth analysis to determine how to retain the strong community links that each clinic has built, how to maintain representative community boards and existing non-LAO funded programs as well as exploring the potential impact of any proposed changes to clinic staff must be part of any visioning report and cannot be left to an Implementation Phase;
- the need to increase clinic law services in York and Peel/Dufferin regions should be separate from the discussion about the future of Toronto community clinics; and
- that we need a better understanding of how the increased funding to the clinic system announced by the Government of Ontario impacts the discussion and potential decisions about the Transformation Process and the

Vision Report, especially before being asked to accept any recommendations to change the clinic system in Toronto or to close SECLS

We therefore resolve that

1. LAO should address the gross inequality in resources in York and Peel/Dufferin regions. However, the City of Toronto is also underfunded and the Vision Report is asking Toronto to make the most dramatic changes. Accordingly, the unmet need in the Peel/Dufferin and York regions should be a separate issue from the question of the best and most efficient model(s) for all clinics in the City of Toronto.
2. The Steering Committee representatives of the 14 Toronto clinics should reconvene as soon as possible to address the issues raised above as well as to consider alternative ways to implement the Principles and Objectives of the Vision Report to transform clinic law delivery of services to our communities



Isabelle Khan, Chair, Board of Directors, SECLS