

Discouraged, diverted and disentitled

Ontario Works New Service Delivery Model

Dean Herd and Andrew Mitchell

We're having a hard time, and ... they make it harder for us. We're going through a hard time, that's why we are on that system. Because we're all going through a hard time and life is not perfect. Life is life. Sometimes some people are lucky, more lucky than others. But some people are not, and we're not. Help us instead of degrading us (B, Sault Ste Marie).

Discouraged, Diverted and Disentitled
Ontario Works New Service Delivery Model

Dean Herd and Andrew Mitchell
Workfare Watch Project
A project of the Community Social Planning Council of Toronto and the Ontario Social Safety
Network
c/o The Community Social Planning Council of Toronto
2 Carlton Street, Suite 1001
Toronto, ON
M5B 1J3

September 2002

ISBN # is 1-894199-05-7

Acknowledgements

This project would not have been possible without the enthusiastic support of a number of people. Josephine Grey and Low Income Families Together (LIFT) were supportive from the beginning, helped to design the project and agreed to facilitate the qualitative research in local communities. Sarah Blackstock carried out the fieldwork with grace, persistence, and very limited resources.

We are indebted to a number of readers and commentators who assisted us in understanding some of the on-the-ground operational issues with the new service delivery model, an area that is still in flux. Ian Morrison provided his usual thorough knowledge and thoughtful criticism. A number of lawyers and legal workers in Ontario's invaluable community legal clinics provided guidance, examples, stories and reaction to the material. They included Martha Macfie, Deborah O'Connor, Marion Overholt and Nancy Vander Plaats.

Lastly, but most importantly, we are indebted to the participants in the research, who freely gave of their time and shared their often difficult experiences. Our hope is, as always, that an honest and thoughtful critique will provide the basis for progression towards a better system: more sensitive to the specific circumstances of its users and more responsive to their needs.

Andrew Mitchell and Dean Herd

Table of Contents

INTRODUCTION	5
NEW SERVICE DELIVERY MODEL: DESCRIPTION AND KEY FEATURES.....	10
1.1. DESCRIPTION.....	10
1.2. TWO STEP INTAKE.....	11
1.3. PARTICIPANT EXPERIENCES	22
1.4. CASE MANAGEMENT.....	26
1.4.1. <i>Problems Contacting Workers</i>	27
1.4.2. <i>Poor Client-Worker Relations</i>	30
1.4.3. <i>Constantly Changing Workers</i>	31
1.5. CONSOLIDATED VERIFICATION PROCESS	34
1.5.1. <i>How CVP works</i>	35
1.5.2. <i>Information requirements</i>	38
1.5.3. <i>Inefficiencies and inappropriate requests</i>	44
1.5.4. <i>Surveillance and Deterrence</i>	47
1.6. SUPPLEMENTARY TECHNOLOGIES.....	49
<i>Automated Support for Employment Assistance</i>	49
1.6.1. <i>Interactive Voice Response</i>	50
NEW SERVICE DELIVERY MODEL: OVERVIEW AND GOVERNMENT PRIORITIES.....	52
CONCLUSIONS.....	58

Introduction

Welfare reform in Ontario to date has focused on highly visible issues: reduced benefits, tighter eligibility requirements, work requirements and sanctions. In our first report, *Broken Promises: The Failure of Welfare Reform in Ontario* we documented experiences with the early stages of welfare reform, in particular the work requirements that were a prominent feature of early reform. We concluded that although the government had sold welfare reform to the general public as a set of changes that would provide people with a “hand up”, in fact, that hand up was not only non-existent, but in many cases was in fact counter-productive.

At the same time as people were having such negative experiences with this early phase of reform, a less well understood, but equally important set of changes was being designed and implemented. This has to do with the way welfare is delivered. In the language of welfare reform, this is known as the “Service Delivery Model” (SDM).

In 1997, the Ontario government embarked upon a pioneering joint business venture with Andersen Consulting (now known as Accenture) to redesign the delivery system for social assistance. The ‘Business Transformation Project’ substantially altered the nature of public/private partnerships in the province, allowing the private sector to become more deeply entangled in what were previously deemed to be core government functions. Driven by a desire to cut costs, the BTP sought to comprehensively redesign social assistance programmes, focusing especially upon the introduction of new technologies and practices to support the delivery of Ontario Works (OW) and the Ontario Disability Support Programs (ODSP). The existing delivery system was thought to be too labour intensive, allowing little time for direct staff contact with clients. Moreover, the lack of common technology and information sharing was thought to encourage error and fraud.

The following report has two main aims: to describe the key features of this new service delivery model and to highlight some of its early impacts. It does so in a qualitative manner, evaluating the new SDM through the experiences and perspectives of Ontario Works recipients, those encountering the new system on a daily basis. The report is based on 7 focus groups that

took place in Brampton, London, Peterborough, Sault St Marie, Scarborough, St. Catharines and Toronto in mid 2001. This material has been supplemented with case stories related by legal workers in community legal clinics from every area of the province. To protect the confidentiality of participants the stories are of necessity anonymous, and the identities of the focus group participants disguised.

Information has also been gathered through Freedom of Information Requests submitted to the Ministry of Community and Social Services (now the Ministry of Community, Family and Children's Services) and reports generated by municipal delivery agents on issues and problems with the new service delivery model. The findings of the report, therefore, are presented with two significant qualifications. Firstly, the report makes no claim to be fully representative or indeed exhaustive. It provides a snapshot evaluation based upon the prime concerns of those interviewed. Secondly, the report represents an early investigation into the operation of new welfare technologies and practices.

That said, the consistency of responses suggests both deeply held and widely shared concerns about the operation of the new model. The words of the participants in the report are representative of similar statements made by other participants throughout the research process. Moreover, the substantive nature of problems and concerns raised indicate that the problems identified go beyond the kinds of 'teething troubles' that might be expected as a new system 'beds down' during the early stages of implementation. Instead, they suggest more fundamental concerns over both the form and function of the new service delivery model.

Key findings

This report is titled “Discouraged, diverted and disentitled” for the simple reason that the new SDM, rather than being about improved service, in fact acts to inappropriately restrict entry and deny benefits to eligible people, in the service of the province’s goals to reduce the caseload and save money. This systematic denial of benefits occurs throughout the application process, as social assistance applicants are discouraged, diverted and disentitled in the following ways:

- Excessive and inappropriate requests for information;
- Cumbersome and complicated application and appeals processes;
- Deliberately confusing procedures and language; and
- Greatly restricted appeal times.

In this regard, system administration can have as important an effect on outcomes as any other component of welfare reform. Reducing benefit levels and increasing participation requirements has the effect of restricting access to assistance, regardless of need. In the same way, burdensome and inflexible administration requirements serve to entrap people and create administrative pretexts for cutting them off or denying them benefits. This ‘micro-regulation’ of the lives of poor people perpetuates the climate of suspicion and hostility that has always been a feature of social assistance. This not only undermines the relationship between workers and the clients they serve, but also the goal of enhanced individualised services and also the stated ambitions of the program.

Second, the changes to service delivery are articulated in the language of increased efficiency and enhanced services to support clients towards employment. But contrary to this promise of a more individual and supportive system, it appears that the chief characteristic of the new system is heightened, if not continual, surveillance delivered in a uniform, cookie-cutter fashion. This “new paternalism” not only contradicts what the system claims to be, but is also in conflict with the goal of enabling people to become more autonomous. Another way of characterising these changes is the difference between a human service system and a business model, between a

system designed with human needs as the focus versus one with efficiency, operational targets and profit as the driving imperatives behind the design.

In addition the technology inadequately supports the employment assistance function forcing large municipalities to maintain their own secondary systems. Small municipalities may not have the capacity to do even that.

Third, it appears that far from reducing administrative costs, and freeing up system resources to support people in their attempts to find employment, costs have, if anything, increased to fulfil the surveillance objectives of the new system. These costs come from the two-stage application processes, additional burdensome information requirements that are not related to proving eligibility, double data entry requirements, and the necessity for delivery agents to maintain their own secondary systems, in-house, to manage key delivery functions such as employment assistance. This finding is confirmed by a recent evaluation of the new SDM by the City of Ottawa, which argued that, “The Province anticipated that the SDM would substantially reduce social assistance administration and delivery costs. At this point the City and other municipalities’ experiences do not support this position.”¹

Finally, if we judge a system by what it actually does, rather than what it purports to do, then we have to conclude that the new system has failed to deliver. The new system is more concerned with surveillance and deterrence, than it is with assisting people to find employment. As the City of Ottawa study concluded, “...client service has not improved; there is insufficient provincial support for the delivery of employment assistance; that there are some integrity issues within the program; and that administrative expenditures have increased as a result of SDM.”²

Many of these criticisms of the service delivery system are not new. Social assistance has never been a generous system and has never offered substantial individualised support to employment. Workers have always been overloaded and difficult to contact and relationships with clients have

¹ City of Ottawa, Report to Health, Recreation and Social Services Committee, June 20, 2002, “Service Delivery Model Issues and Financial Implications Regarding Ontario Works and the Ontario Disability Support Program. (Hereafter *City of Ottawa*).

² Ibid.

always been difficult, frequently fraught with tension and hostility. A degree of surveillance and deterrence have always been features of assistance, and may be endemic in some form to social assistance systems generally. What is new is the intensity of surveillance and the technologies employed, the importation of private sector methods and standardised business practices which have standardised delivery and centralised policy authority at the same time as actual delivery has been decentralised.

Still more worrisome is that the government appears bent on restricting entry yet further, by ensuring that the telephone pre-screening interview process screens out greater numbers of people.

Although the new system is designed to reduce the caseload by discouraging applications, we know nothing about what happens to those who are refused assistance or discouraged from completing an application. The government has done nothing to ensure that they are not unfairly refusing assistance to people. There has been no research into the circumstances of those who are refused assistance through the operation of the new service delivery model. The unspoken assumption of the government is that they obviously didn't need assistance, but this is far from clear. They will include people who simply couldn't produce a required piece of documentation, who abandoned their telephone application after being discouraged from continuing or those who simply couldn't bear the continuing hassle of dealing with welfare. Some will have been successful getting a job and supporting themselves, but others, and no one knows how many, will not. How well or poorly they are surviving is unknown, and of little interest to the provincial government. That this would count as a successful outcome of welfare reform speaks volumes about the limited policy debate that is taking place around welfare reform. Hopefully this report will help to spark a more thoughtful policy debate about the appropriate goals for a system of social assistance.

New Service Delivery Model: Description and Key Features

1.1. Description

The new Service Delivery Model for social assistance, the key element of the Business Transformation Project (BTP), has been fully operational across the Province since January 2002. The problems that BTP was designed to address were those of rising caseloads and costs. The provincial government was unequivocal about the urgent necessity, as well as the rationale for reform:

Ontario's thirty-year-old social assistance system was in dire need of reform. Caseloads had almost tripled, annual costs had risen from \$1.3 billion in 1985 to \$6.8 billion, and business processes were largely paper-based and labour-intensive, leaving little time for caseworkers to serve clients. The technology supporting the system had become outdated and beyond repair, leading to error and fraud.³

Front and centre were concerns about rising caseloads and costs, notably from perceived fraud. Cost savings in particular loomed large in discussions of the benefits of BTP. Missing from this analysis was any acknowledgement of the wide range of other factors -- most significantly structural change in the economy, the deep recession of the early 1990s and the changes to the federal EI system rendering that first line of income support unavailable for many unemployed people -- which combined to drive up caseloads significantly.

Emerging out of this understanding, the stated goals of the BTP focused primarily upon reducing costs, as well as improving program integrity, improving client services and promoting self-sufficiency.

The SDM has the following key features:

- A common province-wide database to provide real-time access to case information and avoid duplication. Information will be available on clients who have moved within the Province or who are re-applying for assistance.

- A two-step intake process composed of telephone screening followed by a face-to-face verification interview to reduce the number of client interviews and generally improve client service.
- Third Party Interfaces to provide automated verification of client information.
- An Interactive Voice Response (IVR) system offering improved access to information for clients and allowing income to be reported.
- Standardized financial eligibility to ensure the equitable application of legislation and policies and consistent levels of financial assistance.
- A streamlined case management function which will reduce staff time on case administration by reducing and/or automating manual processes to track client information as well as producing management and field reports. Significantly, priority-based financial assessments have replaced time-based reviews.
- Automated Support for Employment Assistance to support staff in the complete delivery of Ontario Works. One application is intended to support both financial and employment assistance.
- Increased monitoring and accountability to provide additional support for program and performance monitoring.

1.2. Two Step Intake⁴

The process of determining eligibility for welfare has been divided into two discrete stages. The initial intake process is composed of a “First Stage Preliminary Assessment”, which is conducted over the telephone. By the summer of 2002, it is expected that all welfare applications in the province will be directed through just seven call centres called “Intake Screening Units” (ISU). Most clients who appear in an office wishing to make an application will be directed to a telephone to call the ISU first (except in crisis situations, and where it is deemed appropriate).

³ Daniels, Art and Bonnie Ewart, “Transforming Ontario’s Social Assistance Delivery System,” *Canadian Government Executive*, Issue 1, 2002.

⁴ Information on the two-stage application process was gathered from a variety of sources including “Ontario Works Transition Directive 2000-05 (revised)”; City of Toronto, Community Services Committee, “Implementation of the Ontario Works Service Delivery Model: Status Update,” June 1, 2001; Notes from meeting with Intake Screening Unit, Eastern Regional Training for Community Legal Clinics, November 2001; and Deborah O’Connor, “An Inside Look at a Welfare Call Centre,” *Social Safety News*, February 2002.

The First Stage Preliminary Assessment is followed by a face-to-face verification interview called the “Second Stage Full Determination”. This stage can include more than one appointment and includes:

- An “employment information session”;
- Completion of a Participation Agreement;
- Completion of the balance of an application;
- Verification of information gathered at both stages;
- A request for additional information related to the first stage, as appropriate; and
- Signing of all forms.

The intention is to reduce the number of client interviews and, as a consequence, improve the quality and reliability of services to claimants. Provincial sources indicate that progress is being made towards creating a more efficient, streamlined system. For example, it has been reported that call centres are answering 80% of calls in less than 60 seconds and average calls are being processed in around 20 minutes, but can take up to an hour and a half.⁵ The script for the interview was developed centrally by the Ministry. At first ISUs in different regions could vary the script slightly to provide additional information. This has now been disallowed and all ISUs must follow an identical script.

The process of applying through a call centre is complicated (see text box “Description of ISU application process”). On top of additional steps before benefits can begin, potential difficulties getting through on the telephone and the potential hurdle of needing to be able to complete a telephone rather than an in-person application, the ISU process can also mislead a person into believing they will be found ineligible. The process starts by gathering preliminary information about the person’s situation. An ISU screener may, on the basis of preliminary information, inform the person that they may not be eligible and give them an opportunity to discontinue the application. At this point, applicants can be led to believe they have been found ineligible. There seems to be no purpose to providing this warning other than to provide an additional avenue to divert people from completing a full application. If they continue the application they

will either be passed on to the local Ontario Works office to complete a full application, or a “conclusion” of ineligibility will be made. The use of the word “conclusion” as in “the end, close, finish, wind up ... final determination”,⁶ can mistakenly lead applicants to believe a final decision has been reached. Many people will misinterpret the suggestion that they **may** be ineligible as a **finding** of ineligibility. Legal clinics have found that their clients are reporting much stronger, direct and discouraging statements about possible ineligibility being made during the telephone screening process than are suggested by a general description of the process.⁷ For example,

*On a tour of the ISU I overheard an intake worker tell someone on the telephone
“You may choose to continue the application, **but you will be found to be ineligible**”
(Legal Clinic lawyer, central-east Ontario).*

⁵ Notes from meeting with Intake Screening Unit, Eastern Regional Training for Community Legal Clinics

⁶ Shorter Oxford Dictionary, Oxford University Press, 1973.

⁷ Notes from meeting with Intake Screening Unit, Eastern Regional Training for Community Legal Clinics, November 2001

In fact, the person has the right to complete a full application and receive a complete assessment of their eligibility. But to do that they must register their “objection” to the “finding of ineligibility” in a particular fashion in order to be allowed to complete a full application.

Again, the process of lodging an objection and moving on to a full application is complicated and must be followed precisely or the person loses their opportunity to complete the application. The “conclusion” of ineligibility becomes a “decision” which is final and cannot be appealed if the applicant:

Description of ISU application process

- Applicant calls the call centre. An auto attendant informs the person what information they will need and approximately how long the process will take. The person waits for an available screener;
- The screener will come on the line and ask the caller to describe their general circumstances. The screener uses a quick tool to do a preliminary entitlement calculation. If it appears the person is eligible the screener advises the caller that there is a second part to the application, and how long that will take;
- Callers in crisis can be referred immediately, before or after the application is completed;
- If the screener states that the person **may** not be eligible, based on the information provided, the caller is asked if they want to continue. If the caller chooses to discontinue the call the interview ends and is recorded as a “chooses to discontinue”;
- If the caller proceeds to the second stage of the ISU process information such as income, assets and history are recorded. If the screener finds that income and /or assets are within 15% of the eligible level the person will be referred to the office for a full application;
- If an initial determination of ineligibility is made (called an “ineligible conclusion”) one of two things can happen. If the applicant lives in Toronto, where the ISU serves the same area as the Ontario Works delivery agent they are informed of their appeal rights and can register their verbal objection on the spot. Outside of Toronto the ISUs serve more than one OW delivery agent and the applicant is given a telephone number to call and told to indicate that they wish to object to the finding of ineligibility (called an “objection to a finding of ineligibility”). Once they call the number a letter is sent to them documenting the finding of ineligibility. Only once the letter is received can the person lodge their “objection”;
- The letter provides the following information: that the applicant may object to the conclusion orally or in writing within 10 days from receipt, or deemed receipt, of the written notice of conclusion; that an “objection” will result in the application being moved on to the second stage; and that, if the “objection” is in writing, it will be treated as a request for an internal review of a negative decision resulting from the second stage process if the decision is based solely on the first stage conditions;
- The notice will also inform the applicant that the “conclusion” may not be appealed, but that a decision that results from an objection to the conclusion may be appealed.

- Does not object to the conclusion in time;

- Objects orally, but does not follow-up in writing before the second stage information session. An applicant can bring their written IRR to the verification interview but they must hand it in before the interview starts;
- Withdraws an objection; or
- Does not attend the scheduled second stage interview.

The process by which a preliminary conclusion of ineligibility is transformed into a “decision” that cannot be appealed is biased in favour of that outcome. The time limits are short and negotiating the process depends on a precise understanding of the requirements. This is not a simple matter given the confusing process and language – the short time limits, that an oral objection must be followed up in writing, the difference between an “objection” and an “appeal”, that “conclusions” cannot be appealed (where a person has not made an objection Ottawa will actually give them a piece of paper). All these process issues are complicated, confusing, and must be followed exactly. Otherwise, the “conclusion” of ineligibility can become a “decision” that cannot be appealed.

It is evident from the description that the process of applying has been made much more complicated, and contains process pitfalls that can improperly render a person ineligible. The extent to which it does so depends on the interests and efforts of delivery agents to counteract the built-in biases towards diverting people which were the province’s intention. Some larger delivery agents have instituted processes to ensure that people are not mistakenly denied benefits, but this is a local discretionary matter and appears to frustrate provincial intentions to make the system difficult to navigate.

Much also depends on the training and skills of the intake workers. In some ISUs the staff are trained social services workers, experienced in Ontario Works legislation and eligibility issues. In others, in an attempt to keep costs low the intake workers are clerical workers who receive only four weeks training, of which two weeks are in the legislation and two weeks are in “customer service”.⁸ This is clearly inadequate to deal with the complexities of individual situations and the complexity of the eligibility rules. Again, community legal clinics have

reported clients have been given incorrect information that led them to believe they were not eligible when they actually were. The City of Ottawa reported an average of three amendments per application case referred from the ISU was required, a problem that results in greatly increased administrative costs, contrary to the stated intention of the SDM.⁹

The process contains unnecessary and confusing steps – “objecting to conclusions” and “requesting Internal Reviews” and “Appealing Decisions”. The requirement that a person “object” to a “conclusion”, then later “appeal” a “decision” seems unnecessarily confusing and burdensome. This is, in part, the result of the ISUs not having the authority to make eligibility decisions, an authority that properly rests with the delivery agents who are equipped to make such determinations. The requirement in some areas to make a separate telephone call to lodge an “objection” seems unnecessary, given the much hyped technology developed to support this new service model.

The letters can take a long time for applicants to receive. Community legal workers have reported clients waiting as long as three weeks to receive the computer-generated letter. Even if time limits for filing requests for internal reviews are not jeopardised by these delays, they do delay people from receiving the assistance they need. Perhaps, more significantly, the system-generated letters are difficult to understand. Again, according to the City of Ottawa the letters are “not customer friendly” and “cause client confusion and result in increased client phone calls, drop-ins and correspondence.”¹⁰ For example, text box A shows the letter which clients receive to inform them of a “conclusion” of ineligibility. Again, it has to be noted that this is not a “decision” of ineligibility. Arguably, this letter provides the information necessary to lodge an objection and continue to file a full application with appeal rights. However, it is inarguably confusing. At best, it was written without thought being given to how easily it could be misunderstood. At worst, it appears deliberately confusing and misleading and intended to leave people with the impression that they have been found ineligible.

⁸ Ibid.

⁹ *City of Ottawa.*

¹⁰ Ibid.

Text box A

Dear [Name]:

On [date], you applied for basic financial assistance under the OW – Reg. Act.

This letter is to notify you that your application for OW – Reg was reviewed. It has been concluded that your application does not meet one or more of the designated conditions of eligibility due to the following reason(s):

[Reason]

This conclusion was made under:

[Ontario Works Regulation]

A conclusion cannot be appealed. However, if you disagree with this conclusion of ineligibility you may submit a formal objection. An appointment will be made for you to go to an office in your area to attend an information session and complete the balance of the application form.

Your objection must be received in this office by [date]. If you do not submit an objection by this date, the conclusion is final and cannot be appealed to the Social Benefits Tribunal.

To submit your objection orally, you may call the telephone number listed on this letter. An oral objection must be followed up in writing. The written request can be provided at the time of your appointment at the local office. This ensures there is a written record of your objection on file.

If you submit an objection, the conclusion will not be considered a final decision and you will be asked to complete the balance of the application. If you withdraw your objection or do not submit a written objection or do not attend the information session and interview, the objection becomes the final decision of the administrator and cannot be appealed further to the Social Benefits Tribunal.

After a full application has been completed, a decision regarding your eligibility will be made.

If you receive a decision that supports the conclusion of ineligibility:

The written objection that you have provided will become a request for an internal review. An internal review will be completed and a decision from that review will be given to you. If you disagree with the decision made on the internal review, you can appeal it to the Social Benefits Tribunal.

If you receive a decision that reverses the conclusion of ineligibility:

If the conclusion of ineligibility is reversed and you are otherwise eligible for assistance, your worker will contact you.

A copy of your application is attached. For more information regarding objecting to a conclusion of ineligibility and the internal review and appeals process, please see the information provided.

If you have extraordinary drug costs information can be provided about programs that may be available to you.

Sincerely,

[name]

Text box A continued

Internal Review:

An internal review is an efficient and informal review of a decision to ensure that it is consistent with the legislation, regulations and policy directives.

You should provide the office with any additional information you have that could help in the review of the decision.

The office must complete the review and give you the result within ten (10) days of receiving the request for the review.

You will be told, in writing, of the internal review decision.

You may withdraw your objection to the ineligibility conclusion or your request for an internal review. However, if you withdraw your objection or request, you lose your right to appeal to the Social Benefits Tribunal.

Appealing to the Social Benefits Tribunal:

If you disagree with the results of the internal review, you may appeal the decision to the Social Benefits Tribunal within thirty (30) days of the date when the internal review should have been completed.

You can get an appeal form from your local office or from the Tribunal. The address of the Social Benefits Tribunal is:

[SBT address and toll-free telephone number]

Can such changes to the process of applying for social assistance be effective in restricting entry to the program? It appears that the answer is yes. A recent review of welfare reform initiatives across Canada intended to strengthen labour market attachment concluded that:

... administrators use other strategies during the intake process to deter or divert individuals to other programs. Deterrence strategies can include the use of quasi-contractual agreements or case plans and orientation sessions to essentially “scare” people away from applying for welfare due to the requirements placed on individuals to move from welfare to work.¹¹

¹¹ Human Resources Development Canada, “Reconnecting Social Assistance Recipients to the Labour Market: Lessons Learned,” Evaluation and Data Development Branch, Strategic Policy, March 2000: 11, SPAH123E-03-00.

At least some Ontario Works administrators share this view. In a 1999 report the Region of Peel claimed “all three steps in the client service pathway have contributed to a significant reduction in the issuance of social assistance in Peel in its first year of operation... Prior to the introduction of this new service pathway, 72% of the applicants who applied for assistance were granted the first month’s assistance. Since the introduction of the new service pathway, 50% of the new applicants have been granted assistance.”¹² The new service pathway described was one that is very similar to the process that is now mandatory province-wide. It included three steps: a Financial Assessment Unit (Intake Screening Unit), the Reach Pre-Employment Program and the Verification Interview/Participation Agreement. All parts of Ontario may not share this experience. The City of Toronto has reported “‘No show’ rates... were comparable for both the existing and new intake processes.”¹³

Despite this, there are indications that from the Province’s perspective the problem with the ISUs is not that eligible people are being discouraged from seeking assistance, but that *too many* applicants are getting through the ISUs – certainly more than the province had anticipated:

... Provincially targeted efficiencies were not being realized. Specifically, there were lower than expected applicant ineligibility decisions made at the ISU and a higher than expected proportion of applicants who were bypassing the ISU altogether as they were not deemed suitable for telephone intake. It was originally projected that 50% of requests and inquiries would not proceed to the second step (municipalities). These projections have not materialized, as actual percentages of applicants proceeding to municipalities was averaged at 64% from November 2001 to April 2002.¹⁴

Indeed, a recent provincial review identified two major problems with the intake screening units: too many applicants (40%) were bypassing the ISU and applying directly; and “only” 12% of applicants were being screened out at the telephone pre-screening stage.¹⁵ Suggested strategies for increasing the screen out rate included instructing “screeners to complete Stage 1 (telephone

¹² Regional Municipality of Peel, “Financial Assessment Unit Update”, November 16, 1999.

¹³ City of Toronto, Community and Neighbourhood Services, “Implementation of the Ontario Works Service Delivery Model: Status Update,” June 1, 2001, hereafter *City of Toronto*.

¹⁴ *City of Ottawa*.

¹⁵ Government of Ontario, Ministry of Community and Social Services, *Intake Study – Final Report: Study of the Ontario Works New Application Process*, December 2001.

interview), including making conclusions of ineligibility where appropriate, *for as many applicants as possible*¹⁶ (emphasis added), and to have screeners exercise greater discretion to make conclusions of ineligibility for people whose income and assets fall within 15% of the allowable limit and forward only those whose income and/or assets are likely to decrease.

Interesting, just prior to these recommendations the document acknowledges that already “ISU screeners make every effort to work with the applicant to complete Stage 1 of the application process by telephone. “However, they are not fully exercising their authority to make conclusions of ineligibility for types of applicants identified in the directives as “may be inappropriate for intake screening.”¹⁷ In other words, the ISUs should be trained to make more conclusions of ineligibility even for people for whom the process may not be appropriate and to not err on the side of the person, but rather to err on the side of ineligibility.

The stated goal of the two-step procedure is to have fewer ineligible applicants continuing to verification interviews. However, it may also ensure that more people at least can get through to speak to a person and have their inquiries responded to. Under the previous system, many people could not get through on the telephone lines, which were frequently jammed, and perhaps never got served. The City of Toronto reported that 93% of incoming calls were answered at the ISU, versus 52% under the old process.¹⁸

The administrative savings are supposed to allow caseworkers to focus on assisting people. However, it appears that the administrative savings have not materialised. Again, the City of Toronto has reported that “one-time data capture minimized the number of data input errors, but did not decrease the amount of time caseworkers spent on financial assessment at the verification interview”; “Overall, additional time was spent on eligibility screening and verification functions”; and “Overall... there was no evidence of time efficiencies or cost-savings generated through the new two-stage intake process.”¹⁹ The City of Ottawa similarly reported that “The

¹⁶ *Ibid.* p. 8.

¹⁷ *Ibid.* p. 8.

¹⁸ *City of Toronto.*

¹⁹ *Ibid.*

overall time to review client eligibility has not been reduced... given that additional information is required to confirm eligibility, develop initial employment plans and complete new mandatory processes (e.g. mandatory literacy testing)” and that based on their own evaluation of the two-step intake procedure “financial savings targets have not been realized.”²⁰

For some people the picture of efficiency painted by the province is an accurate reflection of their experiences, as expressed by the following participant:

I find the way it is right now is set up a little better because they can just backlog it ... find it, and ask you if anything has changed and go from there. Before when it was a person, you're lucky if you got that same person a second time and then you'd go through everything again (L, St. Catharines).

However, even if the official statistics regarding how promptly calls are answered are accurate they can obscure much individual experience. Calls answered quickly are no indication of quality of service received and tell us little about the actual content of these interviews.

The weight of evidence from our research, confirms that the new two-step process is acting as a barrier to accessing welfare rather than a mechanism for fine-tuning eligibility. A significant amount of discouragement is occurring at this stage of the process. A call centre system necessitates a move to a more standardised set of questions. However, under this ‘one-size fits all’ approach, more complex, but legitimate cases that fail to meet this simple criteria risk being turned away. Eligible and potentially eligible people are discouraged from continuing with the application process.

Moreover, people without regular access to a telephone or those who might have difficulty managing a telephone application process – those with language and comprehension barriers and mental illnesses for example - may face serious obstacles. According to the province, alternatives are built into the process for applicants who would have difficulty with the telephone

²⁰ *City of Ottawa.*

intake process due to crisis, communication barriers or complex personal situations. Essentially the efficacy of these alternatives boils down to a person's right to make an application in person and whether the applicant is made aware of it.

The process is not fully automated and some discretion for the intake workers remains. "Intake screening will require highly skilled, knowledgeable screeners, who can make decisions based on the ineligibility and potential eligibility of applicants."ⁱ That discretion can be used to screen out otherwise eligible applicants through subtle, or not-so-subtle discouraging of applicants continuing with the process – leading them to believe they will be found ineligible and not informing them of their right to complete a full application regardless of the results of the telephone screening.

Where social assistance recipients were promised a streamlined, efficient and user-friendly application process, they have been faced with a convoluted, unreliable and extraordinarily complex one. The complexities of navigating such a process led the focus group respondents to identify a number of specific problems based on their own experiences. As well as experiencing problems with the reliability and accessibility of the system, significant numbers highlighted the unsuitability of such an application procedure for many service users, principally the significant minority who are the most vulnerable and in greatest crisis. These are the same people who most need assistance, delivered in a sensitive and humane fashion. They are precisely the same people who may be most negatively affected by such a delivery system, and whose needs are inadequately addressed by the new SDM.²¹

1.3. Participant Experiences

Most participant experiences with the two-step intake system centred on problems accessing the call centres. These problems had to do with simply getting through on the telephone, the suitability of this type of system for the complex nature of many individual situations and overall system reliability.

Access Problems

Many participants in the focus groups complained of difficulties accessing the call centres. Contrary to the official information, a frequent complaint was the amount of time it took to process a claim. More significantly, participants recounted great difficulties accessing the system, with numerous focus group members insisting that they had to call “10-15 times” (W, Scarborough) before finally reaching a screener. In this regard, the feelings of one respondent that he was getting a “raw run around” reflected a widespread feeling across the groups. As the same contributor continued, he was told:

“Call me back this day and this time and talk to this person.” I called and it took me at least 3 or 4 times to actually get through the whole thing. It just took too long and my patience was running out. I wasn’t getting my questions answered and ... [it] just did not work for me (Sk, SSM).

Even once participants managed to access the system, however, many found the process drawn out and difficult. The following experiences are representative:

Sometimes we have to call for 20-30 minutes (C, Scarborough).

It was about a week, a week and a half later. ’Cause I kept, I kept trying and then same old thing and then finally I got through to somebody (SK, SSM).

It [took] me almost 45 minutes just to give them my information over the phone (F, Brampton).

Unsuitability

These problems raise the concern that the social ‘distance’ of the system is not suitable for many using the service. The adoption of telephone pre-screening reflects a broader move away from interpersonal, ‘soft’ social services to more automated and therefore distant and ‘hard’ services. While this might be suitable for the provision of banking and insurance services, as part of the

²¹ City of Ottawa.

logic of efficiency it raises serious difficulties for many claimants, especially those deemed 'harder to serve'. People with poor English language skills, low educational attainment, and physical and mental health problems often need personal support to navigate bureaucracy. Moreover, the complexity of individual situations makes it difficult to ensure consistent and fair treatment of applicants. As the following quotes indicate, this system puts them at a disadvantage and risks disempowering them as a result:

I didn't find that part very bad ... but I mean if I didn't have a grade 12 education or 2 years at George Brown, I'm sure I wouldn't have been able to give this person information on the phone. Because it was that difficult, and you had to have everything. And if you're lacking one piece – you're screwed (J, St Catherines).

If you have any kind of special needs, or your situation isn't exactly cut and dry, like black and white, you are automatically told you are not eligible ... For example, if you're an adult living with your parents that's a huge problem ... And if you're moving and your file is moving from one jurisdiction to another, that's another problem that I've heard about. A lot of people don't have ... the confidence to call the office directly and make the complaint. They just kinda give up (M, SSM).

At that time I told my worker I had the income of this amount. They told me if I use that income to house myself, then I'd be eligible. So I went out and I spent the \$440 I was getting for baby-bonus ... to house myself, went to reapply and they told me I was ineligible ... I had to go through the call centre THREE other times, THREE orientation meetings, THREE other workers before I was actually deemed eligible ... It got more confusing for the call centre the more times I had to call in. Because I would tell them, "I just called here three weeks ago, and if you look it up on your computer..." (L, St Catharines)

The following story related by a clinic legal caseworker, provides more detailed insight into just how difficult it can be for a person with barriers to navigate the system.

A client of mine, who was a "grandfathered" disabled recipient (automatically transferred from the old Family Benefits program to the new Ontario Disability Support Program), was incarcerated for four months. Because of this she was cut off ODSP disability benefits and told she had to reapply. I helped her to file an IRR (attaching the recent court decision on this issue), told her to reapply for ODSP and advised her to apply for OW.

The woman is schizophrenic and heavily medicated so I offered to call the call centre and help her through the application process. The application took one hour to

complete and was horrendous. She had lost all of her identification so she did not have her OHIP or SIN numbers, did not have her birth certificate and did not have her bankbook.

She would have given up many times during the process if she had called the centre on her own. I pushed and asked the call centre a number of times to just set up an appointment for this client so she could meet face to face with someone and go through the application process. The call centre woman apparently couldn't do this until all of the questions were asked and answered. A number of times she had to put me on hold stating that she had to ask her supervisor questions. At one point, she spoke with her supervisor then told me that we didn't have to answer any more questions because her supervisor told her that client could simply call the local ODSP office and they would reinstate her benefits immediately. I again told her that the client was grandfathered from Family Benefits to ODSP and the ODSP office's position was that incarcerated, grandfathered recipients had to reapply for benefits. I had to urge her somewhat to continue the interview. If our client had been told this I know she would have agreed to stop the application process and would, via her CMHA (Canadian Mental Health Association) worker, have called the ODSP office only to be told that she was cut off and had to re-apply to Ontario Works. Then she would have had to contact the call centre and start all over again.

The call centre also does not seem to be able to handle "I don't know" answers. Our client did not know how much money she had in the bank. When I told the woman that the answer to this question was "I don't know" she couldn't accept this. She said she had to enter something. I told her to leave it blank and that our client would be able to provide this information to OW during her face to face meeting. This was not acceptable - the application could not continue until I gave this woman a figure to enter into the system. I gave her an amount, after asking our client to give me an amount - but I told the screener that they had to state somewhere that this was just an estimate. I finally got an appointment for this client, after answering all of the questions. The appointment was four days from the date I called the Call centre.

The call centre would not let me bypass their application process despite the fact that I advised them that the client is schizophrenic and has a comprehension problem. If our client had to apply through the call centre on her own she would have given up and terminated the call. I also feel that the Call centre would have told her she wasn't eligible because she did not have the information needed to apply. On top of this they would have given her wrong advice - telling her to just call OD and they would reinstate her benefits. The result of our intervention, and CMHA's attending the OW appointment with the client is that she had her face-to-face interview and is now receiving OW assistance (LP, clinic legal worker, southwestern Ontario)

These stories speak to a greater problem than simply a system “bedding in”. In fact, it is hard to explain the new application procedure as anything other than a structured attempt to reduce the number who can successfully negotiate the application process.

System Reliability

I had to listen to all these messages, and then she came on the phone and she put me on hold for 20 minutes. Then she came back again, asked me some more questions and then she put me on hold for another 20 minutes. Then she came and said something about the computers are down, and said that I would have to come in with documents (W1, Scarborough).

Achieving system reliability is one of the normal ‘teething troubles’ associated with implementing a new system. But there is much more than simple reliability at issue here. The problems identified by participants go to the heart of the new SDM. In isolation, such problems would merely be an operational cause for concern to be ironed out. In combination, however, they strongly suggest that it is the very *design* of the SDM, rather than its inconsistent *operation*, which is keeping the caseload low by restricting entry.

1.4. Case Management

One of the key changes under BTP is the adoption of a more systematic system of case management that makes greater use of technological supports to manage routine administrative functions. In theory, this should free up workers and allow more one-on-one support for clients. This suggests a more positive and flexible approach to client-worker relations and, indeed, this is how the provincial government has sought to depict it. Specifically, case management can be important in two regards. Firstly, workers can make a clear break from the traditional ‘policing and processing’ role performed by front-line staff. Secondly, workers can forge individual and on-going supportive relationships with unemployed people. Operated in this way, case management can provide the vital ‘missing link’ between seeking and securing a positive labour market outcome. The views of workers and the degree to which they believe they are being granted more time with clients to develop such relationships lies beyond the scope of this study. The evidence from participants, however, strongly suggests that they would welcome this new relationship. Indeed, as the following representative quotes reveal, focus group members were quick to praise those workers who they felt offered them a high quality service:

She's the greatest person in the world. I had her the first time I was on social assistance after my car accident. I had three or four different workers and then about two years later, when finally I went for my last try to file for disability, she found me a physician ... a proper physician. Because I had three different doctors telling me that, "Yes you're disabled, but there's something wrong in your head." So she's like, "Well I'm sick of seeing you like this." She did something about it. I'm so grateful. She's awesome (L, SSM).

Unfortunately, the vast majority of contributors pointed to a wide gap between government rhetoric and their personal experiences. Contrary to the promises of the new system it was proving very difficult to contact workers; when contact was established, many clients had a poor view of their worker and the extent to which they genuinely tried to help; and there was little opportunity to overcome these problems and develop a consistent one-on-one relationship because workers were constantly being changed. The overwhelming perception was that interactions were dominated by a climate of suspicion and hostility.

1.4.1. Problems Contacting Workers

A large number of focus group participants reported finding it more difficult to get access to workers. The prevailing feeling was that, quite simply, it was becoming "harder to get in touch with them" (C, Peterborough). This appears to be a direct consequence of a shift in practice. Claimants are now discouraged from entering offices with requests for assistance or enquiries without an appointment. Instead, they are directed to contact workers over the telephone. The intention is to create a more streamlined and efficient system in which routine inquiries are dealt with through an automated telephone system (Interactive Voice Response) and workers can set aside more time to deal with individual client needs. However, in reality the new approach is falling short of meeting these goals. As the following two quotes indicate, there is a concern that the only consistent feature of the new system is its inconsistency:

"Do not come in without an appointment", that's on the recorded message on the phone when you call. Now there's a phone at the Welfare office that you can call from downstairs, but you're still gonna either get a message, a voice mail, or whatever they call it now-a-days, or you need an appointment. If it's something real quick and she just happens to answer the phone, you might get help (L, Brampton).

They don't answer the phone very often, not very often at all. They've got the answering service pick it up, the voice mail, always. They say on the recording, do not come in ... Do not come in without an appointment, but it also says that they will return your call within 24 hours. Doesn't happen. Doesn't happen (K, Brampton).

Participants felt that they were short-changed by the arbitrary way in which they managed to contact workers, as well as by the random nature of responses. The evidence from the focus groups suggests that workers are still overburdened with the demands of the new system despite removing informal access. Moreover, bottlenecks of pressing need remain and these appear to be resulting in some people slipping through the safety net completely. In particular, contributors highlighted three problems. Several of the group members pointed out that not everybody could afford to maintain a telephone service. Those who could not were forced to go to extreme circumstances to contact workers:

I have a telephone, courtesy of my parents, thank heavens; but if I did not have a telephone ... What am I supposed to do, stand out there with my baby in a stroller in the middle of a snowstorm and redial, redial, redial? (W1, London).

Moreover, the groups recounted numerous instances of struggling to make contact with workers who they felt were often too busy to return calls. Indeed, when clients were forced to leave messages, the time taken to respond varied enormously:

If you make calls to talk to someone, often your calls were unanswered. Who wants to wait around for a week waiting for a phone call? ... If you miss that one phone call you re-call again and reschedule and wait that extra two weeks again. All over again. (P, SSM).

I sometimes wait on the phone for over an hour trying to get through (C, Peterborough).

Respondents were almost unanimous in the belief that relying on messages was an inadequate basis for dealing with problems. For example, one request for specific information regarding assistance with transportation costs resulted in the most cursory of responses:

I left a message for transportation. My counsellor said ... she called back and said she left a message. She didn't leave a message, her message was: 'I called, bye' (L, Brampton)

The failure to get a prompt and satisfactory response to requests for assistance left many with the opinion that the “worker only phones when *they* want something” (S, Scarborough). This example, reflective of numerous others, suggests that the system is geared to minimising people’s opportunities to get help. Of course, for some service users these delays amount to no more than a mild inconvenience and a sense of frustration. For many others, however, the significance lies in the cumulative impact and the domino effect such delays can initiate. Certainly, the focus group respondents indicated numerous examples when there were far graver outcomes:

I've been trying to get hold of my worker for over a week and a half now. Trying to get medication for my two daughters and myself. This is life-saving medication. She has refused to get back to me ... I've been faxing her letters, I've been faxing her the prescriptions. My husband's been trying to call her and leaving numerous messages on her answering machine ... Her answering machine says that, “[she's] only in the office Mondays and Fridays”. She's too busy to get back to anybody during any other day. I can't afford the medication, because it costs a hundred and something dollars (U, Scarborough).

I kept calling and kept calling and kept calling and nobody was returning any phone calls. At that point I didn't have a phone ... I didn't have a permanent residence and I was [calling] through an action centre downtown for street kids. I was using their phone number and I finally had an advocate from there go with me to the window ... and he basically said, “Look, she has been calling, we have it logged every time that she has used our telephone” ... She seemed so shocked, “Nobody's gotten back to you!?” ... The shelter is going to kick me out because you're not calling me back, you have to call people back ... About 4 months I tried to get a call back from them (M, London).

Taken together, these problems paint a picture of a somewhat rigid, unresponsive system which is inappropriate to the delivery of a service based on better meeting client needs – as the BTP goals nominally intend. This stringency seems especially unsuitable, given the increasingly dynamic interconnections between the worlds of welfare and work, which necessitate more flexible responses as client circumstances frequently change.

1.4.2. Poor Client-Worker Relations

The difficulties many participants had in contacting their workers may well be a factor in the poor relationship between clients and workers, with increased frustration on both sides. Certainly, the focus groups reported significant tensions, with the common belief that relations were deteriorating under the new system. There was a widespread feeling that workers “make you feel degraded” (V, SSM) and turn meetings into nothing more than a “game of intimidation” (B, SSM). On several occasions, there were comments to the effect that workers act as if welfare payments are a “hand out not a hand up” (L, SSM). There were also numerous complaints about treatment by workers, and the following representative quotes reflect frequently voiced concerns about the demeaning climate in which meetings took place:

I find most, 98% of these workers talk down to you. You are a lower class of normal life, 'you're here to do what we want you to do, and if you don't do it ... if you don't jump high enough, or you don't go through enough hoops, then we're not going to help you'. They make you feel intimidated, they talk down to you so that you feel degraded, and you're a lower form of life (L, St Catharines).

I had obtained a job and needed a start up for clothing. I went to my worker and asked her for it. She looked right in my eyes and said, "Does it have to be new?" I felt like this [Gestures that she felt an inch tall] (P, SSM).

Even though you'd find a job and you fall back on, it's always your fault. It's always you. It's always you're the bad guy. They also make you feel that you practically have to beg for that money ... like that money comes out of their pockets and it's not (B, SSM)

I lived with a toothache for over six months because I refused to ask for a dental card. She made you feel like it was coming out of her pocket (O. Peterborough).

Fundamentally, and without contradiction, those attending the focus groups wanted to be treated as individuals and offered assistance based upon their own specific circumstances and needs. The words of one respondent powerfully captured a wider feeling about how workers tended to treat recipients:

She treats me totally like a statistic. Like she says, "Oh, well people your age ..." and "People in your group ...", I'm not a group – I'm K and she treats me as all single mothers not just an individual (K, St Catharines).

While good workers can make a positive difference, the effect of a harsh or punitive worker can be devastating. Again, it should be stressed that, for significant numbers of this client group, failure to provide the right information at the right time can mean much more than the frustration of *another* phone call or *another* wasted journey. In many circumstances, it can have very real and serious implications for clients:

It took me three years just to get glasses for my daughter. I ended up having to phone Queen's Park ... to get a purchase order for my daughter's glasses ... What my worker didn't tell me was that the purchase order had been ordered. She did it in the middle of August. I didn't know because she didn't notify me and it expired at the end of August. When I finally did get around to finding out about it, it was too late. Then I was informed by the doctor ... that because of her age and because it was delayed for so long there is permanent eye damage. There's absolutely nothing they can do ... For everything that should be covered, I've had to fight like crazy to get it from this worker (C, Peterborough).

These criticisms are both valid and understandable, but it would be simplistic to attribute the blame entirely to front-line staff. The downside of individual provision is always likely to be variability, resulting in instances of uneven and ineffective performance by some workers. While poor client-worker relationships have always been a feature of social assistance, and some degree of individual failing might be expected, however, the extent of poor client-worker relations suggests more significant cleavages. It is likely that these have been exacerbated by large worker caseloads, the rapid adoption of a new system with new and heavy administrative requirements, different priorities and limited training. The emphasis, therefore, has to be on the wider programme structure, rather than the performance of individual case managers who can only be as good as the system within which they operate. Case-managers cannot unilaterally raise the quality of provision or remove all the job barriers confronting clients. Clearly, their functions are embedded within a deeper programme philosophy and framework.

1.4.3. Constantly Changing Workers

Indeed, the failure to develop positive relationships in part results from a policy decision to continually rotate workers. At its best, a case management approach serves as a basis for more

focused and constructive meetings for participants. The rapport and cumulative knowledge which grows out of successful case management intervention means that meetings can focus on remaining barriers to work, individual needs and personal progress. For workers, this continuity lends itself to a greater understanding of individual circumstances providing a platform for developing the most appropriate individual strategies for progression. However, any progress towards this goal can be lost with the perpetual churning of workers. Practically, this has led to reports of information being lost and repeated updates in which participants have to go through their circumstances all over again, providing all the same information. As the following exasperated participants explained:

Every time your worker changes, you've got to come up with the documents again, one more time. The birth certificates, the marriage certificates, the divorce papers, land taxes ... Where am I going to get these papers again? (S, Brampton).

I just changed to a new worker. All my workers keep being changed so I keep getting called in ... for updates, continuously (Y, SSM).

Practically, such continual flux creates a great deal of confusion and uncertainty among clients regarding access to benefits and services:

[There's] a lack of consistency between the workers. The way the services are delivered varies from worker to worker, especially regarding discretionary benefits (C, Peterborough).

[You have] a worker who understands what you're going through and within the next week they change them and you get someone who really doesn't know your file. They're going through the computers, and you have to get this, this, and this, before you get your cheque. One thing I liked about the other worker is that she used to call you and let you know if there was a problem, if you needed to get certain information before your cheque was released to give it to you then. This worker now, won't even call you if your cheque is on hold, and when you're in subsidy, they give you a notice of termination right away (K, Scarborough).

She said because she's under school age, I shouldn't have been working. But they made me go to work when that baby was eight months old. They said, 'You have no choice' and I didn't know. I went out and went to work. They never told me that I could get money for clothes or anything like that (O, Peterborough).

More substantively, the lack of a consistent worker means there is less possibility of developing an ongoing relationship that can build trust and help clients towards a positive outcome. Once more it needs to be stressed that given the delicate financial balancing act many assistance recipients are forced to perform, receiving misleading or inappropriate information can quickly create a downward spiral:

Recently, I've had two different workers that have been contacting me. One that's been trying to get me to do some volunteer work, or whatever. But I have my daughter all the time to take care of. At one time, they wanted me to take her out in her wheelchair and her medication, and she naps during the day. She's not potty-trained or anything and they wanted me to do the 80 hours of volunteer work a month. I tried to explain to her like I have a disabled child at home, and I have nobody to watch her for me. I can't really go out and do it ... But she intimidated me into feeling that I had no choice (K, SSM)

They told me that the money would be there in my bank account on the 1st ... I went to my bank, they had put \$600 in and they were supposed to have put in \$1500 for my start-up. I called them and said, 'What is this?' ... They looked through the computer and in that time they had changed my worker. From me applying, getting a worker, to the time my cheque was to come in, my worker had been changed. Only the information didn't go to the new worker ... They changed workers without telling me, and when they did change workers they didn't send my files over properly, so I lost out on an apartment for my kids and myself ... I ended up staying in the abusive spouse's house until March. He just kept coming around and coming around and coming around ... so finally I left. Now I'm in a shelter because they screwed up. (K, Brampton).

Overall, the mood of the focus groups was that the new system was inspiring a greater degree of suspicion and hostility. The experiences of the majority of participants suggested that government rhetoric about providing an improved customer service was just that, rhetoric. In practice, they felt that the new system was “uncaring ... with no feelings left in it” (V, SSM) and more concerned with constant surveillance and treating “everybody like they're cheating the system” (W, London). The following graphic example shows how this works in practice:

The worker showed me a piece of paper, and she said it's confidential, you can't see, but I can read. So she turned aside and she was reading it. "It says, you go to church every week and you also take part in church activities on Sundays and you bring food and somebody has written about this saying that you make cakes, you

bake cakes and you bring a lot of good food. I want to know with this much rent, how can you do all of this?" (C, Scarborough).

This is no surprise. The climate generated around reforms of social assistance programs has an important influence on the way that clients perceive them and their likelihood of trying to access them or remain on them.

1.5. Consolidated Verification Process

The stated aim of the Consolidated Verification Process (CVP) is to increase the accuracy of eligibility assessments and ensure that the right amount of financial assistance is provided to the right person. To do this, CVP provides a rigorous and ongoing review of every aspect of a recipient's case history. One of the prime aims is to provide province-wide consistency for financial eligibility. The database that has been created can cut across departmental and jurisdictional boundaries, meaning specific standards can be embedded in the technological supports. Caseworkers access third party data to verify information as well as to monitor potential sources of income such as EI and assets such as cars through the Ministry of Transportation. In theory, this revised process is meant to reduce the number of ineligible claims; increase the accuracy of assistance level calculations (both underpayments and overpayments); and allow workers to spend more time on client needs. Interviews are meant to be less intrusive for clients because they are completed in the office and reduce the number of times clients are asked for the same information.

A handful of group members indicated that they had experienced no major problems with the review process. Indeed, a small number, such as the example below, explained how it had helped them:

The first thing that I was asked was, was I still on Unemployment? Because of driving the bus I had been on unemployment one summer. I said 'No' and he said, 'Well, you must be ... because they're taking \$78 a month from you' ... I had the close-off to show my claim was finished and ... they had to give me that money back ... They were really good about that (W, Brampton).

However, many more people reported significant problems with CVP and the data suggests a reason for that. The Province reports that 283,000 cases have been reviewed, and of these, 72 percent had no change in their benefits; 9 percent had their benefits cut; and only 3 percent had an increase in their benefits. The remaining 16 percent of cases (over 45,000 cases) either withdrew from assistance or were terminated completely.²² This would not be remarkable if in fact the system was simply correcting mistakes in eligibility in a proper and fair manner. Unfortunately, there is considerable evidence that the application of CVP has resulted in numerous cases being closed improperly and unfairly. In addition, the fact that 72% had no change in financial status suggests that for the vast majority of program participants, the intense scrutiny and embedded rules are set too high and result in unnecessary intrusion.

Whether CVP continues to generate the same rate of case closures is hard to predict. The high rate of closure experienced to date may have been related to the file review of sole support parents undertaken before transferring them from the Family Benefits Program to the Ontario Works program. Many of these cases had not been updated for a long time, and their circumstances may have changed to the extent that they were no longer eligible, without knowing so. On the other hand, a large proportion of the caseload are people with significant barriers that may interfere with their ability to meet the ongoing onerous requirements of the program.

1.5.1. How CVP works

There is no question that the frequency and nature of reviews has changed significantly. Under the previous system, financial assessments were time based and usually occurred once every 12 months. Under BTP, priority-ranking factors are now used to determine when cases should be reviewed. In effect, case reviews are no longer prioritised on the basis of need, but on the ‘risk’ of committing fraud (Text box B). The pre-determined criteria that will trigger risk raise serious concerns about the equity of the system. One such factor, for example, is high shelter costs in

²² Daniels, Art and Bonnie Ewart, “Transforming Ontario’s Social Assistance Delivery System,” *Canadian Government Executive*, Issue 1, 2002.

relation to benefits. Any case where shelter costs exceed 75 percent of net revenue is flagged as a risk. However, rents have been rising rapidly, while benefits have been frozen in nominal terms. Between 1996 and 2001 in most of the large urban centres of Ontario rents have increased much faster than general prices. In Toronto the average rent for a bachelor apartment rose 28% between 1996 and 2001, while two-bedroom apartments rose by 25%. Over time rising rents will mean increasing numbers will be automatically pushed into higher risk categories when nothing about their situation has changed. These risk-based triggers appear to exist for the purpose of simply increasing the scrutiny of, and pressure on, those who have been on the system for a longer period.

People are given an “abbreviated” review, which does not require an interview, if they meet all of the following criteria: All information is on file, On-line information matches information on file, the case is not flagged for high accommodation costs, no flag for overdue CIUR, any support order has been reviewed in the past two years, and any support waiver has been reviewed in the past year. If any of the criteria are not met a full CVP review is required.

Text box B

CVP risk factors 1

High risk factors:

- High accommodation costs (equal to or greater than 80% of participant's net revenue).
- Participant has been in receipt of social assistance for 36 months or more.
- CVP review due (11 months or more since last CVP review).
- Support in pay (but whereabouts of support person unknown).
- Support not in pay.

Medium risk factors:

- Potential for CPP eligibility.
- Twelve months since participant's last case file review (only for cases that have never been CVP'd).
- Another person resides at the participant's address.
- A dependent is added to allowance after the date the case is made active.
- Participant has business income.
- SIN begins with a '9' or is blank (A '9' indicates a person without permanent resident status who
 - is permitted to work in Canada).
- Accommodation costs equal 75 – 79% of participant's net revenue.
- Participant has been in receipt of social assistance for 24 – 35 months.

A file is ranked as low risk if it does not have any medium or high ranking risk factors.

Sources: Business Transformation Project, "Consolidated Verification Process", OMSSA fall training seminar, December 1, 1998; "CVP Countdown", Northumberland County, undated; and Ontario Works Policy Directive 6.0 – 1, June 1, 1998.

Concerns expressed by participants focused around three main areas: the process of providing information; inefficiencies and inappropriate requests for information; and the overall climate of suspicion and surveillance, and the deterrent effect that resulted.

1.5.2. Information requirements

The sheer volume of information that is required can be mind-boggling, and seems to go far beyond what is required to determine eligibility. Just an overview of the categories of possible information requirements includes:²³

- Birth verification (documentation for all applicants and participants and beneficiaries);
- Marital Status – any legal documents pertaining to a divorce or separation;
- Support – where applicable a Declaration of Support and Maintenance;
- Immigration Status – documents relating to immigration for all applicants and participants and dependants;
- Income – eligibility for potential sources of income must be discussed and assignment forms completed where appropriate e.g. EIB, CPP, WCB;
- Property – copies of deeds and or mortgages for any property owned by the applicant or participant or beneficiaries including principal residence;
- Debts – verification of all debts over \$500 owed by applicants or participants;
- Documentation to indicate pursuit of assistance through ODSP (if applicable);
- Social Insurance Number for applicant and spouse;
- Health Numbers for all beneficiaries;
- Sponsorship or Breakdown of Sponsorship (for sponsored immigrants);
- Bank Accounts – verification of bank account information including account numbers and location(s) for the year preceding the application. Changes to accounts must also be verified (e.g. closed accounts);
- Receivables – details of monies owed to the applicant and his or her efforts to recover them;
- Year and make of vehicles;
- Funds held in trust;

- Roomer/boarder information;
- Income – must be verified and noted;
- Accommodations – lease/rental agreements must be verified and documented;
- Assets and Real Property;
- School attendance;
- Employment;
- Participation restrictions or deferrals;
- Education status

At first sight the list may seem routine and no more than a social assistance system would normally require. But in practice, the array of requirements to satisfy any of these categories, and the process by which these requirements are imposed can be onerous, and unfair to the point where it excludes people genuinely in need. For example, satisfying the income verification requirements can mean producing any of the following (if relevant): Support Court order, Divorce settlement which includes support, private agreement, affidavit of verbal agreement, letter of eligibility from income source (e.g. pension), cheque stubs, bank records showing deposits, copy of application for other income, appeal letters from other income source; repayment from income source due to assignment, T-4 or T-5 slips from Revenue Canada, Income Tax Assessments, Child care receipts, Employment pay stubs, training allowance pay stubs, sponsorship agreements or payments, OSAP assessments, Fire insurance settlement documents, monthly statements and or receipts for self-employment income and expenses, waivers for pursuit of child support include police reports or medical reports or spouse receiving financial assistance; and other verification as applicable.

Significantly, the findings from the focus groups confirm that this staggering range -- and weight -- of information is being demanded in practice as well as on paper. Almost all focus group members reported having to provide extensive financial and non-financial evidence to maintain a claim for support. Unsurprisingly, this burden has left many feeling overwhelmed and confused. Indeed, the frustration articulated by one respondent that “they want everything. They just want everything” (K, Brampton), resonated across all of the focus groups.

²³ Ontario Works Policy Directive 6.0 – 1, June 1, 1998.

They asked me for my bank account, if I owe any debt, personal debt, credit card debt, if I have any investment. I told them I have a life insurance. I had to get, from the company, the life insurance policy to prove to them that it wasn't cashable. I have to get my RRSPs to prove that to them and that the amount I said I had was what I have ... I have to go to my bank to get statements ... I had to give them my UI insurance pay stubs and I have to give them proof of my credit card, as to how much I owe, if I owe over \$500. And my 1999 income tax assessment, I have to give them that (A2, Brampton).

I had to bring my divorce papers, they wanted the decree ... they wanted a bank book that had to be updated, my son's and my health card, our birth certificates, rent receipts which I didn't need cause my rent goes directly to the landlord. That's in their files, they should know. Then they pulled out the credit bureau reports. They pull out driver's things, they pull out everything you can possibly think of (Y, SSM)

They want to know every possible way that you could possibly get your hands on any kind of money. If you own anything, they want to know if you have any kind of jewellery. You don't want to walk into a meeting wearing jewellery because they're going to ask you to sell it. I do have some jewellery that's worth a lot of money but that was my mother's. When my mother died that was given to me. It's not something that I would ever wear, but it's not something I would ever claim because that's mine, that's something that's very personal to me, was given to me by my mother when she died ... But they'd want me to sell it ... I have been told by my worker, 'If you have any jewellery worth any money, you must sell it.' ... That's why that is on the questionnaire, the sheets that ... they fill out with your assets (K, Brampton).

She was telling me all ... these different things that I had to come up with. Sort of like documents and stuff. I didn't have a lot ... I lost everything at my last place, most of it. All my ID. I have two pieces of ID and don't have a picture ID right now ... I have an expired passport somewhere and a birth certificate. That's it. I know my SIN number but I don't have my card. Or my health card right now. As I said, I lost all my stuff (T, Toronto).

The intense pressure recipients feel to supply this information was only compounded by the associated fear of losing financial support entirely should they fail to hand in the necessary documentation. Many clients were also deeply upset by the manner in which the process of information gathering was handled. For most, this reflected the wider concerns already noted about the nature of their relationship with their worker. However, for at least one respondent the pressure applied went far beyond concerns about language, tone or attitude:

I asked them exactly how I was supposed to go about getting my landlord's address and phone number and what not. And she told me, 'Lie to him.' She said to say you're filling out your income tax ... 'Tell him what you have to tell him. But we have to have his address and phone number' ... I was kind of shocked when they said that I was supposed to lie to my landlord (O, Peterborough).

Across the focus groups as a whole, the majority of participants had no problem with the principle of supplying relevant information. However, they felt that a number of practical considerations were overlooked. Most significant amongst these were the issues of the time allowed to obtain information and the costs associated with providing it. Again and again, clients complained that they were given insufficient time to produce the requested information. As the quotes below reveal, this exacerbates worries that payments will be suspended and in some cases can create genuine panic:

They sent me a letter of everything they wanted me to bring in, and I had all the information that they put on the letter for me to bring in. But when I got there to speak to the worker, she added stuff on and only give me a certain length of time to bring it in – like two weeks or something. Or they would cut my cheque until I had the information in (K, SSM).

I got two weeks notice, but it was by mail. It wasn't a phone call. So if you misplace this, or mail doesn't always come, you have no clue and your cheque can be held ... I also had to bring phone documentation – my phone bill ... just to show anywhere else my money was going. I was terrified (A, SSM).

The merits of these time limits are questionable at best. While it is certainly the case that faster processing of information works in the recipients interest, there is no evidence that this is motivated by such concerns. Indeed, frequently the necessity to contact third parties for information results in delays which are out of the control of the recipient and yet it is they who suffer. Equally problematic are the costs associated with obtaining various documents. While some respondents reported having costs returned, again there was no consistency:

They needed 12 months worth of bank statements, and she [a recipient] got cut off because she could not afford to pay the bank the \$8 times 7 for the statements she was short ... They went through the statements that she did provide to ask, "What did she buy for \$200?" ... or they circled them and wanted to know what that money was (J, Scarborough).

I was asked to bring in all my ID, all my children's ID, all my husbands ID and at the time I did not have my youngest daughter's birth certificate. They told me it was alright for me to show up for the meeting without it, but that I had 48 hours to go down and get it ... I had to have that and I had to have somebody sign it so I could have it given to me right away ... They gave me \$35 so I can pay for the birth certificate and the registration form. At the end of the month they took that \$35 back (A, Scarborough).

Clinic caseworkers report many similar examples of clients subjected to what they consider to be outrageous and unnecessary information demands. Existing clients have been required to produce credit card and bank statements going back over several years, when the information has never been required before. One clinic worker reported:

Some of the information demands are quite different from what we have seen before, 18 year old insurance policies, 20 year old divorce papers, divorce papers for all three of a woman's divorces. The demands are also unreasonable, particularly bank statements that clients can't afford. One of our offices has forgone requiring information if it costs more than \$50; the other (headed by the new ODSP manager) has no mercy. Clients are also being required to produce documents that don't exist: written versions of 10 year old verbal agreements, receipts for items where it is clear nothing was in writing etc.(L.R., lawyer, Eastern Ontario).

Banks and credit card companies have refused to provide documentation because it has been archived, or demanded large payments to provide it. In some cases, the letters clients received had all of the information requirements checked off for the client to produce, whether or not they were relevant to the client. In others, additional information was added to the standard list, and more demands added at the CVP interview itself. Among the more ridiculous demands were: a copy of a lease from a recipient who lived with her father and who did not have a lease; bank records from accounts closed two or three years previously; an insurance policy that had been cancelled several years before and copies of documents previously submitted.

Turning to the process by which information is gathered, there appears to be little flexibility or patience for applicant's sometimes difficult circumstances. A legal worker reported that a client who missed an appointment because she was in a treatment centre was given an expanded list of documentation and given two weeks to collect it and appear at another appointment. She missed the appointment because of family difficulties and was cut off. In another case a client was

ordered to attend a CVP interview that took place in another community. She had no car, there was no bus service and a taxi would cost \$60. She was told she would be cut off if she did not attend. As the same lawyer explained these examples accurately reflect the fundamental changes that the system as a whole has undergone:

Administratively we have noticed a change: there is no slack cut for clients at all, either in the type of information requested or the time lines given... clients... tell us that the interviews feel like interrogations, they last up to 3 1/2 hours, and the workers are very intimidating and abrupt: "Get this or you are cut off". Many times clients complain that they are being asked for information they have already provided... Depending on the information, clients are often given no time to get the information... We have one or two clients who have given up on social assistance because of the process (L.R., lawyer, Eastern Ontario).

Accessing third-party databases is also portrayed as leading to a more efficient and consistent implementation of eligibility criteria. Here again the list of information that may be accessed about a person is extensive and can include: welfare fraud database; asset checking services; immigration; Revenue Canada; Managing Enforcement with Computerized Assistance (MECA); Ministry of Transportation; Equifax (credit history); Employment Insurance; Canada Pension Plan; Workplace Safety and Insurance Board; Banks; Landlords; and Employers. Serious problems and injustices have occurred here as well. For example, cases have been reported where Ministry of Transportation records showed old cars registered in a client's name. Even in cases where the cars were clearly old -- 20 years and more -- and the applicants had long ago scrapped them, such people have been refused assistance until they were able to provide proof of how the cars had been disposed of.

In cases where these cases have been brought to community legal clinics, legal workers have been able to intervene and restore a person's benefits. Concern remains however, for the many who do not manage to access such assistance, and the unnecessary damage and stress inflicted through this process. At least one legal worker who served a particular ethnic community expressed the concern that many women from these communities would not object to such demands and would simply comply with the procedure as best they could.

Regardless of the guiding logic behind these practices, it is apparent that the costs of providing information, along with the limited time allowed, combine to create a severe barrier to maintaining a claim. In doing so, they serve as just one more mechanism for discontinuing or suspending payments.

1.5.3. Inefficiencies and inappropriate requests

Again, it bears repeating that most contributors did not resent appropriate enquiries. Criticisms resulted from the highly pressurised context in which these took place; with more information demanded, more often, with less time to obtain it, all under the threat and fear of cheques being suspended or cancelled. Frequently, participants reflected on the perceived inequity between the demands placed upon them and an administrative system that seemed to constantly fall short of their expectations. The excessive demands and the ticking clock that participants faced seemed in stark contrast to what many perceived as an inefficient system. As evidenced by the following quotes, most contributors had faced requests for duplicated information, documents going missing, and what they felt was an intentionally slow processing service:

They wanted everything – everything they've already got: proof of your birth certificate, your kids' birth certificates, report cards, proof that they're going to school, rent receipts. They ask you for bank statements (S, Peterborough).

They already had a copy of the actual insurance papers. I showed her the actual life insurance policy but that wasn't good enough. She wanted this piece of paper right from the insurance company ... They were really slow at one point in getting the information out and ... she actually held my cheque (C, Peterborough).

I had to fax in my pay stub. I had one worker at the time who told me I had to fax in my original. I was new at this so I faxed in my original and he lost it. My cheque was on hold (K, Scarborough).

They ask you to bring in the exact same information you brought in when you first applied ... every time they do an update, even though it should be in their files... They keep asking me three times a year for the same information ... I have to keep supplying it three times a year – minimum. If you don't, there's an interruption in your cheque (L, St. Catharines).

The experiences of this last group member reflect a more widely felt concern. Participants strongly felt that these inefficiencies represented far more than a collection of individual errors. Instead, they were understood as deliberate practices designed to facilitate the delaying or withdrawal of benefits. This belief was only exaggerated when participants had to contend with a whole range of inappropriate requests for information. Sometimes, these appeared to be careless, administrative errors such as the example given by one Peterborough respondent:

My meeting was in the middle of August and they wanted verification that my kids were in school. Reality check! They don't go to school in the summer. So, I got a hold of the school social worker and he gave me a letter stating that the kids had attended school the year before that and that their attendance was good ...If your child misses so much time from school, the school is obliged to call the system and say that you're child is not attending school regularly which means then they can start deducting your cheque ... They were accusing [one of my sons] of missing 46 days of school. I said, 'That's bullshit. There's no way in hell [my son] has missed 46 days of school.' She said, 'Do you want to see the attendance records?' ... I looked and then looked again and I went, 'Will you please explain to me why [my son] has missed school in April, May and June when those months aren't even here yet? Is something going on here that I don't know?' She went, 'Oh, that's the problem.' Because they've gone to a new system what's going on is that they're carrying the attendance from last year on to this year' (K, Peterborough).

There were, however, numerous examples of more worrying incidents, ranging from inappropriate requests of women fleeing abusive relationships, and pushing them to seek child support payments in situations where it would be dangerous to do so:

When you're in that state, you're just grabbing your kids and going. You're not thinking about, 'Oh, I better bring this and I better bring that.' ...I fled an abusive home ... They want a bill in his name and a bill in my name to prove that we lived together ...I'm supposed to have that with me? I'm supposed to have remembered, 'Oh, I better grab a bill with his name on it, so I can prove when I'm at the shelter, that I lived with him' ... How am I supposed to get that? I can't just call one of the companies and say, 'Oh, I need a copy of his bill.' They're not going to give that to me ... It's ridiculous! (K, Brampton).

They told me they would deduct a hundred dollars for child support, the child support agreement that I had signed six years ago with my younger daughter's father. I don't get [that] because he can't afford to pay it to me, but they would still deduct it and I would have to take him to court ... Basically it works out that if I go on welfare I end up with less money than I get now and right now I'm only living off my Child Tax (W1, Scarborough).

They made me take this man to court for child support, I got threats the whole way through, and they still would not let me drop the case. They said that they had to have child support. The whole thing fell through because the court said "She has to have \$800 for the DNA test" and I didn't have it. I was so fed up with it and finally there had been so many police reports going back and forth, they dropped the whole thing. But I had to go through that – we all had to go through that – just to satisfy their bureaucratic requirements. I know one woman who is getting so much – on paper – per month from her husband, and they assume she's getting it and she's not and they've cut her off completely because they assume she's being taken care of (C1, Scarborough).

They wanted to know where my ex was. They got really invasive about that ... I don't have to go for child support because it was dangerous to me ... [but] they started trying to pull that back up and say, 'Well, they've changed everything and you've got to go for support. You've got to at least show that you've tried.' They wanted his address and stuff ... They wanted to know not only who he was and where he lived, they wanted to know if he had brothers and sisters and where his parents lived ... I refuse to go for support because I'm not going to put my family in danger. But they wouldn't leave it until I gave them an address. So I just gave them a funny address and the guy didn't catch on (S, Peterborough).

In one case a legal worker reported that a client was even asked if she still got her period, whether she was pregnant and whether she had gone through menopause!

A significant amount of this misinformation seems to be generated by the embittered accusations of former spouses. The flames of these personal quarrels have been fanned by the ready availability of the provincial "fraud hotline." Two examples make the point, the first revealed by a woman in her early thirties:

I had a boarder, an elderly man. When I had my house they accused me of living with ... this guy [who] was 70 years old ... They had me come in for an interview, accusing me that I was living common law with this guy (S, SSM).

I was accused of having my stepfather live with me, who had been dead for three years at that point in time ... I had to take in his death certificate, the letter from the funeral home, a copy of the plot where he was buried. I went and took a picture of the site at Pine Hills with my dog standing on the spot so they'll know where it is (J, Scarborough).

Another graphic example was provided by a woman who explained how her home became the subject of close monitoring. A vindictive call to the 'hotline' led workers to understand that she

was living with a male. The house was then monitored over a period of time. This surveillance of her home revealed that there was indeed a frequent male visitor, but not one that would warrant such an invasion of privacy:

They called and said there was somebody, three times a week, coming in my driveway. They had actually sat and watched my house ... They had the license plate, and the colour of the vehicle ... It was the school social worker ... 'The person you're talking about is the school social worker. And yes, he is in our home quite a bit. Am I sleeping with this man? Absolutely not' ... 'Well, we know that he has come to your home in the evening.' 'Yeah, he has. He has picked up my son to take him to hockey and brought him back' (K, Peterborough).

It is clear then that even after enormous investment, the sought after “improved program integrity” has not resulted. The City of Ottawa has “identified a number of concerns related to the technology’s impacts on payments to clients and audit functions... situations have occurred where, payments cannot be reconciled, clients may have overpayments assessed in error and payments cannot be generated or cancelled.”²⁴ Administrative overpayments can be harmful to people even when they are accurate, but considering the new lengths that the province can go to collect overpayments, being pursued for an incorrect overpayment may have devastating impacts.

1.5.4. Surveillance and Deterrence

Formatted: Bullets and Numbering

Such inappropriate intrusions and accusations have led to an understandable perception amongst respondents that the chief concern of the new system is one of surveillance and deterrence. Many of the focus group members felt they were facing heightened surveillance under the new procedures that were designed only to deter people from making and maintaining legitimate claims. One contributor, who described the entire process, as “pathetic” typified the sense of outrage felt. He continued to explain how the level of intrusion resulted in questions probing whether “somebody gives you a pair of socks or a tube of toothpaste” (W, London). Whilst examples of the extreme surveillance noted above were rare, there was abundant evidence of this excessive ‘micro-management’ of the lives of assistance recipients:

²⁴ City of Ottawa.

[I had] a form of what was considered a gift that had to be reported. Shoes, and various items like that, you were supposed to report at dollar value. You were allowed a birthday gift and a gift at Christmas. One of the things that I always remembered on that list was that if you were invited to somebody's house on a regular basis for a meal, that meal is a reportable item. Like if every Sunday you went to your Moms for dinner, you were supposed to say to them, "I had dinner at my Mother's 3 Sundays this month and the value of the meal was \$8.95 or whatever." If you got taken to a restaurant meal on a regular basis, that was a reportable item ... One of the few things that was excluded was gifts from the church, like from the food bank, but you were allowed one visit a month and no more than a certain dollar value (J, Scarborough).

[The worker] said there's a thing that they're all hooked up to in the computers. It's called Equinox [Equifax] Canada and it gives them full credit line ... She asked what credit cards I did have. I told her and looked across the table and said, 'You have a Canadian Tire card ... Is that not a card you can get cash withdrawals from? A thing where you can go to the store and get cash for the card?' I said, 'Yes.' ... 'Have you ever done that?' I said, 'I don't know. I can't remember. I don't use it for cash.' She knew more than she was letting on to me. She had everything. But I didn't know they were allowed to do that until we got there (O, Peterborough).

Do you know what my worker told me? She is not giving me enough money to make it on a monthly basis so she knows that I'm defrauding them, but just hasn't figured out how yet. I get \$1106 a month and between my rent, heat and hydro which is all in one, it's \$950. So she knows I'm defrauding them, she just hasn't figured out how and because of that, and because of the new government standards, they can actually call me in every month for an update (K, Peterborough).

They're labelling 'welfare' ... and when they label you, they put you in this little group. Then you are in their little prison and then they control you. 'Don't you go out making \$20 shovelling a driveway cause you better report it, cause if you don't, we have the hotline' ... You're killed every time you turn around (V, SSM).

As much as anything else, this micro-management runs counter to the stated aims of fostering independence. Significantly, though, as exasperated group members reflected, it is effective in meeting a less publicly stated ambition -- to act as a deterrent and to persuade people to leave the system, even if they are eligible:

I don't wanna go through the same process again ... and I don't want to deal with these people again because they just digging and digging you for more information every time ... When you think you've given them everything they need, tomorrow they call you back, 'something is missing'. I just want to move on. All I need is first and

last, and go back to my minimum job and work sixteen hours a day just to pay my rent and use my baby bonus for food and diapers (F, Brampton).

There's a few people I knew that have actually left the province. One woman just said she couldn't do it anymore and signed the kids over to her mother and she left ... They're saying that these people are finding jobs. No, they're not finding jobs, they just can't put up with all the hassles and all the stuff that they are going through. It's demoralising and it wears them down emotionally (C, Peterborough)

Across the focus groups, participants reported numerous incidents of inefficiencies, inappropriate requests, intrusions and surveillance. Many of these experiences had a negative impact on clients and resulted in benefits or cheques being delayed or even withdrawn. It is no surprise, therefore, that the overwhelming feeling emanating from the focus groups was one of suspicion and distrust. As the eligibility requirements of the system have become both more complex and burdensome, more eligible applicants are failing to meet them. The perverse injustice running throughout these harsher requirement is that assistance recipients are now considered guilty until they prove – and then re-prove – otherwise. People are either being found ineligible or, tired of the hurdles and barriers, are resorting to other means of support. Consequently, simple caseload measures tell us nothing about the real levels of need for assistance within Ontario. Assistance recipients -- promised a 'hand-up' based on the support of a flexible, efficient, client-focused service -- are instead forced to receive assistance within an unrelenting, and occasionally unnecessarily vindictive, system. In effect, they are being punished for circumstances which frequently lie beyond their own control.

1.6. Supplementary Technologies

Automated Support for Employment Assistance

Aspects of the new delivery system and the technology that supports it are intended to shift the emphasis of casework from monitoring financial eligibility and issuing cheques, to employment assistance. However, delivery agents in the large urban centres are reporting significant difficulties with the employment assistance function, specifically its rigidity and limited

capacity.²⁵ The system is primarily geared towards monitoring financial eligibility and “is not an effective tool to manage Employment Placement Activities and as such, EFA must continue to augment the provincial technology with local technical and program solutions... Due to increases in administrative demands on staff (e.g. double data entry), caseworkers do not have additional time to assist clients to achieve their employment goals.”²⁶

The concerns of delivery agents appear to be born out in the experience of the participants, who voiced concerns about inadequate, outdated and inappropriate information:

They send you for jobs that do not exist. I took [a friend] up to [company name] for a job that hadn't been available for SIX MONTHS! ... Welfare gave her the listing ... and we spoke to his wife and she said, "We haven't ... needed anyone for six months!" (J, Scarborough).

I think workers should be able to ... have something printed up to tell people that Human Resources has computers with access to the Internet; some of the colleges will help you with resumes. It's fine to ... have these pieces of paper up there in 55 different languages, but I think a worker should say, "You can go to Centennial, they'll help you with a resume." Or meaningful advice. Not: "Go learn how to read", but meaningful advice (J, Scarborough).

1.6.1. Interactive Voice Response

A further element of the SDM is an ‘Interactive Voice Response’ (IVR) system. The IVR technology is intended to allow clients to make enquiries (both general and specific) and to report changes to ‘routine’ information, such as income without having to wait to speak to a real, live person. However, rather than smoothing the transition to work, this appears to raise further bureaucratic barriers. For example, as recipients now have to provide a monthly income report whether their status has changed or not, there is an increased risk of disqualification for unreported or inaccurate information.

²⁵ City of Toronto.

²⁶ City of Ottawa.

Some respondents reported that they were comfortable with the idea of using IVR, but as the following participant explained, they had little opportunity to do so:

I have called it, just to find out how much we were going to get. I called the day before I was supposed to get the cheque ... But ... I work part-time, and you can't get through until the day before the cheque is coming out (O, Peterborough).

For a variety of reasons, however, this technology was largely shunned by those interviewed here. Most of the respondents reported frustrations and concerns which, in the context of the SDM as a whole are, by now, somewhat typical. For example, once more the comments of participants highlighted the issues of access and reliability:

All of a sudden I get this PIN number, and I have to start calling that, and 'Why do I have to call that' because [you] got my income ... "Well, sometimes we lose documents in the office" ... So I called in ... press this to get this, press this to get this, press this because you didn't press this. You go all the way through this whole thing, "We're sorry but we cannot take a recording right now", the machine's in [not working] (W1, London)

They put you through the whole process ... Then tell you that the process didn't work because the machines aren't working? (J, London)

Most frequently, however, the responses of participants raised serious questions about the suitability of this technology for many of this client group, with a range of pressing needs that are often difficult to reduce to a standard enquiry:

I've found the information on this very new. I mean they'll tell you your cheque is going out or your cheque is being held. But you can't ask a question ... 'Can we be reimbursed for the glasses or can we...' You can't ask a machine that, and it's got press 1, 2 or 3. That's your choice, that's it (O, Peterborough).

Very frustrating and very confusing. I was ready to lose my patience ... I was about to lose my patience 'cause I wasn't talking to a real person. I knew the questions I wanted to ask, but I wasn't getting any straight answers. I just didn't want to do it anymore (Sk, SSM)

It is perhaps not surprising given the numerous system shortcomings already identified that service users have an increasingly strained relationship with the system as a whole. For many, this translates into a deep sense of distrust and suspicion:

Have you ever gotten where they say, “Or to speak to someone in case of emergency, press zero” ... Then it goes to some other recording that says, “blah, blah, blah, but nobody can talk to you anyways!” Basically, I don’t even know what they say any more. They have so many recordings, and I hear them all so much, I’m like – I get confused just ... all I know is I WANT TO TALK TO MY WORKER! ... Nobody else is there with me and I just want help, and nobody is there (W3, London).

They push the wrong buttons, and they put the wrong amount on there, and you’re not seeing nothing for the next ten years of your life. This way if it’s on your card it’s in black and white (Y, SSM).

Such concerns go to the heart of the new delivery model. These new technologies are an integral part of a larger process of de-personalising social assistance: distancing recipients from access to support and in the process isolating and marginalising them more.

Overview and provincial priorities

That caseload reduction was the paramount goal of the provincial government is made abundantly clear in a report commissioned by the Province to provide an economic justification for the BTP. The report, “Review and Update of the Business Transformation Project Business Case and Risk Analysis”²⁷, goes into exhaustive detail to document the benefits of the BTP. To January 2002, the report shows benefits of \$692.3 million offset by costs of \$412.6 million, for a net benefit of \$280 million.

Regardless of the accuracy of these claims, for our purposes it is enough to note that the vast majority of the “benefits” derive directly or indirectly from caseload reduction. Table 1 shows the sources of benefits, the total benefits realised as of January 2002 and the average expected benefits per year from the mature system. Of the \$692.3 million of gross benefits that the report claims have accrued up to January 2002, 70 percent are associated directly or indirectly with caseload reduction and “avoidance” (shown in the table in bold italics). Another 22 percent comes from reduced benefits. In the mature system it is projected that more than one-half of the

²⁷ HLB Decision Economics Inc., *Review and Update of the Business Transformation Project Business Case and Risk Analysis*, March 2002.

annual gross benefits of \$377.5 million will come from caseload reduction and avoidance and another 20 per cent will come from reduced benefits. There is no mention anywhere of savings expected because the new system enabled people to gain employment faster or in greater numbers.

Closer scrutiny of major categories of benefits is revealing. To January 2002 CVP generated \$345 million in direct program savings through caseload reduction. In the last year of that period, 2001-02, it generated savings through caseload reduction of \$111.2 million. It did this by reviewing an average of 5 per cent of all OW cases and 0.6 per cent of ODSP cases per month. Of these they closed 22.5 percent of OW cases reviewed, and 4 percent of ODSP cases, resulting in the closure of approximately 900 cases per month.²⁸

In the future it is estimated that CVP will result in the termination of 17 percent of OW cases reviewed with CVP and 3 percent of ODSP cases reviewed, producing savings of \$105.4 million annually. That means the termination rates and annual savings are only slightly lower than those achieved through the implementation phase. However, if one of the main ways CVP saved money to date was by a thorough review of Family Benefits files that had not been reviewed in a long time and finding people whose circumstances had genuinely changed, then it is unreasonable to expect the same results into the future.

The disability adjudication process is another area that has delivered significant caseload avoidance benefits. As of January 2002 it had resulted in savings of \$78 million due to caseload avoidance. This was accomplished by avoiding 326 ODSP cases per month, with average benefit duration of 42 months. Most (but not all) of these are assumed to remain on OW at lower benefits, and for the average of only 9 months.

In future years the Province anticipates that it will result in savings of \$42 million annually. These savings are expected to come from avoiding 200 ODSP grants per month, resulting in savings to the ODSP program of \$54.1 million, offset by increased OW costs of \$11.7 million.

This gives some idea of the significance of caseload reduction to the government, and the true priorities of the BTP. Benefits flow entirely from caseload and benefit reductions, and the administrative savings that allow the functions of surveillance and deterrence to be carried out efficiently. If these goals are not realised it will create problems apart from the obvious budgetary ones. The BTP is the highest profile example of public-private partnership engaged in by this government. The Province needs to demonstrate significant benefits to avoid more criticism from the Provincial auditor over its handling of this contract, but also to show that such Common Purpose Procurement relationships actually work.

The troubling prospect is that if some parts of the new system do not meet provincial expectations for restricting entry to the system, the way the ISUs appear to be, then the spectre of further efforts to disentitle and deny people are possible.

²⁸ Ibid. vol. 2, pg. 20 and Table 7 and vol. 3 Table A2-5.

Table 1: Service Delivery Model - Benefit Streams Descriptions and estimated amounts				
Benefit Source	Description	Benefit Type	Total savings to January 2002 (\$millions)	Average expected savings per year (\$millions)
Change Reporting 1 & 2 (Income Reporting)	Automated existing policy for terminating cases which failed to submit income reports.	Caseload Reduction - Program Expenditure	\$ 45.2	\$ 4.4
Disability Determination	Operationalized the new disability adjudication regulations of the Ontario Disability Support Program Act.	Caseload Avoidance - Program Expenditure	\$ 78.1	\$ 42.4
Change Reporting 3 (Tax Tables)	Automated existing policy for calculating net chargeable income deductions.	Cost per case Reduction - Program Expenditure	\$ 61.8	\$ 10.6
CR1 & 2 and CVP Caseload Reduction	Avoided administrative funding transfer from Province to Municipalities for FBA Sole Support Parent cases terminated due to CVP and CR1 & 2.	Caseload Reduction - Admin Expenditure	\$ 8.4	
Consolidated Verification Process (CVP)	Implemented standardized eligibility verification process, including risk-based prioritization, third-party information verification, performance management processes, and implementation of technology and human performance supports.	Caseload Reduction - Program and Admin Expenditures; Cost per case reduction - Program Expenditure	\$ 344.8	\$ 105.4
Consolidated Verification Process (CVP)		Cost per case reduction - Program Expenditure	\$ 154.0	\$ 73.3
Intake (SDMT Release 1A)	Implementation of redesigned intake screening and verification processes, including the introduction of call centers for data capture and screening of applications for assistance, standardization of third-party information verification, and implementation of technology and human performance supports.	Caseload Reduction - Program and Admin Expenditures; Casework Productivity Improvement - Admin Expenditure.	\$ -	\$ 12.6
IVR (SDMT Release 1B)	Implementation of a self-serve, telephone-based IVR application for clients to obtain responses to high-volume, low-complexity enquiries without caseworker effort.	Casework Productivity - Admin Expenditure	\$ -	\$ -
Case Management (SDMT - Release 2)	Implementation of redesigned case management processes, technology and human performance supports, including replacing CIMS with SDMT.		\$ -	\$ -
Caseload Reduction	Increased automation of eligibility and entitlement business rules.	Caseload Reduction - Program Expenditure	\$ -	\$ 39.1
Cost Per Case Reduction	Increased automation of eligibility and entitlement business rules.	Cost Per Case Reduction - Program Expenditure	\$ -	
Overpayment Recovery Across	Automation support for enabling recovery of overpayments from across	Program expenditure.	\$ -	\$ 6.7

Jurisdictions	municipal jurisdictions.			
Caseload Reduction	Increased automation of eligibility and entitlement business rules.	Caseload Reduction - Admin Expenditure	\$ -	\$ 8.5
Casework Productivity Improvement'	Improved process efficiencies associated with process improvements, automation, single integrated database and modern technology platform.	Casework Productivity Improvement - Admin Expenditure	\$ -	\$ 74.5
Total Gross Benefits			\$ 692.3	\$ 377.5
Total attributable to caseload reduction (\$ millions)			\$ 476.5	\$ 199.8
Total attributable to caseload reduction (%)			69%	53%
Source: HLB Decision Economics Inc., <i>Review and Update of the Business Transformation Project Business Case and Risk Analysis, March 2002.</i>				

Conclusions

With the adoption of the BTP the residents of Ontario were promised a social assistance delivery system that would reduce costs through efficiencies and create a more flexible, client-centred service, better able to meet recipients' needs. However, the evidence drawn together for this report – taken from the knowledge and experiences of those delivering and receiving social assistance – uncovers a starkly different reality. As we argued earlier, if we judge the new SDM by its actual performance rather than its promises, then the evidence points to a system that is clearly failing to deliver:

- ❑ Instead of the promised reductions in administrative costs, allowing system resources to be freed-up to help people find work, costs have increased. In particular, this is due to the additional costs incurred through the two-stage application process, unnecessary and burdensome information requirements, double data entry needs, and the necessity for delivery agents to operate secondary systems.
- ❑ Instead of the promised streamlined and efficient service, delivery is riddled with access problems, system failures and duplicated and inappropriate requests for information.
- ❑ Instead of the promised flexible, individual and responsive system, performance so far points to a rigid, standardised and insensitive system. On top of this, more complex eligibility requirements mean that eligible applicants are failing to access services or are inappropriately removed from them.
- ❑ Instead of the promised client-friendly system helping assistance recipients find work, the new SDM is dominated by a climate of suspicion, intimidation and hostility. Social assistance applicants and recipients are forced to contend with the use of deliberate practices designed to facilitate the delaying or withdrawal of benefits, along with an increasing 'micro-management' of their lives, as they are subject to continual information requests, intrusions and surveillance.

In sum, the new SDM restricts entry and denies benefits to eligible people through excessive and inappropriate requests for information, cumbersome and complicated application processes, deliberately confusing procedures and language and greatly restricted appeal times. Once translated into operation on the ground, therefore, the much-vaunted innovation and experimentation of BTP is revealed as nothing more than a new twist on an old welfare story: discourage, divert and disentitle.

These cannot be dismissed as mere operational difficulties that will be ironed out as the parties gain experience with the new system. It is clear that these defects go to the very conception and design of the new model, as new technologies and business practices are deployed to achieve the political goal of restricting access to income support.

We are mindful of the fact that many similar criticisms have been made of Ontario's social assistance system throughout its history. Social assistance has never been a generous system and has never offered substantial individualised support to employment. Workers have always been overloaded and difficult to contact and relationships with clients have always been difficult, fraught with tension and hostility and surveillance and deterrence have always been features of assistance, and may be endemic in some form to social assistance systems generally. And yet the intensity of the problems and degree to which the new systems are embedded in technology and centralised business practices suggest that something more fundamental is occurring. What is new, and significant, are the technologies employed, the importation of private sector methods and standardised business practices which have standardised delivery and centralised policy authority at the same time as actual delivery has been decentralised.

ⁱ Ministry of Community and Social Services, "Business Transformation Project, Service Delivery Model," Executive Summary, November 8, 1999: 11.