

GTA LEGAL CLINICS' TRANSFORMATION PROJECT

STEERING COMMITTEE MEETING

MONDAY MAY 26, 2014

6:00PM-9:00PM

NORTH YORK

PRESENT:

Kevin Lee, KBCLS; Isabella Meltz, KBCLS; Andrea Margles, PCLS; Trevor Howard, SECLS; Stewart Cruickshank, ETCLS; Julius Mlynarski, SECLS; Vanessa Emery, WSCLS; Christie McQuarrie, WSCLS; Brook Physick, FLCS; Joe Myers, WCLS; Marjorie Hiley, FCLS; Sharon Majik, SECLS; Mayo Hawco, NPD-CLS; Yodit Edemariam, RCLC; Ann McRae, RCLC; Luis Mayorga, ETCLS; Nancy Henderson, PCLS; Jack De Klerk, NLS; Jack Fleming, NPD-CLS; Dennis Bailey, CLCYR, Steven McCahon, RCLC; Paula Courtot, CLCYR; Matt Benson, ETCLS; Leslie Anderson, WTCLS, Sean Meagher, PI; Leila Sarangi, PI

AGENDA

Agenda Items		Discussion/ Information	Outcome	Action/Discussion Points	
1	6:00	Welcome/introductions		Received	
2	6:05	Review of meeting materials	Information	Received	
3	6:10	Review of minutes from May 13 meeting Feedback from Clinics	Discussion	Approval	Review of new time line resulting from discussions of the SC.
4	6:15	Working Group Report	Information	Received	
5	6:30	Number of Clinics in Toronto	Discussion	Approval	
6	7:30	Resource Allocation: Power Point Presentation by Public Interest	Discussion	Approval	
7	9:00	Adjournment and next meeting	Discussion	Approval	Next meeting is Tuesday June 10, 2014 from 6:00pm – 9:00pm in Metro Hall

MINUTES

1. Welcome and Introductions

Welcome and introductions were received.

2. Review of Meeting Materials

Meeting materials were received.

3. Review of Minutes from May 13th Meeting; Feedback from Clinics

Minutes from May 13 were reviewed.

SC members were asked to provide feedback from their clinics. Clinics wanted to know if there will be a centralized training centre similar to Parkdale's in the new model. They also wanted more information about satellites, in particular, how permanent and fully staffed they would be. It was noted that permanently staffed satellites may undermine the principle of having teams by fracturing the team and permanent satellites can be expensive. Rexdale, for example, is in a hub now, would we give up that location or scale it back? While the research and principles adopted suggest non-permanent community access points, it was noted that space will need to be suitable, free and consistently available.

The KBCLS Board shared that it is unable to endorse a transformation vision report that is based on the proposed prototype org chart. The motion, which was unanimously passed at their recent board meeting, is as follows:

[The KBCLS] Board is unable to endorse any of the proposed models because they do not reflect the community based service model that responds to the needs of our clients.

KBCLS suggests that the larger structure will institutionalize and bureaucratize the community clinic system and shows a radical shift from the current model. They did not want to wait until June to let the SC know of their decision, which is why they are presenting it to the SC today.

KBCLS is also moving forward with plans to have dialogue with clinics, the general public and media to talk about this. They believe that the project requires more resources to continue the discussion and development of a new model. It was noted that the process of recommending a new system has not concluded yet and there will be more opportunities for discussion as we move forward.

4. Working Group Report

Jack and Marjorie gave the Working Group report. They put forward to Vicky that the clinics need more funding from LAO, but she was clear that this decision is not in her scope. She is going to schedule a meeting between the co-chairs and Bob Ward within the next couple of weeks to discuss the resourcing issues facing clinics in the GTA.

The WG co-chairs continue to meet with the committee of transformation projects across the region. Hugh Tye and Jayne Mallon are the Co-chairs of that group. LAO are adjusting their position on funding a transformation project coordinator position through ACLCO.

5. Number of Clinics in Toronto

Discussed below with Resource Allocation Presentation.

6. Resource Allocation Presentation by Public Interest

Sean presented on the resourcing of clinics in the new system (see presentation emailed on May 28), which explores the various tools which could be used to determine a resourcing formula. It is suggested that the tool used for the purposes of resourcing the legal clinics be LICO households. While it is not an absolute predictor of demand and is over the eligibility criteria, it is a common measure of poverty, readily available and a strong predictor of other demands, such as immigration. For example, the map in the presentation shows there is a high correlation of immigrants/refugees and poverty in the GTA.

The first LICO table in the presentation also shows that there is little variation between poor (households below LICO) and very poor (household with incomes less than \$20K and incomes less than \$10K) in terms of geography. This, for example, would be due to their limited affordable housing options.

The presentation highlighted the extreme growth of poverty in York and Peel regions, the chronic underfunding of GTA clinics, and the implications this has on resource allocations. To fairly re-distribute current resources throughout the transformed system, Toronto would have to transfer some resources from the downtown to the inner suburbs, but would also have to transfer a large number of staff to the outer suburbs as well. The presentation showed, that, though LICO populations in Toronto have not grown at the same pace as the 905 regions, they have not fallen either, and they will still require their resources to deliver poverty law services.

However, if Toronto is to retain its current staffing, bringing the 905 into parity in staffing rations would require about 35 more staff in York and Peel regions to address their exceptional growth within those constraints.

The SC discussed whether Toronto should be required to fill the gap in resources, or whether filling this gap is the responsibility of LAO.

Considerable additional discussion explored resourcing options and factors, such as future growth, that might affect them.

The SC discussed advocating to LAO for increased funds. Toronto itself is already substantially under-resourced, especially when compared to other urban centres across the province, and the cost of transformation should not be disproportionately borne by the areas of the GTA.

The vision report will put forward a model that uses LICO household data as the indicator of poverty, the consequences of which will mean a significant transfer of resources. The report can state that while we have a model of transformation, we cannot go ahead with it without the injection of new funds from LAO.

The SC took a straw vote that showed more support the 5 clinic model than the 6 clinic model but no support for other models. Comments on the votes put considerable emphasis on which models could allow the clinics in it to reach the size of the model clinic.

Public Interest will add street names to maps and distribute them to the SC.

7. Adjournment and Next Meeting

Next meeting is June 10, 6pm – 9pm at Metro Hall

Meeting Adjourned 9:12pm