



Ministry of  
Social  
Services

# Saskatchewan Assistance Program

## Policy Manual

Income Assistance and Disability Services  
**May 2011**

Available on the Internet at: [www.socialservices.gov.sk.ca/sap](http://www.socialservices.gov.sk.ca/sap)





**May, 2011 Revisions**

<b>Chapter Section</b>	<b>Update</b>
10.5.1	<i>Trustee fees increase effective May 1, 2011</i>
15.3.5	<i>Level of care rates increase effective May 1, 2011</i>
15.4.2	<i>Vacancy rates at or below 1.5% - add Weyburn, Humboldt, Meadow Lake, Melfort</i>
20.4	<i>Deferral of Income from inheritances or gifts intended for RDSP</i>

**April, 2011 Revisions**

<b>Chapter Section</b>	<b>Update</b>
3.1	Eligibility Date – application signed within 15 days. In exceptional circumstances, signing requirement may be extended to 30 days with supervisor’s approval
3-Delegation	Supervisor’s approval to extend application signing requirement to 30 days in exceptional circumstances
15.3.2	Temporary emergency shelter – new rates effective April 1, 2011
15.4	Shelter Allowances – new rates effective April 1, 2011
15.4.2	Vacancy rates at or below 1.5% - add Moose Jaw and Estevan
16.2	Special Food Allowance – add emergency shelters
16.17.2	Clarify - out of province move costs
16.20.5	Clarify – transportation of the deceased person
18.3.1	Saskatchewan Pension Plan – new contribution maximums for the 2010 taxation year



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POLICY STATEMENT		SASKATCHEWAN ASSISTANCE PROGRAM
Legislative Authority	Subject:	
	Format of Manual	CH 1

The manual is a companion document and is used in conjunction with the regulations. Italics are used to identify amendments.

## **Format of Manual**

### **1.1 Chapter Organization**

Each chapter deals with a subject division of the Saskatchewan Assistance Regulations.

EXAMPLE:

Regulation Sections 3, 4 & 5

Manual Chapter 2 - Application for Assistance

Chapters in this manual follow the same sequence as the regulations.

### **1.2 Numbering**

The composition of the manual is sub-divided into:

Chapters	Chapters are divided into sections.
Sections	Sections are identified by numbers (e.g., 2.2, 2.3, 2.3.1)

Appendices are listed alphabetically.

Note: Ministry forms are numbered and are referred to by number in this manual.

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**POLICY STATEMENT****SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 2, 3, 4 &amp; 5</b>	<b>Application for Assistance</b>	<b>CH 2</b>

**Intent**

Those wishing to apply for financial assistance and/or health benefits must do so in writing on a prescribed form. An application form must be provided upon request. Necessary assistance and information to complete the form are provided.

**Policy****2.1 The Applicant in a Family Unit**

Where a couple lives as a family, the couple should select which person will be the applicant. Family unit is defined in Regulation 2(1)(d.11).

**Guidelines for Determining Family Units and Spousal Relationships**

When a couple does not declare a spousal relationship after a period of 3 months cohabitation while on assistance, the following guidelines are used to determine whether the couple is living as a family. An accumulation of the following factors suggests an economic interdependence. The information is provided by the client. See definition of spouse Regulation 2(1)(f.1). For persons included in the budget, see Regulation 10(2) and for estimating resources, see Regulation 12(1).

**Living Arrangements**

- Do they maintain separate living accommodation? Are separate addresses used for banks, driver's licenses, vehicle registrations?
- In whose name and address are utilities metered?
- Do they use the same phone number?

**Living Accommodations**

- If rented, who is listed on the rental agreement?
- If owned, who is the registered owner?
- Does the physical facility allow for the described living arrangement?

**Financial Matters**

- Who pays for the monthly rent or mortgage, utilities, groceries and household supplies?
- Are there joint bank or credit accounts?
- Are there joint loans or do they guarantee for one another?
- Are any assets jointly owned?
- Who are the beneficiaries on insurance policies?
- Who claims the children as dependants (e.g., income tax return, Registered Savings Plans)?

- Do they claim the person with whom they are living as a spouse on their income tax return?

#### Family Matters

- Is there a common surname? What surname do the children use?
- Who are the birth parents of the children registered with Vital Statistics?
- Is the other adult with whom the client is living required to support the client or any of the children through a court order?

## 2.2 Employability Status

### Fully Employable

- Persons who are capable of working 36 hours per week or more. Including people who are employed, self-employed (e.g., farmer), or unemployed.
- Persons capable of working 36 hours a week, who are enrolled and participating in an upgrading or training program that is intended to enhance their ability to obtain employment.

### Partially Employable or Unemployable

Persons are considered partially employable when they are only capable of working on a part-time or casual basis or are unemployable when they are unable to work due to *social* or family reasons. No Medical Report is required. The partially employable or unemployable category includes:

- Persons with a poor work history and/or social problems. The reason is documented and the supervisor's approval is required.
- Persons who attend at sheltered workshops or activity centres.
- Persons aged 55 and over, unless they have employment income, are seeking full-time employment or consider themselves fully employable. Those aged 50 and over who are considered partially employable or unemployable for these reasons prior to February 1, 2009, continue to be considered partially employable or unemployable until they reach the age of 55 or their circumstances change.
- Persons recently separated, with children, who require a period of adjustment including those in family shelters and safe homes.
- Mothers with newborn children for up to 90 days. Employability is reviewed after 90 days.
- Foster parents, alternate caregivers and persons of sufficient interest where familial reasons prevent the caregiver from working full-time because of the need to care for the children placed in their care.
- When medical care is being provided to a member of the family unit out of the province, verbal confirmation from a health professional is sufficient.
- Familial reasons prevent the person from working full-time because of the need to care for a family unit member. The report indicates the condition of the family member requiring care. Written confirmation from a health care professional is sufficient.

A medical report (form 1092 or 1093) is required when a person is considered partially employable or unemployable for health reasons. This requirement includes pregnant women who are unable to participate in training or employment (e.g., high risk pregnancy).

A person may be considered partially employable or unemployable for up to 60 days pending receipt of a medical report.

### **2.3 Disability**

Clients with a disability are those whose employment or training capabilities are limited and no change is expected within one year.

The worker uses the information provided by the client and health practitioners to determine whether the client has a disability. Medical reports are a tool to help the worker complete the assessment. Information from other sources (e.g., psychologist's report) may also be considered.

The medical report (form 1092 or 1093) relating to the ability to function is obtained within 60 days. If the medical report is unclear or inconsistent with other available information, further clarification from the health practitioner may be obtained.

A person may be considered to have a disability for up to 60 days, pending receipt of a medical report. After 60 days, benefits are adjusted to the date the medical report or other relevant information is received. If no information is provided, an overpayment is not calculated for the first 60 day period.

No medical report (form 1092 or 1093) is required when the presence of a disability is documented in one of the following ways:

- by a health or education professional (e.g., psycho-educational assessment completed by a psychologist documents the disability);
- disability is permanent and a medical report is on file from a previous application;
- client is receiving CPP Disability benefits;
- Daily Living Support Assessment (DLSA) has been completed – approved private service home;
- client resides in a special care home or a group home;
- Saskatchewan Abilities Council vocational assessment documents the disability;
- Certificate of Incompetence has been issued.

### **2.4 Application Criteria for Special Groups of Applicants**

#### **2.4.1 Age 18 for Application**

In most cases, an application is made in the month following the applicant's 18<sup>th</sup> birthday. Those receiving services through *The Child and Family Services Act* as well as those who do not receive such services and who reside on their own may apply on their 18th birthday.

#### **Full or part-time high school students living with parents:**

High school students 18 years of age, but under 19 and living with parents are only eligible as dependants in their family unit, except:

- students with a disability;
- single parents;
- those who have been financially independent of their parents (financially independent means the student had been self-supporting living away from home for a period longer than 60 days or the student has received employment income for full time work in his or her own name for a period longer than 60 days); or

- those who are not eligible for Transitional Employment Allowance (TEA) and whose parents are receiving TEA.

#### **2.4.2 Those who received assistance for basic needs from another province or an Indian Band for the month of application.**

Minimal assistance may be provided (see Chapter 6). Full benefits may be provided the following month. Travel funds may be provided for the client to return to his or her former residence.

#### **2.4.3 Youth 16 or 17 years of age**

Youth 16 or 17 years of age applying for assistance because of family problems are referred to Child and Family Services. Those receiving services from Child and Family Services may apply for assistance on their 18th birthday. For payments to youth who received services through a Section 10 of *The Child and Family Services Act* prior to age 18 and who turn 18 see Chapter 15.3.3. If, in the opinion of the Child and Family Services worker, the client will continue to require care or supervision in the home, it is the responsibility of that worker to advise the home operator of the requirement to be licensed. For transient youth see Chapter 2.4.7

#### **Family Unit both less than age 18**

An application for assistance is not considered until the process above is completed.

#### **Married Couples**

An application for assistance is completed and eligibility is assessed in the usual manner.

#### **Family Unit with Head of Household aged 18 and over living with a 16/17 year old.**

The couple must have lived together for 3 months before the relationship is considered common-law. An application is taken from the adult. The youth (and child, if any) is referred to Child and Family Services for an assessment of services required, the relationship and parental support (consent and financial). If the youth is referred for financial assistance the referral must include written parental consent or Child and Family Services' recommendation that assistance be provided without it. The referral must also include information as to who is receiving the federal/provincial child benefit. The adult allowance and other needs may be provided. Support services are provided by Child and Family Services.

#### **2.4.4 Children with non-parental caregivers**

Children are not eligible for assistance until age 18. Children from other families may be included as dependants if the family is eligible for assistance.

#### **Non-parental caregivers**

Those children whose parents place them with a caregiver who has an active protection file are referred to Child and Family Services for an assessment of the placement. The children are added to the file based on the results of the assessment. If there is a record of previous protection concerns the worker contacts Child and Family Services to determine whether an assessment of the caregiver should be completed.

Caregivers are referred to Canada Revenue Agency for determination of eligibility for the federal child benefits.

If the arrangement for the child(ren) is long term, the caregiver is required to pursue support action under *The Family Maintenance Act*. Support action may be waived. See Chapter 3.5

for waiver reasons. Other financial resources such as Canada Pension Plan Orphan's Benefits and inheritances are considered income.

#### **2.4.5 Assisted Adoption Program**

When adopted through the Assisted Adoption program, the child(ren) is added as a dependant to the parent(s) file. The adoption worker is consulted prior to providing special needs to prevent duplication of benefits.

#### **2.4.6 Non-Indians living on Indian Reserves**

Maintenance needs, including the cost of transportation to receive medical care, are met by the band welfare administrator. These clients are nominated for supplementary health coverage. If the welfare administrator refuses to grant financial assistance non-Indians may appeal to Indian and Northern Affairs Canada (INAC). For health services only see Section 2.5.6 and Chapter 16.22.2).

#### **2.4.7 Transients**

Transients are those single or family units, not currently receiving assistance in the province, who have recently moved into the province and do not have or do not wish to establish a permanent residence in the area where they are applying.

Financial assistance and/or health services may be provided for up to four working days. See Chapter 16.22.2

#### **2.4.8 Funeral Expenses**

An application for funeral expenses (form 1244) may be made within three months of the date of the funeral by any of the following.

- surviving spouse or dependant in a family
- parent of a deceased or stillborn child
- friend and relative if there is no immediate next of kin

See Chapter 16.20.1. In the absence of the above, an application may be made by a funeral director.

#### **2.4.9 Strikers**

Eligibility is determined in the same manner as other applicants.

#### **2.4.10 Those under sentence in a Provincial Community Training Residence**

Board and room and special needs may be provided to those in a Community Training Residence. Clients are not nominated for health benefits. (See Chapter 16.22.2)

#### **2.4.11 Non-Canadians/Sponsored Immigrants Sponsored Immigrants**

Citizenship and Immigration Canada (C.I.C.) is contacted in order to determine immigration status. If receiving financial assistance under any of the C.I.C. programs there is no eligibility for assistance. Canadian citizenship does not nullify the terms of a sponsorship undertaking.

Eligibility is considered:

- Upon termination of a C.I.C. sponsored program when the non-Canadian has been on the program for one year or after the person has been placed in continuing full-time employment (e.g., four weeks of full-time employment if the prospects are on-going and of a permanent nature);
- Upon termination of a private sponsorship.

Where a sponsored person and/or his or her family members listed on the sponsorship undertaking apply for and are granted social assistance during the validity period of the undertaking, a default of the sponsorship undertaking occurs. When a sponsor is unable or unwilling to assist the applicant, assistance may be granted providing all other eligibility requirements are met. The applicant is required to provide all information possible concerning the sponsor's circumstances. Such cases are referred to C.I.C. who will verify the immigration status. Any assistance granted is considered a debt to the province by the sponsor and no subsequent applications from a sponsor who has defaulted will be approved by Canada until the province confirms that the debt has been extinguished or repaid to the satisfaction of the province. These cases are referred to Central Office.

Non-Canadians – see Chapter 3.4

## **Refugees**

**Formally granted refugee status by C.I.C. -** Most of these refugees receive financial assistance from C.I.C. (Adjustment Assistance) or a contracted agency for the first year in Canada or until they are placed in full-time employment (30 days or more). If they require assistance after 1 year or lose their job they may apply for assistance.

**Refugee Claimants** – These claimants arrive in Canada and apply for refugee status. They are allowed to remain in Canada until their refugee application is heard by C.I.C. This process may take 6 to 9 months. Refugees may receive a work visa pending their hearing. C.I.C. does not provide any financial assistance. The person is eligible for assistance if he or she meets normal eligibility criteria. For health services see Chapter 16.22.2.

### **2.4.12 In a training program when applying for SAP**

An assessment is made to determine whether the training program will lead to independence. If the program would have been approved had the person been on assistance, the applicant is considered to be in training and eligibility assessed accordingly.

If the program is one that would not have been approved, assistance is provided only if the training activity does not impede actively seeking work and accepting employment. If the applicant is not employable the participation in a training program will not, of itself, make the person ineligible for assistance. No assistance is granted for costs associated with the training.

## **2.5 Application Forms and Re-Application**

Signed applications submitted by fax or transmitted electronically may be accepted.

### **2.5.1 Application for Social Assistance form (1001)**

This form constitutes a declaration of circumstances, reporting requirements and client consent. The application is completed and signed by the applicant before benefits are provided.

To ensure consent for verification purposes, the spouse signs the Spouse Reporting Requirements and Consent form (1003) within 60 days if not present at the initial interview.

If a client has not received assistance for more than 30 days a new application form is completed.

People may apply or reapply for assistance at any time, regardless of the date of previous refusal or cancellation (including appeal decisions). In the case of a reapplication from a client who appealed, the refusal would stand if the client's circumstances remain unchanged.

The client's eligibility is reassessed, if the circumstances which precipitated the decision have changed.

### **2.5.2 Transient Aid (1113)**

Because transients require short-term services, a shortened application form is used to authorize benefits. (See Section 2.4.7)

### **2.5.3 Family Shelter Authorization (1114)**

Form 1114 is used by family shelter staff for residents to apply for assistance and establish date of eligibility. 1001 is used to issue benefits. (See Chapter 13.4.6)

### **2.5.4 Requisition for Goods and Services (1131)**

Form 1131 may be used to provide minimal assistance pending the determination of eligibility for assistance. It may also be used to establish the date of eligibility, provided the Application for Social Assistance form 1001 is completed within 14 days.

### **2.5.5 Application for Funeral Expenses (1244)**

Form 1244 is used to apply for assistance for funeral expense for those not on assistance. See Section 2.4.8 and Chapter 16.20.2

### **2.5.6 Supplementary Health Application – Non- Treaty Indian on Reserve (1115)**

These applicants must meet the normal eligibility requirements. Form 1115 is used by staff for non-treaty Indians on reserve who receive assistance from a band and who are not eligible for Indian Health services. To complete an assessment for health services, see Chapter 16.22.2. Children eligible for Family Health Benefits may be eligible for northern medical taxi. See Chapter 16.4.4

### **2.5.7 Temporary Health Coverage (THC1117)**

Form 1117 may be used where an emergency health need exists and immediate treatment is required (e.g., drugs or dental.) Form 1117 is not used to authorize use of an ambulance. See Chapter 16.22.2

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement is noted in a chronological recording.	Documentation
<b>2.1 - Determining family units - adults</b>	Client verbal statement about: <ul style="list-style-type: none"> <li>- address of other party</li> <li>- physical description of accommodation for client</li> <li>- name of other parent of child(ren)</li> </ul>	Client provides: <ul style="list-style-type: none"> <li>- rental agreement, certificate of title</li> <li>- utility bills</li> <li>- bank statements</li> <li>- loan information</li> <li>- documents concerning ownership of other assets</li> <li>- income tax return regarding children declared as dependants</li> </ul>
<b>2.2 - Unemployable familial reasons</b>	Verbal confirmation from CFS for foster child	1092 or 1093 for health reasons, high risk pregnancy or member of family unit requiring care
<b>2.5 - Application and declaration of circumstances</b>		1001 completed and signed 1003 Spouse Reporting Requirements and Consent Form
<b>2.3 - Unemployable medical reasons</b>		1092 within 60 days
<b>2.3 – Disability</b>		1092 or 1093 within 60 days (other than for noted exceptions)
<b>2.4 - Age 18 living with parents applying in own right</b>	Financial independence - client verbal statement about former addresses and means of support	
<b>2.4.2 - Received assistance from another province / band</b>	Verbal or written verification from band or province regarding date and amount of last assistance	
<b>2.4.3 - Determining family unit – youth couples</b>		CFS assessment Written parental consent or CFS recommendation
<b>2.4.4 - Adding dependants to family of non-parental caregiver</b>		Caregiver provides verification of any income received by dependants (e.g., CPP Orphan's benefits). CFS assessment if caregiver has active protection file. Contact with CFS worker to confirm whether an assessment of caregiver should be completed if caregiver has closed protection file. Letter from parent, Legal Aid, or private lawyer, re: support.
<b>2.4.5 - Assisted adoption</b>	Contact with adoption worker to verify special needs granted by Assisted Adoption Program	
<b>2.4.6 - Supplementary health for non-treaty Indians on reserve</b>	Written or verbal confirmation from band client is living on reserve	1115

<b>Policy Reference</b>	<b>Verification Client's verbal statement is noted in a chronological recording.</b>	<b>Documentation</b>
<b>2.4.8 - Assistance for funeral expenses</b>		1244
<b>2.4.11 - Immigrants and refugee claimants</b>		1001 Form letter #1005 CIC document indicating inability to obtain SIN - CH 3.2.2
<b>2.5 - Family shelter authorization</b>		1114 1001
<b>2.5.1 Spouse's consent if not at initial interview</b>		1003 within 60 days
<b>2.5.2 – Transients</b>		1001 1131 1117 Also see CH 15.6

**Delegation of Authority**

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

<b>Approval Items</b>	<b>Reference</b>	<b>Approval Required</b>
Not employable – poor work history or social problems	2.2	S

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## POLICY STATEMENT

## SASKATCHEWAN ASSISTANCE PROGRAM

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 6, 7 &amp; 8</b>	<b>Eligibility for Assistance</b>	<b>CH 3</b>

### Intent

The client is responsible for making a written application for assistance, producing evidence of lack of self-support, rehabilitation or re-establishment, making necessary information available, reporting changes in circumstances and participating in periodic case planning.

All those who apply using form1001, must be seen in person within 60 days. Even if they are not capable of completing the application, they must be seen by a Ministry employee. This requirement does not include applicants whose finances are managed by the Public Guardian and Trustee.

The unit administrator is responsible for determining what additional information may be necessary to establish eligibility and to keep a record of the information relevant to the application.

Assistance is granted when the client is incapable of self-support and meets a test of need. Emergency advance payments may be provided if essential to the health and safety of the client and/or dependants.

### 3.1 Eligibility Date

The date of application is deemed to have been made on the date of application shown on the top portion of form1001.

The date of eligibility for assistance is the date the applicant notified the Ministry of his or her intent to apply for benefits, as long as the application is signed and received by the Ministry within 15 days. In the calculation of the 15 calendar days, the first day is excluded and the last day is included. If the 15<sup>th</sup> day falls on a holiday or weekend, the 15-day period is extended to the next business day for the Ministry. In exceptional circumstances, the supervisor may approve an extension, up to 30 days, for applicants who are unable to meet the 15 day signing requirement.

Applicants may complete the application prior to the appointment date. For minimal assistance pending eligibility, see Chapter 6.1. If the application has not been received by the Ministry within 15 days (up to 30 days in exceptional circumstances) from the contact date shown on the form, the eligibility date is the date the application is received in the office. The day of application is not included in the calculation of days.

### 3.2 Requirement to Provide SIN and HSN

As a condition of eligibility, applicants and eligible spouses must provide the:

- Social Insurance Number (SIN) for the purpose of verifying eligibility; and,
- Health Services Number (HSN) including the HSN of other eligible family members for the purpose of determining eligibility to receive supplementary health benefits.

Hard copy is not required.

The SIN and HSN are required as soon as available, but not later than 60 days from the date of eligibility.

When the SIN and HSN is on file from a previous application and the client is personally known by a Ministry employee no further identification is required.

### **3.2.1 Clients with no SIN or no HSN**

If either the SIN or the HSN is not available for both the applicant and spouse at application, the applicant and spouse are asked to present one of the following documents for identification:

- Driver's License (current)
- Any Photo Identification
- Band Registry Card
- Passport/Immigration documents
- Birth or baptismal certificate

These identification documents are photocopied and returned to the client. Where photocopying is not possible the worker lists the documents examined and notes the information in a chronological recording.

### **3.2.2 No SIN**

See Chapter 16.23 for payment for obtaining a SIN. Refugee claimants who are unable to obtain a SIN within the 60 days are exempt from the requirement to obtain a SIN, provided supporting documentation from Citizenship and Immigration Canada is obtained. The time period can be extended with supervisor's approval.

### **3.2.3 No HSN**

Clients who do not have a HSN (e.g., from out-of-province) may be nominated for supplementary health coverage (except Registered Indians who receive health services through Health Canada). The Ministry of Health will provide a HSN which meets the requirements for a HSN for the assistance program.

Clients who are not eligible for supplementary health coverage are required to provide a health number within 60 days.

Supervisor's approval is required when a refugee claimant is unable to obtain a HSN within 60 days.

### **3.2.4 No Identification**

If no identification is available at application, a physical description is noted in a chronological recording and assistance may be provided for up to 30 days. Assistance may be provided for an additional 30 days if one of the documents noted in Section 3.2.1 is provided.

### **3.2.5 Name Change**

A change in client's name is reported on the Change of Circumstances (form 1243) and the Ministry of Health is notified.

## **3.3 Case Planning**

The goal of case planning is to assist clients to become as self-sufficient as possible. As part

of the case plan, clients, regardless of their employment status, may be referred to employment or training opportunities or other related services. Referrals depend on individual needs and capabilities as agreed upon in the documented case plan. (See Appendix A for case planning.)

When clients are unwilling to pursue self-sufficiency, eligibility is reviewed and benefits may be cancelled.

### **3.3.1 Part-time Training**

Part-time enrolment is approved only when there is a disability that prevents the client from full-time participation in training and a part-time program is necessary to obtain employment. Clients, for whom part-time studies are an approved plan, are not required to take student loans. If they do, the loan is considered income, unless they repay the loan immediately. Students are responsible for repaying loans and no allowance is provided for loan payments or for tuition or books. See Chapters 16.14.1, 16.14.2 and 19.11.

### **3.3.2 Contacting Current or Prospective Employers**

Information concerning work or a possible job is required only to assess eligibility. The client is required to provide necessary details either verbally, which in most cases is sufficient, or in writing depending on the situation. Contact with an employer should only be made with the client's consent and if he or she cannot provide the required information. Written verification from employers is not required and should not be pursued. Requesting this of an employer could be perceived by the client as a barrier and is a breach of confidentiality.

In situations where fraud is suspected, the client is asked to provide wage information. If this information is not provided, the employer may be contacted. See Chapter 14.

### **3.4 Persons who are not Eligible for Financial Benefits.**

- Persons in federal penitentiaries, federal halfway houses or provincial correctional centres. See Chapter 16.22.2 for health benefits.
- Young Offenders in open or closed custody facilities.
- Persons on visitors' visas or foreign students on student visas.
- Non-Canadians and sponsored immigrants are not eligible, unless they meet the conditions of Chapter 2.4.11.
- Persons involuntarily committed to the Saskatchewan Hospital, North Battleford. For those admitted for assessment only see Chapter 13.4. Those residing at Saskatchewan Hospital voluntarily may be eligible.
- Those who are eligible to receive the Transitional Employment Allowance.
- Students between 18 and 19, living with parents, attending high school. These students do not qualify for assistance in their own right including the period of normal school recesses except for those eligible students noted in Chapter 2.4.1.
- Registered Indians and their Registered dependants who normally reside on a Saskatchewan reserve are not eligible when the primary reason for residing off the reserve is:
  - receiving medical treatment;
  - incarceration including residence in community training residences and half-way houses until the sentence is discharged;
  - long-term institutionalization in special care homes, group homes, approved homes, personal care homes and temporary residence in safe shelters, addiction rehabilitation centres, detox centres or similar facilities; or,

- attending full-time education with the following conditions:

#### High School

Students who apply for assistance to attend an off-reserve education program when resources are available on the reserve as confirmed with Band officials are not eligible. They are advised to contact their Band to explore available educational opportunities for on-reserve residents.

#### Post-Secondary Education - University

Students approved for post-secondary education programs are provided a living allowance through the Band education program for up to 8 months of the academic year. This allowance is intended to meet the needs of students and their dependants. These students are not eligible for assistance from the Band or from the Ministry.

Students remaining off-reserve during a school break not exceeding 4 months are expected to seek work. Those who require financial assistance are referred to their Band. If it is confirmed that the Band refuses to provide financial assistance, the application is assessed as it would be for any other applicant. Those who exceed the break period of 4 months or who graduate may apply for assistance and are assessed as any other applicant. For university students who live off-reserve see Chapter 4.

#### Training programs - Up-Grading and Training Courses

Students who apply for assistance to enroll in an upgrading or training program when resources are available on the reserve as confirmed with the Band/INAC are refused assistance and advised to return to the Band to make alternate arrangements. The Provincial Training Allowance may be a resource.

### 3.5 Possibility of Maintenance

As a condition of eligibility clients, are expected to pursue every possibility of self-support including maintenance payments. Support matters are dealt with separately from access or custody issues.

#### Definitions

Assignment of Rights (form 1251) - permits the Minister to receive support payments on behalf of a client. It also provides the authority to pursue a variation of the order or agreement, and to recover subrogated arrears. The Assignment is effective the date of the application for assistance. Example: Application completed January 2007. Assignment of rights completed June 2008. If there was a maintenance order during any time between January 2007 and June 2008 and assistance was issued because the respondent did not pay as ordered, the assignment of rights enables the arrears to be recovered for that time period.

Maintenance Agreement - a voluntary signed agreement establishing support payments.

Maintenance Enforcement Office (MEO) is a division of the Ministry of Justice and Attorney General responsible for registering orders/agreements and collecting support payments.

Maintenance Order - a court order which establishes support payments.

Subrogated Arrears - when an Assignment of Rights has been completed the Ministry recovers any arrears which occurred during the time the client received assistance. The collection of these arrears may continue after the client no longer receives assistance.

Variation Order - is any change by the court to the order/agreement. Any variation action is referred to Central Office.

### **Waiver of Maintenance**

Pursuit of maintenance agreements or order is waived when:

- the absent spouse or parent has no means to pay (e.g., is on assistance, a student or incarcerated).
- paternity cannot be established. Where more than one person may be the father, the court establishes paternity. (See Chapter 16.23 for DNA testing).
- potential abuse by the absent spouse or parent poses a serious threat to the client and/or dependants.
- the whereabouts of spouse or parent cannot be determined.
- the spouse or parent is deceased and there is no estate.

Except for the death of the parent, the above cases are reviewed at annual review to assess the current situation and the potential to obtain support. See Chapter 11.

Pursuit of spousal maintenance is not required when the parties co-habited as spouses for less than two years pursuant to *The Family Maintenance Act*.

### **Client Has No Maintenance Agreement/Order**

Support action is waived; or the client is referred to Legal Aid. When an agreement or order is obtained, a copy is placed on the client file.

### **Client Has Maintenance Order or Agreement**

The client provides the most recent copy for the file. A certified copy is required when registering orders or agreements with the MEO. (For payment of certified copies of maintenance order, see Chapter 16.23)

For those clients with voluntary agreements, the client must provide information regarding the respondent's gross income. The gross income is compared to the amount of support payment. If the payment is not within 10% of the federal child support guidelines, the client renegotiates the agreement amount or is referred to Legal Aid. The respondent's gross income is compared to the federal child support guidelines on an annual basis.

When payments are in arrears, except in cases where an order or agreement has provision for special or extraordinary expenses, the client completes an Assignment of Rights form which is forwarded to the MEO. For income assessment, see Chapter 18.

When maintenance payments are being made and there are no arrears, the Assignment of Rights form is not completed unless the client requests this. The client may still register the order or agreement with the MEO and may choose to complete the Assignment of Rights.

### **Cancellation of Assistance**

The worker immediately notifies the AEMOHELPLINE by E-mail. This is essential to ensure ongoing support payments are sent directly to the client. (See Chapter 13.6)

## 3.6 Emergency Advances

### 3.6.1 Granting Criteria

- Cash and liquid assets are considered the first resource;
- The need is essential to the health and/or safety of the client or other members of the family unit and must be met;
- Determine whether expected income will be received in time to meet all or a portion of the need;
- Only the minimal amount necessary is provided. (e.g., partial payment of full amount of need may be acceptable to vendor).

An allowance may be provided as an emergency advance:

- for a need(s) for which an allowance has already been provided. (e.g., a family that spends the entire cheque and is without food before month end; spoiled or stolen food.)
- when an applicant with child(ren) identifies unmet children's needs (e.g. families from another province and new applicants who have no remaining resources from their last child benefit.) Payment is prorated until the 20th of the month at \$160 per child.

### 3.6.2 Recovery

The advance is recovered from the next monthly cheque. Where the payroll date has passed the recovery is made from the following month's cheque. If exceptional circumstances exist (e.g., a large recovery resulting in financial hardship) the overpayment recovery rate schedule may be approved. (See Chapter 14.11)

## 3.7 Replacement of Lost or Stolen Cash

When a client reports lost or stolen cash:

- the worker obtains a statutory declaration indicating the circumstances of the incident;
- the declaration is retained on the file;
- if additional assistance is required an emergency discretionary advance may be issued. For granting criteria and recovery see Section 3.6.1.

This section does not refer to lost, stolen, or forged cheques. Those circumstances are addressed in Chapter 12.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
<b>3.2 Identification</b>	SIN provided by client HSN provided by client or by health electronically when client is nominated for supplementary health benefits	No ID at all available -- physical description of client recorded on electronic file. Either no SIN or no HSN -- copy of current driver's license, photo ID, band registry card, passport or immigration documents, birth/baptismal certificate within 30 days. Worker lists documents examined in chronological recording where copying is not possible. No further ID required if on file from previous applications and client is personally known by a department employee.
<b>3.3 Case planning</b> Also see Appendix A	Client provides information about job, or written or verbal consent to contact employer.	Electronic recording regarding case plan.
<b>3.4 Off reserve for education</b>	Written or verbal contact with band regarding residency, education, funding resources, etc	
<b>3.5 Support waiver</b>		Chronological recording
<b>3.5 Support – orders or agreements</b>		Copy of order or agreement
<b>3.5 Support – payments in arrears</b>		1251 Certified copy of support order if not already registered
<b>3.5 Support – voluntary payments within guidelines</b>	Client verbal statement about respondent's gross income	Support agreement Renegotiated agreement if below support guidelines
<b>3.7 Replacement of lost cash</b>		Statutory declaration

### Delegation of Authority

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

Approval Items	Reference	Approval Required
Eligibility Date – extend application signing up to 30 days in exceptional circumstances	3.1	S

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**POLICY STATEMENT****SASKATCHEWAN ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 9</b>	<b>Determining the Amount of Assistance</b>	<b>CH 4</b>

**Intent**

Assistance is provided using the budget deficit method of calculating eligibility.

**Policy****4.1 Budget deficit method:**

- balancing allowable needs against available resources.
- a budget deficit occurs when needs exceed resources.

**4.2 Health Services Only Eligibility Including Non-registered Indians Living on Reserves**

See Chapter 16 for a summary of health benefits for SAP, Seniors Income Plan (SIP) and Family Health Benefit clients.

An assessment for health services only is completed for those in Community Living Service Delivery (CLSD) licensed approved private service homes or licensed group homes for individuals with income of \$410 or greater. (See Chapter 15.3.4)

Assessment for health benefits is calculated for the upcoming 12-month period using form 1089. Allowable assistance rates are used for basic and special needs. Financial benefits are not issued. Annual utilities, including telephone for those in residential care facilities, and medical travel costs are considered.

A review of circumstances is completed annually and an assessment of eligibility for the upcoming year is completed to determine whether the client is eligible for further health coverage. See Chapter 11.

For non-registered people living on reserve, application form 1115 is used. (See Chapter 2.5.6) For the annual review, documentation from the Band confirms the client continues to receive assistance in the same family.

For the annual review for residents of Ranch Ehrlo, confirm that the client continues to reside at a Ranch Ehrlo residence.

**4.3 University Students.**

A full-time university student is a person who is registered in three or more classes in any semester.

Please see Chapter 16.14 for primary sources of education funding.

University students are not eligible for assistance unless they satisfy conditions outlined in the Regulations. Any subsequent interruption in continuous assistance (student loans or earnings from employment) does not disqualify the student from continuing the approved university program.

If a client is already receiving assistance and subsequently becomes a university student, assistance is provided until the date classes commence, not the date the student loan is anticipated or received. Full rent and utilities may be provided if required.

University students who apply for assistance during semester breaks are subject to normal eligibility criteria. Christmas and Easter holidays are not considered break periods.

**Delegation of Authority**

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

<b>Approval Items</b>	<b>Reference</b>	<b>Approval Required</b>
University Student	Reg. 9(2.1)	M

**POLICY STATEMENT****SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 10, 11 &amp; 12</b>	<b>Persons Included in the Budget</b>	<b>CH 5</b>

**Intent**

In estimating need and income, only the applicant and dependants are included.

With some exceptions, every adult person in the household is expected to contribute financially for his or her own basic needs.

**Policy**

The onus is on the client to ensure that adults in the home contribute financially, except for sons or daughters participating in training (including school holidays) or those who receive the adult allowance. For calculating income from boarders and roomers, see Chapter 19.5.

When two or more clients share accommodation assistance is provided to each on the basis of the individual's share of costs up to certain shelter maximums. See Chapter 15.4

For live-in caregivers, see Regulation 12(2) for the minimum contributions deemed toward household costs.

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	POLICY STATEMENT	SASKATCHEWAN ASSISTANCE PROGRAM
<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 13, 14</b>	<b>Granting of Assistance, Date Assistance Commences and Minimal Assistance</b>	<b>CH 6</b>

### Intent

Assistance is provided from the date of eligibility but not prior to the date of application. See Chapter 3.

Shelter and utilities for the full month in which eligibility is established may be provided, if the applicant has not been paid for that month.

Minimal assistance includes the adult allowance or board and room, shelter and utilities.

Items of special need which are urgently required may also be provided.

The onus is on the applicant to take all necessary actions to establish eligibility in a timely manner. The applicant should not experience undue financial hardship if eligibility cannot be immediately determined or if awaiting the outcome of an appeal. In these instances, minimal assistance may be provided.

### Policy

#### 6.1 Minimal assistance may be provided if required:

- if eligibility can not be immediately determined and need is urgent. (also see Chapter 3.1)
- to those clients who have received assistance for basic needs from another province or Indian Band for the month of application who do not return to their former residence. See Chapter 2.4.2
- pending a regional or provincial appeal hearing except when there is a budget surplus, non-exempt assets are readily accessible, the applicant is a university student, or to persons who are not eligible under Chapter 3.4. Minimal assistance may include travel outside the community of residence and/or child care expenses to attend the hearing.
- pending a provincial appeal hearing from the date of the client's request, as long as the client attended the regional appeal hearing or provided prior notification that he or she would not be attending.
- to allow time for the Ministry and client to be advised of an appeal decision, assistance may be granted to include up to seven calendar days after a hearing. If the seven days falls into the next month, a full month's rent and utilities is not automatically issued. This time period may be extended if the client or Ministry has not been notified within the above time period. To calculate the time period, see Chapter 21.

Any assistance granted under Regulations Section 14(2) is not considered an overpayment unless the client deliberately misrepresented the circumstances during the application process.

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POLICY STATEMENT		SASKATCHEWAN ASSISTANCE PROGRAM
<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 15</b>	<b>Advising As To Eligibility For Assistance</b>	<b>CH 7</b>

## Intent

When an application for assistance is approved or denied, the applicant must be informed in writing. If an application for a benefit is denied, the applicant must be advised of the reason and the right to appeal.

## Policy

The applicant is advised in writing (letter) of both the initial decision and of any change in the allowance. A cheque message may be used to advise of a change in the allowance. A letter is used when the client should be advised of the right to appeal a decision.

If a decision has not been made regarding eligibility the applicant is advised in writing within 14 days as to the status of the application, when a decision is expected and the right to appeal.

When granting assistance the following information is included in the notification:

- basis of assessment including the information relied on to make the decision and relevant reasons for making the decision
- amount of allowance
- what information or action is necessary to establish continuing eligibility
- right to appeal a decision regarding assistance

Applicants are advised of the obligation to report all changes in circumstances.

The client is advised in writing of the denial or cancellation of assistance, the reason, the applicable Act, regulation references, policy manual references, and the right to appeal. Regulations or policies are not quoted in the letter. Clients may be given information regarding access to the regulations or policy manual.

Clients who have unusually high seasonal earnings are advised to meet their basic living expenses during times of unemployment. See lump sum income Chapter 20.4.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
7. Advising re: eligibility and change in amounts		Form letters (1001 - 1006)

**POLICY STATEMENT** **SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 16</b>	<b>Manner of Paying Assistance</b>	<b>CH 8</b>

**Intent**

The manner of paying benefits is outlined.

**Policy**

Assistance is paid in advance. When the first payment is after the first of the month assistance is calculated proportionately to the last day of the month.

For the purpose of prorating benefits, all months consist of 30 days.

The method of payment is determined by the worker. Wherever possible, clients are expected to use direct deposit.

If a budget deficit of less than \$1 or other small amounts exists, the monthly allowance is issued when the total accumulated is \$10. Health coverage is continued.

**8.1 Payments to Clients**

**8.1.1 Monthly Payments**

Monthly payments are used whenever possible, including retroactive payments to special care homes, special needs and other adjustments.

Adjustments of less than \$10 are issued on monthly payments rather than by overnight or emergency cheques, unless an urgent situation exists.

**8.1.2 Overnight and Emergency Payments**

Overnight payments or emergency cheques are used until the case is established on the monthly payment system.

Emergency cheques are used when there is an immediate need essential to the health and/or safety of the client or other family members, and an overnight payment would not be available in time to meet the immediate need.

**8.1.3 Mid-Month Payments**

Mid-month payments may be provided for those clients whose net allowance after shelter, utilities, special needs and overpayments or advance recoveries is \$50/month or more.

Clients on trusteeship and those receiving level of care allowances are not included.

#### **8.1.4 Direct Deposit - Electronic Funds Transfer (EFT)**

Clients are expected to have their benefits deposited electronically to their bank account by completing form 1031, except when a client:

- has a garnishee in place or garnishee proceedings have commenced.
- lives in a remote area where there are no accessible banking services.
- is unable to obtain a bank account.

Other exceptional circumstances may be approved, based on the written request from the client.

Direct deposit is expected for any type of payment except joint payment cheques or cheques to vendors and trustees. Clients are responsible for payment of service charges and overdrawn accounts. Applicants who have a bank account are expected to return the direct deposit authorization form 1031 to the ministry within 15 days of the application. Applicants who do not have a bank account are expected to contact a financial institution and open a bank account within 60 days of the application unless exceptional circumstances exist.

Clients may request cancellation of direct deposit by completing form 1030. In cases where the direct deposit has been cancelled, the requirement of direct deposit is reviewed upon re-application.

#### **8.1.5 Payments to Trustees**

Payments may be made to trustees on behalf of the client. Funds for clients are paid to the trustee, including the Public Guardian and Trustee, except for direct payments deemed appropriate (e.g., utilities, invoices), which may be paid direct to vendors.

#### **8.2 Joint Payment Cheques**

Joint payment cheques are only issued for rental benefits. A cheque payable to the client and the landlord is issued to the client. This payment method is used for those with money management problems or who feel they are unable to manage their own rent payment.

The payment amount may not exceed the amount of the shelter allowance and is not to include utilities.

#### **Joint payment cheques are not issued:**

- to new applicants who have an established residence (6 months or more) and have no rent or utility arrears.
- to those with no obvious money management problems.
- to those who are employed
- when the amount of the entitlement is less than the shelter need
- when the landlord is bankrupt or owes taxes and a third party (e.g., Canada Revenue Agency, municipality) demands payment. In these situations, rental benefits are made payable to the client.

Information regarding joint payment rent cheques is provided to landlords or agents upon inquiry. The client's personal circumstances cannot be discussed.

When the landlord has not received the joint payee cheque, either the client or landlord signs a statutory declaration. Both signatures are not required. See Chapter 12.3

## **8.3 Third Party Payments**

**Whenever possible, funds should be provided directly to the client.** Third party payments may be used to make direct payments to vendors or suppliers.

When a direct payment is cancelled or changed, the worker advises all payees receiving direct payment of any changes or cancellation one month prior to the effective date of the change. In situations in which one month's notice cannot be provided (e.g., whereabouts unknown, death), the next cheque is cancelled and the payees notified as soon as possible.

Payments made directly to vendors or suppliers should not include GST.

Third party payments should not be used to make one-time payments in place of a requisition or invoice.

### **8.3.1 Cheques**

Cheques are used for ongoing monthly payments, after it has been established that the client is not able to manage his or her funds and no one is prepared to act as a trustee in the local area.

The Ministry informs each payee of the amount paid. The amount paid cannot exceed the amount provided for the specific need.

### **8.3.2 Requisitions**

Requisitions are used in situations in which an emergency cheque cannot be issued. See Section 8.1.2. Payments are made on the basis of an application or duly authorized requisition or Transient Aid form. See Chapter 2.5.

### **8.3.3 Invoices**

The worker authorizes a vendor to provide goods/services to a client. A bill is submitted and the worker authorizes payment through the invoice system. Funds are provided directly to clients when they receive the bill.

### **8.3.4 Multiple Billing**

Payment may be made for several clients on one billing for services rendered by a vendor following authorization by the client's worker. This payment method is used only where services are rendered occasionally.

### **8.3.5 Electronic Billing**

Payment of the actual monthly cost for client utilities (SP/SE) may be provided through electronic billing when there are arrears or for those who state they are unable to manage their own SP/SE payments. GST is not included in the payment.

### **8.3.6 Reimbursement of Third Parties**

When the vendor contacts the worker following return of the stopped cheque, a copy of the client's second statutory declaration is provided. If a vendor believes that the client cashed the cheque, he or she may wish to provide the statutory declaration and the cheque to the police.

Reimbursement may be approved by the worker when it is determined that the vendor took all precautions to confirm the identity of the client cashing the cheque. An overpayment is assessed on the file. See Chapter 12.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
<b>8.1.4 Direct Deposit</b>	Client verbal statement with respect to living in a remote area.	No direct deposit: letter from bank refusing bank account, garnishee documents, written request from client 1031 1030 to cancel

**POLICY STATEMENT**

**SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 17, 17.1, 17.2</b>	<b>Security Deposits</b>	<b>CH 9</b>

**Intent**

When required, security deposits may be guaranteed for clients in the amount of their shelter allowance. Those receiving Provincial Training Allowance (PTA) through the Ministry of Advanced Education, Employment and Immigration (AEEI) may also be eligible.

**Policy**

**9.1 Security Deposit Guarantee**

A security deposit is money given to a landlord or agent to be held as security for the payment of a liability of the tenant agreement. Rather than providing funds at the commencement of a tenancy the security deposit is guaranteed.

Security deposits may be guaranteed, in most cases, when clients move. Security deposits and lease renewals prior to October 1, 1997 (\$125) will remain in effect until the client moves. Clients requesting a security deposit after October 1, 1997 are not required to return a previously issued \$125 deposit.

Guaranteed security deposits are paid to landlords upon successful claim through the Office of Residential Tenancies (ORT) or through written agreement of the client to the claim. The guaranteed amount is the approved shelter allowance. This amount can change subject to increase or decrease of the shelter allowance. Those with rental costs above the approved shelter allowance may make private arrangements on the additional deposit amount with the landlord.

In shared accommodation, the guarantee is applied to the rent amount issued to each client.

A guarantee may be required when a youth receiving services from Child and Family Services applies.

A guaranteed security deposit paid to the landlord is considered an overpayment as specified in *The Saskatchewan Assistance Act* Section 13.1 (5) except for relocating for employment or training, family violence or death. In these exceptional cases, the overpayment is waived by noting the circumstances in a file recording.

**Social Housing** - When clients move from one unit to another, a transfer fee may be provided if required.

## 9.2 A security deposit is not guaranteed when:

- a client renting a property with an existing guarantee moves to another property owned by the same landlord. The security deposit guarantee is transferred
- a client is paying board and room
- it has already been provided to the landlord
- it has not been requested by the landlord
- it is not within the jurisdiction of *The Residential Tenancies Act*
- a client rents from a housing authority (See Chapter 15.4.6)
- a spouse moves. If the applicant moves the security deposit guarantee is transferred to the spouse remaining in the premises.
- a client has an agreement for sale and pays all rental monies to purchase price and is responsible for maintenance and taxes
- a new applicant remains in the same residence and has not paid a security deposit

For clients leaving assistance and their eligibility for a security deposit see Chapter 16.13

## 9.3 Appeals

Clients may dispute a landlord's Notice of Claim for Social Services Guarantee to the ORT within 120 days from the end of tenancy. For overpayment recoveries, see Chapter 14.11.

If the client appeals the overpayment decision, he or she has 30 days to contact the Ministry concerning the assistance overpayment.

## 9.4 Advocates

Upon request, the Ministry may provide \$45 for an advocate (other than a spouse or dependant) to attend an ORT hearing. Payment may be made for one hearing on an application concerning a security deposit matter. See Chapter 16.21.

## 9.5 Rent Arrears

For rent arrears while on assistance, see Chapter 15.4.8.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
9.1 & 9.2 Security deposit guarantees		1006 Chronological recording to waive overpayment

**POLICY STATEMENT**

**SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 18</b>	<b>Trusteeship</b>	<b>CH 10</b>

**Intent**

A trustee may be appointed to handle a client's funds when the Ministry is satisfied that he or she is incapable of managing the allowance. See Chapter 3, Intent.

A trustee is responsible for the administration of assistance funds solely for the purposes specified in the Trustee's Agreement. All trustees must notify the Ministry of any changes in the client's circumstances, keep records of and account for funds, and submit an accounting documentation upon the request of the Ministry.

**Policy**

**10.1 Guidelines governing the appointment of trustees**

Any responsible person who is prepared to administer the allowance in the best interests of the client may be a trustee.

Families are the first resource. A contracted agency is considered if no family member is available or willing to provide this service or should such an arrangement not be in the client's best interests.

**10.2 Persons/Agencies who may be trustees**

Families are the first resource to provide trusteeship services.

Contracted Organizations are funded by regional offices to provide trustee services.

Private Trustee - A private trustee is appointed if it would be in the best interests of the client and the ministry to have a private trustee manage the client's funds. A private trustee can be appointed for a maximum of five clients. Caution must be taken not to appoint anyone who may be in a conflict of interest.

Public Guardian and Trustee (PGT) - Some clients are placed under the jurisdiction of the Public Trustee if certified as incompetent. Where the PGT does not act as the property guardian or trustee, a private trustee may be appointed. The PGT is not required to sign a trustee agreement nor account for funds received as this is required by the Provincial Auditor.

Ministry of Social Services, third party payments - The Ministry may act as trustee and distribute client benefits to one or more payees where no one is prepared to act as a trustee in the local area. The Ministry informs each payee of the amount paid. The amount paid cannot exceed the amount provided for the specific need. See Chapter 8.3.

### **10.3 Establishing a case on trusteeship**

The supervisor approves the appointment of a trustee except when the Ministry acts as trustee.

The worker, client and the trustee discuss the reasons for trusteeship and the services offered by the trustee. The client is advised in writing of the trusteeship and the right to appeal this decision. Should the client register an appeal the trusteeship is maintained until the appeal process is completed. The client also has the right to appeal to the agency administering trusteeship services if dissatisfied with their services.

The trustee and the worker sign a Trustee Agreement (form1056a). When a trustee is appointed a specific date is established for review of the need for a trustee. The need for a trustee is assessed at the time of annual review.

### **10.4 Managing Trusteeship Cases**

All assistance funds are paid to the trustee on behalf of the client whether a trustee fee is paid or not. No payments are made to other third parties, except direct payments to SaskEnergy or SaskPower, in cases in which arrears were deferred prior to May 1, 2007 or other direct payments deemed appropriate (e.g., utilities, invoices).

The worker advises the trustee of any changes in the client's allowance.

Trustees are notified that the Ministry reserves the right to conduct an audit of transactions related to the trusteeship and that all receipts, invoices and cancelled cheques must be kept until written authority for their destruction is granted or five years have passed.

Trustees are responsible for giving notice to vendors (landlords, utility companies, etc.) regarding any changes in the client's financial circumstances which affect them.

Where the Ministry acts as trustee, the Ministry informs the client in writing of the arrangement, the distribution of benefits, and of the right to appeal. This arrangement is reviewed at regular intervals or at the time of the annual review.

### **10.5 Payment for Trustee Service**

#### **10.5.1 General**

The monthly fee provides for record keeping and counseling services provided to the client, as well as any bank charges and transportation expenses the trustee may incur while providing trustee services to the client.

The fee is not intended to cover special travel arrangements that a trustee may provide to the client when no other means of public transportation is available. In such instances, special transportation costs may be paid for the client. (See Chapter 16.4)

#### **10.5.2 Fees and Services Provided**

Private Trustees - \$72.50/month/client *[Revised May 1, 2011]*

Contracted Organizations (signed agreement with region - \$102.50/month/client. *[Revised May 1, 2011]*

Staff, operators, members of the board of group homes, licensed special care facilities, personal care home operators, approved home operators, or family members are not paid a fee-for-service to act as a trustee. (For definition of family see Chapter 16.4.9).

Services provided by trustees:

- administer the client's finances to ensure that ongoing maintenance needs are met.
- establish and supervise the client's monthly budget.
- teach the client how to budget and cope with his or her situation.
- advise the Ministry immediately of any changes in the client's circumstances (e.g., change of address, receipt of income, change in number of dependants, etc.)
- notify vendors (landlords, utility companies, etc.) regarding changes which affect the amount of payment.
- provide supportive services such as menu planning, consumer education, purchasing (e.g., groceries, furniture), locating suitable accommodation, referrals to other resources.

It is expected that contracted organizations will provide more specialized services in these areas than a private trustee can offer.

### **10.5.3 The Public Guardian and Trustee (PGT)**

The administration fee for the PGT is paid through the monthly cheque process according to Regulation Section 18. Payment includes the GST and set up fee.

## **10.6 Accounting from Trustees**

Trustees are required to maintain a separate accounting for each client and record the manner in which funds are disbursed.

The private trustee, excluding parents, siblings, son or daughter, forwards the completed trustee accounting form 1056B or other appropriate accounting ledgers every 12 months. Contracted organizations complete the accounting form every 6 months.

For level of care arrangements complete form 1056C.

In cases where a trustee cannot provide an accounting within the prescribed period the accounting may be deferred for up to three months with the approval of the supervisor.

The PGT is not required to account for funds received as this is required by the Provincial Auditor. Documentation of client's income and assets is not required.

The supervisor may waive the requirement for an annual accounting when a trustee:

- submits a monthly accounting
- cannot provide the form in such circumstances as destruction of documents by natural disaster, work stoppages at an agency, or other similar circumstances.
- dies or refuses to provide accounting.

## **10.7 Client Appeal Procedures**

Clients on trusteeship have the right to appeal their allowance being handled by a trustee. When the services are handled through an agency and the client is dissatisfied with their services he or she may appeal to the agency.

## **10.8 Client Access to Financial Records held by the Trustee**

Clients receiving services from a trustee have access to their financial records.

## **10.9 Mismanagement of Trusteeship Funds**

If a trustee is suspected of mismanaging a client's funds, the matter is discussed with the trustee. The trusteeship may also be cancelled if an overpayment is calculated on the client's file during the period of trusteeship. Collection is deferred until responsibility for the overpayment is established. If the trustee is responsible for the overpayment, the file is referred to the Ministry's Accounts Receivable Unit which will pursue collection from the trustee. When the trustee is in receipt of SAP, the overpayment may be transferred and recovered in accordance with procedures outlined in Chapter 14.11.

## **10.10 Cancellation or Change of Trusteeship/Direct Payment**

The worker notifies the trustee and/or payee and the client in writing that the trusteeship has been cancelled and requests the final Trustee Accounting Report.

When a trusteeship is cancelled and the trustee is holding an accumulation of assistance benefits on the client's behalf the total amount accumulated should be given to the new trustee or the client. The Ministry advises the trustee to give the funds to the new trustee or to the client. If any of these accumulated funds are to be recovered against outstanding overpayments, the trustee should return the funds to the Ministry.

When a client dies and assistance funds are being held by a trustee, the funds are forwarded to the client's estate or the ministry if there is no next of kin or no Will.

When the Ministry acts as trustee, see Chapter 8.3

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

<b>Policy Reference</b>	<b>Verification</b> Client's verbal statement should be noted in a chronological recording.	<b>Documentation</b>
<b>10.1 – 10.3 Trustee appointment</b>		1056a Letter to client re: right to appeal
<b>10.5 Trustee accounting</b>		1056b 6 months for contracted services and 12 months for private trustee

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**POLICY STATEMENT** **SASKATCHEWAN ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 20</b>	<b>Determining Continuing Eligibility</b>	<b>CH 11</b>

**Intent**

Each client’s eligibility shall be reviewed every time there is a change in circumstances, but not less than once a year (e.g., application date in January – annual review month will be January of the following year). Assistance may be provided with the supervisor’s approval, if the review is overdue.

**Policy**

**11.1 Annual Review**

Annual reviews include an assessment of the client’s circumstances, including needs, assets, income, employability, case plans, efforts to obtain support, the amount of voluntary support, the need for trusteeship and recommendations. Continuous special needs granted are reviewed to determine whether they are still required.

Reviews are carried out by personal interviews. The review declaration (form 1009) or other reporting document or process authorized by the Ministry for completion of the review is used and a chronological recording is completed. Signatures are compared with those on file.

Form 1009 may be completed by mail for regional administrative/static cases with all of the following criteria:

- partially employable or unemployable and no change is expected;
- childless;
- no income or non-fluctuating income (e.g., Canada Pension Plan (CPP));
- minimal personal contact (6 or fewer per year).

The unit administrator may approve a review by mail in exceptional circumstances.

For children with non-parental caregivers see Chapter 2.4.4	
For trustees see Chapter 10.	For farmers see Appendix D.
For self-employed clients see Appendix E.	For Health Services only see Chapter 4.3.
For non-registered Indians on reserve and Ranch Ehrlö residents, see Chapter 4.3.	

**11.2 SAID Service Centre**

Form 1255 is completed every 3 years for cases with a Community Living Service Delivery (CLSD) or Mental Health case manager. A review of circumstances is not required for residents of Valley View Centre.

**11.3 Other Reviews**

Whenever there is a change in client’s circumstances all necessary documents are completed.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
11. Annual review assessment of needs, assets, income, employability, case plan, amount of voluntary support, need for trusteeship		1009 1255 BAS centralized caseload 1092 for special diet Documents and chronological recording confirming that needs, assets and income have been reviewed and noting any changes in client circumstances and case plan. For Non-Registered Indians living on reserve - documentation from Band If the amount of recurring income has not changed, documentation is not required at annual review. If no medical report for partially employable or unemployable per 2.2 or 2.3, supervisor approves at annual reviews.

### Delegation of Authority

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

Approval Items	Reference	Approval Required
Annual Review by mail in exceptional circumstances	11	M
No medical for partially employable or unemployable	11 (also see 2.2 and 2.3)	S

**POLICY STATEMENT** **SASKATCHEWAN ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 20(A)</b>	<b>Lost, Stolen, or Not Received Cheques</b>	<b>CH 12</b>

**Intent**

When a client does not receive a cheque, loses it or it has been stolen, assistance may be provided to prevent hardship.

**Policy**

**12.1 Initial Process**

No action to grant minimal assistance is taken:

- until three working days following the cheque mailing date if the cheque is not cashed; **or**
- if more than 30 days have elapsed since the date of issue and the cheque has been cashed.

Joint Payee Cheques - either party (client or landlord) may sign a statutory declaration. It is not necessary to obtain the signatures of both payees.

**12.2 If the cheque has not been cashed**

Benefits, including rent by joint payment cheque, may be reissued as an emergency advance after the statutory declaration has been taken and a stop payment has been placed on the cheque.

**12.3 If the cheque has been cashed**

If the client or landlord acknowledges the endorsement or there is sufficient reason to believe he or she endorsed the cheque, no further action is taken and any assistance issued to the client for the month is assessed as an overpayment.

If the client or landlord does not acknowledge the endorsement, a statutory declaration is taken and placed on file.

If less than 30 days have elapsed since the cheque was issued, benefits are issued as required and are not immediately assessed as an overpayment. Rental benefits paid through joint payment may be reissued as an overpayment to the client after the landlord indicates the signature is not his or hers. If the client remains in the premises, future rent payments are paid through a trustee. If the client leaves the premises in the same month the landlord may claim the security deposit. Payment should not be made twice for the same month. (See Chapter 9 for security deposits)

If more than 30 days have elapsed, no additional benefit is issued.

The benefit issued is an overpayment if it is determined that the client cashed the cheque.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
12. Lost/stolen, or not received cheques		Photocopy of cheque if cashed and second affidavit (3628) completed.



**POLICY STATEMENT****SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 21, 22, 23 &amp; 24</b>	<b>Changes in the Amount of Assistance</b>	<b>CH 13</b>

**Intent**

Benefit amounts depend on the client's needs and resources. Any changes in needs or resources may cause an increase, decrease or cancellation of benefits.

**Policy**

The client is required to report all changes in circumstances immediately. Adjustments are made accordingly and the client is advised in writing (letter). (See Chapter 7)

When a third party provides unverified, previously unreported information which may affect the client's eligibility, the matter is discussed with the client. The client is provided with written notice prior to adjusting benefits.

**13.1 Changes in Employment Status**

When an employable person becomes not fully employable for one month or more, any adjustment to the shelter benefit is made effective the date the client provides information to the Ministry confirming the change in employability.

When a not fully employable person becomes employable, an adjustment to the shelter allowance is effective 6 months following the change in status as long as he or she remains in the same residence. See Chapter 15.4.2

**13.2 Changes in Income**

Income is reported monthly. If monthly income does not vary, it is reported when first received and as changes occur. For garnisheed income, see Chapter 19.2.3

**13.3 Changes in Family Composition****13.3.1 Children**

Increase - When there is an increase in the number of children, form 1243 is completed and the entitlement is recalculated. A newborn child is added effective the date of discharge from the hospital if the client advises the Ministry within 30 days. After 30 days the child is added effective the date of notice. Only children born outside the province are nominated for health coverage. For children from another family see Chapter 2.4.4.

Decrease - When children leave the family for any reason, health benefits are cancelled immediately. Financial benefits continue to the end of the month and no overpayment is

assessed. If another cheque has already been issued which includes the child, no overpayment is assessed (e.g., month end).

Children remain on the file up to 6 months when they are living outside the community of residence for medical purposes (e.g., treatment) or school attendance. For absences longer than 6 months, supervisor's approval is required. For children's allowances see Chapter 16.5 and Chapter 16.6.

Wards living with an alternate caregiver or foster parent are not eligible for financial or health benefits (for shelter, see Chapter 15.4). Wards are added effective the date wardship is discharged based on verbal confirmation from Child and Family Services or the parent.

A Person of Sufficient Interest (PSI) is a court-appointed designation of an adult for the care of a child(ren). Children who are living with a PSI are considered part of the family unit and are eligible for health and financial benefits. Child and Family Services is notified that benefits are being provided for the child(ren).

### **13.3.2 Visiting a Spouse**

When a client who resides in a residential facility (e.g., nursing home) stays temporarily with their spouse, the basic allowance is pro-rated for the duration of the visit. See Chapter 15.2.1

### **13.3.3 Marital Status**

In the case of divorce, separation, death or change of the head of the family, form 1001 is completed. When a spouse is added, a form 1218 is completed.

Separation/Reconciliation - If the new head of the family requires assistance, benefits are provided from the date of application to include shelter and utilities, if required. No overpayment is assessed for the former head of the family whether there is continuing eligibility or not. If reconciliation occurs within the month of separation, no further benefits are issued and no overpayment is assessed.

New Family Unit - If both adults received assistance during the month no overpayment is assessed for that month.

### **13.3.4 Incarceration**

See Chapter 3.4. No overpayment is assessed for benefits provided for the month in which the incarceration occurred.

Families - If the head of a family is incarcerated for more than 30 days, form 1001 is completed by the spouse.

A trustee may be appointed to handle shelter and utility benefits for up to 90 days for single parents incarcerated in the province if required to keep the family intact.

### **13.3.5 Death**

No overpayment is assessed for benefits provided for the month in which the death occurred.

## **13.4 Absence from Accommodation**

No overpayment is assessed when a client temporarily (30 days or less) resides in short-term accommodation (hotel) or in a special facility (e.g., family shelter, addiction treatment centre, respite home, jail) and has already received an allowance during the month.

### **13.4.1 Special Care Homes/Group homes - absence**

#### **Temporary Absence**

First 30 days - no reduction in the special care home resident charge or group home charge.

31 - 60 days - reduce the special care home resident charge or group home fee-for-service by \$1.50 /day (in lieu of the cost of meals). For homes licensed through Community Living Service Delivery (CLSD) to serve clients with an intellectual disability, the \$410 basic board and room rate and the CLSD top-up are reduced equally.

Over 60 days - cancel the resident charge or group home fee.

#### **Death or Permanent Departure of a Resident**

When notice has not been given, payment for the special care home resident charge or group home charge may be continued for 7 days following the date of the departure or until the bed is occupied, whichever occurs sooner. Payment for the 7 day notice is not provided where the resident charge was cancelled because the client was absent more than 60 days. When a client is given notice to leave, payment is cancelled from the date of discharge.

Payment for the special care home resident charge may not exceed 7 days after the death of a recipient. See regulation 25C(4)(e).

### **13.4.2 Approved Private Service Homes, Personal Care Homes and Family Homes**

#### **Temporary Absence**

First 30 days - no reduction in the allowance

31 - 60 days - reduce the level of care allowance by half. For homes licensed through CLSD to serve clients with an intellectual disability, the \$410 rate and the CLSD top-up are reduced equally.

Over 60 days - cancel the level of care allowance

#### **Permanent Departure**

When a client leaves permanently and no notice or insufficient notice has been given (e.g., 30 days), payment may be continued for 30 days or until the bed is occupied, whichever occurs sooner. This is not provided where the level of care allowance had been cancelled because the client was absent more than 60 days. When a client is given notice, with cause, as determined by Ministry, payment may be continued for 30 days or until bed is occupied; whichever occurs sooner. If notice is given to leave without cause, payment is cancelled from date of discharge.

For clients in family homes, the allowance is cancelled immediately.

When a client leaves a home pending the results of a review of circumstances in the home, payment may be continued for 30 days or permanent placement of the resident, whichever occurs sooner.

**13.4.3 Clients admitted to Hospital** (excluding those living in Special Care Homes, Approved Private Service Homes, Personal Care Homes and Family Homes).

First 30 days - make no change to the allowance.

More than 30 days - the allowance is adjusted the first of the following month.

### **Single Person**

If the stay in hospital will be less than three months, shelter and utilities or board and room and the personal living allowance is provided. If the stay is over three months and shelter and utilities or board and room is required to maintain the residence, these needs may be provided with the supervisor's approval.

### **Member of a Family Unit**

The family is considered a unit and the needs of the family member in hospital are calculated on the basis of the personal living allowance and special needs (e.g., disability travel).

### **13.4.4 Vacation/Summer Camp**

There is no change in benefits when clients who receive level of care allowances attend summer camp or are on vacation for a period up to 30 days. For travel to Camp Easter Seal see Chapter 16.4.2.

### **13.4.5 Addiction Treatment Centres, Emergency Accommodation or Family Shelters**

Form 1001 is used to issue the personal living allowance and other needs except for those already receiving assistance. See Chapter 2.5.3 for family shelters. No accommodation or treatment charges are provided. The personal living allowance is provided from the date of admission (prorated for the month of admission) until the last day of the month that the client leaves (whether the program is completed or not).

For those already receiving benefits, the adult allowance is provided for the full month of admission. In the month of discharge the adult allowance is prorated from the date the client leaves treatment. No overpayment of the adult allowance is assessed.

Shelter and utility allowances may be provided during the period of admission if required to maintain permanent accommodation.

## **13.5 Relocation**

### **13.5.1 Within the province**

Clients are free to move. If they require assistance to move, see Chapter 16.17 for moving expenses.

### **13.5.2 Outside the province**

Contact is made with the other province to obtain agreement if the client will require financial assistance. (Prior arrangements for moving are not required in some provinces.) A client's plan to move to another province is approved by the supervisor. The client is advised that further eligibility can only be determined by the other province. See Chapter 16.17

### **13.5.3 Temporary absence from Saskatchewan**

Assistance may be provided with the unit administrator's approval in situations such as:

- client participating in a training program as part of an approved plan;
- taking medical treatment not available locally; or

- on vacation up to 30 days.

### **13.6 Cancellation**

See Chapter 16.22.5 for cancellation of health benefits.

Cancellation of benefits and file closure may be completed 30 days from the last day of the month assistance was issued. The effective closure date is the last day of the month assistance was issued whether or not the client was entitled to those benefits.

Cancellation of benefits and file closure are completed immediately in the case of the client's death, marriage/common-law, or leaving the province. An overpayment is not assessed for the month in which the change occurred.

The file may be closed after the appeal period has passed:

- 20 days after the regional hearing, or
- immediately following the date of interim assistance following a provincial appeal decision to deny benefits.

For clients with a budget surplus over a two month period due to recurring wage income or accumulated assistance benefits exceeding the exemption, cancellation of benefits and file closure may be completed within 60 days from the last day of the month assistance was paid (see Chapter 19.2).

Where there is an Assignment of Rights in place and assistance is cancelled see Chapter 3.5.

The client is advised in writing of the reason for the cancellation except for death, leaving the province.

For reapplication see Chapter 2.5.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
<b>13.1 – 13.5 Changes – income, name, children, marital status, incarceration, absences from home, family shelters, relocation</b>	Wards -- client verbal statement	1009 1243 1218 1001 1114 1005 Relocation – 1006, 1009, memo from Mental Health or CLSD (see 15.3.4) Income -- stubs submitted monthly. If doesn't vary (e.g., CPP) at time first received and when change occurs. 1243 not required when family size decreases (e.g. child turns 19, becomes a ward, etc.)

### Delegation of Authority

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

Approval Items	Reference	Approval Required
Shelter/board and Room over 3 months while in hospital. - other needs	CH 13.3	S
Temp. absence of children – absences longer than 6 months	CH 13.3.2	S
Assistance to clients out of province	CH 13.5.3	M

POLICY STATEMENT		SASKATCHEWAN ASSISTANCE PROGRAM
Legislative Authority	Subject:	
Saskatchewan Assistance Act Section 29.3, 29.5	Overpayments	CH 14

## Intent

An overpayment is any benefits provided to which the client is not entitled. It is recovered from future entitlement or other means.

## Policy

### 14.1 Overpayment Defined

The amount paid in excess of entitlement is calculated as an overpayment:

- if an allowance was paid during a period when budget deficit did not exist
- if an allowance was paid in excess of the amount permitted
- if the client was ineligible for other reasons

Before benefits can be granted, eligibility must be established. Assistance cannot be granted when there is no entitlement with the intention of recovering it as an overpayment. This does not apply to emergency advances or to issuing additional assistance when a client loses money. (See Chapter 3.7).

Overpayments are calculated on the basis of actual benefits paid in excess of entitlement. Inappropriate use of income or assets may affect eligibility. These funds are not assessed as an overpayment. The amount of benefits paid in excess of the entitlement is an overpayment.

### 14.2 No Overpayment is Assessed

No overpayment is assessed in the following situations:

- Where a disability allowance was provided pending receipt of a medical report (see Chapter 2.3) and the report does not confirm a disability.
- Where an allowance was provided to meet needs (see Chapter 3.6) and it later becomes known that the funds were not used for that purpose, unless duplicate funds are issued.
- For payment of a guaranteed security deposit when the client relocates for employment or training, family violence or death. See Chapter 9.
- Decrease in family size when children leave the family (see Chapter 13.3.1).
- Separation/Reconciliation - See Chapter 13.3.3.
- New Family Unit - If both adults received assistance during the month no overpayment is assessed for that month.
- Incarceration (see Chapter 13.3.4).
- Death (see Chapter 13.3.5).

- When OAS, GIS and/or CPP benefits are received the client's SAP benefits are not recalculated to create an overpayment equal to the death benefits received. Financial Services Branch, Collections Unit, consider the death benefits received as a refund to the Ministry. (See Chapter 16.20).

### **14.3 Methods of Overpayment Calculation**

For recurring declared income see Chapter 19. For disposal of declared income while on assistance, see Chapter 20.4.

#### **Undeclared Income**

For suspected fraud, see Section 14.5.

#### Undeclared Lump Sum Income

An overpayment of assistance is calculated from the month after the income was received. Any available exemptions are applied to the lump sum income. Any surplus income is applied to the following month(s) and any benefits issued in excess of entitlement are calculated as an overpayment.

If the client used some of the income to purchase assets from which money can be recovered within a reasonable period of time, benefits are suspended. The client is advised to use the proceeds to meet basic living needs. 15% is added to the client's needs for the period of time assistance is not provided. See Chapter 19.2 and Chapter 20.4.

#### Undeclared Recurring Income

The monthly entitlement is recalculated from the month after the income commenced. Needs provided through assistance are included in the monthly budget. If the client has a budget surplus, further benefits are suspended. For contacting employers about undeclared wages, see Chapter 3.3.2.

#### Inaccurate Information

If the client's circumstances are not as declared (e.g., income), an overpayment for past benefits is assessed using available information. No income estimates or averages are to be used. The client is notified of the overpayment and that it may be adjusted as further details are determined. If fraud is suspected, see Section 14.5.

### **14.4 Posting and Notification of Overpayment**

An overpayment is assessed and posted on the electronic file. The client is notified in writing of the reason, the amount and the specific details concerning the overpayment. The client is notified in writing if the amount is changed for any reason or recovered in full. If the allowance is cancelled and the overpayment has not been fully recovered the client is notified, in writing, indicating the amount of the outstanding balance. Voluntary repayment is also requested. The client is advised of the refund set-off process by the Ministry's Financial Services Branch, Accounts Receivable Unit.

### **14.5 Suspected Fraud**

If it appears that a client deliberately gave false information or withheld information in order to receive an allowance to which he or she was not entitled, the case is reviewed with the

supervisor and Quality Assurance Unit to determine if a referral to the police is appropriate. If so, the Quality Assurance Manager approves the case to be sent to the appropriate law enforcement agency, after ensuring written notification is sent to the client advising of the right of appeal regarding the overpayment assessment, and the appeal process has been completed or the time period to appeal has passed.

The following criteria are considered:

- length of time over which the alleged fraud occurred;
- the intent to commit fraud by the client;
- the Ministry's due diligence in ensuring the client was informed of reporting requirements; and
- assessment of the case by the Ministry.

## **14.6 Fraud Convictions**

When clients are convicted of fraud they are obliged to repay the full amount of any overpayment resulting from the fraud. If restitution is ordered, the amount paid through restitution is deducted from the overpayment. The overpayment remains until the total amount is repaid in full, whether or not the client serves a period of incarceration, restitution is ordered in a different amount, or other similar circumstances.

## **14.7 Assignment of Overpayments**

When spouses separate, the head of the family is responsible for the full amount of the overpayment. If the spouses subsequently reconcile the overpayment is recovered regardless of any change to the head of household.

If a person has an overpayment and becomes a spouse in a different family, the overpayment cannot be recovered from the entitlement without the written consent of the head of the family. Care must be taken to ensure the new head of the family has a full understanding of this undertaking. Any existing overpayment of the head of the family is recovered first. Any overpayment incurred by the couple is recovered next. The spouse's overpayment is recovered last. The spouse remains responsible for the overpayment, if she or he subsequently separates.

If the head of the family dies and there is an outstanding overpayment it cannot be transferred to the spouse if he or she applies for assistance.

## **14.8 Bankruptcy and Overpayments**

A person may become bankrupt in several ways:

- by making an assignment in bankruptcy (voluntary declaration)
- by being petitioned into bankruptcy (debtor is forced into bankruptcy by his creditors)
- by an insolvent person making a proposal

Once the assignment or petition is made the client is no longer entitled to deal with financial resources. These are transferred to a trustee in bankruptcy (usually an accountant). Creditors may no longer take any action to try to recover the money owed to them.

Upon bankruptcy the file is reviewed to determine whether there is an outstanding overpayment. If the overpayment is being recovered the deduction is immediately discontinued whether or not the Ministry is listed as a creditor. Any recoveries made after the bankruptcy date are refunded to the client. The amount of the overpayment for the benefit period up to and including the date the bankruptcy has been filed cannot be recalculated once the bankruptcy has been filed. Any overpayments which arise after the date of declaration for bankruptcy for benefit periods of the bankruptcy claim period are immediately collectible.

Proofs of Claim are forwarded to the Revenue Operations Unit, Central Office, for processing. If any amount of the outstanding overpayment was calculated on a paper file it is forwarded with the Proof of Claim. The Revenue Operations Unit files the claim with the trustee in bankruptcy. A copy is returned to the regional office with the file.

When a discharge order is granted by the court, all debts of the client are cancelled. Any existing overpayment which arose before the bankruptcy is cancelled as an uncollectible debt unless it can be proven through a court action the debt arose through fraud, false pretenses or fraudulent misrepresentation or breach of trust.

The Board of Revenue Commissioners approves the cancellation of the overpayment. The Revenue Unit forwards a copy of the cancellation approval notification to the worker and posts the debt as cancelled which reduces the overpayment balance. The overpayment is not adjusted by the worker.

#### **14.9 Cancelling Overpayments**

Cases are identified by the Revenue Operations Unit. Only the Board of Revenue Commissioners can approve cancellation of the overpayment. The Revenue Unit forwards a copy of the cancellation approval notification to the worker and enters the overpayment balance, if any, on the file. The overpayment balance is not adjusted by the worker.

#### **14.10 Collection of Overpayments**

An overpayment is a debt owing to the Crown and may be recovered from entitlement, through court action or by other means. There is no time limitation for pursuing suspected fraud action through the criminal justice process.

When a deceased client has an executor or an administrator, the rules of estate administration require ordinarily that they pay out personal debts before they distribute assets. The executor or administrator, if known, is notified of any overpayment.

#### **14.11 Recovery of Overpayments**

##### **Recovery Rates**

Section 29.5 of *The Saskatchewan Assistance Act* authorizes the recovery of overpayments. The following rates are used to recover overpayments from future entitlement and are not intended to preclude recovery by other means.

## Overpayment Recovery Rates

Net SAP Payment *	Recovery Rate Per Month
\$ 0 - 310.00	\$15
310.01 - 430.00	\$25
430.01 - 570.00	\$40
570.01 - 720.00	\$55
720.01 - 870.00	\$70
870.01 - 1,000.00	\$85
1000.01 +	\$100

\* Net SAP Payment = Total of basic needs and continuous special needs, minus utilities, shelter, non-exempt income and advance recoveries.

The recovery rate for those who are employed is 60% of the exempted earnings to a maximum of \$75, plus the appropriate rate as indicated above based on the Net SAP\*.

When the amount of entitlement is less than the overpayment, the recovery rate is the amount of the monthly entitlement less \$1. See Chapter 8.1.1.

A higher recovery rate may be used if requested by the client.

A lower recovery rate may be approved by the supervisor for those clients:

- who receive room and board payments
- who receive the personal living allowance
- who receive level of care payments
- whose overpayment was the result of Ministry or administrative error
- whose overpayment was the result of a wage/need adjustment based on previously declared information
- whose entitlement is less than the recovery rate.

The recovery may be deferred by the supervisor for those clients:

- whose overpayment is being appealed
- who declare bankruptcy (see Chapter 14.8)

Decisions by Regional Appeal Committees or the Social Services Appeal Board to defer overpayment recoveries are forwarded to the Accounts Receivable Unit.

### 14.12 Underpayments

Underpayments occur when the amount of assistance is less than the budget deficit. The underpayment amount is subtracted from any outstanding overpayment, except when an underpayment occurs due to an administrative error, as a result of Ministry error or when the Social Services Appeal Board has not upheld the Ministry's decision to deny a benefit.

Underpayments are assessed from the date:

- the client advises of the change, or
- with the supervisor's approval, from the date the change occurred where needs were unidentified and there are outstanding unpaid accounts for those needs.

For calculations over 2 years, use form 1246.

### SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
14.4 Posting overpayments		Form letters 2002, 2003, 2005
14.7 Assignment of overpayment		Written consent from spouse
14.8 Bankruptcy		Proofs of claim form

<b>Delegation of Authority</b>		
The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager		
Approval Items	Reference	Approval Required
Fraud referral to Quality Assurance Manager	14.5	S
Fraud referral to police	14.5	M
Deferral of overpayment recovery	14.11	S

**POLICY STATEMENT** **SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 25</b>	<b>Assistance Benefits</b>	<b>CH 15</b>

**Intent**

Allowances shall be provided for the items essential to meet minimum living requirements.

**Policy**

Items essential to meet minimum living requirements include:

- food, meals purchased away from home
- personal and clothing requirements
- travel
- household needs
- accommodation such as shelter, utilities, board and room, or residential facilities: (e.g., group homes, approved private service homes)

**15.1 Adult Allowance and Disability Allowance**

**Adult Allowance** -- The allowance includes provision for food, clothing, personal, travel and household needs. It is provided to adults and children 18 years of age, but under 19 in the family unit.

**Disability Allowance** -- \$50/month is provided to adults with a disability who receive the adult allowance; \$20/month is provided to adults with a disability who receive a board and room allowance. (See Chapter 2.3)

**15.2 Individual Items of Need**

While the full adult allowance is usually provided, an individual item (food, clothing, personal, household) may be issued.

**15.2.1 Food Allowance**

**Allowance for food only** - provide the full adult allowance.

**Visiting A Spouse** - When a client who resides in a residential facility (e.g., nursing home) visits temporarily, with their spouse who resides in his/her owned or rented accommodation, the adult allowance is prorated for the duration of the visit. (See Chapter 13.3.2)

**15.2.2 Clothing Allowance**

The allowance for clothing for adults only is \$40.

**15.2.3 Personal Allowance**

The personal allowance is \$75.

**15.2.4 Clothing and Household Advances**

Only clients who are expected to be in receipt of the adult allowance for a sufficient duration to recover the advance may receive an advance payment.

An allowance of \$240 may be granted in advance for up to six months or the actual amount of the need whichever amount is less.

No further advance is provided until any outstanding amount is recovered.

Advances may be granted for urgent household needs when the cost of major items cannot be met through the monthly allowance. (List of basic household items, see Chapter 16.10)

An advance is used prior to providing funds for special household equipment except for circumstances listed in Chapter 16.10.

Child car seats may be provided by advance when community resources are not available.

See Chapter 16.1 (special clothing) and Chapter 16.10 (household equipment) for special needs and advances.

### **Recovery:**

Advances are recovered using multiples of \$40 for single clients and families.

A lower recovery rate or deferral may be considered for those clients who move to board and room or move to licensed care or family homes.

No advance is provided when the recovery rate exceeds the monthly entitlement.

When the amount of assistance is less than the advance recovery rate, the advance recovery amount is monthly payment less \$1.00.

## **15.3 Other Items of Basic Allowances**

### **15.3.1 Purchase of Meals**

For meals purchased away from home the rates are \$5.00/day for breakfast, \$6.00/day for dinner and \$9.00/day for supper.

Clients residing in rooms without access to cooking facilities or where meals are not provided may receive an allowance to purchase meals at \$10.00 per day (based on a 30 day month). The personal living allowance is also provided. Also see Section 15.4.4.

Clients and a required driver may receive an allowance for restaurant meals when traveling for medical appointments away from the community of residence. (See Chapter 16.4.1)

A meal allowance may be provided to a client residing in a room with access to cooking facilities if the unit administrator is satisfied the client is not capable of safely cooking meals.

### **15.3.2 Accommodation Away from Home or Temporary Emergency Shelter**

Clients who require accommodation away from home (e.g., medical appointments, when spouse/child(ren) are in hospital or receiving palliative care, appeal hearings, court appearances, job interviews within the province, funeral) may receive funds for the most reasonably priced accommodation. Clients who stay with friends or family may receive \$25 per night.

The following allowance may be provided for temporary emergency shelter provided by contracted agencies: (Effective April 1, 2011)

- Single Adult – \$46.15/day
- Families and Childless Couples – \$61.50/day

For meals see Section 15.3.1 and for travel see Chapter 16.4. For transients see Section 15.6.

### 15.3.3 Board and Room – Accommodation and Meals provided

For those who live with parents and have children, a board and room allowance is provided for each adult. In other board and room arrangements the regulatory rates are provided.

Excess rates may be provided for an 18- year-old who received services through Section 10 of *The Child and Family Services Act* prior to age 18 and who received an amount for board and room in excess of regulatory rates. This amount may be provided for one month following the completion of the current school year in which the youth attains the age of 18 years. The personal living allowance may also be provided as this is not included in board and room payments by Child and Family Services. (See Section 15.3.5 and Chapter 2.4.3)

A utility allowance is not provided as board and room includes laundry, telephone and other utility needs.

No advance may be provided for clothing needs. See Chapter 16.1 for special clothing needs.

### 15.3.4 Allowance for Board and Room in Residential Care Facilities

Any person who provides accommodation and personal care to a person other than a relative requires a license under *The Mental Health Services Act*, *The Residential Services Act*, or *The Personal Care Homes Act*.

#### Allowance for Level of Care and Group Homes

**Community Living Approved Private Service Homes and Group Homes** A rate of \$410 for board and room is allowed in determining eligibility for those under age 65. For those 65 and older, a rate is established annually by Income Assistance and Disability Services (IADS) Program and Service Design. Funding for board and room costs exceeding \$410 may be provided through Community Living Service Delivery (CLSD) to the home operators. Personal living and other allowances are provided. For income, see Chapter 19.14.

#### Mental Health Approved Private Service Homes and Group Homes

The following rates are paid for adults with a disability who receive care in approved private service homes licensed under *The Mental Health Services Act*.

[Revised May 1, 2011]

Daily Living Support Assessment	Total
Level 1.0	\$703/mo
Level 1.5	\$819/mo
Level 2.0	\$937/mo
Level 2.5	\$1,114/mo
Level 3.0	\$1,248/mo
Level 3.5	\$1,430/mo
Level 4.0	\$1,611/mo
Level 4.5	\$1,794/mo
Level 5.0	\$1,975/mo

Mental Health group homes are grant funded by the Ministry of Health.

**Personal Care Homes** - The following rates are paid for adults with a disability who receive services in private homes licensed under *The Personal Care Homes Act*.

[Revised May 1, 2011]

- Level I \$ 755 per month
- Level II \$ 932 per month
- Level III \$1162 per month

**Family Homes (Not Licensed)** - The following rates are paid for adults with a disability living with their relatives. A relative is defined in *The Personal Care Home Act* as a son, daughter, sister, brother, parent, aunt, uncle, great aunt, great uncle, grandparent, great-grandparent, cousin, nephew or niece. Foster parents are not considered relatives.

[Revised May 1, 2011]

- Level I \$ 631 per month
- Level II \$ 790 per month
- Level III \$ 1008 per month

## **Determining Level of Care and Effective Date of Payment**

### **Approved Private Service Homes**

Care levels for those in Approved Private Service Homes are determined by Mental Health or CLSD workers based on completion of the Daily Living Support Assessment (DLSA). A copy of the face sheet or a memo from the Mental Health or CLSD worker is required when rates are established or changed.

Payment: for up to the first 3 months is based on an estimate by the Mental Health or CLSD worker of the client's support level. Following the assessment, a payment increase is retroactive to the date of placement. Any decrease is effective the first day of the month following completion of the assessment. For cases in which the assessment is received after benefits have already been issued for the following month, the decrease is effective the first day of the next month. The rate remains the same if a client moves from one approved home to another.

## **Personal Care Homes and Family Homes**

To determine a level of care, a form1093 is completed by a physician within 60 days. A board and room rate of \$330 is provided until a form1093 is received. In disputed cases, a second medical report is obtained and a further assessment made by the worker. No further medical assessments are required unless it is evident the condition has changed. Clients are advised of their right to appeal.

Payment: the appropriate level of care rate is provided effective the date of the placement, but not prior to the date of application.

**Group Homes** - No documentation regarding level of care is required.

## **Resident Charges for Special Care Homes/Hospitals**

**Special Care Homes** - Clients living in Special Care Homes as defined under *The Housing and Special Care Homes Act* are required to pay a resident charge as determined by Health. The resident charge is adjusted quarterly and changes are made automatically.

**Hospitals** - Clients in hospital who no longer require acute care are charged the special care home resident charge by the hospital. Level IV cases continue to be assessed at

the special care home resident charge rate regardless of the length of time the client remains in hospital.

### Facilities Providing Specialized Services

**Ranch Ehrlo** – Services are contracted through Child and Family Services and CLSD. No financial benefits are provided. Residents may be eligible for Health Services only (see Chapter 4.3).

### 15.3.5 Personal Living Allowance

An allowance of \$115 per month is provided to adults in hospital, residential care facilities (group homes, approved private service homes, personal care homes, family homes, family shelters, alcohol/drug treatment centres) and to clients residing in rooms without cooking facilities who receive an allowance for restaurant meals. Children receive \$55/month.

An allowance of \$115 per month may also be provided to an 18-year-old who was previously in a Section 10 agreement through Child and Family Services, for one month following the completion of current school year in which the person attains the age of 18 years. (See Chapter 2.4.3)

### 15.4 Shelter Allowances

Shelter allowance for the full month in which eligibility is established may be provided if the shelter allowance for that month has not been paid. Shelter costs are documented or confirmed.

#### Shelter Rates – Minister’s Order # 09/2011

Effective April 1, 2011	Maximum Shelter Allowance			
	Tier A	Tier B	Tier C	Tier D
Single Employable	\$328	\$256	\$245	\$233
Room only:				
- Single	\$200	\$200	\$200	\$200
- Childless couple	\$400	\$400	\$400	\$400
Childless couple	\$526	\$440	\$398	\$344
Single Unemployable	\$459	\$358	\$314	\$326
Families				
- 1 or 2 children	\$636	\$508	\$494	\$403
- 3 or 4 children	\$688	\$603	\$544	\$480
- 5 or more children	\$760	\$699	\$606	\$557
<p><b>Tier A:</b> Lloydminster, Regina, Saskatoon, Estevan and the bedroom communities of: Allan, Asquith, Balgonie, Belle Plaine, Bradwell, Buena Vista, Clavet, Colonsay, Dalmeny, Delisle, Disley, Dundurn, Edenwold, Elstow, Grand Coulee, Langham, Lumsden, Lumsden Beach, Martensville, Meacham, Osler, Pense, Pilot Butte, Regina Beach, Shields, Thode, Vanscoy, Warman, White City.</p> <p><b>Tier B:</b> Creighton, Kindersley, La Loche, La Ronge, Macklin, Melville, Prince Albert, Rosetown, Weyburn, Yorkton.</p> <p><b>Tier C:</b> Battleford, Fort Qu’Appelle, Humboldt, Meadow Lake, Melfort, Nipawin, Moose Jaw, North Battleford, Swift Current, Watrous.</p> <p><b>Tier D:</b> Other towns, rural areas and social housing units.</p>				

#### 15.4.2 Criteria for Shelter in Excess of Shelter Allowances - Supervisor's approval

- When a client who is receiving up to the maximum shelter allowance for a not fully employable person becomes employable, an adjustment to the shelter allowance is effective 6 months following the change in status as long as he or she remains in the same residence.
- Clients require time to seek alternate accommodation for reasons other than increased rent. Excess shelter for the month circumstances changed and up to two months following may be provided.
- Clients who receive notice of a rent increase and live in communities with vacancy rates at or below 1.5% may receive an excess shelter allowance equal to their actual rental costs (less any Saskatchewan Rental Housing Supplement received by the client). The excess shelter allowance may be provided for a period of up to 6 months. Actual rent may be provided for further 6 month intervals if the vacancy rate remains below 1.5% or if the client's specific circumstances limit access to more affordable or suitable accommodation (e.g., large family size, wheelchair accessibility).

The following communities have vacancy rates at or below 1.5% as established by the CMHC Rental Market Report for Fall, 2010:

- Cities: Regina, Moose Jaw, Estevan, *Weyburn, Humboldt, Meadow Lake, Melfort*
  - Towns and villages: Balgonie, Belle Plaine, Buena Vista, Disley, Edenwold, Grand Coulee, Lumsden, Lumsden Beach, Pense, Pilot Butte, Regina Beach, White City
- Clients residing in North Battleford and Yorkton (where vacancy rates were previously at or below 1.5%) who were granted actual rent in excess of shelter allowances prior to October 1, 2010 may continue to receive an allowance for the actual cost of their rent for a period of up to nine months (up to and including June, 2011). This will allow these clients time to make decisions about their living arrangements such as seeking alternate accommodation and applying for the Rental Housing Supplement for additional support.
  - Clients residing in North Battleford and Yorkton who received a notice of a rent increase effective October 1, 2010 and who were advised that the actual cost of rent would be approved prior to September 15, 2010 may receive the actual cost of their rent for a period of up to nine months (up to and including June, 2011). This will allow these clients time to make decisions about their living arrangements such as seeking alternate accommodation and applying for the Rental Housing Supplement for additional support.
  - For clients who must maintain two residences because of medical treatment or participation in a training or employment opportunity in another location, shelter allowances for the second residence cannot exceed the maximum shelter rate for the number of family members in this accommodation.

In the following situations, the shelter amount cannot exceed \$150 above the maximum rate for the family size. Those receiving shelter exceeding \$150 above the maximum rate may continue receiving the higher shelter rate until they move, the family composition changes or they go off assistance.

- Clients with a disability with mobility and access problems are unable to locate suitable accommodation (e.g., level entry, elevator, more space for wheelchair) within the shelter maximum.
- Clients have an exceptional medical circumstance which impacts their ability to obtain accommodation.
- Clients present unusual or exceptional behaviour which impacts their ability to obtain accommodation.
- Clients have lived in the same residence for ten or more years and continued residence is important to their well-being. For home owners, additional funds may be provided for insurance (See Section 15.4.5).

In the following situations, the shelter amount cannot exceed the maximum rate for the family size including the additional individuals.

- A spouse who usually resides in a care facility who stays periodically with the client (See Section 15.2.1 for visiting spouses).
- Clients who operate foster homes or clients who provide care as Persons of Sufficient Interest (PSI). The shelter rate includes the number of children approved for the home.
- Clients who care for wards as an alternate caregiver or parents with access who have regular (at least monthly) visits with their child(ren) as part of an order or written agreement.
- Family size is expected to change (newborn, child(ren) returning home) for 3 months prior to the change. When the family size decreases the shelter amount is not reduced until the client moves to another location. The appropriate shelter rate is then applied.
- Family members are temporarily absent because of:
  - education – for the duration of the course
  - incarceration – See Chapter 13.3.4 for up to 90 days
  - in care of the Minister – for the duration of the wardship or agreement

Social Housing - excess shelter is not provided except for homeowner's insurance or if the client operates a foster home or cares for a child(ren) as a Person of Sufficient Interest. The shelter amount is reduced when family size decreases (See Section 15.4.6).

### **Saskatchewan Rental Housing Supplement**

Clients are to be referred to the Saskatchewan Rental Housing Supplement and the Disability Housing Supplement. These benefits may be available to assist with the cost of housing.

For those receiving an allowance in excess of the maximum shelter allowances, the excess shelter allowance is reduced by an amount up to or equal to the housing supplement benefit, but not exceeding the amount provided in excess of the shelter allowance. The Saskatchewan Rental Housing Supplement received in the current month, excluding any retroactive amount, is used to reduce the excess shelter amount in the following month.

### **15.4.3 Shared accommodation – including clients sharing with homeowner**

The share of the shelter cost cannot exceed the client's shelter maximum, or the actual cost of shelter, whichever is less.

#### **15.4.4 Room Rental – no meals provided**

Room rental rates are provided to single clients and childless couples for sleeping accommodation which has no cooking and no bathroom facilities in the room. The rate includes utilities, except laundry and telephone. A landlord/agent may require a security deposit. Rent in excess of the shelter allowance is not provided. If the accommodation has cooking and bathroom facilities it is considered a suite, and the usual shelter rate is provided (See Section 15.4.1). Room rates are not used when clients reside in hotels, hostels or the YM/YWCA or for families. See Section 15.3.2 for temporary emergency shelter rates and Section 15.3.3 for board and room.

#### **15.4.5 Home Ownership**

The shelter allowance may be provided for an initial purchase loan on the primary residence. A primary residence is a structure fixed on a permanent foundation. A mobile home or trailer may also be considered a primary residence if it is skirted and permanent on an owned lot or permanently located in a park for mobile homes.

The shelter allowance includes the initial purchase loan for a home or trailer, interest, taxes, fire insurance, home loan renewal fee, lot rental fee, condominium fees and includes additional loans taken out prior to application and used for essential renovations. A shelter allowance is not provided for loans taken out for any other purpose. The shelter allowance cannot exceed the shelter maximum for the family size unless excess shelter has been approved by the supervisor. (See Section 15.4.2 and see Chapter 16.18 for home repairs)

If a home loan is renegotiated to include items such as personal debt or purchase of a vehicle, a shelter allowance may be provided if the client provides documentation to indicate the outstanding balance of the home loan at the time of renegotiation, what the monthly shelter costs would have been and how long it would have taken to pay the home loan had the client not added other debts to the total loan. The shelter allowance may not exceed the maximum amount for the family size.

When property is held in joint title with the former spouse, the client may be eligible for an amount not exceeding the maximum shelter rate for the family size.

When property is held in joint title with others, the client's share may not exceed his or her actual share of the shelter cost (home loan, taxes, property insurance and related cost) or the maximum shelter allowance. (e.g., if there are 3 names on the title, a single client is entitled to up to 1/3 of the shelter costs). See Chapter 19.9 for assessment of direct home loan payment.

#### **Agreements for Sale**

These are situations where rental payments are applied to the purchase price of a property for a prescribed period of time. The seller retains the title until all the payments have been made or the client assumes the home loan. The shelter rate may include charges such as property tax, house insurance and interest if included in the agreement as long as the amount does not exceed the maximum shelter allowance. Funds for repairs are not provided until the client holds the legal title of the property. (See Chapter 16.23 for transfer of title funds)

## **Property Taxes**

An allowance equal to the amount of the current taxes owing is provided either on a monthly or annual basis. If a client is eligible for assistance for less than a full calendar year, payment of taxes commences from the date of eligibility. The allowance is the amount actually paid by the client (including any discount).

For clients who live on the home quarter, funds may be provided for the residential portion of the property tax. The remaining tax is considered an allowable expense in calculating farm income (see Appendix D). For tax arrears see Chapter 16.19.

## **Property Insurance**

An allowance is granted for the reasonable replacement cost of insuring a dwelling owned by the client but not for the contents. If a client has an insurance policy covering dwelling and contents and the insurance company does not provide a cost breakdown, 85% of the premium is provided. In the event of damage, the deductible is provided to repair or replace the dwelling. (See Chapter 16.18 for repairs)

## **Mortgage or Tax Arrears While on Assistance**

When clients accumulate mortgage or tax arrears to the extent they are in danger of foreclosure or loss of property, an emergency advance may be provided to pay arrears if the client:

- is currently receiving benefits; and
- received a shelter allowance for the period and at the residence where arrears accumulated; and
- continues to reside at the residence for which the arrears have accumulated;
- can reasonably expect to afford to pay the mortgage or taxes in the future; and
- the mortgagor confirms foreclosure is pending or the municipality is taking action to take title under the *Tax Enforcement Act*.

Any payment for arrears is limited to the period for which an allowance has been issued. The amount of the payment cannot exceed the actual cost of the mortgage or taxes. Any amount issued for arrears that is duplicate assistance for shelter previously granted is assessed as an overpayment. See Chapter 16.19 for factors to be considered.

## **15.4.6 Social Housing**

The Social Housing Rental Program provides affordable rental housing for low income seniors and families.

### **Shelter Rate for New Clients, Moves and Sharing Accommodation**

For new clients and those moving to social housing units, the Tier D shelter rate applies immediately. When 2 clients share accommodation, the client eligible for the higher shelter rate receives the shelter allowance. The other client does not receive a shelter payment. When a client shares with a person not on assistance, the Tier D rate is provided to the client. Excess shelter rates are not provided. (See Section 15.4.2) Public Housing Authorities may increase rent effective the date of any Tier D shelter allowance increase. The actual amount of rent is used to determine eligibility for Health Services only. (See Chapter 4.3)

### **Rent Geared to Income**

When gross income exceeds \$700 per month, the client's rent or mortgage amount may be reduced by the housing authority using the graduated rent scale. The worker refers these clients to the housing authority for a shelter adjustment. These clients may leave assistance if their shelter charge is reduced.

## **Security Deposit**

Security deposits are not charged by housing authorities. The housing authorities may request security deposits for other properties they manage. See Chapter 9. When clients move from one unit to another, a transfer fee may be provided if required.

## **Home Purchase - Mortgage Units**

The shelter amount is the Tier D rate except where the principal, interest and tax payment (PIT) is lower than that amount. House insurance may be provided as excess shelter pursuant to Section 15.4.2.

### **15.4.7 Other Shelter Arrangements**

When rent is reduced in exchange for caretaking duties and no wage is paid, the actual amount of rent charged is provided. No income is assessed since no wage is paid.

When shelter payments are made directly to a financial institution or landlord through a separation agreement, court order, divorce decree, or a private agreement, no income is assessed. If the payment made is less than the maximum shelter rate, a shelter allowance may be provided to make up the shortfall. (See Chapter 19.9)

Where the landlord is bankrupt, owes taxes, or other similar circumstances and a third party (e.g., Canada Revenue Agency, municipality) demands payment, rental benefits are made payable to the client. (See Chapter 8.2)

Clients who own or rent accommodation may rent portions (room or suite) of their premises to others, including clients. They are considered landlords and an appropriate income charge is assessed. (See Chapter 19.5)

Placarded Housing - Landlords are not legally permitted to rent to new tenants after a dwelling has been placarded. Clients who continue to reside in such a dwelling may be required to pay rent as determined by the Office of Residential Tenancies (ORT). They can also vacate immediately and seek compensation through the ORT.

PST charges on hotel rooms rented on a monthly basis may be provided and are not considered part of the shelter allowance.

### **15.4.8 Rent Arrears While on Assistance**

When clients accumulate rent arrears to the extent they are in danger of eviction, an emergency advance may be provided to pay rent arrears if the client:

- is currently receiving assistance; and
- received a shelter allowance for the period and at the residence where arrears accumulated; and
- continues to reside at the residence for which the rent arrears have accumulated;
- can reasonably expect to afford to pay the rent in the future; and
- the landlord confirms eviction is pending.

Any payment for rent arrears is limited to the period for which a shelter allowance has been issued. The amount of the payment cannot exceed the actual cost of rent for a period not exceeding 3 months. Any arrears in excess of the previously issued shelter allowance are assessed as an overpayment. Any amount issued for rent arrears that is duplicate assistance for shelter previously granted is assessed as an overpayment.

Example: Shelter allowance is \$500. Actual rent is \$650.

- Client is in arrears of \$650 (one month). Assistance payment for arrears is \$650 which is considered an overpayment.

Excess shelter up to the actual amount of rent (less any rental housing supplement the client receives) may be provided for a further 3 months to allow the client time to seek alternate accommodation (See Section 15.4.2).

Trusteeship should be considered in cases where it appears the client is not capable of managing the allowance.

## 15.5 Utilities Allowances

Except for telephone and laundry, the actual monthly cost for basic utilities in the client's name is provided to the client upon receipt of a bill or confirmation from the utility company, through electronic billing (SP/SE), or directly to the vendor. See Section 15.5.5 for exception.

Payment for utilities for the full month in which eligibility is established may be provided if the need exists. An allowance may be provided based on confirmed utility information (e.g., budget billing, minimum sewer charge). No funds are provided for meter repairs.

Wherever possible, utility allowances are paid to the client, not the utility vendor. GST charges are included for clients who pay their own accounts.

Clients are expected to use the monthly equalized payment plan (EPP) unless:

- the client is on electronic billing;
- the client is on direct payment as a result of arrears;
- the utility vendor confirms the client cannot be established on EPP; or
- the client is expected to be on assistance for a short period of time.

Sharing - the actual cost of the client's share is provided when the client's name is on the statement.

### 15.5.1 Laundry

When clients require a laundry allowance to pay to use a washer and/or dryer, or pay to have their laundry done, the following rates are provided:

1 person	\$10/month
2 people	\$15/month
3 people	\$20/month
4 or more people	\$25/month

For special needs laundry see, Chapter 16.16

### 15.5.2 Telephones

Except for board and room, \$30 is provided when clients provide documentation that they have a phone service. This includes a land line at the client's residence or a cell phone with pay as you go or monthly fees. For "pay as you go" service, the client's name must appear on the activation document or other documents from the service provider. No funds are provided for long distance charges, deposits, repairs, or internet. For special needs telephone allowance, see Chapter 16.9.

In exceptional circumstances, the supervisor may approve an allowance for a land line telephone when:

- the client is unable to secure a phone in his or her name; and,
- immediate access to a phone is essential for the client's health and safety; and,

- the client provides documentation confirming payment of phone service at the client's address.

For residential care facilities, approved private service homes, group homes, personal care homes and family homes, \$30 is provided where a telephone is required for a reasonable purpose and the client is unable to access facility phones due to disability or unavailability.

### **15.5.3 Equipment Rentals**

Water heater rental costs are provided to homeowners. Water softener rental costs are provided for homeowners and renters.

Fuel Tank Rental – rental costs are provided to homeowners.

### **15.5.4 Service Connections**

Charges for connecting or reconnecting services for utilities are issued as required. Deposits may be provided for approved moves. See Chapter 16.17

### **15.5.5 Utilities Not in the Client's Name**

The actual monthly cost for basic utilities in the client's name is provided to the client with the following exceptions.

Allowances for utilities may be provided to the client for services contracted for by landlords, in multiple unit dwellings (e.g., house with basement suite, duplex or fourplex) where:

- there are no more than four (4) separate rental units in the building; and,
- utility charges are included in the rental agreement; and,
- the meter for that utility is in the landlord's name; and,
- copies of the bills indicating the client's share of the costs are provided. The worker is not responsible for calculating the client's share of utility charges if the landlord or client submits a billing which includes charges for other tenants.
- The allowance is proportionate to the number of separate rental units. (e.g., 4 suites - client portion cannot exceed 25% of total utility cost.)

Allowances for utilities may be provided to the client for a utility contracted by the landlord:

- Where a municipality will establish a utility only in a home owner's name and the client is a tenant; and,
- The meter for that utility is in the landlord's name; and,
- Copies of the bill indicating the actual cost are provided.

Allowances for utilities may be provided to the client for a utility in another tenant's name:

- Where a municipality will only establish a utility in one tenant's name in a shared living arrangement; and,
- The utility bill is in the tenant's name with whom the client shares the accommodation; and,
- The client submits a copy of the utility bill with the client's share of the cost clearly indicated and signed by the customer whose name is on the bill.

### **Utilities Metered to Publicly Funded Housing**

The monthly utility cost is determined by the publicly funded housing authority. The cost is specified in the rental agreement and may include mandatory parking charges.

### **15.5.6 Equalized Payments - Settle up and Cancellation**

The monthly utility payment is the same amount every month. The account may be settled to determine whether there is a credit or debit. Settle up also occurs at moves. When the client moves and the budget billing rate was higher than the actual charges, a refund is made by SP/SE to the former client or to the ministry, as directed by the ministry.

The equalized payment amount is considered the actual monthly utility charge. The actual amount owing in the settle-up month is provided to the client or vendor. The amount owing is not used to adjust equalized payments for previous months. Where there is a credit carried forward from the settle-up month, no payment is made until the credit amount is insufficient to cover the equalized payment amount.

### **15.5.7 Cancellation and Case Closure**

Equalized payments – Unless the settle up amount is assessed in the month prior to benefits being cancelled, no adjustment is made if the settle up subsequently occurs.

SP/SE Electronic Billing – SP/SE is advised by Central Office when assistance is cancelled for those clients whose accounts were paid through electronic payment so they can initiate recovery of the deferred arrears from the client. See Chapter 10.10 for cancellation of direct payments.

### **15.5.8 Utility Arrears**

#### **Prior to Application**

An allowance may be provided for utility arrears outstanding prior to application if there is a threat to the health and safety of the applicant or the applicant's dependants due to utility disconnection or pending disconnection (as confirmed by the utility provider).

If the applicant did not have the resources to pay the utilities in the past, minimal amounts to ensure continuance of service may be provided.

If the applicant had adequate resources to pay for the utilities that are in arrears at application, any amount provided to pay the utility arrears is considered excess assistance and assessed as an overpayment. Approval of the supervisor is required for payments exceeding \$500. The applicant will be considered to have had adequate resources if the applicant had sufficient financial resources to meet basic and special needs.

#### **Utility Arrears accumulated while in receipt of assistance**

When clients do not pay their accounts and are in danger of having service disconnected an emergency advance may be provided to the client to pay outstanding charges including GST and late payment costs. (See Chapter 3.6.1)

Clients who demonstrate an inability to manage by not paying their utility accounts are placed on trusteeship or direct payment.

#### **Deferred Utility Arrears**

Direct and electronic payment for clients who have deferred arrears with SaskPower or SaskEnergy is continued until benefits are cancelled or when the arrears are fully recovered.

### **15.5.9 Wood and Water Delivery**

An allowance may be provided for firewood and water (including delivery) in rural areas when required. If it is more economical, clients may be provided mileage rates to haul their own firewood or water. See Chapter 16.4 for mileage rates.

### **15.5.10 Garbage Pickup and Septic**

Utility allowances include usual charges as well as costs related to septic systems and garbage pick up where the municipality charges for service. An allowance for mileage to the nearest landfill may be provided to the client. Payment for someone else to haul garbage may be provided where the municipality does not provide garbage removal.

## **15.6 Transients**

Financial assistance and/or health services may be provided for up to four working days. See Chapter 2.4.7 and Chapter 16.22.2

**Meals or Food** - For groceries the adult allowance and the Special Allowance for Children are prorated for up to four days. Restaurant meals are provided if cooking facilities are not available. See Section 15.3.1 for meal rates.

**Shelter** - Accommodation is provided using the most economical resources such as accommodation at no cost with friends or relatives, hostels or hotels with light housekeeping facilities.

**Travel Costs** – see Chapter 16.4

**Other** – see Chapter 16.23

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
15.3.2 Accommodation away from home	Staying with family or friends - client verbal statement	Hotel – Statement, invoice or receipt
15.2.4 Advances	Client verbal request	
15.3.3 Level of care		Front page of Daily Living Skills Assessment (DLSA) for Approved Private Service Homes or Memo from Mental Health 1093
15.4.1 – 15.4.7 Shelter – own home, joint title, agreements for sale, direct mortgage payments, rent, board and room, insurance	Board and room – client verbal statement Room rental – client verbal statement	<p>When no hard copy confirmation is initially provided, the supervisor may for one month only approve shelter providing there is corroborating evidence that the client is unable to obtain the required confirmation. This is recorded on a chronological recording. No second payment is made until such time a hard copy confirmation is obtained. Subsequent shelter payments are not provided until documentation is received unless there are exceptional circumstances (e.g. client faces immediate eviction, landlord or client is hospitalized) and will require supervisor's approval. See delegation of authority.</p> <p>Renters – rent receipt (current or last month if there is no change in address), rental agreement for the current address, proof of payment (cashed cheque or direct debit or payment) at application or move, form 1006, rent increase notice including shared arrangements. No documentation is required when rent is provided by joint payment or to a trustee.</p> <p>Social Housing – no rent receipt required</p> <p>Home owners – proof of payment (e.g., bank statement) certificate of title, mortgage/loan agreement, home insurance and tax statements</p> <p>Joint Title – proof of payment, certificate of title, mortgage/loan agreement</p> <p>Agreements for sale – copy of agreement</p>

<b>15.4 Living arrangements – shared room, room rental</b>	Client verbal statement (as described by client)	1001 1006
<b>15.5 Utilities</b>	Telephone - Annual review verification for “pay as you go” cell phones when current documentation not available: chronological recording indicating worker has verified service either by calling the phone number listed on the original “hook-up” document and talking to the client, or having the client bring the phone in and checking it is still activated. Land line – call to confirm at annual review	Telephone – Statement, contract or other form of documentation confirming phone service in client name or if bill not in client’s name, confirmation of land line at client’s address with supervisor’s approval Utility bills in client name Utilities metered to landlord or – copy of bill or documentation from landlord Utility services supplied only in the owner’s name – rental agreement and copy of bill signed by landlord Utility services only in one tenant’s name in shared arrangement – copy of bill signed by customer with whom client shares Social housing – copy of rental agreement Receipts for wood/water, fuel tank rental and delivery costs EPP - bill in client name, at rate change or move Electronic billing on SWIN when utility bills not provided by vendor

### Delegation of Authority

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

<b>Approval Items</b>	<b>Reference</b>	<b>Approval Required</b>
Granting shelter without documentation – see documentation requirements	15.4	S
Exceeding board and room rates	Reg.25C(4)(e.1)	M
Telephone allowance in exceptional circumstances	15.5.2	S

**POLICY STATEMENT**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 27</b>	<b>Special Needs Including Health Benefits</b>	<b>CH 16</b>

**Intent**

An allowance may be provided for certain items of special need. When eligibility for financial and/or health benefits is established, clients are nominated for supplementary health benefits.

**Policy**

Approval of the unit administrator is required for requests over \$5,000 in a fiscal year (April 1 - March 31) for items defined in Regulations Section 27 (4) E, G, L and S. (Sections 16.10, 16.12, 16.18 and 16.23)

**16.1 Special Clothing**

An allowance is provided for clothing in special circumstances.

**16.1.1 Items recommended by a physician or a health professional**

Where not otherwise provided, an allowance for clothing may issued for:

- incontinence briefs/napkins used as clothing, except for those receiving palliative care. An average monthly cost of incontinent supplies is established and actual costs are reconciled annually. The under or overpayment is calculated at year end and a new average is established if necessary. Where actual costs are paid, an invoice, statement or receipt is required.
- special brassieres and wigs not covered through the Cancer Society.
- clothing necessary due to extraordinary (e.g., rapid, more than 25 pounds) weight change,
- therapeutic or modified footwear (not runners) when the footwear is required due to a physical or medical condition and it is not covered by Saskatchewan Health. This includes footwear replacement where there is no change in the condition.

**16.1.2 Clothing required for training**

Where not provided by the training program, the actual cost of clothing required for training (e.g., uniform) is provided.

**16.1.3 Clothing supply seriously depleted**

A clothing allowance may be provided if the clothing supply is seriously depleted at the time of application as a result of a disaster or due to extraordinary circumstances.

**16.1.4 Maternity clothing - \$150.**

**16.1.5 Layettes - \$110/baby.**

This allowance is not provided where service groups provide layettes.

**16.1.6 Graduation Clothing**

- Grade 8 - \$75
- Grade 12 - \$175

- An allowance of \$120 is provided to those on assistance in adult education programs (e.g., Adult Basic Education (ABE), short skills courses) to participate in a formal graduation ceremony.

## 16.2 Special Food Allowance

An allowance for special food items may be provided in addition to the ordinary food allowance during pregnancy, lactation, convalescence, or for treatment purposes. The special food allowance is provided:

- to those who receive the adult allowance or board and room allowance;
- to children with special dietary requirements.

An allowance for special food is provided on the basis of a form 1092 except for:

- pregnancy verified by a physician or health professional,
- lactation diet

The need is reviewed at least annually and a form 1092 is required except for those with previously documented HIV or AIDS.

The rates below are provided for commonly prescribed special diets where the expenses exceed ordinary food costs and the actual costs are not known.

<b>Special Diet Rates</b>	<b>Allowance</b>
Calories (all age groups) – for diabetes, weight reduction and modified fats (low cholesterol):	
1900 - 2499	\$27
2500 - 2999	\$42
3000 +	\$75
Dialysis	\$35
Food Supplements	actual cost
High Protein Diet - for acute conditions where the treatment is intensive and for a specified time period.	\$53
Pregnancy or Lactation	\$48
HIV or AIDS (to include food supplements)	\$140

Actual costs established by a dietitian or nutritionist may be provided for the above diets or those not listed above.

When more than one diet is prescribed, funds for the higher cost diet are provided.

Funds for special diets are not provided to those in hotels or emergency shelters with the exception of bottled water and food supplements.

Funds for special diets are not provided to those receiving level of care allowances except when tube feeding is required. For these clients the actual cost for food used for tube feeding products minus \$120 is provided.

For those in Community Living Service Delivery (CLSD) group homes the total amount for food including a special diet minus \$140 is provided.

Food supplements (e.g., Boost, Ensure) are enriched food products prescribed by a physician for a specific condition for a specific time limit (e.g., Crohn's disease, malabsorption problems). The actual verified cost is provided. Supplements are considered a special diet.

For those with HIV/AIDS the actual cost of bottled water is provided.

### **Special Diets for those unable to eat:**

The following deductions are made for children and adults who require special products as they are unable to eat:

- **Child(ren)** - the actual cost of the special diet (including infant formula) in excess of \$70 per month is provided.
- **Adult** - the actual cost of the special diet in excess of \$120 per month is provided in addition to the adult allowance.

### **16.3 Northern Food Allowance**

An allowance of \$50 per month per person is provided to clients north of the 54th parallel as well as Barthel, Cumberland House and Pemmican Portage who receive the adult allowance, board and room, or who reside in an approved home or group home.

### **16.4 Traveling Expenses**

Clients are expected to meet their normal travel costs including the cost of license plates from the monthly adult allowance. Clients are expected to seek services from the location nearest their home community. Travel costs are not provided for visits between non-custodial parents and their children. Ambulance services and some other medically related transportation services are provided by Health. (See Section 16.22.4)

Travel costs by the most practical and economical means are provided. When clients are eligible for an allowance for more than one reason, costs for the most economical travel mode are provided (e.g., bus pass in urban centres). For exception, see Section 16.4.2.

#### **Mileage rate (funds to cover gas, oil)**

##### **For those residing south of the 54<sup>th</sup> Parallel**

- 22 cents per kilometer for a private vehicle
- 27 cents per kilometer when a driver other than a member of the family unit is required because the client is unable to drive or has no access to a vehicle.

##### **For those residing north of the 54<sup>th</sup> Parallel**

- 24 cents per kilometer for a private vehicle
- 29 cents per kilometer when a driver other than a member of the family unit is required because the client is unable to drive or has no access to a vehicle.

(1 mile = 1.6 kilometers)

Travel allowances are provided in the following circumstances:

#### **16.4.1 Medical Purposes**

Travel for medical purposes may be provided. Clients are expected to seek services from the location nearest their home community. Under exceptional circumstances, the supervisor may approve travel to another location within the province (e.g. CLSD client whose behaviour cannot otherwise be managed, no pharmacy within the community of residence.) For out of province travel see Section 16.22.4.

An allowance of \$10 per trip for taxi and/or \$10 per day for parking may be provided. If additional funds are required, the allowance is assessed on the actual cost of bus fare, taxi or other modes of transportation. Where costs amount to more than \$10 per month because of

a chronic medical condition, a monthly allowance based on average cost is established and reviewed periodically.

### **Escorts for Medical travel**

This allowance is related to the medical travel of the client and is not for attendant care or for services required when a client is in hospital or receiving treatment.

A travel allowance for one non-medical escort to and from a medical appointment or treatment may be approved, upon a request from a medical professional, Mental Health worker or CLSD worker only when there is a legal or medical requirement such as:

- where the client has a severe physical disability and requires help with activities of daily living;
- where the client is medically incapacitated;
- where the client has been declared "mentally incompetent" by a court of competent jurisdiction and assistance is needed to access medically required health services;
- when there is a need for legal consent by a parent or guardian who is not part of the family unit;
- to accompany a minor who is accessing medically required health services except for a Status Indian parent living on reserve.
- when a language barrier exists to access medically required health services and these services are not available at the referred location; or
- to receive instructions on specific and essential home medical/nursing procedures, and it is not possible for the instruction to be received in any other manner.

When an escort has been authorized, an allowance for the escort's meals and lodging may also be provided. The following criteria should be considered in approving a travel allowance for a medical escort:

- a family member who is required to sign consent forms or provide a patient history;
- a reliable member of the community;
- physically capable of taking care of themselves and the client and not requiring assistance or an escort themselves; or
- proficient in translating.

#### **16.4.2 Travel needs due to disability**

An allowance of \$20 is provided to those who can travel to assist with transportation for household and personal activities. (See Chapter 2.3)

The actual cost or mileage rate is provided to clients with a disability when transportation is required for employment, education, and/or medical purposes.

Mileage may be provided when a driver is required to enable a client to attend educational, therapeutic or rehabilitative programs at non-profit organizations and institutions. For those who attend regularly (at least 3 days per week), the mileage rate is calculated per client per kilometer for a maximum of 5 clients. If attendance in the program is for longer than 2 hours per day, the mileage may include 2 round trips (allowing the driver to return home between drop off and pick up times).

Rates may be negotiated by the unit administrator for transportation of clients by private carriers (e.g., taxi, bus) when more than one client is transported.

The actual cost or mileage rate may be provided for travel to Camp Easter Seal.

### **16.4.3 Registered Indians**

Registered Indians receive assistance for accommodation, sustenance and travel costs outside their community of residence from Health Canada. Arrangements are made in advance by clients with federal officials. Local travel needs may be provided through Social Services.

### **16.4.4 Northern Travel**

**Social Services** assesses eligibility and nominates for supplementary health coverage before medical trips can be authorized.

**Health** authorizes medical travel on the basis of eligibility for supplementary health.

**Social Services** is responsible for health-related local transportation and all meals and/or accommodation costs required as part of the medical trip.

**Health** is responsible for authorizing long distance travel which is related to a health need as well as subsequent transportation costs when it is an extension of the medical trip (e.g. taxis from airport to medical appointment). This responsibility extends to both outgoing and return long distance trips. This includes authorizing transportation by commercial carriers. Children covered by Family Health Benefits are eligible for medical travel through Health. In most cases, one parent may accompany the child as a medical escort. See Chapter 2.5.6 and Appendix at the end of this chapter.

### **16.4.5 Training, employment or other programs outside of the community of residence**

Actual cost or mileage rates may be provided to participate in training, employment or other programs approved as part of a case plan when they are outside the community of residence.

### **16.4.6 Travel costs to take children to child care**

Actual cost or mileage rates may be provided for parents and children to take children outside their home to child care when parents are attending training or programs approved as part of a case plan.

### **16.4.7 School transportation allowances**

Actual cost or mileage rate is provided for children attending elementary or secondary school when transportation is not provided by the school board and when children live more than one kilometer or eight blocks from school or the distance determined by school boards.

### **16.4.8 Travel for special needs children in a licensed child care facility**

Actual cost or mileage rate is provided for children aged 6 and under enrolled in a licensed child care facility who require these services as a result of medical, physical, social, emotional, developmental or language needs.

### **16.4.9 When families are not a resource, travel allowances may be provided to:**

- Attend a job interview outside the community of residence within Saskatchewan where a similar opportunity does not exist within the community.
- Accept confirmed employment or attend a training program outside of the community of residence. (See Chapter 3.3.2)
- Participate in an approved case plan (e.g., AA, counselling, support group sessions for abused persons or abusers). When there is an active protection case, no allowance is provided for travel related to the Child and Family Services case plan. For those in training see Section 16.14.

- Attend one visit with a family member with life threatening illness and/or a funeral service for a family member. Funds may be provided within or outside the province for a family member. Family member includes: a member of the family unit (spouse, children), grandchildren and the family who raised the client (parents, brothers, sisters, grandparents). Family unit refers to a client and his or her dependants. The decision as to the number of family members who receive a travel allowance is based on case circumstances. A maximum amount up to \$400 per family unit may be provided. The rate includes travel, accommodation, meals and child care costs.
- Visit a member of the family unit with a serious medical condition and/or attend a funeral service of a member of the family unit. The actual cost of public transportation or the mileage rate, whichever is most economical, is provided. See Chapter 15.3 for accommodation and meals and Section 16.15.4 for child care.
- A client with a disability to visit a parent once a year, where the visit takes place outside the community of residence within the province and the parent is a recipient and is unable to travel due to disability. A maximum of \$400 may be provided. The actual amount is provided if the costs are less than \$400. The rate includes travel, accommodation, meals and child care costs.
- For a custodial parent to visit child(ren) in residential care (e.g., hospital) as part of an approved plan where the visit takes place outside the community of residence.
- Attend regional or provincial appeal hearings outside the community of residence, if requested.
- Attend legal aid offices.
- Travel to or from family shelters.
- Attend court appearances within the province - criminal, Family Services, divorce, child custody/access unless travel costs are provided by another agency/ministry (e.g., Ministry of Justice and Attorney General for subpoenaed witnesses)
- Attend mandatory parent education classes as part of a separation or divorce action.
- Attend an initial visit with birth parents or biological son or daughter within or outside the province. Funds to a maximum of \$400 may be provided.

## 16.5 Visiting Children's Allowance

Under current family law, joint custody is assumed unless the custody order or written agreement specifies that one parent has custody and one has access. Where children are in care, the Minister has custody of children and the parent(s) may have access. This allowance may be provided when children visit a parent with access who does not receive the Canada Child Tax Benefit (CCTB). The allowance of \$160 per month per child is provided on a pro-rated basis. The visit must be at least 24 hours before the allowance is paid. For visits over 24 hours, the benefits are provided for each day even if the child(ren) stays a portion of a day. When the allowance is provided for more than 15 days/month for more than 2 consecutive months (except for summer holidays), the parent is required to apply for the CCTB. If not eligible for CCTB the allowance may be continued. No other needs are provided.

## **16.6 Special Allowance for Children**

This allowance may be provided on a pro-rated basis to assist with children's basic needs to a maximum of \$160 per month per child. The allowance is provided for the following children:

- newborns
- youth returning from custody facilities to parents/caregivers
- children returning to care of parents or caregiver from foster care, alternate care or placement with a designated person of sufficient interest
- Canadians returning from out of the country who are not receiving CCTB payments
- transient families
- refugee families who do not qualify for federal CCTB payments.

Parents or caregivers must apply for the children's benefits immediately.

The allowance is provided from the time the child is added to the file until the 20th of the month. If a child is added after the 20th of the month, the allowance is provided until the 20th of the following month.

All other families (e.g., from out of province) requesting assistance for their children's basic needs may be assisted only by an emergency advance until the next CCTB or Benefit Adjustment payment.

This allowance is not provided to families with federal government overpayments being recovered by Canada Revenue Agency.

## **16.7 Special Care Allowance**

\$25.00 per month may be provided for the purchase of services (e.g., snow removal, lawn care and wall washing) necessary to maintain a home if the spouse or dependant is unable to perform the tasks. The allowance may be provided to renters as well as home owners except for those who rent rooms or who share accommodation with others.

## **16.8 Approved Home Activity Allowance**

An allowance of \$25 per month may be provided to clients with a disability who reside in approved private service homes licensed through *The Mental Health Services Act* or *The Residential Services Act* or in homes licensed through *The Personal Care Homes Act*.

## **16.9 Telephone Allowance for Clients with a Disability**

Special equipment may be provided by SaskTel at no charge or at a discount rate with a physician's verification. When clients, including those in special care facilities, require special telephone equipment (e.g., voice amplification, speaker phone) which is not otherwise available, the actual cost is provided. Funds are not provided for telephone alert services (e.g., First Alert, Life Line) unless recommended by a physician due to a life-threatening illness or condition of an adult who lives independently. Funds are not provided for internet services.

## 16.10 Household Equipment, Furniture, Furnishings and Supplies

Clients are expected to provide for their household furnishings through the monthly adult allowance. No allowance is provided to those living in board and room or room rental arrangements, licensed care, or family homes except for infant cribs. No allowance, except for infant cribs may be provided to clients who have been on assistance for less than 12 consecutive month unless the need is urgent and is approved by the supervisor, and is limited to situations where not having the item poses a health or safety threat. The length of time the client is expected to receive assistance is considered.

An allowance for basic household furnishings may be provided to those who have never owned the items before. The most economical means of meeting the needs is considered. The item(s) requested and amount granted are recorded.

Needs over \$500 are assessed by home visit unless the supervisor waives the requirement.

Estimates or receipts are not required when using cost guidelines.

The following cost guidelines are used:

Basic Household Equipment and Supplies	Cost	Basic Furnishings	Cost
cleaning utensils	\$15	beds	\$250
cooking equipment	\$80	chest of drawers	\$110
curtains	\$45	cribs	\$210
dishes	\$30	high chair	\$60
linens	\$75	kitchen table and chairs	\$250
lamps	\$45	sofa and chair	\$350
		fridge	\$540
		stove	\$500
		washer	\$450
		dryer	\$320
		vacuum cleaner	\$125
Delivery and taxes to be added			

An additional 25% is allowed for communities served by the Buffalo Narrows and La Loche offices and for the communities of Cumberland House, Creighton, Uranium City, Wollaston Lake and Pelican Narrows.

### Advances and Household Equipment, Furniture, and Supplies

An advance is the first resource when replacing or repairing household items (e.g., fridge, stove, washer). See Chapter 15.2.4 for advances. A special needs allowance may be provided in addition to the advance if the advance is not sufficient to cover the cost.

The full advance is used for replacement items before providing additional funds with the exception of:

- the destruction of household furnishings as the result of a natural or man-made disaster. The insurance deductible may be provided if this is the most economical way to replace furnishings. (See Chapter 19.6).
- never had furnishings and requires the item(s) due to:
  - an increase in family size (e.g., purchase of crib for newborn).
  - a move to unfurnished accommodation that is more suitable for the family's need if this is an appropriate plan.

- household equipment necessary for the treatment of a medical condition and upon the recommendation of a physician or health care provider, where other resources are not available. (e.g., humidifiers, orthopedic mattresses, air filters). The client may approach the Kinsmen Foundation, Red Cross and service clubs for items the ministry does not provide.
- an advance is outstanding, the need is urgent and is approved by the supervisor, and is limited to situations where not having the item poses a health or safety threat. The length of time the client is expected to receive assistance is considered.

### **Repairs - Home Owners**

The household allowance is used for minor household repairs (furnace filters, tap and minor electrical repairs) if the cost is below \$40. Amounts over \$40 are provided as a special need under Section 27(4) L of the Regulations. No funds are provided for duct or vent cleaning.

Major repairs to the heating, plumbing and electrical systems are provided under Section 27(4) L of the Regulations. (See Chapter 16.18)

### **16.11 Education Expenses for Children**

An annual allowance is provided to cover expenses including supplies, school activity fees, textbooks, locker fees and gym clothing as follows:

For each child age 5	\$ 50
For each child age 6 - 13	\$ 85
For each child age 14 and older	\$130

For children age 5 in grade 1 or age 13 in grade 9 refer to Section 27(4) (F) of the Regulations.

The allowance is intended to meet all core educational expenses for the school year, including driver education. The school allowance is not pro-rated for those who apply after the beginning of the school year. Actual verified costs may be issued for Home Economics, Industrial and Graphic Arts projects and/or for credit Physical Education classes.

Fees may be provided when attendance at summer school is necessary for children to complete a high school grade.

**Tuition** - Tuition fees are the responsibility of school boards.

### **16.12 Expenses Incidental to Commencing Employment**

Work boots, special clothing, mandatory licenses (not including outstanding fines charged against licenses), fees or permits, criminal record checks, Hepatitis B immunization and minor tools may be paid when essential to employment and when not provided by the employer. Employers, including sheltered workshops, are required to provide protective equipment which they deem necessary to do the job.

Employment Supports (receipts not required):

- An allowance of \$40 is provided once per application to assist with the cost of:
  - travel within the community of residence and/or incidental expenses to attend job interviews; and,

- travel to work within the community of residence until first pay.
- An allowance of \$50 is provided once per application to assist with the cost of one month's vehicle registration where a vehicle is required for employment purposes (e.g., delivery, courier, where the vehicle is used on the job).

### **16.13 Security Deposits**

Clients whose assistance is cancelled due to employment may request funds for a security deposit in an amount of one half of their approved shelter allowance if they are moving. Payment is made to the client rather than the landlord.

### **16.14 Transition Allowance**

Advanced Education, Employment and Immigration (AEEI) is the primary funding agent for adult education and training. Assistance is not intended to supplement or replace any available funding sources, to replace student loans or Provincial Training Allowance (PTA) funding for those who default on their payments. (See Chapter 3.4)

Student loans, Provincial Training Allowance (PTA), Employment Assistance For Persons with Disabilities (EAPD) and Band funding are considered the primary sources of funding for education and training.

Clients enrolled in full or part-time Adult Basic Education (ABE), Short Skills Training (4+ weeks) and related courses are required to apply for PTA.

#### **16.14.1 Case Plan**

The Transition allowance may be provided when there is prior approval of a case plan.

#### **16.14.2 Allowances**

##### **Transition Allowance**

- An allowance of \$20 per month may be provided for participation in part-time programs of up to 15 hours per week.
- An allowance of \$40 per month may be provided for participation in programs of 16 hours or more per week.

The allowance is provided from the date the case plan is approved or the month the program commences, whichever is later. The allowance is not prorated for attendance, date of commencement or date of completion.

\*For travel see Sections 16.4.5 and 16.4.6

The Transition Allowance is provided as part of an approved case plan to a client, spouse or child over 18 but under 19, who is:

- awaiting PTA, student loans, Skills Training Benefit, and other funding sources;
  - eligible to receive assistance to top up PTA;
  - involved in short term (less than 4 weeks) pre-employment skills training;
  - an adult enrolled in high school;
  - participating in a training placement for a maximum of 6 weeks leading directly to a job where the course is not approved for PTA, student loans or other education funding;
- or,

- involved in a structured, capacity building program which prepares clients for further training or employment for a maximum of 6 months and where the course is not approved for PTA, student loans or other education funding. These programs do not include intermittent activities (e.g., Alcoholics Anonymous, counselling, support group sessions or driver training.) For these activities see Section 16.4.9.

**School supplies allowance** for full-time attendance at high school for adults - \$130.

**Course related costs for training program approved by the worker:**

- Transcripts - Funds may be provided for transcripts required for training programs.
- Deposits
  - Deposits may be provided for approved training
  - Course-related costs for on line high school courses where this is the only reasonable means for the client to complete high school and it is part of an approved case plan.
  - No book deposits are provided except that a GED book deposit is provided to those who remain eligible. No other costs are provided.
  - Other costs such as criminal records checks, processing fees, Hepatitis B immunization may also be provided.

**16.14.3 Evaluation Programs** - Saskatchewan Abilities Council

Referrals to the EAPD are made when clients meet the criteria of that program. EAPD does not provide training allowances for clients who attend short term (30-day or less) vocational assessments. EAPD pays the assessment fees and clients continue to receive assistance including travel.

**16.15 Homecare and Child Care Allowance**

Funds are not provided for members of the same family unit to provide service to each other (e.g., spouses, dependant children).

**16.15.1 Home Support Services**

These services are provided for adults and children through Home Care at rates established by Saskatchewan Health regardless of the number of services provided. Payment is not provided for clients in board and room, licensed care, or family homes (see Chapter 15.3.4) or where a level of care allowance is provided. (For Northern Health Districts see Appendix).

A home care allowance may be provided in exceptional circumstances with the unit administrator's approval for services provided other than through Regional Health Authorities. This is not intended to compensate family members providing home care.

**Meals on Wheels** - The client's adult allowance is not reduced when receiving Meals on Wheels. These services are provided through Home Care. An allowance is provided to pay the Home Care user fee at rates established by The Ministry of Health.

**16.15.2 Attendant Care**

Clients who require attendant care services are referred to the Health District to receive available services through Home Care or funding through the Individualized Funding Program. For live in caregivers, see Regulation 12(2) for the minimum contributions deemed towards household costs.

### 16.15.3 Adult Day Care for Respite

Respite care is temporary care of a person with a disability which provides relief for the usual caregiver. No funds are provided for adult or children's respite care in any other circumstances.

Clients with a spouse requiring special care who are receiving the adult allowance may be provided an allowance for the spouse to attend an adult day care centre or respite facility.

### 16.15.4 Child Care

No funds are provided when:

- Family or friends do not charge for services;
- there is an active child protection case and the need for child care is related to the Child and Family Services case plan; or,
- Saskatchewan licensed child care is used. The Child Care Subsidy provides a full subsidy for parents eligible for assistance). A deposit may be provided if required.

Payment for child care costs is made to the parent for the care of their children and is based on the following guidelines. These guidelines are minimum rates. No receipts or reconciliation are required when paying guideline rates.

	Private (Unsubsidized)	
	Half Day - 5 hours or less	Full Day - more than 5 hours
1 child	\$10	\$20
2 children	\$14	\$27
3 children	\$17	\$34
4 or more children	\$21	\$41

If child care costs are higher than the guidelines, a reconciliation using receipts is completed at least every 2 months. If the client is not making the payments, trusteeship is considered.

Funds may be provided in the following circumstances:

- for participation in an approved plan (e.g., AA, support group sessions)
- when a parent due to illness or disability is unable to care for a child(ren)
- when a child is hospitalized and there are children at home
- as long as a parent(s) is employed or in training
- when a parent is required to seek employment
- when a parent attends the Fine Option program
- when required for reasons outlined in Section 16.4.9

### 16.15.5 Pre School

Funds are not provided unless the pre-school is used for child care while the parent is in training or is employed.

### 16.15.6 Active Child Protection Cases

Allowances are not provided for family support services funded through Child and Family Services.

## 16.16 Laundry Service

When a medical condition causes unusual laundry requirements, actual laundry costs may be provided.

## 16.17 Moving Costs

Prior approval for moving costs is required. Moving costs may be provided as follows.

### 16.17.1 In Province

#### Once a year

- for medical or health purposes
- for employment, education/training purposes
- when moving to more adequate or affordable accommodation. If more than one move in a year is required for this reason, the supervisor's approval is required.
- when the rental property is no longer available or is sold

#### Once every two years - for eviction

**For safety reasons** - As often as required with supervisor's approval.

The following rates are provided: - singles and childless couples - \$50  
- families - \$150

Estimates and receipts are required if the cost will exceed the above amounts.

### 16.17.2 Out of Province

The supervisor's approval is required when a client wishes to move or return to another province (e.g., employment, leaving an abusive relationship, move closer to family support). Contact is made with the other province to advise of the client move and if the client will require financial assistance. The client's name, dependants and relevant circumstances regarding the move are provided.

Clients may move on their own without the other province's agreement.

Assistance for moving basic household belongings may be provided. Other costs such as meals and accommodation may also be provided. See Chapter 15.3.

**Moves to Saskatchewan** - Social Services will not accept responsibility for moving costs. Clients may move without the ministry's agreement. For eligibility of those who have received assistance from another province or Indian Band see Chapter 2.4.2.

## 16.18 Repairs to a Primary Residence - (See Section 16.10 for minor repairs)

Funds for repairs to a primary residence owned by the client may be issued for health and safety reasons to long term clients (on assistance for 12 consecutive months and expected to remain on assistance) and where insurance is not a resource. Prior approval of the unit administrator is required for expenses exceeding \$5000. An exception to this time period may be made when emergency home repairs are required (e.g., furnace). Estimates are required if the cost exceeds \$500. The market value and the client's equity in the home are important considerations.

Those purchasing through an agreement for sale are not eligible for repair funding. (See Chapter 15.4.5)

Saskatchewan Housing Corporation administers a number of home repair programs as well as a home modification program for persons with a disability and seniors. The Residential Rehabilitation Assistance Program (RRAP), and the Emergency Repair Program are available for those with limited income to assist with home repairs.

The Provincial Disaster Assistance Program (PDAP) may assist municipalities and individuals who suffer uninsurable losses from a natural disaster.

### **16.19 Shelter Arrears Prior to Application**

Mortgage or tax arrears accumulated prior to application may be paid only if the health and safety of the client is threatened and if the unpaid arrears were a result of lack of funds in the past. Minimal amounts to prevent eviction may be provided. (For property taxes see Chapter 15.4.5)

Based on notification from the Provincial Mediation Board tax arrears including any penalty fees, lien costs and legal fees accumulated prior to application may be provided.

Factors to be considered include:

- the cause of arrears
- the amount of arrears
- the value of the property and the equity of the property
- suitability of the accommodation
- the length of time the client has lived in the property
- the client's long term plan
- length of time the client is expected to receive assistance.

Rent arrears accumulated prior to application may be paid only if the health and safety of the client is threatened and if the unpaid arrears were a result of lack of funds in the past. Minimal amounts, not exceeding actual rent amounts, to prevent eviction may be provided.

The maximum payment may not exceed the actual cost of shelter arrears for a period of 3 months. If clients require time to locate alternate accommodation, see Chapter 15.4.2.

Approval of the supervisor is required for payments exceeding \$500.

### **16.20 Funeral Expenses**

#### **16.20.1 Funeral Arrangements**

In the absence of next of kin, a relative, or other responsible person, the funeral director may make the application for funeral expenses for those not on assistance.

#### **16.20.2 Application**

An application should be made before arrangements are completed but not later than three months from the date of burial. This time period may be extended with the supervisor's approval in exceptional circumstances. For those not on assistance, form 1244 is completed when a friend, relative or funeral director applies on behalf of the deceased.

#### **16.20.3 Eligibility**

All liquid assets which are readily accessible (e.g. bank accounts, bonds, Guaranteed Income Certificates (GIC's) ) are considered a resource except for the Canada Pension Plan (CPP) Death Benefit and the last Old Age Security (OAS), or Guaranteed Income Supplement (GIS).

In the case of a dependant, the families' resources are considered. For veterans, funds through the federal ministry of Veterans Affairs (Last Post) may be available.

The application is denied if:

- assets are readily available
- assets are sufficient to cover a reasonable funeral cost at non-assistance rates.
- the funeral costs have already been paid.

Funds provided by a relative, other than a member of the family unit, for funeral expenses, for a tombstone or a more expensive casket, are not considered a resource.

For incidental funeral expenses for families on SAP, see Section 16.23.

#### 16.20.4 Rate Schedule for Funeral Expenses

<b>Basic Funeral Expenses (Adults and Children)</b>	<b>Amount</b>
Services, casket, urn, regulatory fee, transfer from place of death including transfer vehicle (20 km.)	<b>\$3500</b>

<b>Additional Funeral Expenses (Adults and Children)</b>	<b>Amount</b>
Transportation – when travel beyond 20 km round trip is required for hearse and one other vehicle – travel per vehicle	<b>2.5 times the Public Service Commission km rates</b>
Grave liners (minimal vault or wood box) – when required by cemetery regulations	<b>Actual cost</b>
Oversize and/or hermetically sealed casket (cost in excess of basic fee)	
Crematory charges	
Cemetery plot - opening and closing	

#### Basic Funeral Expenses

Services includes transfer from place of death including transfer vehicle (20 km), mandatory documentation, embalming, dressing, cosmetics, visitation, funeral service in chapel or church including use of hearse, transfer to cemetery or crematorium including equipment required to provide these services.

Casket for all burials and cremations include a casket appropriate for viewing, simple lining, and handles for six pallbearers. Important: This same casket is to be provided for all burial and all cremation services including immediate disposition.

Urn - For all cremations with a service and/or visitation. If no service or visitation, cremains will remain in the container in which they are returned from the crematorium.

Actual cost defined - Actual cost on manufacturer/supplier invoice, plus freight and PST when applicable. Does not include GST.

Social Services does not provide an allowance for any items not specified in the above allowable expenses. Examples include: clothing, flowers, guest register, "Thank You" cards, printed memorial folders, grave marker, obituary, death certificates, limousines or sedans, fees for clergy, church fees, musicians, lunch receptions, requested upgrades to casket, urn and vault etc.

Cemetery plot is provided at no charge by city or municipality.

### **16.20.5 Transportation of the Deceased Person**

The family is a resource for transportation costs. Transportation is limited to the boundaries of the province except for the cities of Flin Flon and Lloydminster. Transportation costs for a funeral and burial to a location other than the *community of residence at the time of death* may be provided with prior approval. Costs to transport the deceased to a location other than that of the funeral, for burial, are not provided.

If authorized by a Coroner, fees related to the transportation of a body from the scene of death to a hospital (for autopsy) or to a holding facility (e.g., morgue, funeral home) are paid by the Office of the Chief Coroner in accordance with *The Coroners Regulations, 2000*. This would include paying for the cost related to the transportation of the body from the hospital or holding facility back to the scene of death. Charges for autopsies requested by the next of kin are not provided through assistance.

### **16.20.6 Payment Process**

All payments for funerals are made to the funeral director. Neither PST nor GST charges are included in the payment.

Financial Services Branch (FSB) applies, on behalf of the Ministry for final payments for the month in which the person died including the CPP Death Benefit. These resources are not deducted from the amount paid to the funeral director. The following information is provided to FSB in writing (form letter 3009):

- name of deceased
- address
- SIN
- date of birth
- marital status at the time of death
- known bank accounts
- certified copy of the Death/Burial Certificate
- certified copy of the paid funeral expense invoice

FSB receives the death benefits and considers them a refund to the Ministry.

### **16.21 Advocates**

Clients may have a person of their choice from their area or from outside their area with the supervisor's approval represent them at Social Services and Office of Residential Tenancies (ORT) appeal hearings. At their request, \$45 per hearing may be paid for an advocate other than a spouse, dependant child or funded agency. Payments are made to the client or trustee.

For ORT hearings, payment may be made for one hearing concerning a security deposit matter. Payment form is available from the ORT. For Social Services hearings, the fee is paid for one hearing unless a further hearing is ordered by the Chairperson.

Advocates' travel and meals may be provided at government rates for Social Services hearings.

## 16.22 Health Benefits

### Universal Insured Services (no nomination made)

Benefits are available to all Saskatchewan residents under Hospital and Physician Services, the Hearing Aid Plan, the Saskatchewan Prescription Drug Plan (Special Support Program) and the Saskatchewan Aids to Independent Living (SAIL) program. As a first resource, clients are referred to the Special Support Program at Health if they have high cost medication needs. Information and applications are available at all pharmacies.

For a summary of benefits for SAP and Family Health Benefit clients see Appendix.

### 16.22.1 Supplementary Health Services

While clients eligible for financial benefits are eligible for supplementary health benefits, the health benefits are administered by the Ministry of Health. **Assistance cannot be provided for health-related costs unless specifically indicated in this section.** When fees are part of Health's co-payment charges clients are expected to pay this cost from their own resources. Registered Indians receive health benefits through Health Canada.

Supplementary health services are available to clients through Health. Commitments should not be made on behalf of Health. Clients or vendors who have questions about eligibility for glasses, dentures, etc., should contact Health directly.

Note: Form 1092 may be completed by a health professional (e.g., physician, nurse practitioner, chiropractor, psychologist, etc.). The Ministry of Health determines which health professionals are paid for completing the report.

The following services are provided by the Ministry of Health: dental, optical, hearing aids, chiropractic, drugs, podiatry medical supplies and appliances and ambulance. (See Appendix at the end of the chapter.)

Vendors must request prior approval from Health to provide some of the supplementary health services.

### Dental Services

Dental benefits for fully employable clients are restricted for six months. There is no restricted period for clients assessed as not fully employable.

### Drugs

Clients should ask their physicians to ensure that prescribed drugs are on the formulary so they benefit from all available coverage.

### Plan 1

The prescription dispensing fee for clients with this coverage is \$2.00. No allowance is provided through assistance. Clients nominated for Plan 1 include those who reside in family homes, personal care homes and hospitals. There is no charge for drugs prescribed to clients in hospital.

### Plan 2

Transients may be nominated for Plan 2.

Those under 18 years of age receive this coverage from Health automatically.

Those with high drug costs may qualify for Plan 2 coverage. The request to the Drug Plan may be made by the client, physician or other health professional.

### Plan 3

Clients nominated include residents of:

- Approved Community Living and Mental Health Private Service Homes
- Community Living and Mental Health group homes
- Special Care Homes where the resident receives Saskatchewan Assistance Program or Seniors Income Plan (SIP) benefits
- Addiction Treatment Centres

Northern Medical Travel - See Section 16.4.4

### **16.22.2 Eligibility for Supplementary Health Services**

Applicants eligible for financial benefits are eligible for supplementary health benefits except for Registered Indians who receive coverage through Health Canada. For non-registered people living on reserves, form 1115 is used to determine eligibility for supplementary health coverage. (See Chapter 4.3 Health Services Only Eligibility)

### **Temporary Health Coverage**

Form 1117 may be issued in cases where an emergency health problem exists and treatment (e.g., drugs.) is required immediately.

#### Procedures:

- The appropriate form is completed.
- A health web nomination must be processed after a THC form is completed.
- A THC may only be issued for a maximum of 14 days for Plan 1 or 2.
- Effective and cancellation dates must be on the THC

### **Other Health Coverage**

Registered Indians are not eligible for health benefits since they retain their Indian health coverage administered by Health Canada whether on or off reserve. Family members who are not Registered Indians are not included in the Health Canada coverage and may be eligible for health coverage using form 1115 (see Chapter 4.3).

An 18 year old who is part of an eligible family is eligible for benefits as a dependant of the family. Supplementary health benefits will be cancelled automatically when the person reaches age 19.

Transients - If an urgent medical need exists, form 1113 is completed. The client is eligible for Plan 2 Supplementary Health coverage on a temporary health coverage form 1117. Coverage is issued for up to four working days.

Refugee - The federal government provides health coverage for one year or until the refugee finds full-time employment whichever is sooner. Clients who have not been granted refugee status may only be nominated for coverage for a specific time number of days to cover a serious medical emergency. Before providing any coverage, clients should be referred to CIC for services. Refugee claimants may receive health coverage through CIC.

Persons residing in Community Training Residences (CTR) are not eligible for supplementary health benefits through the Ministry of Social Services, but through the Ministry of Justice and Attorney General.

Those sentenced to federal halfway houses are not eligible for supplementary health benefits. Coverage is provided by the federal government. Those not sentenced, but residing voluntarily in a federal halfway house, may be eligible for supplementary health benefits.

Extended health benefits for a client with a disability - Supplementary health benefits may be extended for one year to a client with a disability who leaves assistance for employment. For health benefits after one year, refer to Chapter 4.3.

### **16.22.3 Payment for Non-Formulary Drugs**

The physician contacts the Drug Plan for approval of drug costs. If approved for payment Drug Plan officials will inform the physician and client. If not approved for special drug authorization no funds are provided by either Ministry of Health or Ministry of Social Services.

Assistance may be available through the Drug Plan, Special Support Program for those who incur high monthly drug costs.

### **16.22.4 Out of Province or Out of Country Health Services**

Whenever health services outside the province are required the need is confirmed by the referring physician or cancer clinic. When health services outside of Canada are required confirmation must be obtained from Health (Out of Country Committee). Upon confirmation assistance may be provided for related needs (e.g., travel, sustenance, accommodation). Social Services does not make payments for any medical or hospital charges.

### **16.22.5 Cancellation of Supplementary Health Benefits**

An assessment is completed to determine if there is eligibility for ongoing supplementary health benefits before the benefits are cancelled (see Chapter 4.3)

## **16.23 Special Circumstances**

**This section is not to be used for granting items not allowed in Sections 16.1 to 16.22.** For example, health benefits policy is in Section 16.22. Section 16.23 can not be used to provide for a health benefit now allowed in Section 16.22. This section is not to be used for **items such as organization fees, weight control programs, music lessons, health or medical items not covered by the Health Ministry (e.g., bubble pack for medication, blood pressure monitor or over the counter drugs), respite or legal fees.**

An allowance may be provided for:

- Equipment or services for those who are hearing impaired: master alert, door beacon, shake awake alarm, interpreter fees.
- Bank Searches and Financial Audits - The ministry pays for service charges incurred in obtaining necessary financial records and conducting audits. (See Chapter 20.1.2).
- Certified Copies of Maintenance Orders - Payment may be provided to obtain certified copies of maintenance orders granted in other provinces or countries. There is no charge for maintenance orders from Saskatchewan.
- Wheelchairs/Scooters repairs - required for mobility purposes related to a disability. Funds may be provided for reasonable repairs (including batteries) for equipment clients own if Saskatchewan Aids for Independent Living (SAIL) or Workers' Compensation Board (WCB) is not a resource.
- Ceiling lift and hoist repairs – required for mobility purposes related to a disability. Funds may be provided for reasonable repairs (including batteries) for equipment clients own if SAIL or WCB is not a resource.

- Medic Alert Bracelets and related costs (e.g., registration) as recommended by a physician (form 1092).
- House Locks - Funds may be provided where safety is a concern whether for accommodation that is owned or rented.
- DNA Blood Testing - Funds may be provided for costs associated with testing required to determine paternity. Testing must be recommended by a lawyer. Whether payment is made is also based on the likelihood of the respondent being a viable financial resource and the potential for successful enforcement of a maintenance order. The ministry will make payment for testing of the client and child only, not the respondent. Payment may be made in advance, if requested.
- Identification - Funds may be provided to the client to obtain documents necessary to obtain a Social Insurance number, to purchase documents required for the purposes of applying for other financial benefits, or to obtain photo ID to enable a client to open a bank account.
- Incidental Funeral Expenses - An allowance of \$100 for incidental funeral expenses may be provided to the head of the family or surviving spouse who receives benefits when a member of the family unit dies (family members on assistance file).
- Crutches - Funds may be provided in emergency situations.
- Pest Control - If the client is responsible, funds may be provided if this is a more economical alternative to replacing essential furniture items. If the client claims no responsibility, he/she contacts the landlord and requests pest control. If refused, the client contacts Public Health regarding a pest control order. If that fails, the client may apply for an emergency order through the Office of Residential Tenancies.
- Storage - Funds may be provided on a short-term basis when clients are unable to move furnishings immediately in such circumstances as:
  - leaves an abusive relationship.
  - new accommodation is not available when anticipated.
  - short-term admission for health care.
- Guide/Service Dog - Funds may be provided for food and veterinary costs if there are no other resources for specially trained dogs to assist clients with disabilities who live independently. Actual veterinary costs may be paid with prior approval.
- Funds may be provided for transfer of legal title when an agreement for sale or home purchase loan is completed and fully paid and the title is solely in the client's name.
- Mandatory methadone lock boxes for individuals receiving methadone treatment

## SAP Program Verification / Documentation Requirements

This appendix is intended as a summary only. Refer to Regulations and policy.

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
16.1.1 Clothing	Client verbal statement for: Commencement of training Graduation clothing Layette & maternity clothing	Medical clothing – Physician or health professional recommendation – 1092, 1093, Daily Living Support Assessment (DLSA), note or verbal statement. Receipts required. Copy of requisition for footwear replacement. Incontinence costs are reconciled annually. Statement, invoice receipt for actual cost.
16.2 Special Diet	Lactation - client verbal statement	1092 – required annually. Pregnancy - statement from physician or health professional Food Supplements - receipt or statement
16.4 Travel Expenses	Client verbal statement for: Employment/training outside community of residence Child school transportation re: distance to school Non-continuous Travel -- job interview, accept employment Attend activities related to case plan Attend funeral services Serious medical Attend appeals -- verbal request Travel to/from Family Shelters Visits with family unit	Medical travel -- appointment card from physician, health care receptionist, 1092, report or letter from health care professional or taxi receipt or invoice indicating address of health facility or doctor's office. Medical – if taxi exceeds \$10/trip or if parking fees exceed \$10/day, receipts are required. Bus fare – verbal or website confirmation of rate Attend court appearances -- copy of request to attend court
16.5 Visiting Children's Allowance	Child in care - client verbal statement or verbal statement from Family Services	- Copy of custody order or written agreement and recording
16.6 Special Allowances for Children	Client verbal statement not receiving CTB Verbal statement from Family Services if child in care or custody	1243 for newborns
16.7 Special Care Allowance	Client verbal statement spouse or dependant unable to perform household tasks	1092 already on file
16.8 Approved Home Activity Allowance	Client receiving level of care in a licensed facility	
16.9 Special Telephone		Phone bill First Alert, Life Line – diagnosis of life-threatening illness and recommendation by physician, contract of monthly bills
16.10 Household Equipment / Furniture		For payment of insurance deductible, copy of policy Items necessary for medical reasons -- recommendation of physician or health provider Receipts are required if cost guidelines not used

<b>16.11 Educational Expenses</b>		Receipt or statement of costs for home economics, industrial arts projects and/or credit physical education classes or fees for summer school.
<b>16.12 Employment Expenses</b>	Client verbal statement	
<b>16.12 Employment Supports</b>	Client verbal statement	
<b>16.13 Security deposits</b>	Client verbal statement	1006
<b>16.14.2 Transition allowance</b>	Client verbal statement	Acceptance letter when paying course related costs. (e.g., transcripts) Provincial Training Allowance (PTA) assessment recording
<b>16.15 Home care</b>		Home care bill or statement
<b>16.15 Child care</b>		Receipt or statement from care giver if above the guidelines
<b>16.16 Laundry – medical</b>		1092 (if not already on file)
<b>16.17 Moving costs</b>		Receipts required if cost guidelines not used
<b>16.18 Repairs to property</b>		Estimates required
<b>16.19 Back bills</b>		Utility bill, disconnection notice Eviction or foreclosure notice Form letter 4001
<b>16.20 Funerals</b>		1244 for those not on assistance Bill from funeral home
<b>16.21 Advocates</b>	Client request	ORT Office form
<b>16.22.2 Health benefits</b>	Health Services only	1089
<b>16.22.4 Health benefits out-of-province or country</b>	Out of province – verbal confirmation by physician or cancer clinic.	
<b>16.23 Special Circumstances</b>	Hearing impaired – special equipment, interpreting fees – client verbal statement (1092 on file) Bank Search and Audits – no verification required  Client verbal request for: Copies of maintenance orders Wheelchair Repair Identification Incidental Funeral Expenses Crutches Fumigation Methadone lock boxes –verbal statement from methadone clinic	DNA testing – Letter from lawyer. Storage – bill required Medic Alert Bracelet – 1092 Guide/Service dog - veterinarian's bill or statement, service dog training certification documents

### Delegation of Authority

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

Approval Items	Reference	Approval Required
Travel – in exceptional circumstances for client to seek services from a location other than that nearest the home	Reg. 27 (4) B 16.4.1	S
Household equipment <ul style="list-style-type: none"> <li>• Over \$5000</li> <li>• Basic furnishings except infant cribs – on assistance less than 12 consecutive months</li> <li>• Waiver of home visit for needs over \$500</li> <li>• Urgent need and not having the item poses a risk to health and safety</li> </ul>	Reg. 27(4) E 16.10	M S  S S
Expenses incidental to commencing employment over \$5000	Reg. 27(4) G 16.12	M
Transition Training Allowance – placement longer than 6 weeks	Reg. 27(4) H	S
Moves <ul style="list-style-type: none"> <li>• More than once a year when moving to more adequate or affordable accommodation</li> <li>• Out of province</li> </ul>	Reg. 27(4) K 16.17.1  16.17	S  S
Property repair over \$5000	Reg. 27(4) L 16.18	M
Shelter arrears prior to application over \$500	Reg. 27 (4) O 16.19	S
Funeral expenses application after 90 days	Reg. 27(4) P	S
Payment to advocate outside area	Reg. 27(4)Q	S
Special Circumstances – over \$5000	Reg. 27(4) S 16.23	M

### Northern Communities/Northern Food Allowance - 16.3

Air Ronge	Denare Beach	Jans Bay	Patuanak	Stony Rapids
Barthel	Deschambault Lake	Key Lake	Peerless	Sturgeon Landing
Beauval	Descharme Lake	Key Lake Mine	Pelican Narrows	Sucker River
Beaver Lake	Dillon	Kinoosao	Pemmican Portage	Timber Bay
Black Point	Dipper Lake	La Loche	Pierceland	Turnor Lake
Black Lake	Dore Lake	La Ronge	Pinehouse Lake	Uranium City
Brabant Lake	Dorintosh	Landing	Points North Landing	Waterhen Lake
Buffalo Narrows	Elak Dase	Loon Lake	Primeau Lake	Waterloo Lake
Camsell Portage	Eldorado	Makwa	Rabbit Lake Mine Site	Weyakwin
Canoe Narrows	Fond Du Lac	McLennan Lake	Rapidview	Whelan
Cluff Lake Mine Site	Garson Lake	Meadow Lake	Sandy Bay	Wollaston Lake
Cole Bay	Goodsoil	Michel	Sled Lake	
Collins Bay	Grandmother Bay	Missinipe	Southend	
Cree Lake	Green Lake	Molanosa	St. George's Hill	
Creighton	Ile a la Crosse	Montreal Lake	Stanley Mission	
Cumberland House	Jan Lake	Neeb	Stony Lake	

### Northern Communities/Home Care – 16.15

Air Ronge	Denare Beach	Jans Bay	Patuanak	Stony Rapids
	Deschambault Lake	Key Lake		Sturgeon Landing
Beauval	Descharme Lake	Key Lake Mine	Pelican Narrows	Sucker River
Beaver Lake	Dillon	Kinoosao		Timber Bay
Black Point	Dipper Lake	La Loche		Turnor Lake
Black Lake	Dore Lake	La Ronge	Pinehouse Lake	Uranium City
Brabant Lake		Landing	Points North Landing	
Buffalo Narrows	Elak Dase		Primeau Lake	Waterloo Lake
Camsell Portage	Eldorado		Rabbit Lake Mine Site	Weyakwin
Canoe Narrows	Fond Du Lac	McLennan Lake		Whelan
Cluff Lake Mine Site	Garson Lake		Sandy Bay	Wollaston Lake
Cole Bay		Michel	Sled Lake	
Collins Bay	Grandmother Bay	Missinipe	Southend	
Cree Lake	Green Lake	Molanosa	St. George's Hill	
Creighton	Ile a la Crosse	Montreal Lake	Stanley Mission	
	Jan Lake		Stony Lake	

<b>Supplementary Health Coverage – See 16.22</b>		
	<b>* SAP</b>	<b>Family Health Benefits</b>
<b>Dental Coverage</b>	<ul style="list-style-type: none"> <li>- a range of routine dental services such as examinations, x-rays, cleaning, restoration, extractions and dentures</li> <li>- persons obtaining dentures will be asked to pay a small fee</li> <li>- persons who choose to upgrade services may be required to pay for a portion of the service or the entire cost</li> <li>- employable clients receive only emergency services during the first six months of eligibility limited to relieving pain and controlling infection</li> </ul>	<ul style="list-style-type: none"> <li>- no coverage for adults</li> <li>- children receive basic dental services</li> </ul>
<b>Drug Coverage*</b>	<p><b>All plans - Individuals under the age of 18 receive eligible prescriptions at no charge</b></p> <ul style="list-style-type: none"> <li>- Plan 1 - \$2.00 per prescription for formulary drugs (persons under 18 – no charge)</li> <li>- Plan 2 (transients and those with ongoing multiple prescription needs) - receive formulary drugs at no charge</li> <li>- Plan 3 (those in special care facilities) - receive formulary drugs and certain prescribed drugs not available under the Drug Plan at no charge</li> </ul>	<ul style="list-style-type: none"> <li>- semi-annual family deductible is \$100; consumer co-payment is 35%</li> <li>- individuals under the age of 18 receive eligible prescriptions at no charge</li> </ul>
<b>Optometric Services</b>	<ul style="list-style-type: none"> <li>- eye examinations every 12 months for children</li> <li>- eye examinations every two years for adults</li> <li>- basic eye glasses are provided</li> </ul>	<ul style="list-style-type: none"> <li>- eye exams are free of charge every 12 months for children</li> <li>- eye exams are covered every two years for adults</li> <li>- basic eye glasses are a benefit for children only</li> </ul>
<b>Emergency Ambulance</b>	<ul style="list-style-type: none"> <li>- coverage includes patient charges for emergency road and air ambulance services</li> </ul>	<ul style="list-style-type: none"> <li>- covered</li> </ul>
<b>Hearing Aids</b>	<ul style="list-style-type: none"> <li>- covered</li> </ul>	<ul style="list-style-type: none"> <li>- no coverage for adults</li> <li>- a benefit for individuals under 18</li> </ul>
<b>Medical Supplies</b>	<ul style="list-style-type: none"> <li>- covered</li> </ul>	<ul style="list-style-type: none"> <li>- for children - free of charge</li> <li>- no coverage for adults</li> </ul>
<b>Chiropractic Services</b>	<ul style="list-style-type: none"> <li>- up to 12 treatments per year are covered</li> </ul>	<ul style="list-style-type: none"> <li>- a benefit for adults and children</li> </ul>
<b>Chiropody (Podiatry)</b>	<ul style="list-style-type: none"> <li>- foot care visits and appliances provided through Regional Health Authority clinics are covered</li> <li>- services of private podiatry clinics are <b>not</b> covered</li> </ul>	

**Drug Coverage** - Those with low-income and high drug costs may apply for the Special Support Program administered by the Drug Plan (Health).

\*Coverage does not extend to services outside of Saskatchewan

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**POLICY STATEMENT** **SASKATCHEWAN ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 27A</b>	<b>Welfare Services</b>	<b>CH 17</b>

**Intent**

Welfare services are those where the objective is to lessen, remove or prevent the causes and effects of dependence on social assistance.

**Policy**

Counseling, assessment and referral services may be provided by:

- Ministry staff;
- calculating a fee for service as part of the budget need of the client; or
- the Minister may make grants to cover staff costs of the agency providing these services.

**17.1 Establishing Welfare Services**

All requests to fund staff at an agency or increase rates for existing services must be forwarded to Central Office with an analysis of:

- The need for the service (e.g., how is this need currently met in the area, the advantages and disadvantages of the present arrangements).
- Potential take-up - how many clients are expected to use the service?
- Impact on existing services (e.g., will it reduce demand on other contracted services or the services provided by other governmental agencies?).
- The cost of the service on a unit basis and an annual basis.
- Potential offsets (e.g., will this service replace an existing service? If so, what would the existing service cost?).
- Any other relevant factors.
- Reporting and accountability requirements are outlined in the agreement.

The decision on whether the service is purchased and at what cost is then confirmed through an agreement.

The Government Organization Act and the need for an Order in Council should be considered.

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## POLICY STATEMENT

## SASKATCHEWAN ASSISTANCE PROGRAM

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 28</b>	<b>Determining Financial Resources - Exemptions</b>	<b>CH 18</b>

### Intent

In determining financial resources available to clients the net amount of all income and assets must be assessed. Voluntary deductions are included in the calculation of income.

### Policy

All income and assets are included in the calculation of financial resources unless they are specifically exempted. During the period of eligibility, exempt resources remain exempt when converted to another type of asset (e.g., exempt portion of income, funds in bank accounts, or purchase car with personal injury settlement).

Overpayment recoveries from benefits such as Canada Pension Plan (CPP) or Employment Insurance (EI), Workers' Compensation Board (WCB), Provincial Training Allowance (PTA) are not made through garnishees and are not considered an allowable deduction. Clients are expected to contact the income source to make other recovery arrangements.

### 18.1 Income Exemption

#### 18.1.1 Wages

Income from wages is reduced by the amount of the exemption prior to calculating the budget deficit or surplus.

**Fully employable** clients including dependants applying in their own right are not eligible for an earnings exemption for the first three months. If they were receiving benefits within the previous three months but were not eligible for an earnings exemption, each month or portion thereof is considered one full month on assistance for purposes of determining the earnings exemption.

If they are eligible for the earnings exemption, left assistance and reapplied, they are eligible for the earnings exemption three months from the date of the new application.

**Partially employable or unemployable clients** are eligible for an earnings exemption from the date of eligibility. Unless employed on a full time basis those clients who reside in family shelters and safe houses are not considered employable and are eligible for the wage exemption from the date of admission.

## Calculating the Wage Exemption

The wage exemption is based on family size, disability status, and the amount of income.

### Client without a disability

Families	\$125
Single	\$50 + 25% of the remaining amount = Maximum \$200.00
Childless Couple	\$75 + 25% of the remaining amount = Maximum \$275.00

### Client with a disability

Families	\$200
Single	\$200 + 25% of the next \$500 = Maximum \$325.00
Childless Couple	\$250 + 25% of the next \$700 = Maximum \$425.00

### 18.1.2 Work Assessment

Income received for a work assessment through the Employment Assistance for Persons with Disabilities (EAPD) is considered wages, not a training allowance. Clients are eligible for the wage exemption.

### 18.1.3 Trusteeship Fees, Advocate Fees and Honoraria

Income received from the Ministry for trusteeship fees, advocate fees and honoraria is exempt. The wage exemption is applied to honoraria and related expenses paid by other sources. Honoraria payments are not intended as salaries or as full compensation for lost income; they are meant as token payments to indicate appreciation of public service.

### 18.1.4 Clients who provide level of care services

The first \$330 of the monthly payment from each person is assessed as board and room income (25% of \$330 = \$82.50). Amounts in excess of \$330 are related to level of care services and are not considered income.

### 18.1.5 Exemption for dependant school children

The wages of dependant school children, including a child 18 or over but under 19, are exempt whether they are earned during the school year or summer holidays. For children who have income from farm stock, the earnings are exempt where it is established that the child owns the stock and the income was generated from farm stock owned by the child.

### 18.1.6 Entrepreneurs with a disability

Clients who receive income from enterprises operated out of their home receive an earnings exemption on the net income (amount of income remaining after deducting expenses) when all of the following conditions are met:

- low income;
- operated by the client with a disability; and
- minimal financial investment in the enterprise.

### 18.1.7 Activity Centres and Sheltered Workshops

Any allowance received from activity centres, sheltered workshops, or similar non-profit organizations/agencies for participation in educational, therapeutic or rehabilitative programs is exempt. To be eligible for the full exemption, the individual is paid directly by the non-profit organization/agency; and the rate of pay is less than minimum wage. If these two criteria are not met, the earned income exemption for a client with a disability is provided (see Section 18.1.1)

## 18.2 Cash and Liquid Asset Exemption

The maximum potential cash and liquid asset exemption is established in Regulation 28(2). For other income exemptions provided in addition to the cash and liquid exemption, see Chapters 19 and 20.

The exemption is the amount of the client's actual cash and liquid assets up to the maximum at the time of application. (See 19.2).

Sample:

Family Size	= 3 persons
Maximum potential exemption	= \$3,500
Actual cash and liquid assets	= \$2,500
Actual cash and liquid asset exemption	= \$2,500

A cash and liquid asset exemption is allowed at the time of application. When a client is allowed the maximum exemption at the time of application, uses these assets and later acquires other non-exempt assets no further exemption is allowed.

## 18.3 Other Exemptions

These exemptions are over and above the cash and liquid asset exemption. See end of chapter.

### 18.3.1 Saskatchewan Pension Plan (SPP)

The SPP is not considered a financial resource to clients until age 65. Clients are required to explore other early retirement options (e.g., CPP, early retirement benefits).

Adult clients may contribute up to \$208.33 per month to a maximum of \$2,500 per year of non-exempt wages or other earned income to the SPP. In two-adult families, the maximum contribution is \$416.66 per month (\$5,000 per year) even if only one adult has earnings. Funds withdrawn from the SPP are exempt as long as they are retained for retirement purposes (e.g., placed in another long-term investment).

### 18.3.2 Saskatchewan Assistance Benefits

Savings from assistance benefits for basic maintenance may be exempt within allowable limits. See Regulation 28(2)(p.2).

### 18.3.3 Registered Disability Savings Plan

Funds held in, or money withdrawn from a Registered Disability Savings Plan (RDSP) are exempt. See Regulation 28(2)(y.2)

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
<b>18. Income Exemptions</b>	Casual gifts – client verbal statement Gambling gains, lottery prizes, bingo prizes and other prizes – client verbal statement Sheltered workshops – client verbal statement	Client provides: Wages – pay stubs, statement of earnings Prepaid funeral – statement from funeral director Cash and liquid assets – bank statement, 1002 Compensation for pain and suffering – statement from insurer, Workers' Compensation Board, or Victims of Crime Act administrators Compensation for permanent injury or death benefit – statement from SGI Compensation relating to Human Rights Code – statement from Human Rights Inheritances – copy of will, letter from lawyer Saskatchewan Pension Plans reinvestment – statement from SPP Treaty Land Entitlement or other Indian land claims – confirmation from band Maintenance payments for adult clients with a disability living with parents – copy of divorce decree or order Payments under the Dependents Relief Act – statement from lawyer or order regarding amount Payments from trusts – statement from lawyer or trustee RESP Statement RDSP Statement

### **Exemptions -- no verification or documentation required – Regulation 28 (2)**

All income must be declared at application, when initial payment received while on assistance and at annual review.

- Child benefits, Benefit Adjustment payments, SES payments
- Contributions other than for ordinary maintenance to recipients who require special care
- Earnings of dependant children attending school
- Home in which the person resides (farm)
- Basic stock herd on a farm
- Seed for next year's crop
- Essential equipment to carry on farming or business operations
- Payments made by the ministry, INAC or ICFS agencies on behalf of children
- Contributions to the cost of funerals made by relatives other than the surviving spouse or the parent of a deceased child
- Cash surrender value of insurance
- Assets held on November 30, 1972 by persons who were admitted to a mental health institution or who were residents of Valleyview Centre and have remained residents.
- Scholarships, fellowships and non-government bursaries other than the value of free board and room provided as part of a scholarship, fellowships and non-government bursaries
- Payments of compensation related to a claim with respect to abuse sustained while attending an Indian residential school
- Payments of compensation, other than payments for lost income, that are related to a claim for child abuse
- Payments of compensation - other than payments for rent or a security deposit ordered by Office of Residential Tenancies or court related to a residential tenancy dispute
- Awards for meritorious conduct or service
- Training allowance received from non-profit organizations such as activity centres or sheltered workshops.

**Also see Minister's Orders (next page)**

## Income Exemptions- Regulation 28 (2) (ee)

The following is a summary and is not a legal description of Minister's Orders nor does it include all exemptions of one time payments prior to 2000.

Date	M.O. #	Exemption	Amount
August 30, 2010	45/2010	Financial assistance payments from the Provincial Disaster Assistance Program	
August 30, 2010	42/2010	The portion of maintenance payments for special or extraordinary expenses	
March 17, 2010	18/2010	Income tax refund payments for the 2009 and subsequent taxation years	
February 4, 2010	07/2010	Money issued by a School Board for home schooling	
January 9, 2009	03/2009	Any payments made under the SIP Act	
November 6, 2008	54/2008	Any payments made under the Province of Saskatchewan's Active Family Benefits Act	
October 22, 2008	50/2008	Exempts any income tax refund for the 2008 taxation year and any tax credit received through the Saskatchewan Low-Income Tax Credit program	
May 1, 2008	24/2008	Exempts payments made under the federal government's Working Income Tax Benefit program.	
September 5, 2007	33/2007	Exempts payments of compensation not exceeding \$10,000 in total, received pursuant to the Dow Corning/British Columbia and Other Provinces Breast Implant Litigation Settlement agreement	To a maximum of \$10,000 in total
May 30, 2007	16/2007	Exempt payments made under the Primrose Lake Community Economic Development Agreement to compensate elders and surviving family	To a maximum of \$10,000 per person
April 19, 2007	09/2007	Exempts any rebate payments on Saskatchewan auto insurance premiums from SGI	
March 12, 2007	05/2007	Exempts respite payments received from Community Living Service Delivery	
June 15, 2006	35/2006	Exempts maintenance payments received by a parent for a son or daughter who is an adult and not a dependant, where the payments are passed on to the son or daughter	
October 26, 2005	70/2005	Exempts payments made under the Pre 1986 – Post 1990 Hepatitis C Settlement Agreement June 21, 2001	
Nov 30, 2004	69/2004	Exempts the Crown Utility Bundle rebate from being considered a financial resource	
August, 2004	47/2004	Exempts co-op patronage dividend payments	\$200 per family per year
July 27/2004	45/2004	Exempting payments received relating to settlement of lawsuits resulting from taxation of fuel and tobacco on reserve lands	
January 23, 2003	06/2003	All funds for Individualized Funding Program paid by Health authorities	
June 29, 2000	56/2000	Exempting income received as a result of a one-time payment made under the 1989-1990 Hepatitis C Settlement Agreement	
May 7, 1990	31/90	Contributions to the Saskatchewan Pension Plan made on behalf of assistance recipients, from other exempt resources, or accumulated funds or interest earned prior to application	

**POLICY STATEMENT****SASKATCHEWAN  
ASSISTANCE PROGRAM**

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 29.A &amp; 29.B</b>	<b>Income</b>	<b>CH 19</b>

**Intent**

Financial resources of the client include the income and the assets of all members of the family unit. All income not exempt under Regulations Section 28 or 29 or in Chapters 18, 19 and 20, is deducted when assessing eligibility. Examples include Workers' Compensation benefits, Employment Insurance benefits, training allowances, pensions, and maintenance payments.

**19.1 Income**

Income is:

- recurring funds such as wages, pensions, maintenance payments, annuity payments.
- lump sum and/or retroactive payments such as pensions (Old Age Security (OAS), Canada Pension Plan (CPP), maintenance payments under a separation or divorce order or agreement, donation from a benevolent organization to meet basic needs and gifts over \$200 per year.

**19.2 Income Assessment**

**19.2.1** Income received during the month is included in the budget calculation for the following month. If the income from the previous month exceeds the current month's budget deficit, no assistance is issued. Any remaining surplus is applied to the following month's entitlement. The case may be closed in cases of surplus due to recurring income and no assistance is provided for 60 days. (See Chapter 13.6) (See Chapter 2.5.1 for application.)

**19.2.2** See Chapter 3.3.2 for client consent to contact employer.

**19.2.3** Garnisheed Income - For new clients and those who reapply, assistance may be provided for up to 60 days, excluding the garnisheed amount, to enable clients to take action through the Maintenance Enforcement Office or Queen's Bench to obtain relief from a garnishment order. Assistance beyond 60 days is provided if action has been commenced and/or there are delays beyond the client's control.

**19.2.4** Orderly Payment of Debt obligations are not considered an allowable deduction or expense.

**19.2.5** At application - Where income is expected later in the month and the client is unable to meet immediate needs, assistance is provided to the end of the month. The actual income is deducted in the following month. See Chapter 20.4 for disposal of income.

## **19.3 Self-Employment Income**

### **19.3.1 Small Business**

Families with income over \$125/month must apply for the Saskatchewan Employment Supplement.

#### **Definition**

Small business is defined as an operation where products are sold or purchased or inventory is maintained. Included are commissioned sales agents (e.g., vacuum cleaner salesmen), tradesmen, hairdressers, and persons operating a practice (e.g., reflexologists, masseuses). Also included are those who are owner/operators of businesses such as taxi or tow truck operators.

Income generated from the enterprise is expected to generate a viable income level which would make the client self sufficient within a 6 month time period. This period may be extended by a further 6 months. All cases are approved by the supervisor.

Entrepreneurs with a disability, as defined in Chapter 18.1.6 are not considered a small business.

#### **Requirements**

Assistance is not intended to support self-employed persons. Those who are self-employed may receive benefits to meet basic living costs. They must have a business plan and establish a record of income and expenses within 30 days. Assistance cannot be issued for operating costs or to add to the value of the business.

#### **Income**

Net income from self-employment is available for basic living needs rather than being reinvested in the operation. Net income is determined by calculating the gross income and subtracting paid allowable expenses. See Appendix E for allowable expenses. The Monthly Income and Expense Report is used to determine the income.

Self-employed clients claim expenses and are not eligible for an earnings exemption.

### **19.3.2 Farming (any holding which generates income)**

Families with income over \$125/month must apply for the Saskatchewan Employment Supplement.

#### **Persons who own and/or operate farms**

Benefits cannot be issued for operating costs or to add to the value of the farm. Net income from the previous year's operation divided by 12 months is used to determine current entitlement. A reconciliation of actual income and expenses is completed at least every 12 months.

If a client is not eligible using the net income from the preceding year, or the income has dropped significantly, and there is not sufficient income available to meet current living expenses eligibility is assessed using current income in accordance with Regulation Section 14 (2) (cash flow). For cash flow assessment, see Appendix E.

#### **Farm operators who are not owners**

Farm operators who rent under a crop share or other contractual arrangement with the landowner may be considered employable. Depending on the amount of farm work required

they are subject to the same expectations as other employable clients and may be required to seek other employment.

### **Farm owners who do not operate the farm**

Owners are not considered farmers if they do not reside on or operate the farm. See Regulation 29 A(2) for assessment of income. They are expected to dispose of their property including the home quarter. This may not be possible if there is joint ownership. See Regulation 29(B)2. See Chapter 20.5.

For information outlining income calculation and completion of the Farm Income Report see Appendix D.

## **19.4 Income from Board and Room and Suite**

Income is charged as follows for clients who have rental income:

### **Boarders/roomers**

Clients are not charged with board and room income from their sons/daughters who are participating in education programs. See Regulation 29 A (3.1)

Where board and room income is received from a client, it is assessed based on the landlord's declaration of the amount and date paid for board and room not the amount of assistance issued.

## **19.5 Income from Insurance Settlements**

**Personal Loss/Injury Settlements** - (e.g., compensation for pain, injury, permanent impairment and out of pocket expenses such as homemaking or living assistance resulting from the loss or injury.) Lump sum payments made by insurance companies, Workers' Compensation Board and Crimes Compensation Board are exempt up to \$10,000 per claim per person. All other payments are assessed as income unless exempt under Regulation 28(2) ( bb),(cc).

**Lost income** - There is no income exemption for insurance payments to replace lost income.

**Fire, theft or property loss settlements** - Payments for loss of essential item(s) are not assessed as income if the total payment is used to replace or repair the lost item(s) within 4 months from the date the payment is received. Any money remaining from the settlement after the 4 month period is assessed as income.

**Life insurance settlements** - All payments are considered income. No exemption is available.

## **19.6 Interest Income**

Interest income in excess of \$100/year received from bank accounts, bonds, saving certificates or any interest bearing financial asset is considered a financial resource.

## **19.7 Income Tax Refunds**

Any income tax refund received for the 2008 and subsequent taxation years and any tax credit received through the Saskatchewan Low-Income Tax Credit program are exempt.

Income tax refunds received for taxation years prior to 2008 are not exempt. The Goods and Tax Services Rebate (GST) is exempt. The client is expected to provide documentation regarding which portion of the refund is the GST rebate.

Income is assessed on the full amount of the tax refund rather than the discounted amount on refunds received through tax preparation/discounting agencies. If the refund due was recovered from the client by set-off or other means with respect to an amount owed by the person to a government, no income is assessed.

### **19.8 Assessment of Direct Shelter Payments**

When a respondent makes shelter payments directly to a financial institution through a separation agreement, court order, divorce decree, or private agreement no income is assessed.

- If the direct payment is greater than the shelter allowance permitted for the case, no shelter need is included in the benefit calculation and no income is assessed.
- If the direct payment is less than the approved shelter rate the difference may be provided.
- When a respondent makes direct payments to a landlord, the client is referred to Legal Aid to obtain an order. The above rules for assessing the income apply.

### **19.9 Enforcement of Maintenance Orders**

When maintenance orders are registered with the Maintenance Enforcement Office and the Assignment of Rights has been completed, maintenance funds are forwarded to the General Revenue Fund. Assistance benefits are provided as if the income was not received. See Chapter 3.5.

### **19.10 Income from Student Loans, Government Bursaries and PTA**

Full-time students who receive income from student loans or bursaries are advised the funds must be used to meet expenses including tuition, books, living requirements and child care. See Chapter 19.2 for income assessment. The income is expected to meet the client's needs for the number of weeks/months for which the loan was intended.

Full or part-time students who receive PTA are expected to use this income to meet basic living requirements and child care needs. For those with approved case plans, assistance may be provided to supplement the PTA. Assistance is not provided when PTA is denied due to an outstanding overpayment.

For university students, assistance is provided to the date classes commence.

Assistance may continue until the second loan payment is received for students enrolled in private vocational schools when all of the following conditions are met:

- the person is already in receipt of assistance; and
- a case plan is approved prior to commencement of the training; and
- tuition accounts for the full amount of the first student loan payment; and
- the client is unsuccessful in obtaining a portion of the loan from the school for living expenses; and
- the client has no other resources to meet his/her living expenses until the next loan payment is received.

### **19.11 Rental Reduction in Exchange for Carrying Out Caretaking Duties**

The shelter need is the actual amount of rent charged. No income is reported or assessed since no payments are received. See Chapter 15.4.7

### **19.12 Retroactive Payments**

Payments from such sources as OAS/GIS, War Veterans Allowances, Workers' Compensation, Canada Pension, or Employment Insurance are considered income for the following month. No overpayment is assessed for the period the retroactive benefit represents. The client is advised in writing of the time period the retroactive payment is expected to meet basic living requirements. See Chapter 19.2

### **19.13 Clients Who Live in Approved Private Service Homes and Group Homes Licensed By Community Living Service Delivery (CLSD)**

Any non-exempt income up to \$410 is paid by the client to the approved private service home or group home. The client/trustee is advised in writing regarding the assessment and the amount the client must pay to the home. If the client is no longer eligible, the health coverage continues as a Health Services case. See Chapter 4.3

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
19. Income	Client verbal statement for: Board and room/suite or room rental Cash payments of maintenance or support, where there is no order or agreement Casual earnings (e.g. lawn mowing or other periodic work)	Client provides: Wages -- pay stubs, bank deposit statement (will not indicate which deductions are made) or note from employer Ongoing income -- cheque stubs, direct deposit advice (will not indicate which deductions are made), bank statement or written statement CPP/OAS/GIS at application, annual review and as changes occur EI -- stubs or EI search or printout Self-employed -- business plan and 1214 within 30 days House rental -- copy of rent receipt, mortgage, insurance, tax statements Insurance settlements -- statement from payer Interest -- bank statement or T5 Maintenance -- separation agreement, divorce decree, voluntary agreement Benevolent organizations -- statement Trusts -- statement from trustee (at least once annually) Income Tax Refunds -- Assessment Notice from Canada Revenue Agency Direct Mortgage Payments -- copy of agreement or divorce decree Student Loans/Bursaries -- client verbal statement and monthly match Caretaking -- rental agreement Retroactive payments -- cheque stub Disposal -- pay stub, bank deposit statement for recurring income (except children's benefits) Trusts administered by Public Trustee— statement from Public Trustee at time of application and annual review.

**Exemptions -- no verification or documentation required** Any income from non-dependant children who are attending university, technical or vocational courses including high school and are not eligible for SAP – Regulation 29 A (3.1)

<b>Delegation of Authority</b> The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager		
Approval Items	Reference	Approval Required
Assistance to self-employed person <ul style="list-style-type: none"> <li>• Up to 6 months</li> <li>• Over 6 months</li> </ul>	19.3.1	S S

POLICY STATEMENT		SASKATCHEWAN ASSISTANCE PROGRAM
Legislative Authority	Subject:	
Saskatchewan Assistance Regulations Section 29.B & 29.C & 29D	Assets & Disposal of Assets, Period of Self Support	CH 20

## Intent

All assets are considered a resource unless specifically exempted.

## Policy

There are three types of assets:

**Liquid Assets** - cash on hand, funds in bank accounts, stocks, bonds or other investments.

**Real Assets** - property (land, houses).

**Personal Assets** - personal property (vehicles, jewelry and other moveable property)

The equity value of real and personal assets is the amount of the asset owned after deducting the amount owing from the total value.

The value of liquid and real assets must be documented.

### 20.1 Liquid Assets

A period of up to ninety days to convert non-exempt liquid assets into cash may be permitted with the supervisor's approval.

A liquid asset may be waived as a resource for sound economic reasons with the unit administrator's approval.

#### 20.1.1 Investments

Clients are expected to redeem or sell investments such as Guaranteed Investment Certificates (GIC), bonds, mutual funds, or shares even if a loss is incurred. The value of the investments at redemption or sale is verified.

Registered Retirement Plans cannot be used as security for loans. Company and government administered plans can be withdrawn at the age defined by the plan, some as early as age 50 if the benefits have been vested (locked in). Vesting usually occurs after two years of employment. Other plans are not locked in and can be collapsed at the client's request. The financial institution is required to provide the funds to those who are without other resources.

For Saskatchewan Pension Plan see Chapter 18.3.

Registered Education Savings Plans and Registered Disability Savings Plans are exempt.

### **20.1.2 Bank or Credit Union Account**

Documentation of liquid assets is required at application in order to determine the liquid asset exemption. See Chapter 18.2. Financial Transactions - The client is required to declare all financial transactions over \$1500 for the two years prior to application and while on assistance.

The client is required to provide financial records considered necessary to confirm and/or clarify financial transactions over \$1500. 1002 may be used to confirm information if other sources are not available. For payment of bank search charges see Chapter 16.23.

### **20.1.3 Insurance**

The cash surrender value and dividends earned, but not paid are exempt. Benefits paid through a life insurance policy are considered income.

### **20.1.4 Inheritances**

A lump sum or monthly amounts up to the exemption amount for the family size at the time the inheritance is received are permitted. There is a separate exemption for inheritances. See Regulation 28(2) (cc.1). Any amount remaining after the exemption is not added to liquid asset exemption and is considered available to meet basic needs.

### **20.1.5 Mortgages or Agreements for Sale**

Clients who receive payments for mortgages or agreements for sale on property in which they are not residents are expected to realize the balance owing through sale or borrowing within 90 days. Evidence from a source such as a bank manager, a mortgage broker, or a real estate agent is produced if they are unable to dispose of the asset.

### **20.1.6 Money held in Trust**

A trust fund refers to funds belonging to the trust. A trust is an obligation binding trustees to deal with property (which can be liquid, real, personal) over which they have control for the benefit of others (which may include the trustee and other beneficiaries). The client has no control over the trust.

Trusts are held by some other person, agency or community group on behalf of the client, his/her spouse, or dependant children.

A copy of the will or documentation from the trustee is provided to confirm the trust and its conditions.

Trustees do not have ownership of trust funds in terms of being able to deal with those funds as if they were their own assets, but are bound by the conditions of the trust and the law on trusts to deal with trust property only in ways which benefit the beneficiaries. These are not the personal assets of the trustee.

Trust funds that are not available for distribution or funds provided for items not covered by assistance are not assessed in calculating entitlement. Where payments are made from any trust fund for needs that assistance would cover, the payment is assessed as income.

Discretionary Trusts - A trust established as a result of a will where an individual named in the will as a trustee has complete control over the disposition of the funds. These are usually set up by the family for a family member with a disability. Funds released for the client's basic needs are income. A copy of the will should be sent to Central Office for review.

Trusts established pursuant to *The Dependant's Relief Act* - Under the Act an application may be made to the court, challenging a will where inadequate provisions have been made for the support of a client. Following a review the court may negate the terms of the will and

establish a special trust for the client up to a maximum of \$100,000. Once established the trust can be used at the discretion of the appointed trustee to enhance the well-being of the client.

For the Public Guardian and Trustee see Chapter 10.2.

## **20.2 Real Assets**

**Retention of Property** - The quarter section of farmland where the home is situated and the home in which the client resides is exempt.

Clients have 90 days to dispose of non-exempt property.

**House rental** - Mortgage payments and reasonable expenses are deducted from the tenant's monthly payment. The remaining amount is considered income.

A mortgage payment on a single dwelling is only allowed as an expense for up to 90 days to provide an opportunity to realize on the asset. Allowing the mortgage payment may prevent foreclosure and protect the equity in the asset.

## **20.3 Personal Assets**

One vehicle of reasonable value may be retained. The client declares the equity value of the vehicle.

Items of personal property with an estimated market value of \$10,000 or more are considered a resource. Where the market value is disputed, the client is asked to provide documentation from 2 or 3 appropriate sources as to the value. The unit administrator may approve the retention of personal assets with a market value over \$10,000 if there are sound social or economic reasons.

Personal assets include items such as vehicles, boat, motor home, recreational vehicle, jewelry, computer, coin collection, hobby equipment and tools not required for employment.

## **20.4 Disposal of Income**

The following factors are considered: amount of income, date received, sources, expenditures.

### **Prior to Application**

Any income received by the client in the month prior to application is considered a resource unless exceptional circumstances exist. See Chapter 9.2.1

Recurring income, except for those listed at the end of Chapter 18, received within 30 days prior to application is verified. Lump sum and/or other retroactive payments received within two years prior to application are reviewed.

The cash and liquid asset exemption including cash on hand is allowed (see Chapter 18.2). Cash on hand is the amount of cash the client holds outside of a financial institution. Appropriate expenditures are determined based on the client's usual living expenses at the time the income was received.

### **After Application** (lump sum income)

Disposal of money used to purchase items which would have been provided through assistance is approved. If the expenditures caused a client to qualify for assistance, money must be recovered when possible. Any remaining surplus income is applied to the following month's entitlement and the benefit is reduced by the amount of the surplus.

If the surplus is greater than the following month's entitlement, there is no further eligibility. Clients are advised in writing as to the length of time the income is to meet their needs as well as an explanation regarding the assessment. Should the client apply for assistance prior to the specified time period the disposal of income is reviewed. Exemptions are considered only if the client has the funds when reapplying.

*A deferral of the assessment of income from inheritances not exceeding \$200,000 or funds from other sources (e.g., gifts) not exceeding \$100,000 may be provided for up to six months from the time the funds are received to allow time for the funds to be contributed to the recipient's Registered Disability Savings Plan (RDSP) account. In exceptional circumstances, the six month time period for making a contribution to the recipient's RDSP may be extended with the unit administrator's approval. See Regulations 28(2)(y.2), 29A (7)(b) and 29B(1).*

## **20.5 Disposal of Assets**

The following factors are considered: amount of asset, date received, sources, expenditures.

**Prior to Application** - Clients provide information regarding any assets they owned or in which they had an interest during the two year period prior to application. The details concerning use of assets and any transfer are reviewed including whether the payment received was adequate in relation to the market value minus any encumbrances as well as the disposition of any proceeds.

### **After Application**

- Using proceeds from the disposal of an asset to purchase items which would have been provided through assistance is approved.
- When a portion of the lump sum payment is exempt, only the non-exempt portion of the lump sum is used in calculating the time the client should be self supporting. The exempt portion of the lump sum payment remains exempt if the client still has the exempt funds at reapplication.
- If there is no further eligibility, clients are advised in writing as to the length of time the income is to meet their needs as well as an explanation regarding the assessment. Should the client apply for assistance prior to the specified time period, the disposal of assets is reviewed. In exceptional circumstances, where health and safety are threatened, the unit administrator may approve the asset disposal.
- The cash and liquid asset exemption is considered only if the client has the funds when reapplying.
- For determining the rate at which the remaining asset is to be used, see Regulation 29 D (1) and 19.2.

Only the proceeds from the sale of the client's current home or the proceeds from a matrimonial settlement can be used to purchase a new home. If not used for this purpose the proceeds are assessed as income. With approval of the unit administrator, proceeds from

the sale of the home may be used to complete necessary home repairs to the new home within 12 months.

## 20.6 Calculating Period of Self Support

If the client has not received assistance for more than 30 days and a new application is completed, the cash and liquid asset exemption is permitted. See Chapter 18.2. The length of time the client should be self-supporting is calculated as follows:

115% of the monthly basic and special needs to which the client would be eligible with no income,  
 PLUS costs related to medical requirements (e.g., drugs),  
 MINUS monthly income (other than lump sum amount)  
 DIVIDED into the lump sum amount to determine the number of self-supporting months (rounded down to a whole month)

The earned income exemption is not used in calculating the period of self support.

Example:

### Single unemployable client living in Meadow Lake

Shelter	\$300.00		
Adult Allowance	\$255.00		
Disabled allowance	\$50.00		
Northern Food Allowance	\$50.00		
Utilities	\$230.00		
	<hr/>		
	\$885.00	x	115%
			\$1,017.75
MINUS Income			\$125.00
			<hr/>
		(Monthly Need)	\$892.75
			<hr/>
Lump Sum Payment			\$2,500.00
Divided by Monthly Need			\$892.75
			<hr/>
Number of months calculation			2.8
Estimated Months of Self Support (rounded down)			2

## 20.7 Change of Residence for Care

A change in residence for care refers to a situation where one spouse resides in a residential care facility. If both spouses apply for assistance separately, each application is assessed separately and the appropriate cash and liquid asset exemption is applied. One half of jointly held assets are considered an available resource.

The home in which the applicant/spouse resides is an exempt asset.

Income received by the applicant is assessed as a resource. If it appears the spouse has sufficient resources to contribute to the applicant's needs, the client is referred to Legal Aid for consideration of support payments.

## SAP Program Verification / Documentation Requirements

*This appendix is intended as a summary only. Refer to Regulations and policy.*

Policy Reference	Verification Client's verbal statement should be noted in a chronological recording.	Documentation
20. Assets	Personal -- client verbal statement. If in dispute, client to provide verification of value from 2 - 3 sources	<p>Cash and liquid assets (e.g., funds in bank accounts, stocks, bonds, mutual funds, shares, RRSPs) -- statement from bank, broker, investment or financial company or passbook. (No ATM slips unless information on ATM slip matches other supporting documents e.g. direct deposit form). Any difference between the amount declared at application and the documented amount received later is noted in a chronological recording.</p> <ul style="list-style-type: none"> <li>- Declared financial transactions over \$1,500 – bank statement or passbook, or 1002</li> <li>- Mortgages or agreements for sale, title search</li> <li>- Securities, shares – statement from financial agent</li> <li>- Real -- e-mail to Central Office re: title search</li> <li>- Disposal -- receipts, bills of sale, client statement, or other documentation</li> <li>- Trusts—Copy of will or documentation from trustee</li> <li>- Trusts administered by Public Trustee— statement from Public Trustee at time of application and annual review</li> </ul>

### Delegation of Authority

The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager

Approval Items	Reference	Approval Required
Waiver of liquid assets	20.1	M
90 days to convert liquid asset	20.1	S
Client to sell home which exceeds needs	Reg. 29 B(2)(iii)	M
Retain personal assets > \$10,000	Reg. 29B(3)	M
<i>Deferral of the assessment of income intended for an RDSP in exceptional circumstances</i>	<i>Reg. 29B(1)</i>	<i>M</i>

## POLICY STATEMENT

## SASKATCHEWAN ASSISTANCE PROGRAM

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 41</b>	<b>Regional Appeal Committees</b>	<b>CH 21</b>

### Intent

Clients have the right to appeal decisions made by Ministry employees.

### Policy and Procedures

Clients who are dissatisfied with the decision about their assistance have the right to appeal to the regional appeal committee. The appeal must be made to and received by the unit administrator in writing within 30 calendar days of the decision letter. The appeal is registered.

Calendar days are calculated as follows:

- In the calculation of the appeal period the first day shall be excluded and the last day shall be included.
- If the appeal period expires on a holiday, the time is extended to the next day that is not a holiday.
- If the appeal period expires on a day when a business office is not open, the time is extended to the next day on which the office is open.

If the client appeals after 30 days the request is filed with the committee chairperson who advises the client that a hearing cannot proceed because the time period has lapsed.

If the client appeals and circumstances have not changed from the previous appeal, the request is filed with the committee chairperson with a brief report from the ministry. The committee chairperson advises the client whether a hearing will be provided.

A trustee or group home operator may make an appeal on behalf of the client if the client wishes. A trustee or group home operator may not appeal an assessment of an overpayment debt for which they have been deemed responsible.

For security deposit appeals, see Chapter 9.3.

When clients request assistance prior to the hearing, minimal assistance may be provided until the appeal is concluded. See Chapter 6.

Upon receipt of the appeal the unit administrator reviews the case to determine if an error has been made. The unit administrator ensures that every reasonable effort is made to contact the client to review the decision.

- Appropriate corrective action is taken if an error was made. Clients are advised in writing of any adjustment. If the client is satisfied with the adjustment, the appeal may be withdrawn in writing. A verbal withdrawal may be accepted with supervisor's approval.
- If no error was made the unit administrator must schedule a hearing within 30 days of the receipt of the appeal and advise the client/representative in writing regarding date,

time and location of the hearing. The notification should contain the name and address of possible advocates.

The following format is used for the ministry's report to the appeal committee:

- Date of Appeal
- Name
- Address
- Birth Date
- Marital Status
- Ages of dependants
- Background (related to issue being appealed)
- Education, Employment History, Vocational Goals (if relevant)
- Present Situation
- Applicable Act, Regulation and Policy references
- Reason for Appeal
- Reason for Ministry's Decision
- Budget - needs, income, entitlement

The Ministry report should only reflect information which bears directly on the issue(s) under appeal. If information or documents from a named source are part of the report his or her consent is obtained. The appeal report is signed by the worker and supervisor. A copy of the report is provided to the client and appeal committee three working days prior to the hearing.

Hearings are held 'in camera'. This means the hearings are private, not public.

Clients may call witnesses and present evidence.

If clients cannot attend the hearing they may have someone attend on their behalf.

Clients may be represented by an advocate. See Chapter 16.21.

Ministry representatives including the worker most familiar with the client attend the hearing.

The appeal committee may wish to consult with ministry officials on technical matters.

A request for adjournment is provided to the chairperson. The hearing may be adjourned at the discretion of the committee. Appeals should be resolved as quickly as possible.

Clerical services are provided by the ministry.

Clients and the unit administrator have the right to appeal the decision of the Regional Appeal Committee to the Social Services Appeal Board. (See Chapter 22) The appeal must be made in writing within 20 calendar days from the date of the decision letter.

Decisions made by the Regional Appeal Committee are binding unless overturned by the Social Services Appeal Board.

<b>Delegation of Authority</b>		
The supervisor or Income Assistance Service Delivery manager writes a chronological recording indicating approval of the request. S = Supervisor, M = IASD Manager		
<b>Approval Items</b>	<b>Reference</b>	<b>Approval Required</b>
Verbal withdrawal of appeal	20.1	S

## POLICY STATEMENT

## SASKATCHEWAN ASSISTANCE PROGRAM

<b>Legislative Authority</b>	<b>Subject:</b>	
<b>Saskatchewan Assistance Regulations Section 43</b>	<b>Social Services Appeal Board</b>	<b>CH 22</b>

### Intent

Clients and the unit administrator have the right to appeal decisions made by Regional Appeal Committees.

### Policy

Clients or the unit administrator who are dissatisfied with a decision of the Regional Appeal Committee have the right to appeal to the Social Services Appeal Board.

The appeal must be received within 20 calendar days from the date the regional appeal committee's decision is given in writing. (For calendar days see Chapter 21). If the client or unit administrator appeals over 20 days the request is filed with the board chairperson who advises the appellant that a hearing cannot proceed because the time period has lapsed.

If the circumstances changed since the regional appeal hearing, the client or the unit administrator may wish to withdraw the appeal. This withdrawal must be done in writing to the board chairperson.

Client appeals are made in writing to the unit administrator. Clients may use form 1067. Unit administrator appeals are made in writing to the Social Services Appeal Board. The unit administrator forwards a form 1068 to the secretary of the Social Services Appeal Board. Appeals for Northeast, Northwest and Centre Regions are heard in Saskatoon. Those for Southeast and Southwest Regions are heard in Regina.

When clients request assistance prior to the hearing, minimal assistance may be provided until the appeal is concluded. See Chapter 6.

The following material is to accompany the Request for Appeal:

- The letter sent to the client informing of the reason for refusal and right to appeal.
- The client's letter or form 1067 requesting a regional appeal hearing.
- The Ministry's report prepared for the regional appeal hearing and documents presented to the regional appeal committee.
- The ministry prepares the one page Summary of the Regional Appeal Hearing form 4005 using the following headings:  
Regional Appeal Committee Summary  
Location:  
Date of Hearing:  
Client Information: Name, Address, City, Postal Code  
Present: Chair, Members, Client, Advocate, Recording Secretary, Staff  
Reason for Appeal: same as reason in the ministry's report to the appeal committee and citing relevant regulations and/or policy sections

Ministry's Position: based on 'Reason for Ministry's Decision' in the ministry's report to the appeal committee

Client's Position: summary of why the client disagrees with the reason for the Ministry's decision

Committee Decision: verbatim decision from committee's decision letter to the client

- The letter to the client conveying the decision of the regional appeal committee.
- The client's letter requesting a hearing before the Social Services Appeal Board.
- Any other documents or information submitted by the client and/or Ministry representatives.

The above material is provided to the Social Services Appeal Board members three calendar days prior to the hearing.

When the Board receives a Request for an Appeal form an appeal hearing is scheduled within 30 calendar days from the date it is received by the unit administrator.

A request for adjournment is provided to the chairperson. The hearing may be adjourned at the discretion of the board. Appeals should be resolved as quickly as possible.

The Social Services Appeal Board notifies the client and the Ministry of the time, date and place of the hearing.

Form 4005 is made available to the client and advocate three calendar days prior to the hearing.

If clients cannot attend the hearing someone may attend on their behalf.

Clients may be represented by an advocate. (See Chapter 16.21)

Ministry representatives, including the worker most familiar with the client, attend hearings.

Decisions made by the Social Services Appeal Board are final unless subsequently overturned by judicial review on matters of law.

## **Appendix A Case Planning**

Assistance benefits are provided on the basis of need. Clients are expected to pursue reasonable opportunities, within their capabilities, to become independent.

Workers participate with clients to develop realistic plans to establish independence, if feasible. The plans take into account clients' circumstances, strengths and any barriers to employment.

### **Client participation in case plans**

Planning is done collaboratively with clients and others who provide service (e.g., CES, Mental Health, trustees, Child and Family Services). Workers discuss interests and assist the client with setting goals to achieve maximum self-sufficiency.

Case planning is a continuous process. As clients progress through their plans, or as circumstances change, the plans may be reviewed and changes made as appropriate. Plans may be modified at any time.

### **Referral to appropriate resources**

Clients are referred to available programs and services consistent with their case plan.

### **Eligibility review**

Whenever the client proposes reasonable alternative activities leading to self-sufficiency, financial eligibility is reviewed.

When a client does not participate in a mutually agreed on case plan activity the worker reviews the reason with the client. If the client refuses to pursue reasonable opportunities for self-sufficiency and/or does not follow through with requests to develop alternative plans for self-sufficiency, benefits may be suspended. Family considerations such as impact on children may be taken into account in deciding whether benefits are to be suspended. The client is advised of the decision in writing and of his/her right to appeal the decision.

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## **Appendix D**

### **Farm Income**

See Chapter 19.3.2

#### **INFORMATION AND FINANCIAL RESOURCES**

The following resources are available to assist the client:

- Ministry of Social Services, Saskatchewan Employment Supplement Phone #1-888-488-6385, Regina 787-4723.
- Ministry of Agriculture and Food (Ag. Rep) - productivity of land, estimate of the amount of Wheat Board payments, information on specialty crops (bees, elk, rabbits), management of farm operation, stabilization programs, marketing boards.
- Agricultural Credit Corporation - verification of loans for all farm programs, foreclosure information.
- Farm Credit Corporation - mortgages on land.
- Saskatchewan Crop Insurance - productivity of land, whether insurance is held, whether insurance is assigned to creditors, amount of insurance payments.
- Saskatchewan Water Corporation - provides grants for wells.

#### **Verification of Information**

In all cases the client must provide the latest tax statement filed with Canada Customs and Revenue Agency. Other sources could include:

- farm account record
- green slips - elevator sales receipts
- permit book - includes information regarding land description, number of acres, whether in stabilization program, amount of grain sold in crop year (August 1 - July 31), ownership of land, if renting provides name of owner, amount of any advances.
- city, town or municipal office - for property and building ownership
- Land Titles - legal description of property, purchase price, ownership, caveats and liens. Also request the General Registration Certificate for information pertaining to writs of execution and maintenance orders.

#### **COMPLETION OF FARM INCOME REPORT**

##### **1. Definitions and Instructions**

The following headings are on the Farm Income Report:

##### **Total acreage is made up of:**

- Seeded acreage (wheat, oats, barley, rye, canola, etc.)
- Summer fallow
- Forage
- New breaking
- Uncultivated land and natural pasture.

##### **Bushels Harvested:**

Acres seeded and bushels harvested must be shown. Compare this with the average yield in the district available from the agriculture representative. If there is a considerable discrepancy, an explanation for the low yield should be given. Grade of grain harvested should also be shown.

##### **Unharvested Grain:**

Estimate 2/3 of anticipated fall yield with a 2 grade drop in quality.

### **Crop Held for Seed**

Number of bushels held must be related to the number of acres in summer fallow shown on the 1212 together with what the farmer expects to seed next year.

Uncleaned rates:

Wheat	- 2 bushels
Oats and barley	- 3 bushels
Canola	- 10 pounds
Rye	- 2 bushels
Flax	- 1 bushel

### **Crop Held for Feed**

This should be related to the number of animals fed. The value of livestock sold should practically double the value of feed held and/or bought.

### **Your Share**

This is the amount remaining after deductions for feed and seed. Where property is rented, the landlord's share is 1/3 with the renter usually getting 2/3 of the total harvested.

### **Price per Bushel**

This is the amount received at the elevator. Due to freight rate, prices vary from one region to another. For canola, flax, oats, and rye, where prices are not controlled by the Wheat Board, these prices vary from day to day.

### **Income**

Total income derived from 'your share' multiplied by the price per bushel.

### **Livestock**

A basic herd is considered to be the breeding stock held at the date of application plus female stock held back for replacement.

The natural increase of the basic herd is considered a resource for direct consumption or sale. Natural increase is the livestock that will reach marketable age within the year. Consider 75% of calf survival rate (3 calves weaned from 4 cows). The purchase price for replacing one of basic herd yearly is allowed as a farm expense but the animal sold and to be replaced has to be accounted for in livestock sales. All butchered livestock is considered income except what is used for reasonable consumption by the family unit.

Replacement of the basic herd over time, from heifers of desirable quality should be allowed through purchase and/or allowing the farmer to keep one of natural increase for replacement. The average productive life of a cow is 10 calves or 10 years. Therefore the rate of replacement of the basic herd should generally be based on 1/10th of the herd being replaced annually.

In the case of poultry farming the purchase of poultry is allowed in order to maintain the flock the farmer had at the time of application. The farmer is not permitted to deduct purchases made to expand his business opportunities as an expense.

When completing the report for the farm year complete the livestock section for actual cattle held, increased and sold during the previous calendar year. Use verified totals for income derived.

If the owner disposed of the entire herd during the previous year the funds realized are considered income.

## **Produce Sold**

Milk, cream, meat, eggs, vegetables, or other produce marketed have to be shown in this area as farm income. Ensure subsidy payments are verified.

## **Other Farm Income**

Farmers obtain verification of crop and hail insurance, rebates and Wheat Board payments. There are also fuel rebate programs. If the farmer belongs to a Farm Income Stabilization Program, verification is obtained regarding contributions and withdrawals. Contributions are not considered an expense, withdrawals are considered income.

Some farmers trade their work for the other goods and services (e.g., feed, meat, milk, etc.). It is mandatory that a dollar value be placed on goods received and included as farm income.

Employment off the farm is not included in the farm income calculation but is considered as income in the month received as with any employed person.

## **2. Determination of net Farm Income**

- Net income is determined by calculating the gross income and subtracting from it the allowable expenses incurred to produce the gross income. (e.g., gross income from the calendar year - (minus) expenses incurred in the calendar year divided by 12 months = estimate of monthly net income for the previous calendar year).
- Advances are not considered income or an expense since the source of income is the value of all grain produced.

The Farm Income Report consists of two types of information, gross income and expenses - (See 3.)

Gross income from:

- the previous year's harvest including grain still held for sale.
- livestock sales during the previous year.
- other produce (cream, milk, eggs) sales during the previous year.
- Wheat Board, crop insurance, farm subsidy and any other farming-related payments received during the previous year.
- GST rebate (farm)

For cash flow method, see E.

Account for total acreage of farm land. A reconciliation using receipts for expenses and income is completed at the end of 12 months. (See Appendix D for income reconciliation.)

## **Where the client is operator**

### **Grain**

- Gross income from grain is calculated from the crop harvested in the previous year even though some or all of the grain may be sold during the current year.
- To determine grain available for sale when grain from the previous harvest has not yet been sold, deduct the number of bushels required for seed or feed from the number of bushels harvested.
- To estimate the income from the grain available for sale multiply the amount of grain available by the initial price paid for the appropriate grade.
- If the client owns land and rents on a crop share basis, it is necessary to show rented land on a separate Farm Income Report form 1212.
- When completing the farm income report, both the current permit book and the previous year's permit book are used. The previous book shows the description of land operated and indicates

acres shown and in what grain. If the operator is also involved in a crop share rental arrangement the final Wheat Board payment stub is required to determine the grain sold in the previous year.

### **Livestock**

To calculate gross income from livestock, determine the number of livestock sold during the previous calendar year and use actual receipts from those sales.

### **Where the client owns farmland but is not the operator**

If the client owns land and is renting to someone else, a crop report can be obtained from the operator. In order to verify previous year's report, use the carbon copy of grain tickets issued at the elevator. It is also possible to obtain verification from Wheat Board with the client's consent.

Where farmland is to be sold or used as security for borrowing calculate income on the basis of the rental agreement (usually one-third of the crop to the owner) in the interim.

In farm rentals (farm owned and rented out) allow taxes, mortgage interest on land and fire and hail insurance as expenses unless the rental agreement obligates the owner to assume other expenses (e.g., chemicals, fertilizers) if part of the rental agreement.

### **Cash rental**

For those farmers who reside on the home quarter but are not actual producers, it may be in their best interests to rent their farm on a cash basis rather than on a crop share. The actual rental rate is determined by productivity of the land on a per acre basis. Adequate remuneration should be received. The market value can be obtained by consulting municipality officials who are aware of rent values in their area.

## **3. Expenses - incurred to produce the farm income.**

### **Expenses**

When the client is the operator, calculate allowable expenses incurred in the production of income and actually paid for during the previous year.

### **Allowable expenses are as follows: (Verified by copies of paid bills)**

- Accounting/legal fees - accounting fees for income tax returns done by qualified accountants and necessary legal work relative to the farming operation.
- Bank charges.
- Breeding fees.
- Chemicals - pertains to herbicide and insecticides used in current year. Use actual, but costs must not exceed Ministry of Agriculture averages by more than 10%.
- Custom work - some operators do not own combines or other equipment and have this done on a custom basis. The cost of fuel and repairs would be reduced if certain operations are performed by someone else and paid on a per acre basis. Use actual, but costs must not exceed Ministry of Agriculture averages by more than 10%.
- Feed supplements (vitamins, minerals, etc.)
- Feed purchased.
- Fertilizer - pertains to fertilizer used in producing the crop. In cases where fall application is made, this expenditure should be included in next year's expenses.
- Fire insurance - premium is allowed as an expense. Issue as a need (85% of the cost of the premium) if net farm income does not cover the cost.
- Fuel/repairs for the machinery and truck - include all fuel (gas and diesel) used in producing the crop. Costs must not exceed Ministry of Agriculture averages by more than 10%.

- GST on allowable expenses.
- Insurance (crop, hail) - premiums paid for crop insurance. In certain instances, these are deducted from claim. If this is done the payment stub will indicate so. Use of crop insurance should be encouraged.
- Land lease fees and arrears paid on farm property not previously deducted.
- Mandatory contribution for farmer and employees (other than spouse and dependants) CPP, EI, etc.
- Mortgage interest - only mortgages for land owned at the time of application.
- Pasture fees - receipts can be obtained from community pastures or co-operative pastures.
- Repairs to buildings - only repairs to buildings other than farm home (barns sheds, granaries and fencing) may be allowed
- Registration/licensing of farm truck.
- Sales commissions.
- Seed cleaning.
- Seed/feed purchases - certified or registered seed is permitted. If grain was held for seed/feed in the last report this expenditure should be queried.
- Small tools and hardware - allow items of \$200 each or less.
- Taxes - taxes and tax arrears paid on farm property not previously deducted. For taxes on the residential portion of the home quarter see Chapter 15.4.5.
- Twine - actual cost.
- Veterinary supplies and fees - veterinary charges together with the cost of serum and supplies.
- Wages - wages paid to others for normal operating of the farm other than spouse and dependants.

#### **Expenses - Not Allowed in Calculation of Net Income**

- Advances.
- Basic needs, shelter. Shelter payments for mortgage (first) are determined by calculating amount of mortgage for house/land - pay proportion.
- Capital costs - any output of funds used to expand or replace business assets.
- Debts (previous).
- Interest payments on operating loans.
- Inventory adjustments.
- Medical and hospital expenses.
- Farm Income Stabilization Program contributions.
- Principal payments on a mortgage on business or other property.
- Purchase price of equipment or buildings.
- Repairs to home.
- Structural alterations and construction of any buildings.
- Utilities such as light, water, phone and fuel for the home. Advise client to obtain separate meter for farms.

Note: Costs of basic needs, shelter and utilities are not allowed as expenses because they may be included as items of need in the budget calculation.

#### **BUSINESS/FARM ASSETS AND LIABILITIES FORM**

The Business/Farm Assets and Liabilities Form (1215) is required at the time of application and at annual review to determine the client's net worth and debt load.

**Property Owned** - include legal description of all land owned by applicant and spouse with the assessed values. List all mortgages registered on the property.

**Property Leased** - include legal descriptions together with the name of the registered owner. The terms of the agreement should be included together with the agreement which is up for review. Copy of these should be obtained. This must be shown to assess the total operation.

**Equipment** - list all equipment owned by the individual as well as the make, model, year purchased, amount owing, and present value. This information assists in determining the practicality of trading in certain pieces of equipment and indicates whether the client has more or less equipment than necessary. If the client terminates the business operation, the value of the equipment for disposal will be assessed and considered income.

## **RECONCILIATION**

When completing the annual review in January or February a reconciliation for the previous year is required using verified net income from the farming operation. (See Chapter 11 for Annual Review) The previous year's income tax return is required.

Any difference in net income from the estimate is reconciled by deducting any overpayment and adding any underpayment and adjusting the net monthly income amount for the next crop year.

## **CASH FLOW**

See Chapter 19.3.2 for use of cash flow for farmers. This assessment method may also be used for those who have stopped farming.

The amount of income is determined by subtracting paid allowable expenses as outlined in Section 3 from the gross income in the month.

Cash flow is used to the end of the calendar year. At the end of the year an annual farm income report is completed. The net annual income (gross income minus paid allowable expenses) is used to estimate income for the following year and an annual income assessment is used.

## Appendix E

### Business Income

See Chapter 19.3.1

### Information/Financial Resources

The following resources are available to assist the client:

- Ministry of Social Services, Saskatchewan Employment Supplement, phone 787-4723 (Regina) or 1-888-488-6385
- Federal Business Development Bank of Canada, phone 780-6478 (Regina) or 1-800-470-0601
- Centre For Business Development phone 1-877-780-8331, which includes:  
Saskatchewan Economic & Cooperative Development, phone 1-800-265-2001  
Western Economic Diversification, phone 1-888-338-9378  
Women Entrepreneurs of Saskatchewan, Inc., phone 1-800-879-6331  
Small Business Loans Association, phone -800-265-2001
- Conseil de la Cooperation de la Saskatchewan, phone 566-6000 (Regina) or 1-800-670-0879
- City licensing offices - check phone listings in the blue pages
- Business Registration, Ministry of Justice and Attorney General, Corporation Branch, 787-2962 (Regina)
- Canada Revenue Agency inquiries, GST, Payroll, Corporate Tax and Business Tax, phone 1-800-959-5525
- Saskatchewan Finance, Provincial Sales Tax, phone 787-6645 (Regina) or 1-800-667-6102
- Saskatchewan Opportunities Corporation, phone 787-8595 (Regina) or 933-7890 (Saskatoon)
- Small Business Loans Association, phone 787-7154 (Regina) or 1-800-265-2001
- Canada - Saskatchewan Business Services Centres, phone 1-800-667-4374
- The financial institution handling the applicant's business account
- Financial auditor - in cases where an audit is necessary to determine eligibility or continued eligibility, the ministry will pay for service charges (See Chapter 16.23)

### Verification of Information

In all cases the client must provide the latest statement of income and expenses as required by Canada Revenue Agency. Other sources could include:

- Financial institution handling the business account(s)
- Consumer and Corporate Affairs, Corporation Branch, for names used for incorporated companies, names of the other companies involving the client yearly profit.
- Saskatchewan Environment and Resource Management, La Ronge (425-4233) for information concerning leases, permits and fur sales.
- City, town or municipal office - for property and building ownership.
- Property search - legal description of the property, purchase price, ownership, caveats and liens. Also request the General Registration Certificate for information pertaining to writs of execution and maintenance orders.
- Freshwater Fish Marketing Corporation, La Ronge
- Wild Rice:
  - Saskatchewan Wild Rice Council, La Ronge
  - Saskatchewan Agriculture, La Ronge
  - Pre Cambrian Wild Rice, Denare Beach
  - Saskatchewan Indian Agriculture Program, La Ronge

## **Calculation of Eligibility and Entitlement Method**

The cash flow method is used. The net amount of income is determined by calculating the gross income and subtracting the allowable paid expenses.

1. Allowable expenses, verified by copies of paid bills, are as follows: (Business portion only)
  - accounting, legal, collection, consulting, related only to the business
  - advertising (newspaper and business pages telephone directory)
  - bank charges - verified
  - basic stock for business operation
  - business motorized vehicle (maintain any leasing/rental agreement in force at time of application)
  - business property tax
  - delivery, express, freight
  - fuel/maintenance/repairs for motorized business vehicles
  - insurance (fire, theft, liability)
  - interest charges on start-up loans
  - licenses
  - mandatory contributions for employer and employees (CPP, Workers' Compensation, etc.)
  - mileage, meals and reasonably priced accommodation for each trip generating business income
  - minor equipment costs/rental for essential business operations
  - mortgage interest on business holdings in existence at time of application
  - office expenses (postage, stationary) to a maximum of 10% of net income
  - rental on business property (indicate to whom paid)
  - telephone charges - other than for the home
  - utilities - other than for the home
  - wages - paid to others, other than spouse or dependants, for normal operation of the business for operators of licensed day care facilities, the first \$50 per child of the monthly payment is an allowable expense.
  
2. Expenses not allowed in calculation of net income:
  - basic needs, shelter (these needs are provided through SAP)
  - capital costs - any expenditure used to expand or replace business assets
  - interest payments on operating loans
  - inventory expansion
  - medical expenses
  - pension plan contributions except for Saskatchewan Pension Plan
  - previous debts (prior to application)
  - principal payments on a mortgage on business or other property
  - purchase price of equipment or buildings
  - repairs to home
  - structural alterations and construction of any property or buildings
  - utilities for the home (Advise the client to obtain a separate meter for the business operation)

## **Completion of the Monthly Business Income and Expense Report**

The Monthly Business Income and Expense Report (form 1214) is used to calculate net income. The report consists of three sources of information.

**Income**

- derived from the business operation
- returns and allowances (allowances are coupons, discounts)
- other income including cash and any advances (cash draw)

**Cost of goods sold**

- completed only if the business involves purchasing goods for resale or the manufacture of goods for sale
- includes inventory at the beginning and the end of the month and the cost of obtaining the inventory. Inventory is the goods/products for sale.

**Business expenses** - costs incurred to generate business income

**Net Income** is the amount deducted from needs to determine entitlement.

The Business/Farm Assets and Liabilities Form (1215) is required at the time of application and at annual review to determine the client's net worth and debt load.

**Property Owned** - include legal description of all land owned by the applicant and spouse as well as the assessed value. List all mortgages registered on the property.

**Property Leased** - include legal description as well as the name of the registered owner. The terms of the agreement should be included as well as any agreement which is due for review. A copy of the lease should be obtained. This is necessary to assess the total operation.

**Equipment** - list all equipment owned as well as the make, model, year purchased, amount owing, and present value. This information assists in determining the practicality of trading in certain equipment and indicates whether the client has more or less equipment than necessary. If the client terminates the business operation, the value of the equipment will be known.

**Cash Flow**

See Chapter 19.3.1 for use of cash flow for self-employed clients. This assessment method may also be used for those who are no longer self-employed.

The amount of income is determined by subtracting paid allowable expenses from the gross income in the month.