



# Memo

To: All Clinics

From: ACLCO Executive

Date: July 19, 2018

Re: ACLCO Update

---

On July 18<sup>th</sup> representatives of the ACLCO Executive met with David Field and LAO's senior management team at a regularly scheduled quarterly meeting. Although a number of clinic-related issues were discussed, and will be reported on soon (via the ACLCO's next Newsletter), a few items merited a quicker update.

You will notice that each of these issues require a response or action from clinics:

## **“Expenditure Restrictions”**

As has been previously reported, the Provincial Government's Cabinet Secretariat sent an Interim Directive on “Expenditure Restrictions” to all government departments, “pending the establishment of an expenditure management strategy after the new government takes office”. The Directive restricts government spending during this interim period in many ways, including a “freeze on discretionary spending”, and a “freeze on New Hiring Except for Essential Services”. Although this Directive does not apply to LAO, LAO has chosen to voluntarily comply with the Directive until LAO hears otherwise from the Ministry of the Attorney General (MAG). In practice this has meant that LAO is not currently flowing through all of the FEG funding that should be allocated to clinics. LAO is also suggesting that clinics voluntarily abide by the restrictions (although it acknowledges that the Directive does not apply to clinics and that it's up to each clinic to decide what it wants to do).

The ACLCO Executive wrote a letter of concern to LAO about its approach to this Directive. The ACLCO pointed out that this Directive did not apply to either LAO or to the clinics and that LAO's decisions were having a negative impact on client services in many communities. The ACLCO insisted that LAO should be forwarding all FEG funding immediately to clinics and requested the opportunity to discuss this matter at the July 18<sup>th</sup> quarterly meeting. At the meeting the ACLCO repeated its concerns directly to LAO's senior managers.

LAO advised the ACLCO that it would continue to abide by the "spirit" of the Directive until it received further clarification from MAG. It felt that to do otherwise would be to potentially anger the incoming government and to "put a target on legal aid's back". LAO felt that these restrictions would only be temporary but had no idea of when they would receive further instructions from MAG. LAO added that most of the FEG funds had been already been allocated to clinics and that "only" \$2M of the \$7.2M due to clinics had not yet been sent out.

The ACLCO will not pursue this matter further with LAO. Rather, as part of the Alliance for Sustainable Legal Aid (ASLA), we have written to the incoming Attorney General, Caroline Mulroney, seeking an opportunity to meet. It is our expectation that this meeting request will be granted. At that meeting we will take the opportunity to educate the new Minister, and her staff, about the importance of legal aid and of community clinics, and the need to honour the commitments of funding investment made by the previous government.

It is absolutely critical that these meetings with the AG and the Ministry occur in tandem with meetings between clinics and their local MPP's. The ACLCO has asked all clinics to engage in these local meetings and to report back to the Association on how those meetings have gone. *If you have not already done so, please set up a meeting with your local MPP(s) as soon as possible, and let Trudi Reaume, at [reaumet@lao.on.ca](mailto:reaumet@lao.on.ca) know about the meeting.*

## **Clinic Compensation Funding Review**

LAO's review of the salaries of clinic staff, as part of the compensation funding review, has begun. LAO has sent a request to all clinics to confirm current staff salaries. This will be the first step in determining the extent of the discrepancy between clinic staff salaries and comparator LAO salaries. The ACLCO urges all clinics to provide LAO with the requested information as soon as possible.

At the quarterly meeting the ACLCO confirmed that this compensation funding review would take into account all compensation components, including salaries, pension and benefits.

## **Clinic Space/Leasing Issues**

The ACLCO once again raised concerns about LAO's draft policy which sets an arbitrary space limit for the size of clinic offices. We had proposed a new policy based on actual clinic space needs rather than an arbitrary number taken from Ontario Public Service guidelines.

LAO responded by saying that a new policy was no longer necessary because LAO was no longer strictly following the draft policy. LAO indicated that it was simply using those OPS guidelines as a starting point for discussion but that it was showing flexibility in recognizing the actual needs of clinics dealing with lease renewals. LAO felt that due to this more flexible approach, this was no longer a major issue.

Prior to pursuing this discussion further with LAO the ACLCO would like to hear from clinics. If your clinic has recently (within the last 18 months) engaged in lease/space discussions with LAO, please let Lenny Abramowicz know about the tenor of those conversations. Do you share LAO's perspective that they have been flexible in recognizing actual space needs in clinics?

### **Clinic Insurance Deductibles**

A number of clinics have expressed concern to the ACLCO about the size of the deductible clinics are responsible for pursuant to our insurance coverage. This has particularly been raised in the context of situations where clinics face law suits from unhappy former clients or from former employees, or if claims were made at off-site events like regional trainings or public meetings.

The ACLCO raised this with LAO and pointed out that the deductible was a matter of concern to clinics. The ACLCO proposed that LAO update its insurance protocol and create an indemnity fund that clinics could apply to in case of such a claim.

LAO indicated that their own budgetary process would not allow the creation of this type of "fund" because it would mean diverting money from client services to a fund that may or may not be called upon. LAO claimed that it was not able to create this type of "contingency" fund.

Moreover, LAO was not convinced that this was really a problem. LAO pointed out that clinics that faced insurance claims were always welcome to approach LAO for assistance, pursuant to the protocol which is posted on The Source. LAO felt that this happened only rarely and when it did occur that LAO was happy to work with the relevant clinic to resolve any issues. LAO's opinion was that this issue was not significant enough to devote further attention or resources to.

Prior to pursuing this further with LAO the ACLCO would like to hear from our membership on the issue. We would like to return to this discussion armed with facts. If your clinic has been in this situation, and approached LAO but not had the situation resolved to your satisfaction, please write to Lenny Abramowicz and provide us with details.

If you have questions or comments about any of these issues, please do not hesitate to contact Lenny Abramowicz, or any member of the ACLCO Executive.