

Third Session - Fortieth Legislature
of the
Legislative Assembly of Manitoba
Standing Committee
on
Legislative Affairs

Chairperson
Ms. Melanie Wight
Constituency of Burrows

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Fortieth Legislature

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LEGISLATIVE ASSEMBLY OF MANITOBA
THE STANDING COMMITTEE ON LEGISLATIVE AFFAIRS

Monday, December 16, 2013

TIME – 2 p.m.

LOCATION – Winnipeg, Manitoba

CHAIRPERSON – Ms. Melanie Wight (Burrows)

VICE-CHAIRPERSON – Mr. Mohinder Saran
(The Maples)

ATTENDANCE – 11 **QUORUM** – 6

Members of the Committee present:

Hon. Ms. Irvin-Ross

*Ms. Allan, Mr. Altemeyer, Mrs. Driedger,
Mr. Jha, Mmes. Mitchelson, Rowat, Messrs.
Saran, Wiebe, Ms. Wight, Mr. Wishart*

APPEARING:

*Hon. Jon Gerrard, MLA for River Heights
Ms. Darlene MacDonald, Children's Advocate*

MATTERS UNDER CONSIDERATION:

*Annual Report of the Children's Advocate for the
fiscal year ending March 31, 2013*

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Madam Chairperson: All right. Good afternoon. Will the Standing Committee on Legislative Affairs please come to order.

Our first item of business is the election of a Vice-Chairperson. Are there any nominations?

Ms. Nancy Allan (St. Vital): I'd be honoured to nominate the—Mohinder Saran as the Vice-Chair of the committee today.

Madam Chairperson: Mohinder Saran has been nominated. Are there any other nominations?

Hearing no other nominations, Mr. Saran is elected Vice-Chairperson.

This meeting has been called to consider the Annual Report of the Children's Advocate for the fiscal year ending March 31st, 2013.

Before we get started, are there any suggestions from the committee as to how long we should sit this afternoon?

Mr. Ian Wishart (Portage la Prairie): We'll sit to 3 o'clock and then assess the situation.

Madam Chairperson: Okay. Is that acceptable with everyone? *[Agreed]* Excellent.

Does the honourable minister wish to make an opening statement? And would she please introduce the officials in attendance.

Hon. Kerri Irvin-Ross (Minister of Family Services): I'll be extremely brief today, and today is about reviewing the annual report.

I want to thank the Children's Advocate and the staff for the hard work that they have done over the last year and the information that they've shared in the annual report that will help inform us as we move forward and strengthen the system. I have lots of confidence in the work that they do in making sure that they're advocating for children and ensuring that the system is working to its best capacity and giving us suggestions on how we improve it. We have enjoyed a long-standing relationship with the Children's Advocate office where they provide us with constructive suggestions and we work together in the implementation of it. We have a positive relationship with the office of the advocate as well as the department and also the minister's office.

So I look forward to working with them in the next year, and I will ask Darlene to introduce the staff, please.

Ms. Darlene MacDonald (Children's Advocate): Corey LaBerge, our deputy advocate; Kirstin Magnusson, who is our advocacy program manager; Angie Balan, quality assurance; Ainsley Krone, communications, research and public education; and Patty Sansregret is special projects, and she would probably tell you I'm her biggest special project.

Madam Chairperson: Thank you, and does the critic, official opposition, have an opening statement?

Mr. Wishart: I do. Certainly, I would like to welcome you all here as well, and certainly make some very positive comments about what we've been hearing from the office about the actions of the office of the Children's Advocate. Certainly, what we hear

from constituents has been very, very supportive; we're very happy with the job you're doing. It's nice to meet some of the staff as well.

I'm new in this role, as you no doubt know, and so we'll try and touch on a few issues, and I guess you'll, hopefully, forgive me if I ask some questions that maybe have been dealt with before, but certainly will help us give us—give me some background. Given that, I think I'll just turn it back over to the Chair.

Madam Chairperson: We thank the member.

Does the Children's Advocate wish to make an opening statement?

Ms. MacDonald: Yes, I do.

Okay, good afternoon. I'd like to thank the Standing Committee on Legislative Affairs for this audience today.

As you're aware, our office exists to represent the rights, interests and viewpoints of children and youth throughout Manitoba who are receiving or are entitled to receive services under The Child and Family Services Act and The Adoption Act. Our Province is empowered to review and investigate, and provide recommendations on matters relating to the welfare and interests of these young people. During the year of this tabled report, we received 2,647 requests for advocacy services.

Our advocacy also involves reviewing services after the death of a young child where the young person or their family was involved with child-welfare services in the year preceding their death. The special investigation reviews identifies ways that publicly funded programs and services that were involved may be improved to enhance the safety and well-being of children. Of the 162 child deaths in Manitoba during the year of this report, 64 were cases that met the criteria for such a review.

For each of our annual reports we chose a theme that reflects what we've seen during the course of the last year. This year's theme, Geared for Success, speaks to our view that the well-being of children is a shared responsibility among many systems and individuals in our society. Just like the cogs of a gear, these parts need to fit snugly together in order to be effective.

We most certainly see examples in our reviews of close-working relationships among the education, justice, child-welfare and health-care systems. We also see instances where systems work well in

tandem with foster parents, elders, other community members, including family and youth and children themselves. However, we also see situations where, if multiple systems had worked together to create and deliver a plan, young people would have been offered better services.

What prevents close collaboration? Often it's the various systems involved are set up to work in isolation from each other, rather than co-operatively. The processes required to make co-operation and collaboration the default approach are not in place regarding—requiring individuals within those systems to make an exceptional effort to integrate with others and can play a role in strengthening a—the family and planning for the child. We're heartened to see a number of organizations and agencies building collaboration. There's a growing recognition of the benefits of this approach, and, by emphasizing this theme in our report, we hope to foster more discussion and momentum in the area.

Overall, you'll note in our report that our office continues to see the need for improvement when it comes to case planning and risk assessment. You may also want to review our recommendations with respect to youth suicide and housing. Again, there are areas that have a relationship to our theme.

Finally, I'd like to highlight the fact that we continue to see an increased awareness about our office among children and youth who are increasingly reaching out to us directly. We are excited to report that we saw a 68 per cent increase in the numbers of children and youth who contacted us directly for support. We see it as very positive that youth increasingly feel they have a place to go with their concerns and recognize that, as our new tag line says, even the smallest voice has the right to be heard.

So I've provided a package that will be given to you at the end of today's session that contains samples of our outreach and public education materials that we produce throughout the year.

So thank you for the opportunity.

* (14:10)

Madam Chairperson: Thank you very much.

The floor is now open for questions.

Mr. Wishart: Thank you for your opening comments, and you did touch on a number of issues that we will be asking a few questions around.

You did make reference, of course, to the fairly dramatic increase in the number of youth contacting your office, 68 per cent increase. And I'm glad that that's in a positive light, that that's not because of increasing numbers of problems. Do you feel you have enough resources to deal with the increase that you're seeing?

Ms. MacDonald: I think anybody probably sitting at the table would say they'd love to have more resources. I think we're doing an effective job, but we could always use more resources, as you ask.

Mr. Wishart: Thank you for the answer. Do you have—have you identified some areas where bottlenecks occasionally occur? I know that everyone always wants more resources to do their job but you clearly have had a significant increase in interaction, and that's a good thing, but have you noted any areas where you're feeling short on resources and bottlenecks have occurred?

Ms. MacDonald: Yes, I believe in order to move our office forward we'd like to be doing more systemic work, and, as you know, we have our staff involved in doing individual child death reports and we also have our intake people and our advocacy officers. But that sometimes takes away from the broader picture of looking at systemic issues, and if I pulled them off of individual cases which are still really important, then there is less of a focus on systemic. And I really do believe that that's what's going to move our office forward.

Mr. Wishart: Thank you for the comments. And, certainly, I would concur from what I've seen in having been Housing critic before that there's a lot of interaction between the quality of the housing and the people that live in it, and, certainly, that was one area that you have identified previously in other reports as an issue and you have made recommendations that went through to the Housing minister in the past, and we have the past Housing minister with us today. I'm wondering if we can get some indication as to whether there have been any specific recommendations and any action taken on these recommendations.

Ms. MacDonald: Yes, we made three recommendations to the minister, and to date, though, I have not seen a response on those recommendations.

Mr. Wishart: Well, thank you for that comment, and I guess I would express a concern that that was back in June, if I'm not mistaken, that we should at least have seen some type of response. I know that

housing issues—dealing with housing issues is a long-term issue so major changes in terms of actions may be a little longer in developing but I would hope that the Minister of Housing currently is taking these issues seriously because we have seen data to suggest that there is a quite a high correlation between health and care of children and the quality of the housing they're in. Do you have any idea as to what are reasonable timelines to expect here?

Ms. MacDonald: Usually, within the year, we would expect answers to our recommendations.

Mr. Wishart: I would hope that that will be the case, and we will certainly be looking for that, and I'm sure you'll continue to do that.

The number of children in care is a cause for concern. It seems to rise; now, you can argue whether that's doing a good job and finding them before problems arise further or whether actions have been taken too quickly in some cases and not quickly enough in others, which is always the difficult decision. Do you have any concerns about the rising numbers?

Ms. MacDonald: I think we always have concerns about the rising number of kids in care. I also don't feel we have—we've done a good job in describing the number. We don't know if, you know, some children come into care for a few days at a time. Some are in care for a very long length of time, and those numbers don't tell us anything about the kids in care. We don't know how many are permanent wards or temporary wards under VPA. We don't know how many, you know, parents have approached, say, the agency because their children may have complex needs, medical problems.

So the number itself is just a snapshot in time, and I really don't think it tells us the story, but, like any person around the table, yes, I have a concern about the rising number of kids in care, and there needs to be many more preventative services.

Mr. Wishart: Thank you for those comments. Now, do you have access—I understand Child and Family Services has a fairly up-to-date information system—do you get direct access to that information, or do you have to go through the minister's office to get access to that?

Ms. MacDonald: No, we have direct access to CFIS.

Mr. Wishart: I guess the obvious following question is, is the information not collected that way that would answer some of the concerns that you

brought forward in terms of length of stay and that's in the system and identifying some of the problems? Is that not available through that system?

Ms. MacDonald: I think it would be a very cumbersome amount of time invested to pull the numbers out that way.

Mr. Wishart: Well, I guess we're always concerned when information systems don't provide us what we need. It is important, as you said, to measure the total number—I think we all share your concern on that. But the type of needs would be something that an information should actually help us identify. And you don't feel the system is helped in regards to that?

Ms. MacDonald: Again, it's a complicated system. I don't believe it breaks down accordingly.

Mr. Wishart: How long has that system been in place?

Ms. MacDonald: Many, many, many years—too long.

Mr. Wishart: Thank you very much, and maybe that does answer that the problem if it's a system that has been in place a long time, it's obviously—maybe needs its—not meeting its needs in every sense of the word.

Do you have—do you feel confident, however, that everyone that Child and Family Services deals with is actually being entered into that system now? There was some concerns expressed previous years—I don't think it was last year, but previous years—that perhaps there was some voids there yet. Do we feel now that everyone is in the system?

Ms. MacDonald: The minister has sent directives to the authorities to make sure that everybody's entered into the system. We do know from our office that, no, not everybody is using CFIS.

Mr. Wishart: Thank you very much. And so you do hear from individuals that are being dealt with through CFS that are not in the system as it currently stands.

Ms. MacDonald: That's correct. And, when we go into the system our self to look for a case or information, that information is not on CFIS, and we do notify the branch with regards to the cases that we're finding that are not logged in.

Mr. Wishart: Thank you very much for that very honest answer. Do you notice any pattern as to what's not entered, or is it just the individual cases?

Ms. MacDonald: I think it's different agencies that are not using CFIS, and there are some connectivity problems in rural areas which create problems.

Mr. Wishart: Well, and thank you for that comment. Living in a rural area, I'm very familiar with getting access issues. It can be a problem even in the south, not even—not specifically to the remote regions.

Do you feel comfortable that adequate records are being kept on the people in the system, whether they're in the computer-based system or not, because that clearly has been a problem in the past? You think that the training available through the various agencies is now adequate to deal with this?

Ms. MacDonald: I believe that the training certainly has been increased over the past number of years—past couple of years—more intense at this point in time. And I think we see some examples of really good case information recordings by many of the agencies, but there are still cases where we see files that have been transferred and there's no historical information.

Mr. Wishart: Thank you very much for that comment. Just going a little further on training, it's clear that there is an increase. Is it in all agencies? Do you feel that—comfortable that the training has moved in an area or moved in a direction that will eventually lead to adequate training in all agencies?

* (14:20)

Ms. MacDonald: My understanding is that all the authorities do have funding for training positions and they are looking at such tools as safety assessments and probability of future harm. So I do believe that the fact that they've been funded for training positions and all the authorities have made this a priority, I'm hoping to see increased levels of communication.

Mr. Wishart: Thank you for the answer. So you still see an increased need for further training. I don't think there's ever going to be a stop to it, but do you feel that the rate of training is adequate to get to the goals in a reasonable length of time?

Ms. MacDonald: I believe the authorities have put training schedules in places. And, as you're aware, when you start off in a new job, you can be overwhelmed with just doing training. And I think it is being properly looked at where people, you know, have a bit of experience in training and then come back and look at their cases and then go back to

training. So I do think people are giving that some really good thought as opposed to just sending somebody out for six months of training and they don't have anything to register or to integrate that training.

Mr. Wishart: You seem fairly convinced that the value of on-the-job form of training is leading to better results then?

Ms. MacDonald: Yes, I believe that it is, and I believe—we have seen some trainers who are actually mentoring people on individual cases, and I think that's worth its weight in gold. I think that's what you really need to do.

Mr. Wishart: I certainly appreciate your comments in that area. You made reference in your opening remarks about the risk assessment problem, because that is certainly the front line, and the decision-making process that goes through both the social worker's situation and as it relates to the child, when they go into a new situation and do that risk assessment. There's lots of guidelines out there, books and books of guidelines, as to what should be done. Do you feel, from the feedback that you're getting, both for and—pro and con, I guess, that proper assessments are being done and action is taken most of the time where it needs to be, or too often?

Ms. MacDonald: I—as I said, in some cases, we see examples of really good assessments. I think the fact that the authorities are agreeing to using what's called structured decision making, and the two components of it where they've agreed to use the safety assessments and the probability of future harm, I do believe that will help. When I started out many, many, many years ago, you know, we didn't have examples of the questions that you could ask, and you relied on your own clinical judgment, which is still very, very important. These are just tools, and they are like guidelines, so that you have specific questions that you can ask, but you still have to rely on clinical judgment as well.

So I guess the short answer is, in situations, we're seeing some really good assessments. We hope to be see—we're starting to see examples of the forms that they're using in the safety assessments. We hope to be seeing many more examples of those in the next coming year; they've just really started.

Mr. Wishart: Well, and thank you for that comment. I am glad that you're starting to see results. I think structure does provide at least an element

in the process. You're absolutely right, personal experience in these situations appears to be extremely valuable. But a tool, as you put it, in the process seems to help arrive at what we all hope will be the best conclusions from the child's perspective. So you're seeing some but not across the board yet?

Ms. MacDonald: That's correct. We do see—as you know, we're a complaint organization, so what we're seeing mostly is when people come to complain that something isn't being done. The other situation is when we're reviewing child death reports, and we are starting to see examples of those on the files.

Mr. Wishart: Well, thank you very much for that comment. And I certainly would encourage the process to move forward as fast as possible. It seems to be the least arbitrary way to arrive at these conclusions. And I did want to touch a little bit on aging-out-of-care situation. And you noted yourself in your opening remarks and in your report that there is still some work to be done in that area. You have made some recommendations in the past in regards to this. Do you feel that we're moving in that area, moving forward?

Ms. MacDonald: I would say, I think some authorities are more ahead than the others. I do still see—or our office still sees that there is not a standard for kids and youth aging out of care. Agencies and authorities end up not having consistent practices, and so there's not one standard when a child, say, should be reviewed at the age of 16 if there's transition to moving out of care at 18. So we don't always see the same standards being applied across the agencies, and people interpret even extensions of care very differently. Some agencies feel if you're going to school and you're doing well then you would be extended in care, where others don't consider that as an extension. And what we are concerned about are the number of kids that are having difficulties and so, therefore, being seen as not co-operating with the agencies and, therefore, are not getting extensions of care, or children at the last minute hearing that they're not getting an extension of care which causes great concern and panic to the child.

Mr. Wishart: Thank you very much.

Yes, I share your concern. It doesn't seem to be a uniform standard, and I had cause to have a discussion with the people at the Siloam Mission not too long ago who are now starting their own initiative because they are seeing a lot of people coming to them who have aged out of care.

Unfortunately, they're not seeing them right away. They're seeing them six months or a year later after they have been out in society and are very often victimized and—out in society—and they expressed a lot of concern that there isn't adequate supports and they, as you said, did not in place in a consistent manner. Certainly, they have success stories as well, but they have identified a fairly significant number that they're concerned about.

Who do you think would be the best agency to put in place these standards, because technically once they're—the people are 18, the children are 18, they're not actually part of the CFS system though they can do extensions? Do you feel that's the best way to deal with it or should there be another agency, and you made reference earlier to other agency involvement.

Ms. MacDonald: I think I would see almost a combination approach. I do think that there are children who need extensions of care. You know, we actually had done a report where we talked about extensions of care to 25 and where children could actually come back into the system once they left if they needed help, much like our own children do. But I do also agree that an outside community organization would be very beneficial in, hopefully, having wraparound services for children as well that would look at employment, would look at education. I think those are the things—look at housing—that would make transition successful.

Mr. Wishart: Thank you, and I appreciate those comments.

It was actually in light of the housing situation that I was in discussion, and they used exactly those same words, wraparound services, which they didn't feel were there. We were having discussions relating to the housing problem specifically and, of course, they offer some limited solutions, but Siloam Mission doesn't feel it has the resources to deal with the number that come out every year. So we would have to find some various agencies within government to assist in the process.

You made reference as well to schooling and, of course, we know that a number of schools have offered free tuitions to anyone who ages out of the system. Do you have any idea how—what the uptake is in that area?

Ms. MacDonald: My understanding is it's pretty successful. The numbers are still limited at this point in time, but, clearly, people are taking advantage of

it, and our understanding is finally the University of Manitoba has come on board as well, so.

Mr. Wishart: Well, and I think they should—all the post-secondary should be congratulated for offering that to people who have grown up and graduated through the Child and Family Services' system, the child-care system. I think that that's certainly a step forward and hopefully we see more uptake in that area. But it's a process and it's only been offered really for about a year and a half, is that correct? This would be the second school year you've seen an increase, do you feel?

* (14:30)

Ms. MacDonald: Yes, I have seen an increase and particularly with more coming on board offering it. With Red River, yes, there is an uptake for sure.

Mr. Wishart: In another area, you made some reference in your comments about younger children and the suicide rates, and also there's been a trend for more females to take their own lives. So do you have any feel in the process—I mean, the numbers alone are cause for concern, especially younger ones—why we're seeing more younger children and why we're seeing more females taking their own lives?

Ms. MacDonald: We—our office has just started looking at the stats, and we just started gathering them from 2008, so I think it is too soon for us to make any comments. We certainly are watching it very carefully. We also were just involved with doing a poster presentation for suicide prevention for the Canadian association of suicide prevention, and when we were there, we met up with the University of Manitoba who is really interested in doing a project with us or including us in a project to look at suicide and particularly the young ages, you know, where suicide is happening. I think our—well, of course, our concern is the very young people as well, and also the method of suicide being strangulation, whereas before I think we would've seen kids taking pills or doing different things and there was still time to get to the hospital. But with strangulation that's not happening, so very, very concerning.

Mr. Wishart: And I appreciate your comments. So we all share the concern about the increasing numbers.

And I recognize that we're early on in the process, and it's good that you've had an approach or contacted an agency that may be able to help us study the numbers and reach some conclusion. I guess the quicker the better is the point in this. How—

and your proactive work in terms of reaching out, making people more aware, is very positive in this area. Do you plan on doing more proactive work in the future, and how long do you think it'll take to actually do a decent analysis of where the problems might be?

Ms. MacDonald: Well, I think we're hoping, if this project goes ahead with the University of Manitoba, hopefully, within a year, we would have some concrete data.

One thing that we've begun to notice, though, when we do public outreach, is that we may not be reaching the proper children or the children that are at risk, because a lot of these children aren't in school. We would think education would be a key component of talking—or preventing suicide, talking education about suicide prevention, but we feel that the kids that are at risk are probably not attending school, so we do need to look for different methods of outreach.

I know, Friday of this week, a number of us at the office are meeting with the head of the RCMP. They're interested in putting our heads together to talk about prevention as well.

Mr. Wishart: Well, and I'd certainly encourage you to do that. If there's quite a correlation between in school and not in school and the suicide rates, our own community at Portage has implemented—it may be a very simple solution, but it seems to be very successful, at least in the early ages, and they're simply calling it the walking school bus. They—teachers go out and actually—and it's a poorer community, certainly a lot of families there on income assistance—the teachers go out and they have the checklists at every household, there should be so many kids, and make sure they go out early in the morning and walk them to school. Because there was—it initially started over some bullying issues, but it has reduced the absenteeism rate by 80 per cent, if I remember their numbers correctly, just in a few months. So it's very simple and may not apply in all communities, but, actually, the smaller the community, the better it'll probably work. And someone's taking the initiative, and those teachers need to be congratulated because they took the initiatives to go out and do that. So, if there is a high correlation between presence in school, they've certainly been able to get more kids coming to school. I wondered if you were aware of that and if I could maybe help by putting you in touch with the teachers.

Ms. MacDonald: I agree. What did you say the name of that project was? You were—*[interjection]*

Madam Chairperson: Mr. Wishart.

Mr. Wishart: They're just calling it the walking school bus. It's in my, if I might follow up, in my own constituency, but there actually was a bit of TV coverage last week on it, because it has—the numbers are very positive.

Mrs. Myrna Driedger (Charleswood): Just a couple questions following along the earlier questions here. With the kids that contact you for help, what percentage of these kids are in situations where they are being bullied or cyberbullied or, you know, another term has come to me recently, too, in terms of kids, cyberstalked? Are you finding that you're hearing more about this, or that's not that common a threat?

Ms. MacDonald: I think we're certainly hearing more about bullying and cyberbullying and trying to do more education about it, but at this point in time, I couldn't tell you the percentage. If you're interested, I can go back and look, but I'm not sure that they would break it down, the numbers down, by that percentage.

Mrs. Driedger: I was just sort of wondering, you know, the prevalence. Certainly, not long ago, I was speaking to some student who indicated that, you know, Internet bullying was probably the biggest challenge they were facing as kids in a high school. And, you know, certainly, it is—it was way beyond what I could even imagine it was.

Another question just based on statistics coming out of this past year is the increasing number of children using food banks. Do you find that the number of children that are coming into contact with your office have—or are speaking up more about the hunger, you know, within their homes or not enough food or, you know, what are the—well, I guess I'll start there. Is—are you hearing that? And—because the numbers keep going up, and we seem to be outpacing other provinces in terms of number of children using food banks according to statistics. Is that something that your office picks up on and has any ability to do anything with?

Ms. MacDonald: My deputy is saying seven times. I'm not quite sure what that means, but—

Madam Chairperson: Mrs. Driedger.

Mrs. Driedger: I'm not sure either, but do you hear from kids that, you know, lack of food in a home is

leading to some of the concerns they have, and is that why they might be coming to you or that doesn't fit into the storylines?

Ms. MacDonald: No, not really. And I just want to go back to your cyberbullying for a second. Our communications and public research person has been doing system kids radio shows talking about privacy rights, too, and how to be careful on the Internet, et cetera, et cetera. So I just want to get back to you on that. But, specifically about food, no, I wouldn't see that as a main contributor. I mean, there would be a number of factors as to why children either approach our office or come into care.

Mrs. Driedger: Would it be ever a question that you would be asking them as you go through, you know, the investigation of something with a child? Does that ever come up as one of the questions posed to them?

Ms. MacDonald: Yes, definitely. We would go through, you know, what has brought them to the attention of our office, what's the concerns. And, yes, I mean, there are times where kids are coming to our office, too, and they are wanting something to eat as well. So they just may have been out on the street for a couple of days, they're coming in, they're checking in with us. We're, you know, getting them help by calling their social worker as well, but we actually do have food in our office to feed them, as well, and bus tickets.

* (14:40)

Hon. Jon Gerrard (River Heights): Sure. Yes, first let me ask a couple of questions about the number of kids in care, and I think, as you mentioned, that there are really too many kids in care.

And there's a study which the Manitoba Health-Centre for Health Policy personnel were involved in and looked at the comparison between Manitoba and other jurisdictions around the world and found that we had about 10 times as many kids in care. This is, I think, a very significant problem, and I wonder, in terms of your office, what you as the Children's Advocate and what your office are doing to try and look at this situation and see what can be done to improve the preventive approaches so we don't have as many kids in care.

Ms. MacDonald: I think our office is very good at becoming involved with a number of systems and talking about coming together and looking at preventative aspects to make sure that a child—for

instance, if there's a reunification process, that it's done correctly so that the child can go home and stay home, that there are supports in place rather than, you know, being sent home and then there's no supports to follow up, which ultimately will lead a child to come back into care.

With regards to the number of kids in care, I've just returned from a meeting in Toronto with the other child advocates across Canada and they are also talking about the definite rise of kids in care, and particularly Aboriginal children in Saskatchewan, in BC. So it is an unfortunate trend, but it's not one that's just Manitoba.

Mr. Gerrard: I note that the number of kids in care this year has again gone up from last year, and in terms of what I see in terms of the people who come to me, one of the concerns has to do with how well the assessments are done, and you've already pointed out that there are sometimes problems with this. You know, we find that, again, in people who come to me, that too often there is not an assessment in which other family members, right, are interviewed or may be interviewed selectively without having a set of really three-sixty look. Maybe you can tell me a little bit about what your experience is in terms of assessments and the interviews done on, you know, surrounding family members.

Ms. MacDonald: The new structure decision tools are supposed to be taking that into effect about the strengths that the family have, what support system, what resources, how the community can help keep that family together, also, with the funding formula and the new family enhancements where people are coming to the attention of the agency maybe earlier and support services are going in at an earlier stage to prevent children from coming in care. So, hopefully, if that model is continued to be—to follow, then hopefully we would see a decrease of kids in care.

You know, I came from Nova Scotia, and when I first started doing social work many, many, many years ago, I mean, there's strong family connections and, unfortunately, we don't seem to have that in rural communities where people are able to be healthy enough and strong enough to help family members. The first thing I ever did as a social worker was to go and say, okay, who in the family can help support this so the child doesn't have to come into care? I hope that we begin to see a lot more of that or community organizations that can do wraparound services for families.

Mr. Gerrard: You know, I mean, I bring this up in part because we recently had an example where it was the family of—the child was taken into care, and there was an option in terms of the journey of this child to have the child with one of the close family members. I think it was the sister of the father in this instance. But it could've been otherwise who had a very stable—both she and her husband were working and so on. But, in terms of the interviews, it was never even—the Child and Family Services never even connected. They never even knew that this woman and her family existed as a resource. And surely more can be done in this area so that kids can be, you know, looked after by family members who are very capable of doing so.

The other thing that we found in the last few months is a couple of instances where children who have been breastfeeding have been taken away from their mothers and put into care. Now, in terms of two of these instances, there was a recognition after several days that this was a mistake and the child was taken—given back to the mother to look after. But this is a—you know, pretty traumatic, and you're interrupting, you know, breastfeeding. And, you know, in both instances, it really looked as if—because the child was returned after a few days—that a mistake was made in properly assessing things in the first place. And I wonder if you would comment on approaches when you've got a mother who's breastfeeding and children being taken away while the child is breastfeeding.

Ms. MacDonald: I know if either one of those cases came to our—the attention of our office, we would certainly intervene and contact. We have had cases where we know that relatives have come forward and yet the child was apprehended and placed in care, and we've really advocated, and the result was that the child was moved to a relative placement.

The other situation with regards to breastfeeding, I do recall an example where we contacted the agency, and immediately, you know, resources were made available so that the breast milk could be transferred to the home to feed the child, and then subsequently the child did go home. So, when our office does become avail—or does become aware of those situations, we would intervene and push very strongly.

Mr. Gerrard: Now, I have a question for you. In terms of a situation where we came across, where there appeared to be—you know, this is—you've got sometimes a broken home and a child is taken into

care, and there's, you know, a difference between the father and the mother, right? And you're in a situation whereas the Child and Family Services worker has to, you know, work out, is one or the other a safe place, or neither, or what have you. And—but in one instance there appeared to be a conflict, that the Child and Family Services worker was a very close friend, right, with the partner of—the new partner of one of the parents, right? And what's your approach in terms of situations like this where you may have Child and Family Services workers in conflict? Are there guidelines? Are there standards?

Ms. MacDonald: There's definitely guidelines on conflict of interest, and we have had situations where our office has been contacted with respect to conflicts and we have arranged meetings and got to the bottom of it. And we would focus on the child and what was important for the child. So if one parent could be removed and the child could remain at home, we would be advocating for that. If we felt there was a social worker who was a relative or a conflict, we would bring that to the attention of the agency and the authority. And if we didn't get resolution there, we would bring it to the Child Protection Branch to say this needs to be looked at, it's not proper.

Mr. Gerrard: Do—are there—the guidelines which are there, are those readily available?

Ms. MacDonald: Most agencies and authorities would have conflict-of-interest policies, just as the Office of the Children's Advocate have conflict-of-interest policies as well.

Mr. Gerrard: Is there a provincial standard, or is this set by each agency?

Ms. MacDonald: I would think it's set by each agency. Maybe the minister would be aware of that?

* (14:50)

Mr. Gerrard: Is the way to find out would be to approach each agency and find out what their conflict-of-interest guidelines are? I'm just trying to be in a position that I could follow up on that.

Now, you made some—an interesting observation with regard to suicides, and there were a fair number of suicides this last year as you put in your report, and you mentioned that there's young women and that strangulation is more of an issue than it was. Have you taken this further to find out more about the individual situations of these children who've committed suicide and what might have triggered

them so that we can learn how to prevent them better?

Ms. MacDonald: We have done a couple of reports, an aggregate report on suicides. So we have looked into the situation and made a number of recommendations.

Mr. Gerrard: You know, again, I had the father, right, whose daughter had committed suicide, come to me, and we spent hours and hours and hours and hours going over what happened and trying to understand. And out of this came what we called Samantha's principle, which is children should never be—should always be given hope, right, and should never be put in circumstances where they're being told that there was a, you know, there was no hope of, for instance in this example of—if she had a baby, ever being able to look after that baby because she was told that she wouldn't be able to by—and, you know, I just wondered what you had done in terms of following this up.

Ms. MacDonald: I'm certainly aware of the case that you mention. I don't have the information from the report, the comment. If you want, I can look into it and send you something further.

Mr. Gerrard: Yes, you know, I think that it would be quite valuable. One of the points that you made, and it may well have applied in this instance, was the importance of children attending school. Right? And, I mean, one of the things—this was a child who was for a period in Child and Family Services, and what really surprised me was that while she was in the care of Child and Family Services, although she was school age she was not attending school. And I'm just wondering what sort of, you know, approach you're taking to this circumstance where the children in care of Child and Family Services who are not attending school?

Ms. MacDonald: That's definitely a concern for us, and with regards to our complex needs report we cite how important it is for Education and child welfare to work together because children who have complex needs are often not attending school and that just creates more of a difficulty for them.

Mr. Gerrard: In this case I don't think you would have, you know, put this young woman in the class of complex needs, except, you know, that she had some anxiety issues. But I think that the, you know, what we did find out was that there was a number of group homes where there were kids in care who were not going to school. And, you know, this, again, was

very, very surprising, and I wonder what—whether you can comment on that.

Ms. MacDonald: And, again, I think that is a big issue in our complex needs report. It is the number of children who change placements and aren't in school, and I think the young lady that you're talking to would fit under that category of being moved from placement to placement and the lack of attachment and the proper resources that she should have had.

Mr. Gerrard: Yes, you had mentioned in—earlier on, about the CFIS, right, and in the—because you are able to get access to CFIS and, I gather, often check CFIS when you're working on a case, what proportion of the instances where you're dealing with a child in Child and Family Services are the children not in CFIS?

Ms. MacDonald: I can't give you the percentage right now, but I know that we have written letters to the Child Protection Branch indicating a number of cases that we've come across are not on CFIS. So we are regularly notifying when we come across those cases now.

Mr. Gerrard: I'm curious whether it's at one in a hundred or one in 10 or one in 20, or any rough estimates?

Ms. MacDonald: One in 100 is what our advocacy manager is saying.

Mr. Gerrard: Now, you mentioned earlier on about the possibility of children needing extensions of care until age 25. Now, currently, I think, that it's relatively easy to get an extension of care under many circumstances—not all—to age 18, 19, 20 or even 21. But beyond that, in my experience, it would be unusual, and yet you mention 25. Do you want to comment on that?

Ms. MacDonald: And sometimes it's not very easy for people to get extensions of care from 18 to 21. A lot of those cases come to our attention and probably two days before they turn 18. We did have a report done that talked about age 25, and I know my BC colleagues are looking at extensions of care for kids who have complex needs, disabilities.

And what the research is saying, that most of us who have had children that are still living at home—and apparently 50 per cent of them live at home until age 25, and then another percentage are in the home 'til 29, but those children have gone back and forth.

And what people are saying is why would we treat kids in care any differently. The fact of the

matter is that they leave care and they run into some difficult situations. Shouldn't they have the opportunity to come back into care provided, you know, they understand what they need and they want to co-operate and work with the agency at the point in time?

What I'm trying to say is, just like if my own daughter left home and moved out on her own, you know, she would be able to come home for a short period of time to get the resources she needed to be able to make her successful on her own. And that's what I think the system is seeing, the ability of kids to be able to come back into care.

Mr. Gerrard: One of the other things that I have heard along a similar line is that too often you have a child who gets an extension of care to 20 or 21, and they may be, at age 21, in post-secondary education but having done a year or so. And when they're not able to extend the care further, they drop out of post-secondary education because they don't have the supports that they had.

I'm just wondering whether you would comment on that. That may be another reason why you should be a little more—one should be a little more flexible in terms of being able to extend care where there was a child in post-secondary education, for example, and partway through.

Ms. MacDonald: I agree that, you know, I think it would be wonderful to have the opportunity to have children continue with their education and be able to live in residence, et cetera, et cetera.

Mr. Wishart: I just had a few more questions, if I could.

You made some reference to these aggregate reports, and you said there was one on suicide, and I think you mentioned a couple of others. How do you define an aggregate report? Is it interagency, interauthority? Is it different departments? What makes you go to this type of a summary? I mean, and I think, it's a fair way to do it, but what are the triggers that encourage you to do that type of report?

Ms. MacDonald: There can be all kinds of different reasons. In one, we had a number of kids that committed suicide in one community. So therefore we looked at similar themes, and what we did was we did the report on, say, five different children, and came out with recommendations that we had seen.

* (15:00)

Another one, there was a homicide, so we grouped that together. But that was a little different because it was under three different authorities. And we made recommendations.

So what we're basically looking is common themes and feeling that we can make some recommendations globally to an authority.

Madam Chairperson: We've reached 3 o'clock. So we'll just ask again the committee, what's the will of the committee?

Mr. Wishart: We just have a few more questions, I think. So, as required, we'll continue.

Madam Chairperson: Is that the will of the committee? *[Agreed]*

Mr. Wishart: Well, and I appreciate those comments. So often it's the complexity of the situation that causes an aggregate report rather than the number of agencies involved?

Ms. MacDonald: Sorry, I was just distracted. I was asking the deputy to find the page. I had the page number.

You were wanting more information on the aggregates, or I can tell you some of the recommendations we've made.

On the homicide aggregate we made eight recommendations involving six youth. The youth received services from five agencies under three provincial child-welfare authorities, and the key themes were: an un-invested case of possible child abuse; challenges in how older youth were being supported in the system; issues with effective client engagement strategy; a need for improvement through communication between foster parents and social workers; a need for increased training for agency staff in the areas of risk assessment and healthy child development; and a need for staffing increases in one of the agency sub-offices; and also better sharing-information protocols between child-welfare staff and community providers.

In the suicide aggregate the key themes included: ensuring file documentation was up-to-date; a review of the agency's conflict-of-interest policy; upgrading training for agency staff in addictions and abuse investigations; and an increase in placement resources for a particular community; and a multi-community assessment of existing resources in areas of needs; and a collaborate approach between multiple levels of government and community leadership to identify needs, effective

methods of community engagement and more resources for community suicide prevention strategy.

Mr. Wishart: Thank you for sharing those recommendations. Those are pretty far-reaching. So—but the majority of them actually are between authorities and agencies as—if I heard correctly—and community structure is probably the three areas that you hit. So the complexity of the situation is clearly a factor in whether you decide to do an aggregate report or whether you just deal with it as an individual case.

Ms. MacDonald: That's correct. *[interjection]*

Madam Chairperson: Mr. Wishart.

Mr. Wishart: Thank you. I jumped the gun.

I did want to touch on a couple of other areas. You mentioned early on in your report that—you called it scope creep—was an issue in the number of cases that come forward, and, of course, you—it is hard to define the range of issues that you need to deal with in some areas. Do you feel that you are now getting a number of issues brought to you that really aren't in your mandate?

Ms. MacDonald: Yes, I think we interpret our mandate very, very broadly, and—but, as you're probably aware, our mandate just includes child welfare—children that are involved or youth that are involved with the child-welfare system. So, if a child is involved in education or health, we can't make recommendations to that unless the child is also involved in the child-welfare system.

Mr. Wishart: And my colleague made reference to the increasing problem of cyberbullying, and I'm sure you've been hearing at least a few cases of people come to your attention. And it's obviously a factor, or we fear it's a factor, in the suicide increases, especially amongst younger girls. Are you seeing a lot of cases being referred to you or people coming forward that are related to those types of problems?

Ms. MacDonald: I'm not sure we would have the stats to look at that with regards to cyberbullying, but, I mean, usually, in any of the incidents with suicide, there's a number of factors involving. And a lot of it is not having relationships, good, solid relationships, or, you're right, people are—kids are isolated, do not have the friendships and, yes, are bullied accordingly.

Mr. Wishart: Yes, I appreciate the comment. And, very often with bullying, it's an issue of no one to go

to. And you may be the person that they have chosen, or your agency that they have chosen, to go to, especially if they're not in a well-structured family situation or a well-structured education situation where they can go to a teacher or anything along that line. Do you expect to see more in this area? Is that one of the areas that seems to be increasing? It's a fairly new thing as—and I understand that. But I can see your office being, frankly, a place where a lot would go in regards to this.

Ms. MacDonald: Yes, very definitely. And I said before, our communications person is doing a lot of radio shows with kids on privacy and how to protect your rights and what—you know, dealing with Facebook and how it should be private as opposed to just letting anybody in. And, you know, we our self are using Facebook as well, and Twitter, and have quite the following.

Mr. Wishart: Well, and I appreciate those comments. I certainly encourage you to be more active in that area, and, in terms of getting out there so that they are aware of it, that would certainly be positive. I suspect that we'll hear more from you in—a few years down the road in regards to this area. It's an area that I think we're all aware is probably going to increase, despite our best efforts, simply because it's so easy and it's so faceless and nameless.

Ms. MacDonald: I'd like to just comment, too, that we are out doing a number of presentations in the community with youth and community members, and make sure that we talk about children's rights and privacy constantly, but I, you know, take your comments and I will make note of those. Thank you.

Mr. Wishart: Well, and thank you. I did want to touch a little bit on, you do have—we do have, in the child and family services process, some short-term foster-care situations. And we've seen, I think, a few cases where individuals are left in the short-term foster care quite a long time. Is that an increasing problem? Do you see that as something that we need to find a solution for?

Ms. MacDonald: Yes, I do. Obviously, the short-term foster homes are doing a really good job, and people do not want to move children from placement to placement, so that's why they're being left in the short-term homes, because there's not enough resources available to move them into an appropriate long-term placement.

Mr. Wishart: So I guess, in summary there, and I appreciate you don't want to move them around, but is it the short-term cure is a quick and easy solution because we don't have enough long-term foster parent placements—foster-care placements?

Ms. MacDonald: I would personally like to see a short-term placement have the ability, again, even wraparound services to assess the child properly so that we know where the placement should be. Short-term placements should be only used for very short term.

Mr. Wishart: Could you define short term in—from your point of view? I know it means different things to different people, and I was struggling a bit as to what's short term in your mind.

* (15:10)

Ms. MacDonald: I always thought short term should be about 30 days.

Mr. Wishart: Thank you. I appreciate that. I know that they're being used for much longer than that and so that certainly leaves us with some issues.

You talked about foster parents in there, foster parent relationship, and there are some organizations out there that are associated with foster parents. Do you feel that there's a good working relationship between Child and Family Services and the foster parents that they so strongly depend on in the agencies?

Ms. MacDonald: I would think that in some situations there are very good relationships and others there are not. I know our office deals a lot with the foster parent network, and if we do get phone calls from foster parents, we refer them on or we try to advocate on their behalf as well. But I do think some foster parents do have difficult relationships with agencies.

Mr. Wishart: I appreciate those comments. And you referenced in your opening remarks, I think it was, to better communications being a big part of the solution. And we do hear, as MLAs, I'm sure, on both sides of the House, fairly often from foster parents who, for whatever reason, are unhappy with treatment in the agencies or changes that have occurred. No one likes change, but certainly they've made an excellent case that sometimes they're not consulted with to any significant degree before a change is brought forward. Do you—have you made any recommendations in the past about different

ways to deal with foster parents either through the association or on an individual basis?

Ms. MacDonald: I think we've done a combination of approaches and particularly, like I said, we would organize meetings with all the stakeholders, including the foster parent. We also feel that the foster parent should be an integral part of a child's plan. So we would encourage their involvements, to have a say and to be involved, and there—they are the people that help transition children back to their families too, so they're all part of a care plan.

Mr. Wishart: Well, I certainly appreciate those comments, and I think there are many foster parents out there that feel that often they're left out of the planning process, and the communications issue around that would be one that I would encourage everyone to work harder on. The foster parents and foster-care people are a big part of the success of the process, if it works, and they need to be a big part of the planning process, and we haven't seen—it's considerable cases where that has been the case and we've seen lots of problems, I guess, is the best way to put it. And I'm not going to ask you to comment on that. I'll move on from there.

You also mentioned that you deal with The Adoption Act, and I have had a few people come forward who were trying to access records from their birth, and there is some difficulty in getting records from Manitoba statistics on this. Have you—do you see any changes coming, especially as we're modernizing that system, so that people, especially from the '50s, '60s and early '70s, can get better access to their birth records?

Ms. MacDonald: I would probably refer that one to the minister.

Ms. Irvin-Ross: I can let you know that we have made a commitment, that we are looking at new legislation to open up The Adoption Act.

Mr. Wishart: So you're talking about this session. Will legislation actually get you access to the paper records, because that seemed to be the difficulty. There didn't seem to be a lack of willingness; there seemed to be a lack of ability.

Ms. Irvin-Ross: My knowledge is—I'm not sure when this legislation will be introduced. It will be introduced in the future. What I can tell you is that right now, adoptions pre—no, post-1999 are accessible. What we're looking at is putting post-'99 more accessible, so it will make a difference.

Mr. Wishart: Can you just clarify that, because I think you said post-'99 in both cases?

Ms. Irvin-Ross: Pre-'99, those adoption records will be—we will be putting into a process where we are going to change legislation so they can be opened.

Mr. Wishart: Just to clarify that further, then, those are paper records. They are not computerized to any degree, and the problem has been in the past that no one has the time to actually go and search out those paper records and provide that information. What are you planning to do that will change that?

Ms. Irvin-Ross: When we have committed to make a process open up for people that are wanting to know what is the history of their birth family, we are making a commitment that we will make it accessible to them. There will be opportunities for individuals, if they want to have their records remain closed, that they can ask for a veto and we'll set that up as well. So, when there's a willingness, we will work with people. We understand that it is going to be a lot of work. But we also value the importance of it and the interest that Manitobans that have been adopted having their records being opened.

Mr. Wishart: Madam Chair, I think that brings us to the end of our questions unless anyone else—oh, I'm sorry, just one more.

Mrs. Driedger: Just a couple.

Just wondering if your agency has anything to do with the Canadian Centre for Child Protection in what they do with, you know, Internet pornography or Internet personal safety, because they are doing quite extensive programming and have certainly spent a lot of time in this area and, I know, go out and talk to parents and kids groups about personal safety on the Internet? Is that an organization that you have anything—any connections with or tap into?

Ms. MacDonald: Not officially.

Mrs. Driedger: And who out there keeps track of numbers of child prostitution and ages of kids that are involved in child prostitution?

Ms. MacDonald: We don't have those numbers, but I can get them for you. We do have a social worker who's involved with sexual exploitation; she's on the committee and works very regularly with them. But I can take a look at the numbers and get that back to you.

Ms. Irvin-Ross: I just wanted to respond to the member for Charleswood (Mrs. Driedger) when she talked about the Centre for Child Protection. The Department of Education has a very close working relationship with them, and it will be further developed with the new legislative assistant that's been appointed. Just for your information, we'll be running—hosting, co-hosting the Safe Schools forum this spring with the Centre for Child Protection. Thank you.

Mr. Gerrard: Yes, just one follow-up question.

If you have a child who is not in school who comes to you or a family member who says that the child is not attending school, what measures do you take to try and make sure that this child who's been in care is going to school?

Ms. MacDonald: On a case-by-case basis, what we would do is—we've had situations like that where parents have called us and maybe have placed the child with a relative and the school would not accept the child back, we would advocate on their behalf, and I've made phone calls to superintendents of schools and—to ensure that that child is placed back in the school.

Mr. Gerrard: Do you have a pretty high rate of success or is it problematic sometimes dealing with the schools?

Ms. MacDonald: I think it can be problematic, but, you know, where they're saying that children have to be in school now to 18, not even 16, we're pushing the envelope on that and feeling that, you know, as—again, as I said, with their complex needs, saying education has to be a very important part of this child and we strongly push it.

Madam Chairperson: Thank you very much.

All right. Annual Report of the Children's Advocate for the fiscal year ending March 31st, 2013—pass.

The hour being 3:20, what is the will of the committee?

Some Honourable Members: Rise.

Madam Chairperson: Committee rise.

Thank you so much.

COMMITTEE ROSE AT: 3:20 p.m.

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