

REGIONAL ADMINISTRATORS, FIELD CONSULTANTS & DIVISIONAL HEADS with the MINISTER OF HEALTH AND WELFARE AND THE GENERAL ADMINISTRATION April 16, 17 and 18, 1951 Parliament Buildings VICTORIA, B.C.

The question of a borderline case being granted Social Allowance in order to receive medical benefits was discussed. This is centrary to policy. If a family are not in receipt of Social Allowance or Mothers' Allowance they cannot be granted it, in order to receive medical benefits. Housekeeping Services: There was a general discussion regarding the need for housekeeping services and how the need should be met. Dr. Mescevich felt that there was a definite need for such services for emergencies and chronic patients. Miss McKay spoke of the need in the Child Welfare Division, in cases where the mother was sick or had deserted or was in hospital where sometimes the only resource was to take the children into care, a procedure which was not socially or economically sound. Miss Carroll spoke of the needs of the Psychiatric Division, especially the Crease Clinic, where the need for trained home-makers in the home was essential. Miss Sutherland brought up the same need in homes where the mother was hospitalized for T.B. and could be discharged much sooner if such a service were available. In answer to the suggestion that this might be a community service it was pointed out that this is impractical, if not impossible, in the smaller and remote communities. There was considerable discussion of the whole question the form it should take and whether it belonged to Public Health or Public Welfare. The concensus of opinion seemed to be that a central service of well-trained home-makers would be invaluable and that such a service seemed to belong to Welfare. Miss McKay suggested that a committee be set up to study the question. The question of social workers doing investigations for Hospital Insurance on people with marginal incomes (individuals -\$600.00 and family - \$1200.00) was discussed and the number was said to be about 350 a month. The concensus of opinion was that this was work which did not need to be done by a social worker. Welfare Institutions and Private Hospitals: Mr. Rimmer made a plea for more guidance being available to the municipalities who were planning their own welfare institutions. He instanced the plan being now considered in Alberni and Port Alberni. This brought up the question of the report submitted by a Committee of the Planning Council which went into much detail and laid down suggested policy. It was felt that if this could be available, it would be of great assistance. There was a general discussion of boarding homes, including costs of running and rates. Foster Homes for Elderly People: Mr. Rimmer stated that in Region I they had a number of homes that were willing to take one elderly person and that these were in general very satisfactory. Provincial Home: After some discussion regarding the difficulty of finding boarding homes in the Kamloops area for men coming out of hospital, the question of using vacant beds in the Provincial Home was brought up. Mr. Lundy agreed that these might be used for such a purpose particularly since these men did not belong to Kamloops but came there for hospital and medical treatment. There was a discussion as to whether the Home should not be a unit of the Infirmary but it was pointed out that it operated under legislation and was not physically designed for an infirmary.

- 9 -The question of the need for extra Infirmary beds was discussed. Mrs. Pringle stated that there were only thirty applications waiting but Dr. Moscovich felt that this was not a true picture of the need and that we should have a definite policy regarding an expanding Infirmary programme. Mr. Griffith stated that the policy was that at strategic points active chronic units and also custodial chronic units should be built. He stated that there was more and more reluctance evidenced on the part of patients to leave their own area. Mr. Rimmer brought up the question of the lack of beds for senile patients. In spite of the opening of Vernon and Terrace, there is still an alarming lack of beds and the situation has to be accepted. Miss Carroll suggested that in cases where the patient is particularly difficult, a complete history showing the total difficulty should be submitted to the hospital. The question of Japanese was brought up by Dr. Moscovich. The only difference in their treatment is that cheques will still be issued from Region IV. Otherwise, they are treated as any other Tuesday, April 17th, 1951 - Morning Session III. Social Assistance (a) Social Allowances - some time was spent in discussing the misunderstandings which had arisen over the recent circular #205 concerning increases in Social Allowance and Mothers' Allowances and the alternative bases for municipal sharing of the cost of the former. In one case in a municipality the total rent differential of \$8.00 had been cancelled when the \$5.00 increase had been made. This left the recipient in a worse position in that he actually received \$3.00 less per month. It was agreed that the rent differential should be decreased only by that portion of the increase applicable to the basic rent allowance. It was suggested that difficulties would arise in the case of partial allowances. The example quoted being that of a single man receiving 30.00 per month. This basic allowance would be shared on the 80-20% basis and the increase of \$5.00 on a 50-50% basis. If at some later time his allowance was increased to the permissable maximum of \$40.00 per month then the final \$5.00 would revert to the 80-20% basis. This could only lead to accounting difficulties. A question was raised also concerning the partial allowance where the municipality did not intend, because of the circumstances of the case, to grant any increase. It was then stated by the Deputy Minister that regardless of the amount of allowance, partial or maximum, and whether or not an increase was granted, the first \$5.00 for a single person, \$10.00 for a couple and \$1.00 for each dependent was to be shared on a 50-50% basis, and the balance of the allowance would be on the 80-20% basis. The amount of the allowance and increase was still at the discretion of the individual municipality based on the circumstances of the individual case, but the basis formula for sharing the costs would be as stated above from April 1st. In those cases where the municipality because of the delay in receiving the circular, had been unable to reach a decision concerning their policy before May 1st, then the new formula of shared costs would not take effect until May 1st. The new formula would be applicable to all recipients residing in unorganized territory effective April 1st,