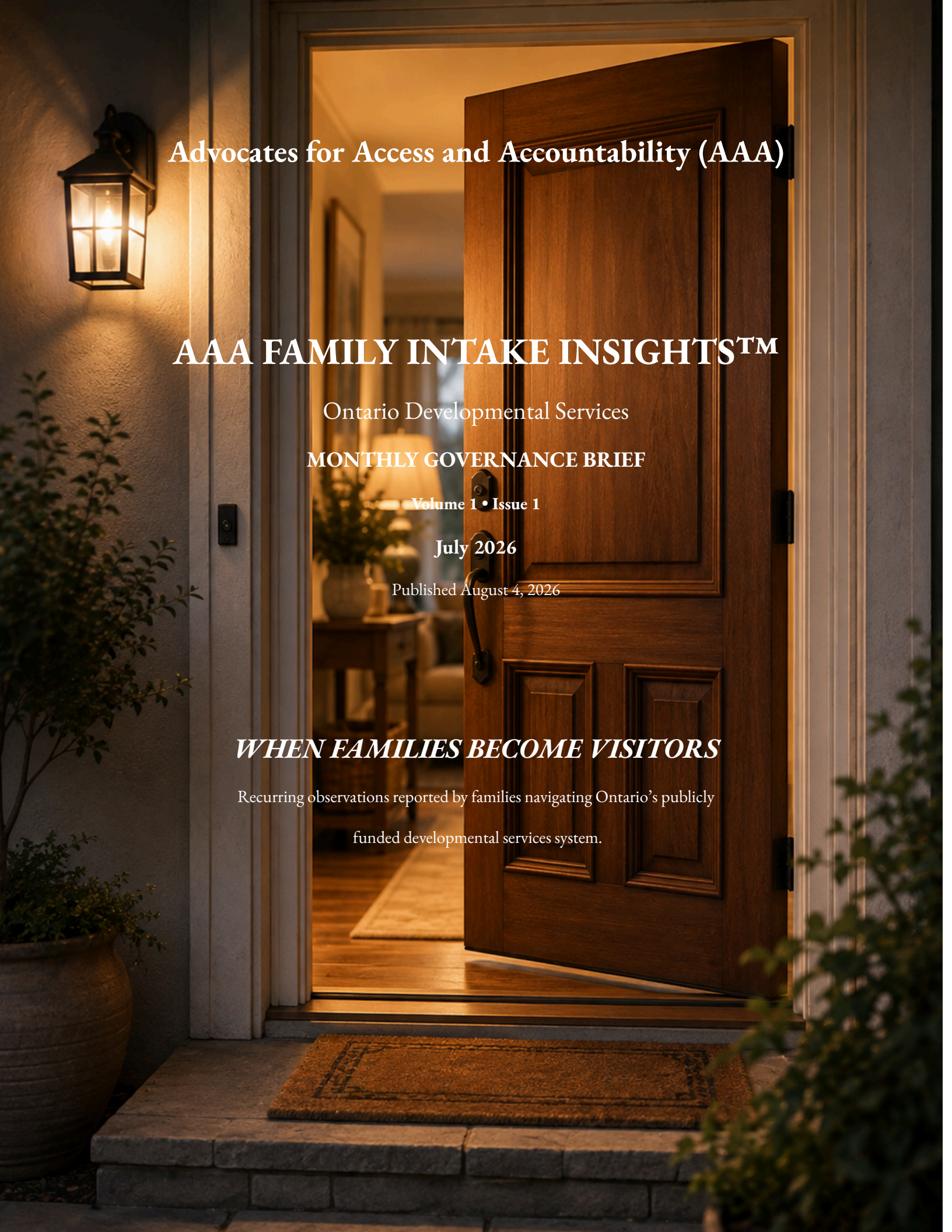

Advocates for Access and Accountability (AAA)

AAA FAMILY INTAKE INSIGHTS™

Ontario Developmental Services

MONTHLY GOVERNANCE BRIEF

Volume 1 • Issue 1

July 2026

Published August 4, 2026

WHEN FAMILIES BECOME VISITORS

Recurring observations reported by families navigating Ontario's publicly funded developmental services system.

Dedication

To Harlan, and to the voices that have too often gone unheard.

To every family who has reached out in desperation, believing no one was listening—

You are not alone.

May these monthly observations ensure that your experiences are documented, your voices are respected, and your stories contribute to a stronger system of accountability.

Together, these reports will become the foundation of the inaugural AAA State of Family Accountability™ to be published on March 1, 2027.

Executive Summary

During July 2026, Advocates for Access & Accountability (AAA) continued to receive confidential communications from families, guardians, caregivers, and community members navigating Ontario's publicly funded developmental services system.

Although each family's circumstances were unique, the recurring observations shared reflected remarkably similar governance concerns involving family access, financial transparency, quality of care, healthcare decision-making, residential oversight, and safety.

The purpose of AAA Family Intake Insights™ is not to investigate individual cases or determine findings of fact. Rather, this Monthly Governance Brief documents recurring observations reported by families, identifies emerging governance patterns, and encourages informed discussion regarding transparency, accountability, and continuous improvement within publicly funded developmental services.

As the inaugural issue, this report establishes the foundation for documenting recurring observations over time. Together, these monthly Governance Briefs will contribute to the first AAA State of Family Accountability™ – Ontario Developmental Services Annual Report, to be published on March 1, 2027.

Intake Snapshot

Recurring Observations Documented by AAA *(Cumulative observations to July 31, 2026)*

Governance Theme	Recurring Observations
Restricted Family Access	25
Financial Transparency	25
Quality of Care & Quality of Life	28
Healthcare & Decision-Making	28
Residential Oversight	28
Safety & Protection	30

Recurring observations reflect cumulative anonymous concerns documented by AAA through family intakes, consultations, advocacy support, and governance correspondence. Individual submissions may involve more than one governance theme.

Emerging Observation

Families rarely contact AAA after a single difficult experience. They contact AAA after repeated efforts to obtain administrative and care service resolution have failed.

Across multiple submissions, families described escalating concerns through service providers, regional organizations, oversight bodies, and government ministries before seeking assistance from AAA.

The recurring observation is not simply dissatisfaction with services or individual decisions. It is the perception that existing administrative processes have not provided a timely or effective pathway to resolve concerns affecting the health, safety, dignity, or quality of life of vulnerable individuals.

It is the perception that existing administrative processes have not provided a timely or effective pathway to resolve concerns affecting the health, safety, dignity, or quality of life of vulnerable individuals. As a result, some families described believing they were left with only two unacceptable options:

- Continue accepting services they believed placed their loved one at risk; or
- Remove their loved one from publicly funded supports without a comparable alternative.

When families consistently describe those as their only perceived choices, the issue extends beyond individual service delivery. It becomes a question of governance.

Why This Report Exists

The idea for AAA Family Intake Insights™ did not begin in 2026. It began more than two years earlier.

On March 1, 2024, AAA Founder Lori Ann Comeau wrote to the Premier of Ontario, Cabinet Ministers, provincial oversight bodies, and members of the media expressing concern that families reporting significant issues affecting the health, safety, dignity, and quality of life of vulnerable individuals often felt unheard despite repeated efforts to obtain administrative and care service resolution.

The correspondence called for greater transparency, accountability, collaboration with families, and stronger oversight within Ontario's publicly funded developmental services system. It concluded with an invitation for government, service providers, and families to work together to strengthen care, communication, program standards, and accountability.

More than two years later, families from across Ontario continue to contact AAA describing many of the same governance concerns.

AAA Family Intake Insights™ was established to ensure these experiences are documented, recurring observations are identified, and important governance questions remain visible.

Its purpose is to listen to families, document recurring observations, identify emerging governance patterns, and contribute to informed discussions regarding accountability, quality of care and quality of life, and continuous improvement within publicly funded developmental services.

Governance Observations

1. **When Families Become Visitors**

   Several families described barriers to maintaining meaningful contact with loved ones residing in publicly funded residential settings. Recurring observations included advance notice requirements before visiting, restrictions on entering a residence, trespass notices preventing access, and prolonged limitations on meaningful family involvement.

   Although every circumstance differed, families consistently described feeling that their role had shifted from partner in care to visitor.

   Governance Question
   How do publicly funded services balance an individual's right to privacy and autonomy with the important role families often play in ongoing support, advocacy, and oversight?

2. **Transparency Builds Trust**
   Families continued to raise recurring concerns regarding financial accountability, access to records, healthcare information, and communication surrounding important decisions. Across these recurring observations, the central issue was not necessarily disagreement with individual decisions, but uncertainty regarding how decisions were made, communicated, implemented, and reviewed.

   Governance Question
   How can publicly funded services demonstrate transparency in ways that strengthen trust between individuals, families, guardians, service providers, and government?

3. **Quality of Care Is Experienced Daily**
   Families described quality of care through everyday experiences rather than isolated events. Recurring observations included concerns regarding housekeeping, cleanliness, personal support, dignity during care, opportunities for participation, and the overall quality of daily living.
   These observations reinforce that quality of life is experienced through ordinary moments that collectively shape a person's sense of dignity, belonging, and well-being.

   Governance Question
   How should quality of care be evaluated beyond regulatory compliance to better reflect quality of life, dignity, belonging, and meaningful participation?

4. **Safety Requires Confidence**
   Families shared recurring concerns involving safety, incident reporting, investigations, and confidence in accountability processes. Regardless of the outcome of any individual situation, families consistently expressed the need for confidence that significant concerns would be appropriately documented, independently reviewed, and transparently addressed.

   Governance Question
   How can publicly funded systems strengthen confidence that serious safety concerns are independently reviewed and appropriately resolved?

5. **Isolation Reduces Natural Oversight**
   Several families described increasing isolation from natural support networks through reduced opportunities for family involvement and community connection.
   While each situation differed, families consistently identified reduced family engagement as one of their greatest concerns.

   Natural relationships provide emotional support, advocacy, and an important layer of independent oversight that complements formal systems of accountability while contributing significantly to quality of life.

   Governance Question
   What safeguards ensure that meaningful family involvement and natural relationships remain part of quality care and quality of life?

Governance Considerations

The recurring observations documented during the July 2026 reporting period raise broader governance considerations for Ontario's publicly funded developmental services system.

These considerations are not intended to assign responsibility or determine findings of fact. Rather, they are presented to encourage thoughtful discussion, strengthen administrative and care service resolution, and support continuous improvement through informed public policy.

1. At what point does restricted family access become family exclusion?
2. How can publicly funded services demonstrate financial transparency when administering or supporting the management of personal funds belonging to vulnerable individuals?
3. What effective administrative and care service resolution pathways exist when families believe significant concerns remain unresolved?
4. How should quality of care and quality of life be measured beyond regulatory compliance?
5. When multiple unrelated families report similar experiences, how should those recurring observations inform oversight and continuous improvement?
6. How should accountability be demonstrated when families believe they have exhausted every available avenue for administrative and care service resolution?
7. What safeguards ensure that dignity, belonging, safety, and quality of life remain central to publicly funded developmental services?

About AAA Family Intake Insights™

Families experience publicly funded systems one interaction at a time. AAA documents those experiences one observation at a time.

Over time, those observations become patterns. Patterns become evidence. Evidence informs accountability. Accountability strengthens public policy.

AAA Family Intake Insights™ is a monthly governance brief. The publication documents anonymous recurring observations reported by families, guardians, caregivers, and community members navigating Ontario's publicly funded developmental services system.

Its purpose is not to investigate individual cases or determine findings of fact. Rather, it seeks to identify emerging governance patterns, encourage informed discussion, and contribute to transparency, accountability, quality of care, quality of life, and continuous improvement.

Grounded in AAA's practice model of See • Document • Act, each Monthly Governance Brief contributes to a growing body of evidence that will inform the inaugural AAA State of Family Accountability™ – Ontario Developmental Services Annual Report, to be published on March 1, 2027, and future public policy work.

Share Your Experience

Families, guardians, caregivers, and community members are invited to confidentially share their experiences through the AAA Intake Form.

Scan Me

About the Founder

Lori Ann Comeau is the Founder & Executive Director of AAA. A family advocate, legal guardian, and systems leader, Lori Ann founded AAA to strengthen transparency, accountability, and administrative and care service resolution within Ontario's publicly funded systems. Drawing upon lived experience alongside governance, policy, and advocacy practice, she is committed to ensuring that family experiences contribute meaningfully to continuous improvement, quality of life, and informed public policy.

Advocates for Access & Accountability (AAA)

See • Document • Act
Observe consistently. Publish concisely. Build cumulatively.

AAA Family Intake Insights™
Ontario Developmental Services
Monthly Governance Brief

First Published
August 4, 2026
Toronto, Ontario
Canada

Lori Ann Comeau
Founder & Executive Director
Advocates for Access & Accountability (AAA)

Appendix A

Historical Foundation

March 1, 2024
Foundational Correspondence
Lori Ann Comeau

The following correspondence was distributed on March 1, 2024, to provincial oversight bodies, government leaders, and stakeholders. It provides the historical foundation for AAA Family Intake Insights™ by documenting governance concerns that predate the establishment of AAA and by illustrating the importance of documenting recurring family experiences over time.

Editorial Note

The following correspondence is reproduced as an historical document and reflects the information, observations, and concerns communicated on March 1, 2024. It is included to provide the historical foundation for AAA Family Intake Insights™ and to illustrate governance concerns that preceded the establishment of AAA.

To protect the privacy of individuals and to maintain the publication's governance focus, limited editorial redactions have been made to the original correspondence:

- The name of the residential service provider has been redacted and replaced with the description *"service provider in Toronto."*
- Personal email addresses and identifying information relating to families, caregivers, advocates, and other private individuals contained within the original To, CC, and BCC fields have been removed.
- These editorial redactions do not alter the substance, intent, chronology, or historical context of the original correspondence.

The correspondence is reproduced for historical reference and should be read within the context of the date on which it was written. It is included to document the historical development of the governance issues that ultimately led to the establishment of AAA Family Intake Insights™.

Gmail [redacted]

Institutional Abuse Rampant in Ontario as MCCSS Continues to Ignore a Role in Service: Harlan Murray Comeau

Lori Ann Comeau [redacted] Fri, Mar 1, 2024 at 10:28 AM
To: bfinlay@ombudsman.on.ca, pdube@ombudsman.on.ca, ann.lehman-allison@auditor.on.ca, shelley.spence@auditor.on.ca
Cc: cco@ohrc.on.ca, michael.harris@orhc.on.ca, "Corbett, David (MAG)" <David.Corbett2@ontario.ca>, doug.downey@ontario.ca, mike.tibollo@ontario.ca, sidney.peters@ontario.ca, ministerserniorsaccessibility@ontario.ca, "jay.jung@ontario.ca" <jay.jung@ontario.ca>, melissa.thomson@ontario.ca, letitia.nolasque@ontario.ca, "DiEmanuele, Michelle (CAB)" <M.DiEmanuele@ontario.ca>, patrick.sackville@ontario.ca, anna.vescio@ontario.ca, "Minister of Children, Community and Social Services" <ministermccss@ontario.ca>, jane.kovarikova@ontario.ca, "Cole, Denise Allyson (MCCSS)" <denise.a.cole@ontario.ca>, "McNally, Sarah (MCCSS)" <Sarah.McNally@ontario.ca>, michael.kerzner@ontario.ca, tim.lewis@ontario.ca, creed.atkinson@ontario.ca, [redacted] "McMahon-CO, Mary-Margaret" <mmcmahon.mpp.co@liberal.ola.org> [redacted]

Good morning Ms.Spence, Ms. Finlay & Mr. Dube,

I hope this email finds you well. As both the Auditor General and Ontario Ombudsman have been aware of the gaps in care and service for those vulnerable in Ontario in the Ministry of Children, Community & Social Services (MCCSS) funded group homes. There is gratitude for the leadership to serve Ontarians and their families with commitment and courage.

The plight of those with developmental disabilities in Ontario has been documented and yet, from a policy as much as programs to support services in the communities has not been aligned with both the demand nor the need – and most of all continues to alienate families, legal guardians, power of attorney and substitute decision makers. MCCSS policies and procedures that bypass those who, as family, advocates, and legal appointments, indicate systemic discrimination at its core. Ministerial performance has to be a factor in assessment of public investments.

The Ontario Ombudsman has investigated the developmental disabilities services with their *"No Where to Turn"* (August 2016), as they have announced their investigation into the plight of adults with developmental disabilities inappropriate housed in hospitals due to the lack of supports and services in communities (March 2023). The Ontario Auditor General highlight their concerns in their annual report in 2013. The decade old issues are really generational issues that if they are continually presented to MCCSS with no response to better serve vulnerable Ontarians, is one, that, their unresponsiveness to sound policy, is one, that indicates that both the value of a life of a vulnerable personal and that of their care is unimportant, and one, that, is, and continues to be mask by the belief that public investment is one that is addressing the issues when in fact, they are serving the development service sector rather than the care and support to the client.

MCCSS has not set program standards nor service goals when over $2 billion dollars is invested annually to over 250 service providers across Ontario, serving under 60,000 clients. There is no need

for a crisis if there were targets to expand services as much as there were more effective uses in governance and compliance as in monitoring funding to support development services and collaboration with families and within the health and community support team.

MCCSS has the *Journey to Belong* (May 2021) believes the families are offered an empower of choice, however when the choice is as it is, or there is no driving effort to strive for market standards in service or governance or the implementation of policies to safeguard the health, safety and care of vulnerable Ontarians. When the pool of inventory is poor, having the financial empowerment of choice offers little consolidation nor does it today; particularly in light of a client centre model. It does, however, offer a further layer of deflection for MCCSS to believe that they do not have a moral and ethical duty to ensure the health and safety of vulnerable Ontarians they fund in these group homes when institutional abuse is rampant across the province. The easiest solution would be to set program standards, and service goals. It is to apply the basic principles of business, growth and expansion in care and clients, like any other sector.

MCCSS directed the guardian to submit a formal request for a literal relocation. It was provided by email in November 2022 on the grounds [redacted] was unwilling to work with the family and guardian to support Harlan's care, putting his health, care, safety and well being at risk. At that time, I was advised by MCCSS, Harlan was on the high risk candidacy for relocation. It was DSO that advised that MCCSS removed Harlan from a high risk candidate to a low in July 2023 when I questioned the 5 month delay to share information to a potential new care service provider for residential care and support services. When MCCSS supports this disconnect, it poses further issues in transparency and integrity.

Harlan has been waiting for a lateral relocation to another public funded group home for over 18 months. Harlan has been waiting 10 months for his current care service provider, [redacted] to meet, discuss and share their findings as to their management actions and decisions to change his drug therapy. Until they can share how this mistake happened, it cannot be refined to ensure that this form of neglect and abuse of power ends. Until [redacted] discloses their actions to change Harlan's drug therapy, they are dangerous, posing a risk to Harlan's life.

Harlan would continue to be in harm's way if, as guardian there was not an intervention given the care and non service at [redacted] MCCSS has avoided a role in service resolution when they continue to fund for Harlan's community support and care of nearly $200,000, knowing the care and non service issues as much as they know about the abuse of power.

Over the past few years, the Ontario Ombudsman and the Ontario Auditor General have been cc'd in communication as I advocate in the health, care, safety and well being of Harlan Comeau Jr., to support their tracking, and potential investigation opportunities to strengthen fiscal responsibility and service accountability. **Today, I am formalizing a complaint on the allocation of development services funding associated with [redacted] and their agreement to Harlan Jr in service accountability and fiscal responsibility. It is hoped the compliance of social justice can be managed by those ministries with the responsibility of healthcare, safety and well being of vulnerable Ontarians. MCCSS is failing vulnerable Ontarians and those in development services and the inconsistencies in their presence, avoidance of care and safety issues in**

relation to a program they administer, is perplexing.

MCCSS was aware of [redacted]

- abuse of authority and making drug therapy changes and did not address it in service;
- confined Harlan to his bedroom, locked him in, as they listened to his telephone calls and conducted full body searches when he returned to his rental home;
- directed front line staff not to open the front door and or answer the telephone to Harlan Jr., father (substitute decision maker) and that of his sister (guardian as of April 2022);
- barriers to health ,care and safety that put Harlan's life at risk as early as March 2020, which staff advised, "[redacted] *was one of the better ones";*
- deposited Harlan Jr., ODSP monthly cheques and government credits into their corporate account, and to date, there has not been consistent accurate financial documentation on Harlan's fixed income that they managed from September 2016 to April 2022, indicating over $18,000 unaccounted for a vulnerable person's fixed income;
- failed to produce both receipts or purchased items of Harlan's Passport Funding, indicating $25,000 unaccounted;
- has not been able to produce health and care information with accuracy;
- has made health related decisions on behalf of Harlan Jr., without providing information or a channel of communication for decision making for the substitute decision maker, Harlan Sr. from September 2016 to April 2022 and moreso, the guardian, has not sought counsel in decision making from April 2022 to June 2023.
- acted as health care custodian without authority;
- has no service agreement that they advised in Spring 2020 that they should provide nor have they provided information package upon entry into [redacted] group home as a means to determine consent, service deliverables and roles and responsibilities;
- unwillingness to work with the family, substitute decision maker, and that of the guardian even thought ministry staff advised in November 2021 that they expected their partners to work with families;
- human rights application in discrimination and human right violations, March 2022;
- denied family access to Harlan as of May 2021 with a trespass order of May 2023;
- non compliance to the regulatory requirements and code of conduct of drug therapy changes in associate to the health and community team, June 2022;
- violated privacy and breach of health and personal information, spanning the non disclosure of series of emergency services and hospital visits;
- violated privacy and breach of health information by sharing information that was not consistent with the health team and that of the guardian, to deflect the care and non service;
- failed to engage, communicate, consult and seek consent on their legislatively required Individual Support Plan (ISP) that is to encompass care support from 2016 to 2022;
- has been using a draft ISP 2023 with adhering to the planning process in consultation, consent and implementation as directed by the guardian; and
- has not provided an ISP for 2024 when they are legally required to do so as of January 2024 to support care and service;
- Failed to access issues as presented in care and service; and
- has been filtering public funds allocated for care and community support to their charity foundation.

MCCSS sought direct communication by the guardian to coordinate lateral relocation, and communicated candidacy priority. There is a formal request to explore roles and responsibilities and consistency application among clients/families across Ontario. MCCSS wanted to manage the lateral residential relocation and yet, they are unwilling to navigate and address care and non service issues in relation to drug therapy changes.

Harlan waited 25 years for residential service support. Not only has he been waiting 18 months for a relocation, he has been waiting 10 months for care and non service resolutions by a [redacted] who has a service agreement with MCCSS that they fund with no fiscal nor service accountability to Harlan. They do not coordinate and finalize service agreements with monthly funding without the belief that they are to address deliverables in association to those who are dependent on care and service and more so, when their partner decides to be non-compliant to Ontario laws.

[redacted] **has received over $750,000 in funding and rental revenue .** There is a service agreement as there is a care plan that they have chosen to disregard the collaboration as much as compliance to legislation(s). MCCSS has continued to fund Harlan's care and community services knowing [redacted] has not provided it for 10 months. They are paying a service provider for non service. They are also aware that their program partner has chosen not to communicate nor resolve the care and service issues with Harlan's guardian, which is in fiscal monitoring of service deliverables while respecting the rights and dignity of vulnerable Ontarians.

Families believe in community living and its services, thinking that the Ontario logo has both integrity and credibility, however when there are 8 REPORT ON cases over a year with over 25 wellness checks, and a series of emergency services visits, there is a role to serve. There needs to be a client survey that is administered from an external body and reported to either the Legislature. Judgment indicates that MCCSS like [redacted] will do anything to hide their neglect of care to a marginalized group, voiceless, and dependent on others for support and care. The very fact that MCCSS has done nothing to get Harlan back to his independent living with support but pays for it, shines another light for performance as much as the root of the systemic and institutional abuse. Ongoing report(s) by Ontario's families with ongoing concerns on access, care and accountability are ones that indicate that MCCSS is unresponsive to the needs across Ontario communities. It is either to re-evaluate, investigate and report back with the ease of reaching out to ODSP recei[tents and their families with a client satisfaction survey to have a proper scan of their needs and shortfalls in a system that serves the care providers over that of the client.

I have cc'd others in this correspondence as it is my hope that there is a ministry-wide review to do better in serving vulnerable Ontarians and those with developmental disabilities. Vulnerable Ontarians should not be intimidated, manipulated nor abused and those who are advocating respectfully, as family members, legal guardians, power of attorney, substitute decision maker should not be intimidated or harassed. On a final notation, care service providers, including publicly funded group homes cannot use the *Trespass and Property Act* to deny entry into a rental property, or use it as formal intimidation or submission. Please ensure there is funding associated with the police boards across Ontario for training. The gaps in service and cannot be placed in Ontario's police because of both performance and service issues in the mandated ministries responsible.

I look forward to hearing from you to further discuss as I do, in an investigation. I have repeatedly asked for MCCSS to conduct a negligence review as outlined in legislation, however they have and continue to be unresponsive. Judgement indicates that their approach is as their development services partners -- there should be gratitude for whatever pickings are offered for as long as it takes irregardless of the quality of care and service and let's ignore them because they do not matter. Harlan will not return to a group home that has changed his drug therapy without consent and as not addressed the non service issues. He will not be forced to return to an unsafe home environment nor will be be removed from support services that he waited a generation. He will not be penalized because of my advocacy to strive for better service for those marginalize in Ontario.

Many thanks for your time and attention to a serious care and safety issue, affecting vulnerable Ontarians across the province. It is my hope with leadership, conviction and courage, steps will be taken to continue to reveal the abuse hidden behind closed doors.

Kindest regards,

Lori Ann Comeau