

# 2017-18 Annual Report

of the Office of the Seniors Advocate



OFFICE OF THE  
**SENIORS ADVOCATE**  
BRITISH COLUMBIA  
[www.seniorsadvocatebc.ca](http://www.seniorsadvocatebc.ca)  
1-877-952-3181





OFFICE OF THE  
**SENIORS ADVOCATE**  
BRITISH COLUMBIA

July 2018

The Honourable Adrian Dix  
Minister of Health  
PO Box 9050 STN PROV GOVT  
Victoria BC V8W 9E2

Dear Minister Dix,

It is my pleasure to present the 2017/18 Annual Report of the Office of the Seniors Advocate in accordance with section 4(4) of the *Seniors Advocate Act*.

The document is the fourth annual report from the Office of the Seniors Advocate and reports on the period of April 1, 2017 to March 31, 2018.

Sincerely,

Isobel Mackenzie  
Seniors Advocate  
Province of British Columbia



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**M**oving into our fifth year, the Office of the Seniors Advocate spent 2017/18 working on the final report for our province-wide Residential Care Survey results, updating and improving some of our monitoring products, as well as doing ongoing research into systemic issues in each of our five mandated areas.

The results of our Provincial Residential Care Survey were released in September at a multi-site event attended by over 500 in-person, online and teleconference attendees. The report, *Every Voice Counts*, highlights that, while there are positive aspects of our residential care system, we need to be doing better, particularly around getting assistance when needed, the rigidity of fixed schedules, available activities for residents, and social engagement.

We also released *Caregivers in Distress: A Growing Problem*, which highlighted that caregiver distress in B.C. is rising, while supports and services are not keeping pace. The data indicate that rates of distress have increased by 7% since our Office's 2015 *Caregivers in Distress* report, while Adult Day Programs and average hours of home support per day per client have decreased by 5%.

In December, the Office released its third annual *Monitoring Seniors' Services* report, adding new information including data on elder abuse from the RCMP and the Vancouver Police Department. Positive trends included a 12% increase in MSP premium assistance participation and a 94% increase in new users of property tax deferment. Areas where we continue to struggle include a decreasing number of seniors' subsidized housing units, and income supplements that are not keeping pace with the cost of living.

We have been busy making improvements to our *British Columbia Residential Care Facilities Quick Facts Directory* over the past year, moving from a 600-page document to an online searchable database. We also added information about raw food costs per resident per day and some new resident profile indicators.

As always I want to thank B.C.'s health authorities, government ministries, and service providers for providing my Office with data, information, and feedback about seniors' services for our systemic reviews and monitoring products.

Our Office also put forward four submissions to federal and provincial governments this year on issues including seniors' poverty, discrepancies in health care supports, and transportation.

2017/18 brought some positive news on issues we have been advocating for including a \$548 million investment into primary care, home and community care, residential care, and assisted living; changes to the tenancy laws that will protect vulnerable seniors; and an announcement around updates to the maximum rent ceilings for SAFER. However, there is more work to be done, and I know the year ahead will bring many more opportunities to improve the quality of life for seniors in this province.

Isobel Mackenzie

**Seniors Advocate  
Province of British Columbia**

# Communication, Outreach and Engagement

**T**hrough a variety of outreach activities, the Office of the Seniors Advocate hears from thousands of seniors, their families, stakeholders, and service providers each year. These engagement opportunities are a critical component of the OSA's work to become aware of and understand the systemic issues facing B.C.'s seniors.

In 2017/18, the Seniors Advocate was invited to speak to 77 community groups and organizations on topics such as residential care, home support, caregiver support, housing, and income issues. The audiences ranged from community organizations to attendees at academic conferences. All of the Seniors Advocate's presentations are listed on the OSA's website.

Community  
Presentations  
**77**

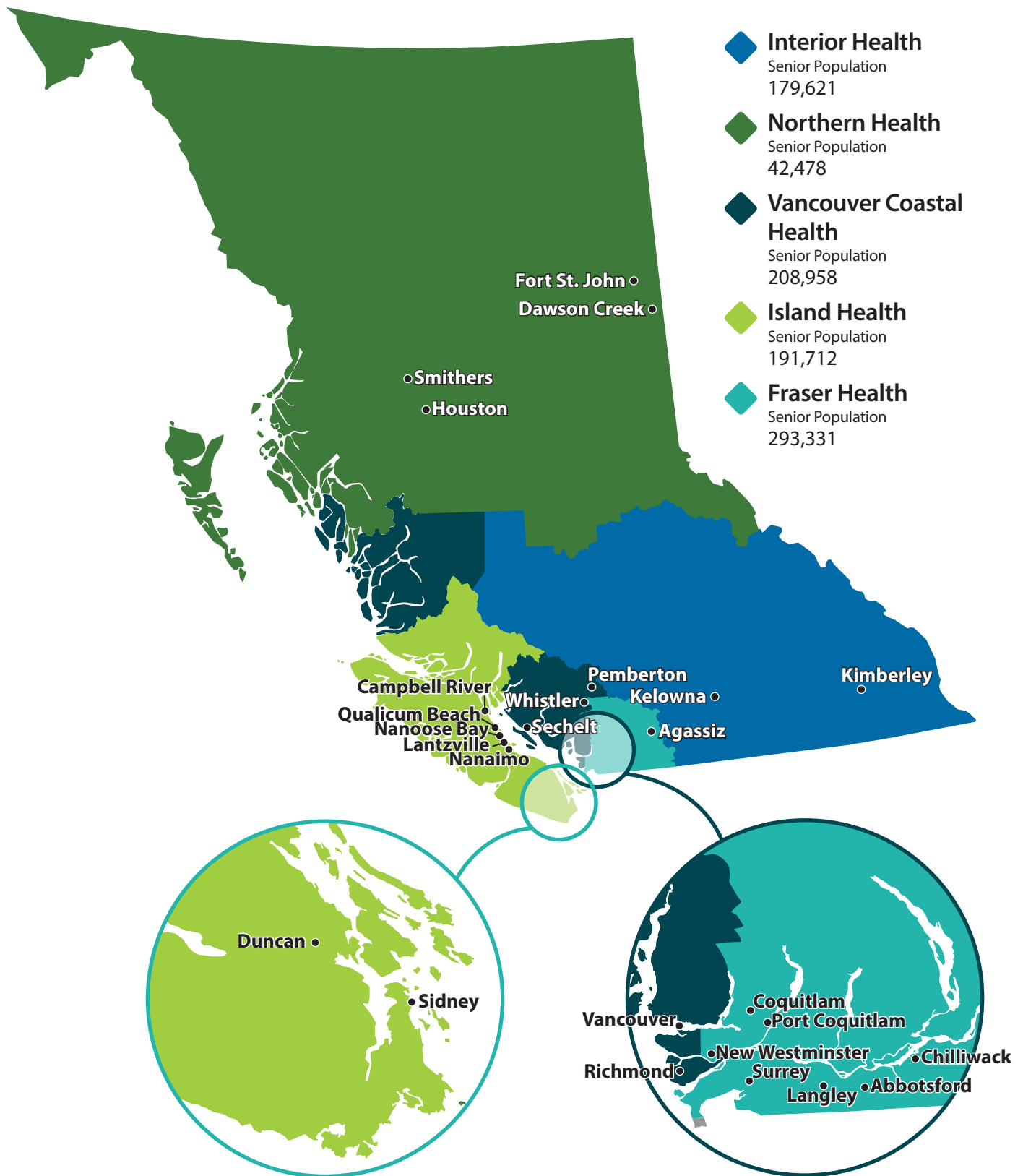
Stakeholder  
Meetings  
**121**

The Seniors Advocate regularly liaises with stakeholders representing the five areas of the OSA's mandate to further develop an understanding of the issues and challenges faced by seniors in British Columbia. In 2017/18, stakeholder groups included CARP, COSCO, Federation of Community and Social Services BC, Pain BC, Alzheimer Society of BC, ICBC, BC Seniors Living Association and Doctors of BC.

In 2017/18, the Seniors Advocate visited 31 communities across B.C., such as Lantzville, Kimberley, and Fort St. John, as well as many visits to communities in the Lower Mainland and on Vancouver Island. As the experiences of seniors vary widely depending on where they live, the Seniors Advocate continues to prioritize visiting as many communities in B.C. as possible.

Communities  
Visited  
**44**

## Communities Visited in 2017/18





# Information and Referral

Information and referral responsibilities are set out under section 3 of the *Seniors Advocate Act*. In particular, under section 3(2), the Seniors Advocate is responsible for promoting awareness of systemic challenges faced by seniors and of the resources available to seniors. Under section 3(3), the Seniors Advocate is responsible for connecting individuals with specific complaints to appropriate individuals or agencies having jurisdiction to resolve those complaints.

While the key mandate of the OSA is to focus on systemic issues in B.C. that impact many seniors, information and referral play a critical and complementary role in the identification and dissemination of information on systemic challenges facing seniors.

## Methods of Contact with the OSA

Members of the public have several avenues of access to the Office of the Seniors Advocate, including telephone, email, online input form, and post mail. The toll-free phone line is answered by an information and referral analyst, with over 20 years of experience with seniors' issues and resources, who handles phone calls and other requests for information or referral and submissions of systemic issues from 8:30 am to 4:30 pm Monday to Friday. Letters and emails requiring more extensive research are responded to by a health care professional with over 30 years' experience working with seniors and community-based programs. With this extensive knowledge base, the OSA staff has been able to provide meaningful information and referral to seniors, their families, and the public.



### Telephone line: **1-877-952-3181**

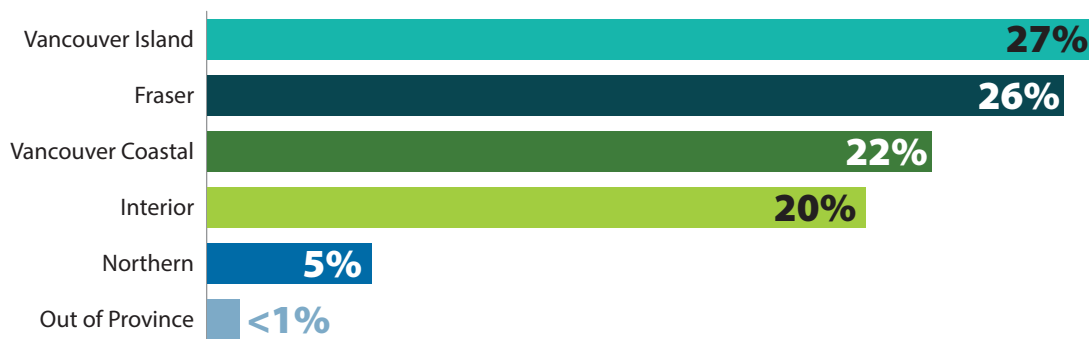
- **6,432** phone calls
- **726** letters, emails and input forms received

The OSA website, [www.seniorsadvocatebc.ca](http://www.seniorsadvocatebc.ca), features an “input form” that provides a space for the public to alert the OSA of issues that impact a large number of seniors, and ideas, solutions and comments related to these matters. This method provides an opportunity for thoughtful input on issues that matter to seniors. The most common topics writers mentioned were related to residential care including bed wait times, staff levels in residential care and food.

All contacts, by any method of communication, are documented; we track and monitor information about these contacts, the area of concern, and our response and follow-up. This information helps us to identify the systemic issues and concerns that are important to B.C. seniors and highlights possible areas for the OSA to research and explore further.

Wherever possible, the location of the contact is captured and sorted by health authority geography.

### Contacts made with OSA by Health Authority



## SENIORS UNAWARE OF ALL ASPECTS OF THEIR DISABILITY BENEFIT PROGRAMS

*Mahindra contacted the Office of the Seniors Advocate because he had a toothache and required dental care. He was on Provincial Disability prior to turning 65 and therefore carried his medical benefits over when he transitioned from Disability Benefits to Canada Pension Plan at age 65. He had contacted his dentist who informed him that he had already exhausted his dental benefits for the current two-year period and he would not be eligible for dental benefits for nine months.*



*Mahindra felt he could not wait nine months for dental care. OSA staff looked into the dental benefits that seniors who were on Provincial Disability prior to turning 65 were eligible for and found that Mahindra's benefit program also covered access to emergency dental care to relieve pain. We informed Mahindra about this additional dental benefit and advised that he contact his benefit program to determine if he qualified for this. We provided him with the phone number for his dental benefits. In the event that he did not qualify, we also provided the contact information for the BC Dental Association Low Cost Dental Clinic in his area.*

Many of the people contacting our Office, particularly those contacting us by telephone, raise issues that result in a referral to another agency or service that can provide further help. The Office of the Seniors Advocate provided 2,763 referrals in 2017-18. The following list highlights our top 10 referrals.

### Top 10 Agencies and Services Referred to, 2017/18

- Health Authority / Home & Community Care
- Patient Care Quality Office
- Medical Services Plan & PharmaCare (HIBC)
- Better at Home
- BC Housing
- Service Canada
- Lawyer Referral Service
- Seniors First BC
- Local area service provider or organization
- BC Dental Association Low Cost Clinic

## SENIORS IN FINANCIAL CRISIS

*Mathew contacted the Office of the Seniors Advocate two days after Christmas. He said there had been a glitch with the automatic deposit of his pension cheque. He had just followed up with his pension office and was told that due to the Christmas break, it would take several days to fix the problem and for the money to be deposited in his account. Mathew said he was almost out of food and he didn't know how he was going to be able to eat until his cheque came in. The OSA staff looked into resources in his community and discovered there was a Salvation Army Centre not far from where Mathew lived. We contacted the Salvation Army and they said Mathew could pick up a food basket before 6 pm that day. While on the Salvation Army website, we noticed information*



*about their drop-in lunch program two days a week. When we inquired about the program, the Salvation Army Coordinator said that Mathew was welcome to join anytime. She said there were many seniors who came regularly to the lunch program. When we communicated this information to Mathew, he was relieved to have a solution to his food concerns and was excited about joining other seniors at the drop-in lunch program at the Salvation Army.*

## Reasons for Contacting the Office of the Seniors Advocate

The OSA completed the Residential Care Survey this year and released the provincial-level results as well as the results for each health authority. When the *British Columbia Residential Care Facilities Quick Facts Directory* was updated in January 2018, the new version included more information for each facility and also a link to the detailed survey results for each of the facilities. We received many phone calls and emails with questions and feedback about the survey results. Many families were very interested in reviewing the results of the survey for the facility where a loved one resided and some families were using the survey results to help them select their preferred facilities.

We continue to receive many requests for the latest edition of the *BC Seniors Guide*, which was released in 2016. Each month, we received an average of 84 requests for the guide from individual seniors and their families and also from organizations that distribute the guide from their offices. The *BC Seniors Guide* is now available in six different languages: English, French, Punjabi, Chinese, Korean, and Vietnamese.

We also released an updated *Caregivers in Distress* report this year with new recommendations. This too prompted calls, letters, and emails to our Office from caregivers wanting to share their caregiver experience and to provide their feedback about the Seniors Advocate's recommendations.

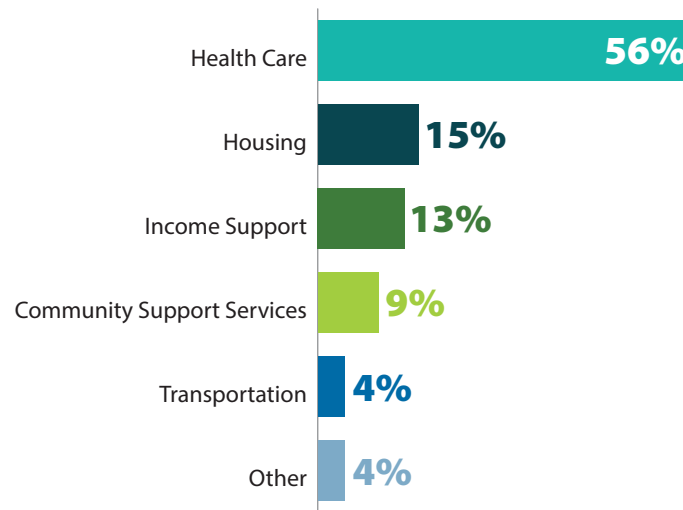
### SENIORS REQUIRING ASSISTANCE ARRANGING POST-SURGICAL CARE

*Mary required surgery and her surgeon had booked a date for the surgery; however, the surgeon wanted Mary to arrange for someone to be with her for seven days following the surgery. As Mary had no friends or family who could commit to do this, the surgery had to be cancelled. She had investigated other sources of care, including contacting her health authority, with no success. Mary's pain and condition were worsening but the doctor wanted to see a plan for her post-surgical care before he rebooked the surgery.*



*Mary contacted the Office of the Seniors Advocate to request our help in solving this problem. After some investigation, we were able to connect Mary with the appropriate person at her health authority. The health authority staff were able to arrange for Mary to go to a transitional care unit after her surgery. Mary notified her doctor, who immediately rescheduled her surgery.*

## Contacts by Service Area, 2017/18



## Contacts by Top 10 Service Areas or Themes 2017/18

- Home & Community Care
- Abuse of Seniors
- Medical Services Plan & PharmaCare (HIBC)
- Affordable Seniors Housing
- Health Authorities Division
- Dental Care
- Pensions
- Legal Issues
- Eviction & Homelessness
- HandyDart

## Individual Issues

Individuals often contact the Office of the Seniors Advocate with concerns specific to their situation; often, however, these concerns are indicative of a larger, systemic issue. Seniors and their families seek information or referrals around issues in our five mandated areas. Examples of the types of issues we heard about in 2017/18 are included below.

**Health care issues** included the level of care in residential care facilities, access to residential care beds, and overuse of medications. Families told us about spouses who were separated in residential care facilities and about seniors with specialized needs being admitted to residential care facilities far from home. Other concerns

included lack of adequate home support hours and caregiver burnout.

**Housing issues** included concerns about rising rents for low-income seniors, the lack of affordable housing, and questions about the Home Adaptation Program, property tax deferment, and the Shelter Aid for Elderly Renters Program (SAFER).

**Transportation issues** included the cost of seniors' bus passes, questions about the Travel Assistance Program, and concerns about lack of travel options to out-of-town medical appointments and specialized tests.

**Income support issues** included calls about pensions, where to find free income tax clinics,



and what income supports and programs are available for seniors. We heard from recently widowed women about difficulties in balancing their household budget now that their husbands had passed away. Many women of this generation stayed home to raise their children or only worked part-time in their later years and had not contributed to the Canada Pension Plan. Seniors who had previously been on Provincial Disability had questions about their disability benefits when they turned 65.

**Community support issues** included questions around Powers of Attorney, Representation Agreements, and wills. Seniors and their families frequently contacted the Office regarding challenges of obtaining low-cost legal advice. Many seniors requested information on assistance with housekeeping, home repairs, and snow shoveling.

The Office of the Seniors Advocate heard from friends, families, and individual seniors

who were looking for help regarding physical, emotional, or financial elder abuse.

We heard from concerned relatives calling from other parts of Canada and other countries asking how to access services for an aging parent, sibling, or other relative living in British Columbia. They wanted to know what services are available and how to access services such as assistance with personal care, medication administration, friendly visiting, light housekeeping, as well as Assisted Living and Residential Care.

Residents of British Columbia also contacted us requesting information about relocating an aging relative from another province within Canada to British Columbia. They posed questions about the admission process and funding for residential care, the B.C. Medical Services Plan, PharmaCare coverage, housing options, federal pensions, and the B.C. Seniors Supplement.

## SENIOR REQUESTING INVESTIGATION INTO A CARE CONCERN

*Huong contacted the OSA to express her concerns about the care her 95-year-old mother had received in a residential care facility. She wanted to make the Seniors Advocate aware of her mother's experience and for further investigation to be conducted. We informed her that each health authority has a Patient Care Quality Office (PCQO) that is mandated to investigate care concerns and make recommendations for improvements in facilities and programs funded by the health authority. We provided the contact information to Huong, but she was concerned that the PCQO was a health authority office and might not conduct an unbiased investigation. We told her about the Patient Care Quality Review Board – an independent body that investigates care complaints when people are not satisfied with the investigation conducted by a health authority's PCQO. We provided her with the contact information for the Patient Care Quality Review Board in*



*case she was not satisfied with the health authority's PCQO review and wanted a review completed by the Review Board. We thanked her for sharing her mom's experience and informed her that the OSA logs all feedback we receive; we use this information to help us understand the systemic issues facing seniors in British Columbia and to determine the priorities for the work of the Seniors Advocate.*

## Systemic Issues

Individuals also contacted the Office to inform us of systemic challenges facing seniors in relation to health care, housing, transportation, income supports, and community supports.

### Systemic Issues in Health Care

- inability to find a family doctor or concerns that their family doctor will soon be retiring and no doctors are accepting new patients in their community
- lack of respite care, adult day programs, and residential care beds in small communities and rural areas
- the process for residents admitted to a facility through a ‘first appropriate bed’ policy to later transfer to their preferred facility
- various aspects of the care provided in residential care facilities including food quality, exercise and recreational therapy, personal care, palliative care, staffing levels, staff training, and the need for respectful, dignified care
- concerns about PharmaCare coverage including necessary medications not being covered, high deductibles, and the cost of shingles and whooping cough vaccines
- lack of funding for dental care, dentures, eyeglasses, hearing aids, mobility aids, and medical equipment for seniors
- the hospital discharge process, which sometimes sends people home before they are ready to be discharged or without a comprehensive plan for their care at home
- the inadequacy of home support hours, short visits, lack of continuity of workers, and limited availability of services
- the level of training of home support workers and how they are scheduled

### Systemic Issues in Housing

- lack of affordable housing for low-income seniors; long wait lists (e.g., two or three years) for subsidized housing
- seniors at risk of becoming homeless because they are being evicted:
  - from their apartments where they have lived for many years because the building is being torn down or redeveloped as condominiums
  - from their manufactured home parks because the land is being redeveloped; often, their modular homes are too old to be safely moved
- low vacancy rate in many parts of British Columbia and/or available suites have rents that are too high
- SAFER grants not keeping up with rising rents in some areas of the province
- tenancy issues and disputes with landlords around increased rents, lack of appropriate maintenance, and lack of respectful communication with senior tenants
- seniors having difficulty affording upkeep and maintenance for their homes and also necessary repairs (e.g., a new roof)
- foreign ownership of seniors’ housing and care facilities
- need for different models of housing for the aging baby boomers
- social isolation for seniors living in the community; need for more choices in seniors housing options including the ability to live independently while at the same time being part of a supportive community
- significant physical and emotional impact on seniors when they are moved to a new location/facility



### Systemic Transportation Issues

- the cost for the Driver's Medical Exam (DMER) and the fact there is no standardized fee
- concerns around the fairness of the DMER for all individuals who are 80 years of age or older, regardless of driving record
- far-reaching impact on seniors' lives when they are no longer able to drive; concerns about navigating the public transit system if one is available
- concerns about HandyDART and local volunteer transportation programs for seniors including limited hours of operation, lack of flexibility, lack of access (primarily in rural areas), and the cost for low-income seniors to access these services

### Systemic Income Supports Issues

- processing time for various programs like the Old Age Security and the Guaranteed Income Supplement (GIS)
- seniors on GIS and Seniors Supplement not receiving enough income to meet their expenses, resulting in seniors paying a large percentage of their income on rent and concerns about becoming homeless
- low income seniors struggling to pay their bills and unable to accommodate unanticipated changes in their expenses like rent increases or unanticipated high hydro bills
- financial impact on the senior left at home if their spouse passes away or is admitted to a long-term care facility

### Systemic Themes around Community Supports

- seniors requesting help filling out application forms for pensions, CPP, disability, and complaint/appeal processes
- concerns about elder abuse, neglect, and self-neglect and resources to help individuals experiencing this
- financial abuse of seniors by family or friends and seniors being the victims of phone scams and abuse
- seniors wanting to remain in their homes but needing help with housekeeping, and general repairs and programs such as the Better at Home Program may not be available in small and rural communities
- caregiver burnout due to emotional, physical, and financial strain
- seniors seeking low cost or free legal advice around wills, Powers of Attorney, and tenancy issues



# Monitoring B.C.'s Seniors' Services

**T**he *Seniors Advocate Act* mandates that the Seniors Advocate is responsible for monitoring the provision of seniors' services in the areas of health care, personal care, housing, transportation, and income supports. The OSA tracks and reports on critical seniors' services by gathering data from ministries, health authorities, and service providers, as well as via surveying seniors directly. The OSA's monitoring work allows us to follow trends over time so that we may identify where programs and services are meeting the needs of seniors and where there are opportunities for improvement. This information enables seniors and their families to make important decisions and to inform service improvements.

## Residential Care Survey

The results of the Residential Care Survey were released in September of 2017. This was the most extensive survey of its kind ever conducted in Canada, targeting over 22,000 individuals in 292 residential care facilities. The survey asked a range of questions on residents' experiences of day-to-day activities and care from questions about food quality and staff responsiveness to observations of physician care and social connectedness. The survey was conducted between June 2016 and May 2017. Residents' most frequent visitors, usually a family member, were also mailed surveys.



*Attendees at release of Every Voice Counts: Residential Care Survey Provincial Results in Victoria.*

## Monitoring Report

In December 2017, the OSA released its third annual *Monitoring Seniors' Services* report. The report provides the status of key seniors' services in the province, highlighting where seniors' needs are being met and where improvements are most needed.



### Transportation

- There was a **5%** increase in the number of new clients registered for HandyDART from last year, a **10%** increase in ride requests, and a **10%** increase in rides provided.
- In 2016, **655,000** or 75% of all seniors maintained an active driver's license, a **4.5%** increase since 2015. The population 65+ grew **4%** over this same period.
- In 2016, **65,810** driver fitness cases were opened for those aged 80 or older. Only **950** seniors (fewer than 2%), were subsequently referred for a DriveABLE cognitive assessment.

### Income Supports

- The Seniors Supplement, a monthly top-up provided by the provincial government to low-income seniors, remains at **\$49.30**. There has been no rate increase since 1987.
- In 2016, **331,682** seniors received some level of MSP Premium Assistance, a **12%** increase over the previous year.

### Elder Abuse

- The Public Guardian and Trustee received **1,638** referrals to respond to allegations of abuse and neglect in 2016/17, a **3%** increase over last year.
- The Seniors Abuse and Information Line received **1,763** calls pertaining to abuse in 2016, a **21%** increase compared to 2015.

### Housing

- Since 2005, the Shelter Aid for Elderly Renters (SAFER) maximum rent that qualifies for a subsidy has increased **9%**, while rents have increased by **45%**. There has been a **6%** increase in the number of SAFER recipients since 2016.
- The number of Seniors Subsidized Housing units decreased almost **5%** between 2013/14 and 2016/17. The number of people 55 or older waiting for a unit increased nearly **16%** in the last year alone.
- For older adults (55+) who are homeowners, there was a **94%** increase in the number of new Property Tax Deferrals, with nearly \$162 million of property taxes deferred in total.

### Health Care

- While the number of B.C. seniors with dementia has increased since last year, the rate of dementia has remained constant; **94%** of seniors 65+ and **80%** of seniors 85+ do not have dementia.
- The number of seniors on the waitlist for both Assisted Living and Residential Care decreased. In 2016/17, **61%** of seniors were admitted to residential care within 30 days, compared to **57%** in 2015/16.
- The average home support hours delivered per client per year decreased by **3%** from the previous year, while the number of clients increased by **3.5%**.

## British Columbia Residential Care Facilities Quick Facts Directory – January 2018



The B.C. *Residential Care Facilities Quick Facts Directory* has been a highly sought-after resource since its initial publication in March 2016. To ensure the information

within the Directory remains current and relevant, our Office spent much of the fall updating information on licensing complaints, reportable incidents, and facility inspections. This year, the data in the Directory was enhanced by adding raw food costs per resident per day, and some new resident profile indicators.

The updated Directory was released in January 2018. Rather than producing a published document, the Directory is now only available in an online searchable database. This version allows users to find facilities by typing in the facility name, municipality, or health authority where the facility is located. Enhancements are planned for the next update to allow for an even more user-friendly experience to search information within the Directory.

To aid the process of providing accurate information on long-term care options, the OSA will continue to update the Directory annually and seek out the most useful information to provide to seniors and their caregivers.

### QFD Summary Findings

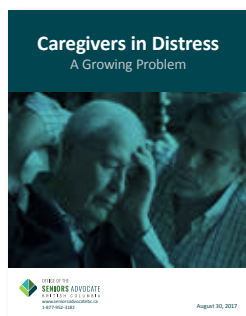
Facility	Resident Profile	Services
<ul style="list-style-type: none"> <li>the Quick Facts Directory provides standardized information on 293 publicly subsidized residential care facilities in B.C.</li> <li>110 facilities with 8,814 beds are operated directly by a health authority</li> <li>183 facilities with 18,328 beds are operated by a contractor with funding from a health authority</li> </ul>	<ul style="list-style-type: none"> <li>the average age of a resident was 85 years</li> <li>30% of residents had severe cognitive impairment, 51% had mild to moderate impairment, and 19% had no impairment</li> <li>30% of residents are almost completely or completely dependent on staff for their activities of daily living</li> <li>almost half of residents score as “low” on the social engagement scale</li> </ul>	<ul style="list-style-type: none"> <li>residents receive an average of 3.14 care hours per resident per day. Only 15% of facilities meet or exceed the provincial guideline of 3.36 hours</li> <li>on average, 12% of residents received physical therapy, 29% received recreational therapy, and 8% received occupational therapy</li> <li>87% of facilities have their food prepared on site.</li> <li>funded food costs range from \$4.92 to \$18.44 per resident per day</li> </ul>

# Reporting

As part of the mandate of the OSA, regular reports on systemic issues affecting seniors are produced and disseminated to the public. These reports highlight critical issues facing seniors and make recommendations to government and seniors' service providers for further system improvements. Summaries of the reports published in 2017/18 are presented below. All reports can be found under "Reports & Publications" on the OSA website ([www.seniorsadvocatebc.ca](http://www.seniorsadvocatebc.ca)).

## Caregivers in Distress: A Growing Problem

The report, *Caregivers in Distress: A Growing Problem*, was released in August of 2017 as an update to the 2015 *Caregivers in Distress* report that indicated 29% of unpaid caregivers are experiencing symptoms of distress such as anger, depression, or feelings of not being able to continue with their caregiving duties. The data in the updated report highlight that rates of distress have **increased by 7% to 31%**. The report focuses on the caregivers of individuals



receiving publicly subsidized home support in the province, as this is the only subset of the caregiving community where measurable data using detailed health care assessments are available. This report also relies on data that tracks key support services such as adult day programs, which provide regular programming and relief to caregivers, respite in residential care facilities, and additional home support services, that also help provide a reprieve from caregiving duties.

### Key findings of the report include:

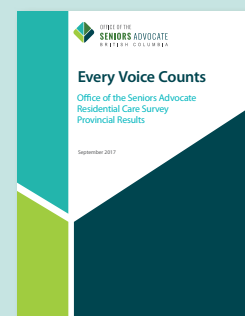
- in 2015/16, 31% of clients had a primary caregiver in distress, which represents a **7% increase** from the 2015 report
- over this period, the actual number of primary caregivers identifying as distressed increased by over 1,000, which represents a **14% increase** in the actual number of caregivers in distress
- the number of home support clients accessing a subsidized adult day program **decreased by 5%** and the number of service days delivered to these clients decreased by 2%
- the average hours of home support per day per client 65 or older decreased by **5%**, signaling less intensive service

## Every Voice Counts: Provincial Residential Care Survey Results – September 2017

The Office of the Seniors Advocate released the provincial results of the residential care survey, along with the results by health authority, in September of 2017.

Key positive responses from the survey include:

- 50% of residents rate the overall quality of the care home as very good or excellent
- 83% of residents believe the staff know what they are doing
- 88% of family members report being involved in decisions about the care of their loved one
- 80% of residents indicate they get the services they need
- 65% of family members rate the facility 8 or higher, with 10 being the highest possible score
- 88% feel safe in the care home
- 86% of residents feel staff treat them with respect
- 88% of family members or most frequent visitors report that facility staff address their concerns always or most of the time



Key areas where residents and families said improvements are needed include:

- 62% of residents say they do not get to bathe or shower as often as they want
- one in four residents say they sometimes, rarely, or never get help to the toilet when needed
- 25% of residents report staff try to relieve physical discomfort only sometimes, rarely, or never
- more than one-third of residents report they are not consistently getting the help they need at mealtimes
- almost 46% of residents report there is no one living in the facility that they consider a close friend and 45% report there is no one for them to do things with
- only (46%) of residents say staff regularly make time for friendly conversation
- 49% of residents only sometimes, rarely, or never have the same care aide on most weekdays
- 4 out of 10 residents living in residential care do not want to be there
- only 57% of residents report that the care facility regularly feels like home



The report of the provincial level results includes eight recommendations for system improvements including:

1. Increasing staffing levels in care facilities.
2. Increasing flexibility around when and how care, services, and activities are delivered.
3. Increase activities for weekends and evenings and create more meaningful experiences overall.
4. Provide better physician care either through GPs and/or explore further increasing the role of nurse practitioners to improve care.
5. Examine opportunities to improve the mealtime experience.
6. Provide on-going education for all care staff on the importance of resident emotional well-being and focus on developing staff skills in supporting this important aspect of care.
7. Health authorities to require facilities to administer the interRAI Self-Reported Quality of Life Survey for Long Term Care Facilities and the interRAI Family Survey for Long Term Care in two years and publish the results.
8. Foster greater engagement with family members in two key areas (promotion of family councils and hand washing).



*Attendees at the release of Every Voice Counts in Vancouver.*

# Initiatives to Address Systemic Seniors' Issues

Outside of the OSA's public reporting and monitoring functions in 2017/18, the Office raised awareness on key seniors' issues through submissions to the federal and provincial government and acting in an advisory capacity on external projects.

## **Ensuring New Transportation Options Meet Needs of Seniors**

In mid-January, the Seniors Advocate prepared a written submission for the Select Standing Committee on Crown Corporations as part of their inquiry into ride-hailing. While there is potential for ride-hailing services to help address a transportation gap for seniors, the submission highlights factors that must be considered during the development of a new ride-hailing regulatory structure to meet

the unique needs of seniors. These include safety, accessibility, and recognition that some seniors may require a more responsive and individualized transportation service. The recommendations included:

1. Develop an insurance product suitable for part-time vehicle-for-hire work.
2. Develop provincial safety standards for all commercial or ride-hailing vehicle drivers, vehicles, and activities.
3. Implement regulatory incentives and requirements which help ensure ride-hailing options will capture the range of transportation services from independent traveller to passengers that require substantial assistance and/or to be accompanied in order to successfully complete their trip.



### Addressing Disparity in Housing and Health Care Costs across Canada

The OSA put forward a submission on Advancing Inclusion and Quality of Life for Seniors to the Standing Committee on Human Resources, Skills and Social Development and the Status of Persons with Disabilities as part of their study on supporting vulnerable seniors. The submission, and the Seniors Advocate's presentation in Ottawa, focused on the diversity of housing and health status across Canada, emphasizing the need for federal leadership to support standardized levels of subsidy for home and community care services and rental supports.

### Helping Seniors Living Independently for as Long as Possible

The OSA's pre-budget submission to the B.C. Select Standing Committee on Finance focused on how the cost of rent and home support is pushing low and moderate income seniors into residential care, where given the existing subsidy level, they will be better off financially than living independently. The submission concludes by recommending that:

- 1) the client rate for home support be waived for clients in receipt of Shelter Aid For Elderly Renters (SAFER)
- 2) the rent cap on SAFER should reflect the Canadian Mortgage and Housing Corporation average rents by Census Metropolitan Area



*Residential Care Survey Volunteers in Victoria*



### Addressing Poverty of BC Seniors

The OSA focused on the cost of housing and health care in its poverty reduction submission, which was submitted as part of a province-wide consultation. The submission highlighted those health care costs that are not covered by the *Canada Health Act* and PharmaCare, such as hearing aids, incontinence products, mobility aids, and personal assistance to get dressed or prepare meals. It also outlines the affordability challenges facing senior renters and homeowners alike.

The submission puts forward the following recommendations to address these concerns.

1. Eliminate the co-payment for home support services or, if that is not possible:
  - revise the home support co-payment formula to reduce the co-payment
  - exempt seniors on SAFER from a home support co-payment
  - allow deferral of the home support

co-payment against home equity using the same framework as Property Tax Deferral program

2. Better align the market rent cap for SAFER with the actual market rent and require a regular review and adjustment.
3. Allow homeowners to defer certain costs of housing against the equity in their home using the framework established for the Property Tax Deferral program.

### Raising the Issues of Age-based Discrimination

The Seniors Advocate presented in-person to Parliamentary Secretary Ravi Kahlon regarding the re-establishment of the BC Human Rights Commission. During the meeting, the Advocate discussed issues around ageism in the workplace, health care settings, and transportation.

# Progress to Date

The OSA makes recommendations to government and service providers on system improvements to better meet the needs of B.C. seniors through its reports, submissions and other initiatives. Key highlights of the progress made on some of these recommendations are included in this section.

## Investment in Residential Care

As announced in Budget 2018, \$548 million will be invested over three years into primary care, home and community care, residential care, and assisted living. The funding is incremental to the federal funding that will be used to invest in home care to enable seniors to remain in their own homes. The provincial funding will help increase staffing to reach the 3.36 direct care hours per resident, per day staffing guideline across the province as recommended by the Seniors Advocate.

## Update to Maximum Rent Ceilings

Budget 2018 committed \$58 million to increase the average benefit under the Shelter Aid for Elderly Renters (SAFER) program. Updates to the maximum rent ceilings and the gross monthly income ceiling for SAFER come into effect in September 2018 and on average seniors will receive an extra \$930 per year. This increase helps address one of the recommendations from the OSA's 2015 report *Seniors' Housing in B.C.: Affordable, Appropriate, Available*.

## Changes to Tenancy Laws

Effective December 11, 2017, changes to the *Residential Tenancy Act* include limiting the use of vacate clauses in new and existing fixed-term tenancy agreements. A vacate clause can now only be enforced if the existing fixed-term tenancy agreement is a sublease agreement or if the landlord or their close family member intends in good faith at the time of entering into the agreement to occupy the rental unit at the end of the term. Unless the landlord and tenant agree to enter into a new fixed term, the tenancy automatically converts to a month-to-month tenancy under the same rules as the original agreement. The changes also limit rent increases between fixed-term tenancy agreements with the same tenant, and strengthen the ability of the Residential Tenancy Branch to investigate and levy administrative penalties for serious repeat and deliberate non-compliance with tenancy laws or orders. These changes will help protect vulnerable senior renters, by closing the fixed-term lease loophole that allowed some landlords to bypass rent control.

## Housing Hub

The Office of the Seniors Advocate has raised concerns about affordability challenges for moderate-income seniors and housing availability in more rural and remote areas. Budget 2018 announced the creation of the HousingHub, a new division within BC Housing with the mandate of increasing the supply of affordable housing, both for rent and for purchase, for middle-income earners. The Hub will work in partnership with non-profit and for-profit sectors, faith groups, other levels of government, and others to find and use or re-use available land across the province to construct and/or redevelop outdated existing housing developments.

## Manufactured Homes Legislation Amendment

Legislation amendments to the *Manufactured Home Park Tenancy Act* were introduced in British Columbia to provide stronger protections for people affected by manufactured home park closures. The changes increase the compensation owners will receive if they are forced to move because of redevelopment. Isobel Mackenzie reached out to appropriate experts and program leaders to ensure that, despite seniors' unique needs, the amendments are benefitting older adults in British Columbia. The amendments are in line with a recommendation put forward in the OSA's 2015 housing report (*Seniors' Housing in B.C.: Affordable, Appropriate, Available*).



Attendees at release of Every Voice Counts in Okanagan

# 2017/18 OSA Operating Budget

The budget for the OSA's fourth year of operation was allocated at \$2.43 million. Expenditures focused on completing the provincial residential care survey, consulting with seniors in their communities, monitoring key services to seniors, and producing reports with recommendations to government and service providers to address systemic issues and improve services to seniors. As expected, expenditures for professional services associated with conducting systemic reviews, reporting, and provincially standardized surveys were reduced significantly from last

year, coming in at \$340,000 compared to \$1.45 million in 2016/17. This reduction was primarily the result of the completion of the HandyDART survey in 2016/17 as well as the completion of the majority of the work on the residential care survey in 2016/17. The \$340,000 was slightly above the planned budget of \$325,000 for professional services due to final residential care survey completion costs in 2017/18. As a result of significant cost savings in other areas, the overall expenditures of \$1.70 million was well below the \$2.43 million budget allocated.

## Statement of Expenditures

Expense Type	2017/18 Budget	2017/18 Actuals
Salaries	\$ 1,175,000	\$ 952,289
Employee Benefits	285,995	244,530
Boards, Commissions, and Meetings	0	2,610
Travel	85,000	32,163
Legal Services	45,000	2,552
Professional Services	324,771	340,039
Information Services	40,000	34,148
Office, Business and Reporting Expenses	474,000	90,313
Amortization Expenses	0	2,487
<b>Total Expenses</b>	<b>\$2,429,766</b>	<b>\$1,701,131</b>

# The Council of Advisors

The Office of the Seniors Advocate's 30-member volunteer Council of Advisors has continued to provide invaluable feedback and insight over the past year. Coming from communities across B.C. from Port Alice to Grand Forks, this diverse group of individuals have been the "eyes and ears" of the Advocate, gathering feedback from seniors in their communities and highlighting the most pressing issues facing seniors. Transportation has been a key theme this year, and several members of the Council were part of an OSA sub-committee examining transportation challenges that informed the Office's systemic review of seniors' transportation that was released in May 2018. Council members

were busy representing the OSA in their communities at a number of events and presentations, including the Union of BC Municipalities Convention and various seniors' health and wellness events.

The Council continues to meet in person twice yearly providing input on key OSA initiatives. This past year areas of focus for the Council included:

- policy regarding medical assistance in dying in residential care
- income challenges for seniors
- awareness levels of key subsidies and supports for seniors



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## Council of Advisors

### Fraser Region – eight representatives

**ML (Mary-Lynn) Burke,** Delta; volunteer, Delta Seniors Planning Team; helps seniors navigate B.C.'s health system for services and housing; spent 15 years with Vancouver Coastal Health managing volunteer programs for seniors; vice president on the Delta Housing Be Mine Society, creating affordable housing for people with varying abilities; columnist with the Delta Optimist and the North Delta Reporter writing mostly on seniors and housing issues.

**Janet Sie Ling Lee,** Burnaby; immigrated to B.C. from China in 1963; hospital nurse for 30 years; volunteers with senior outreach for the Collingwood Community Centre; established a Chinese school in Vancouver in the 1980s.

**John Barry Worsfold,** White Rock, Adjunct Professor in Department of Gerontology at Simon Fraser University; former clinical social worker in the field of psycho-geriatrics for Fraser Health Authority.

**Leslie Gaudette,** Langley; epidemiologist and retired manager in Chronic Disease Division, Public Health Agency of Canada; senior analyst, Canadian Cancer Registry, Statistics Canada; member Langley Seniors Community Action Table, and supporter of Bard in the Valley and the Langley Players Drama Club.

**Kay Dennison,** Delta; coordinator, Delta Seniors Planning Team; 17 years as supervisor of a community non-profit advocating for seniors' rights and independence; worked with seniors in areas of abuse, poverty, transportation and housing; volunteers on the Delta Opposes Violence Everywhere (DOVE) and Network to Eliminate Violence in Relationships (NEVR) committees as the voice for seniors in the areas of senior abuse and family violence.

**Val Windsor,** Delta; co-chair of the Delta Seniors Planning Team; Delta School District trustee; 40 years in education, including 32 years as a classroom teacher. Passionate about seniors' housing, transportation and non-medical services.

**Mohammad Rafiq,** Surrey; volunteer in community development and welfare organizations including Surrey Seniors Planning Table; seeks to reduce the intergenerational gap and develop inter-cultural communication between communities.

**R.D. (Bob) Ingram,** Mission; 35 years in public service; education consultant; president of Mission Seniors Centre Association, Mission Community Services Society and Mission Association for Seniors Housing; 2014 Citizen of the Year Award.

## Interior – six representatives

**Donald Caskey**, Grand Forks; active community volunteer, B.C. Seniors' Games (B.C. 55+ Games) Society, the local Red Cross Health Equipment Loan Program (HELP), the local hospice and the Kettle Valley Food Cooperative.

**Walter Popoff**, Krestova, Slocan Valley; director on the Regional District of Central Kootenay; vice chair, West Kootenay Boundary Regional Hospital District; executive of the Slocan Valley Seniors Housing Society.

**Heather McDonald**, West Kelowna; Retired 2000 Coquitlam School Board; a member of Senior Citizens Service Association; Certified Senior Advocate 05/10/08; joined 2014 Westside Health Network Society, a non-profit organization as Vice President helping over 400 seniors on the westside. Taken courses as a senior peer advocate funded by Health Canada and Vancouver Foundation. Served on a committee with Kelowna Community Resources participating in a project for seniors transitioning from loss and retirement; September 2017 joined the Council of Advisors; volunteered for Red Cross, Salvation Army, Gospel Mission and Food Bank.

**Broc Braconnier**, Kelowna; Professional Engineer; retired senior Canadian Forces Officer and former CEO of a BC post-secondary training institute, currently serving on several boards including BC Condominium Homeowner Association, Central Okanagan Community Futures Development Corporation, among others.

**Wade Ireland**, Kelowna; figurative art model, actor; an experienced seniors' peer support worker; volunteered with seniors and disabled people in B.C. and Manitoba.

**Jennifer Coburn**, Savona; past president BC Old Age Pensioners Organization.





## Northern – three representatives

**Anne Hogan**, Prince George; retired regional district administrator; housing research volunteer for the Prince George Council of Seniors; 2009 Masters thesis from the University of Northern British Columbia on seniors' housing, health and social inclusion in the city.

**Linda Pierre**, South Hazelton, Director, Regional District of Kitimat-Stikine and North West Regional Hospital District, representing First Nations and rural/remote communities; Instructor, Northwest Community College; Marriage Commissioner; interest in social justice, systemic change.

**Dawn Hemingway**, Prince George; Associate Professor and Chair of the School of Social Work at the University of Northern British Columbia; Immediate Past President of the BC Psychogeriatric Association, serves on Northern Health Authority's Elder Program Council, Provincial Director for Nidus Personal Planning Resource Centre and Registry; Prince George Better At Home Advisory Committee; Prince George Council of Seniors Advisory Committee; leadership team for the Stand Up for the North Committee.





## Vancouver Coastal – seven representatives

**Stuart Alcock**, Vancouver; president of the 411 Seniors Centre Society; experience in health care, constituency assistance, legal aid management, social work and child and youth care counselling.

**Mohinder Grewal**, Richmond; Council of Senior Citizens Organizations of B.C.; former executive director, Sikh Professional Association of Canada; director, Vancouver Multicultural Society; president (twice), National Association of Canadians of Origins in India.

**Trudy Hubbard**, North Vancouver; president Kiwanis Seniors Housing; former executive director, North Shore Volunteers for Seniors; member, College of Occupational Therapists of B.C.; manager, B.C. Centre for Non-Profit Development.

**Ihsan Malik**, Richmond; 40-year member, Pakistan Canada Association, served as trustee, public relations director, secretary, and president; advocates for immigrant and refugee seniors' issues such as language barriers, transportation, housing and more; President of Metro Vancouver Cross Cultural Seniors Network Society for the last 3 years; Chairman of Trustees of Pakistan Canada Association for the last two years. Recently elected on the steering Committees of BC Health Coalition.

**Jennifer Shaw**, Vancouver, retired gerontologist; former executive director of the West End Seniors Network, 1991-2004; chair, 1998 National Conference of the Canadian Association of Gerontology; fundraiser for a new hospice in Vancouver.

**Robie Scholefield**, Vancouver; former BC TEL (now TELUS) Marketing Manager. For many years, Robie has been a member and volunteered in many associations. He is dedicated to improving the quality of life of seniors and persons with disabilities.

**Marnie Simon**, Pemberton; former program head of the Perioperative nursing program at BC Institute of Technology; president of the Whistler Health Care Foundation for 15 years; director and chair of the Pemberton Library Board for 8 years; member of the advisory committee to Vancouver Coastal Health for over 5 years representing the Sea to Sky corridor; currently a member of the fundraising committee for the Sea to Sky Hospice campaign. Marnie is a Rotarian and was president of the Pemberton Arts Council for the past 4 years.

## Vancouver Island – six representatives

**Robert (Bob) McWhirter**, Salt Spring Island; former teacher, school district administrator; board member, Greenwoods Eldercare Society; president, Gulf Islands Retired Teachers Association; president, Salt Spring Island Historical Society.

**Gail Maureen Neely**, Port Alice; chair, Seniors/Elders Better Living Advisory Committee to the Mount Waddington Health Network; represents both First Nation and non-First Nation communities; former mayor, Port Alice.

**Bob Willis**, Nanoose Bay; former air traffic controller; “Past President”, and Chair of the Nomination Committee, to the Nanaimo and Area Branch of the National Association of Federal Retirees; assists 2,000 members through committees, coordinating volunteers and member outreach.

**Buncy Pagely**, Saanichton; opened first Multicultural Women’s Centre in Victoria; Canada’s first model Diabetes Centre on the Songhees reserve; winner, Women of Distinction Lifetime Achievement Award; Honorary Citizen Award from the City of Victoria; Facilitator of Cancer and Heart Disease Programs in the Multicultural Communities in BC, 10 years.

**Valerie Thoem**, Sidney; focus on accessibility and the implications of aging to people with a disability; has been a member of BC Ferries Advisory on Accessibility; Disability Alliance of BC and B.C. representative on Canada Pension Plan board concerned with developing fair and equitable CPP provisions for individuals with a permanent disability.





**Email**

[info@seniorsadvocatebc.ca](mailto:info@seniorsadvocatebc.ca)

**By Phone**

Toll-free 1-877-952-3181

**In Victoria**

250-952-3181

Open Monday to Friday, 8:30-4:30

Translation services available in more than 180 languages.

**By Fax**

250-952-3034

**By Mail**

Office of the Seniors Advocate

6th Floor, 1405 Douglas Street

PO Box 9651 STN PROV GOVT

Victoria, BC V8W 9P4

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