

2019-20

ANNUAL REPORT

of the Office of the Seniors Advocate



OFFICE OF THE
SENIORS ADVOCATE
BRITISH COLUMBIA



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BRITISH COLUMBIA

September 2020

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 2019/20 Annual Report of the Office of the Seniors Advocate in accordance with section 4(4) of the *Seniors Advocate Act*.

The document is the sixth annual report from the Office of the Seniors Advocate and reports on the period of April 1, 2019 to March 31, 2020.

Sincerely,

Isobel Mackenzie
Seniors Advocate
Province of British Columbia

CONTENTS

MESSAGE FROM THE SENIORS ADVOCATE	2
ABOUT THE OFFICE	4
COMMUNICATION, OUTREACH AND ENGAGEMENT	5
INFORMATION AND REFERRAL	6
Methods of Contact	6
Distribution of Contacts	9
Reasons for Contacting the OSA	10
Issues Identified	12
COVID-19 Response	21
Referrals to Services	23
MONITORING SENIORS SERVICES IN B.C.	24
Monitoring Seniors Services Report	24
Long-Term Care Quick Facts Directory	26
REVIEWING SYSTEMIC ISSUES	27
Home Support... We Can Do Better	27
A Billion Reasons to Care	27
ISSUE PAPERS, SUBMISSIONS AND PRESENTATIONS	29
PROGRESS TO DATE	32
COUNCIL OF ADVISORS	35
2019/20 OSA OPERATING BUDGET	42



The 2019/20 fiscal year was shaping up to be a busy and productive year. However, nothing prepared us for the frenzy of activity that descended upon us as the year came to a close and we found ourselves in the middle of a global pandemic that was placing a phenomenal burden on the health and social service sector and areas that serve seniors.

For the most part, this annual report will provide a look at our activities in the “pre-COVID-19” world. We highlight our systemic reports and our annual publications and monitoring results. You will read of the many communities visited as the OSA remains committed to reaching seniors directly in all parts of B.C. Highlighted, is the continued engagement with stakeholders who provide services to seniors, along with a continually increasing virtual and social media presence as demonstrated with Twitter and website activity.

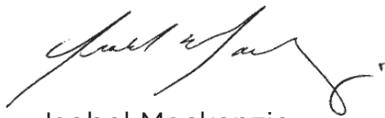
As always, we have taken the opportunity of our annual report to share with you a few of the stories we hear from the thousands of seniors who reach out to our office each year. Through their own voice, we can see that seniors throughout B.C. have faced many challenges as they navigate through the aging process. We also find that in many cases we can connect seniors and their family members with the services and supports they need.

This report includes a section related to the last month or so of this year when the office was focused very much on responding to the emerging pandemic. As we finished off the last quarter of 2019/2020, we were making tremendous adjustments to support the safety of OSA staff who began to work from home, while continuing the important work of this office. In particular, the launch of Safe Seniors Strong Communities, a program funded by the B.C. government in response to COVID-19, required a phenomenal effort by staff of the OSA and the Ministry of Health as we were guided by an all-party committee of the legislature. The

result of these efforts will leave a lasting legacy for seniors through a stronger social safety net.

As we reflect on the work of this office over the past year, there is as always, a recognition of the tremendous support for seniors demonstrated by tens of thousands of British Columbians who volunteer their time to deliver services, participate in research and provide advocacy on behalf of seniors. There are also incredibly dedicated professional staff both here at the OSA and throughout governments, health authorities and service providers across the province who work tirelessly to support healthy and dignified aging. To all these people I say a most profound thank you.

Sincerely



Isobel Mackenzie

**Seniors Advocate
Province of British Columbia**



ABOUT THE OFFICE

The Office of the Seniors Advocate (OSA) was created in 2014 under the authority of the *Seniors Advocate Act*. The OSA is mandated to address issues related to seniors age 65 and older, in the areas of health care, housing, transportation, income, and personal supports. The Seniors Advocate focuses on overall systemic issues, while also connecting individuals to the appropriate organization to resolve their individual needs.

Through the OSA, the Seniors Advocate fulfills the legislative duties, responsibilities and authorities outlined under the Act by:

- monitoring seniors' services,
- identifying and analyzing systemic issues affecting the well-being of seniors,
- making independent recommendations to government and service providers,
- collaborating with persons delivering seniors services to improve efficiency and effectiveness of services, and
- promoting awareness of resources available to seniors and connecting seniors with the information and services they need.

Under the Act, the Seniors Advocate also has a duty to advise, in an independent manner, the Minister responsible for seniors, public officials, and persons who deliver seniors services. Areas on which the Seniors Advocate can provide advice include systemic challenges faced by seniors, policies and practices respecting those challenges and the changes needed to address them.

In order to fulfill the legislated role of the Seniors Advocate, the office focuses on four main areas of activity:

- Communication, outreach and engagement
- Information and referral
- Monitoring seniors services
- Reviewing and reporting on systemic issues

The Seniors Advocate is also supported in her role by a diverse Council of Advisors from all areas of the province, who provide valuable insight into the key issues affecting BC seniors.

COMMUNICATION, OUTREACH AND ENGAGEMENT

Through a variety of outreach activities, the OSA hears from thousands of seniors, their families, stakeholders, and service providers each year. These engagement opportunities are a critical component of this office to inform us of the systemic issues facing B.C.'s seniors.

CONNECTING WITH SENIORS

In 2019/20, the Seniors Advocate continued to connect directly with seniors through community presentations and town hall meetings on topics such as seniors services, long-term care, home support, caregiver support, housing, and transportation issues. The audiences ranged from community organizations to attendees at academic conferences.

Town
Hall and
Community
Presentations
83

Stakeholder
Meetings
174

CONNECTING WITH STAKEHOLDERS

The Seniors Advocate regularly liaises with stakeholders to further develop an understanding of the issues and challenges faced by both seniors and those who provide services and supports to B.C. seniors.

CONNECTING GEOGRAPHICALLY

In 2019/20, the Seniors Advocate visited 40 communities across B.C. in all five health authorities. 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
40

Senior Population in B.C. by Health Authority, 2019

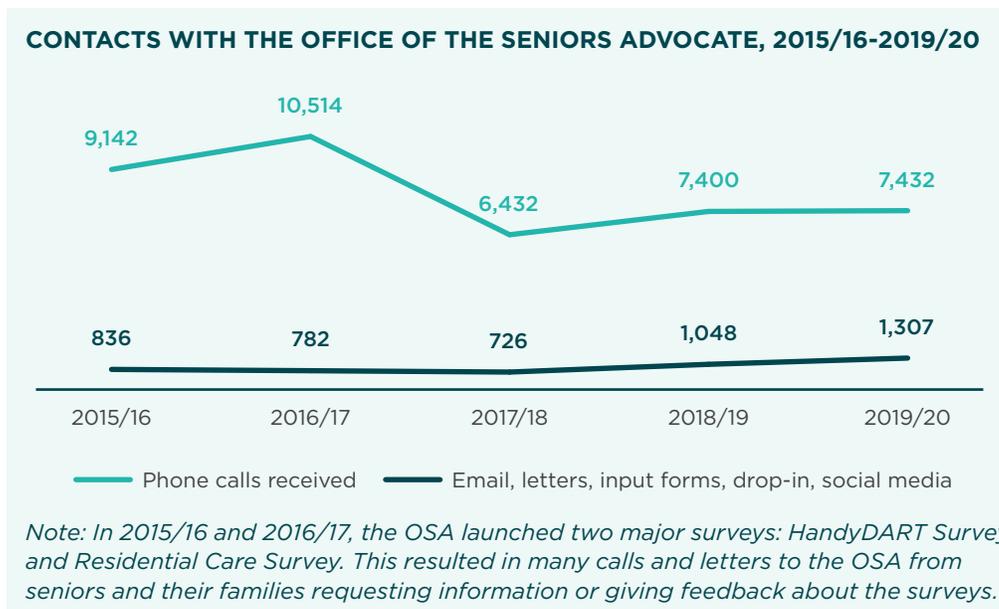


INFORMATION AND REFERRAL

The OSA provides thousands of seniors with information regarding the supports and services available to them. We operate a 1-800 information and referral phone line that has recently expanded to provide 24-hour service and a website that provides direct links to the *BC Seniors' Guide* and several reports and publications. In addition to providing information to seniors, the OSA receives information from seniors through telephone calls and emails. The feedback from seniors on the issues that matter to them is integral to the work of this office.

METHODS OF CONTACT

The OSA records all contacts with our office by all methods of communication. We track and monitor information about each contact, 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 future research.



PHONE, EMAIL, AND LETTERS

Members of the public have several avenues to access the OSA, including telephone, email, an online input form, and surface mail. The toll-free information and referral phone line was expanded in 2019/20 to allow for 24-hour access. Staff responding to the phone and to correspondence have a wide variety of knowledge and experience. Some are health professionals with many years of experience working with seniors, community-based programs and the health care system while others have extensive experience with government programs and front-line customer service. All are dedicated to supporting seniors, their families and the general public with meaningful information and referrals to services and programs that can assist them in resolving their issues.

In addition, the OSA website, www.seniorsadvocatebc.ca, features an input form that provides a space for the public to inform the OSA of issues that impact many seniors, and to submit ideas, solutions and comments related to these matters.

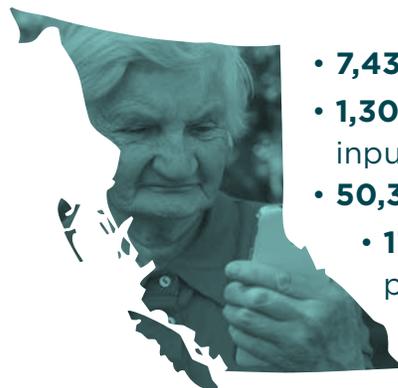
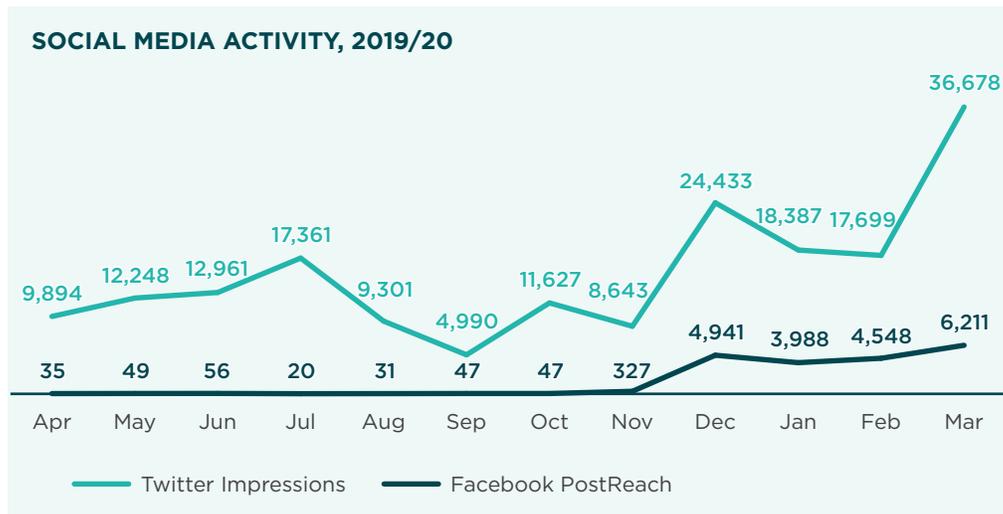
WEBSITE

There were 50,379 visitors to our website in 2019/2020. Activities included 2,328 searches of our online Long-Term Care Quick Facts Directory and 11,939 downloaded files. The chart below shows the site views and page views that gradually increased throughout 2019/20.



SOCIAL MEDIA

This year, the OSA expanded its use of social media, including Twitter and Facebook, to interact with the public about current events and relevant topics. Twitter users read 134 tweets posted by our Office a total of 173,464 times, and 20,300 people saw one of our 64 Facebook posts at least once throughout the year. There were a total 2,167 Twitter followers and 731 Facebook followers by the end of 2019/20. Twitter impressions and Facebook post reach increased significantly throughout the year, particularly in March due to the COVID-19 outbreak.

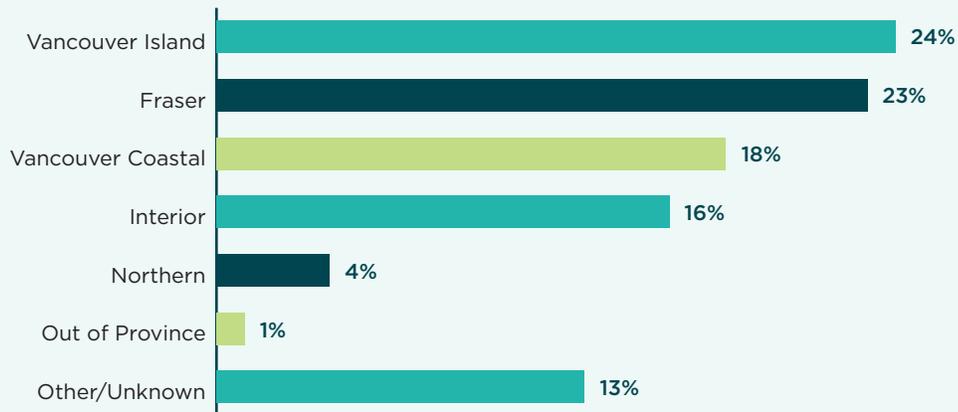


- **7,432** phone calls received
- **1,307** letters, emails and input forms received
- **50,379** website visits
- **173,464** organic post views on Twitter

DISTRIBUTION OF CONTACTS

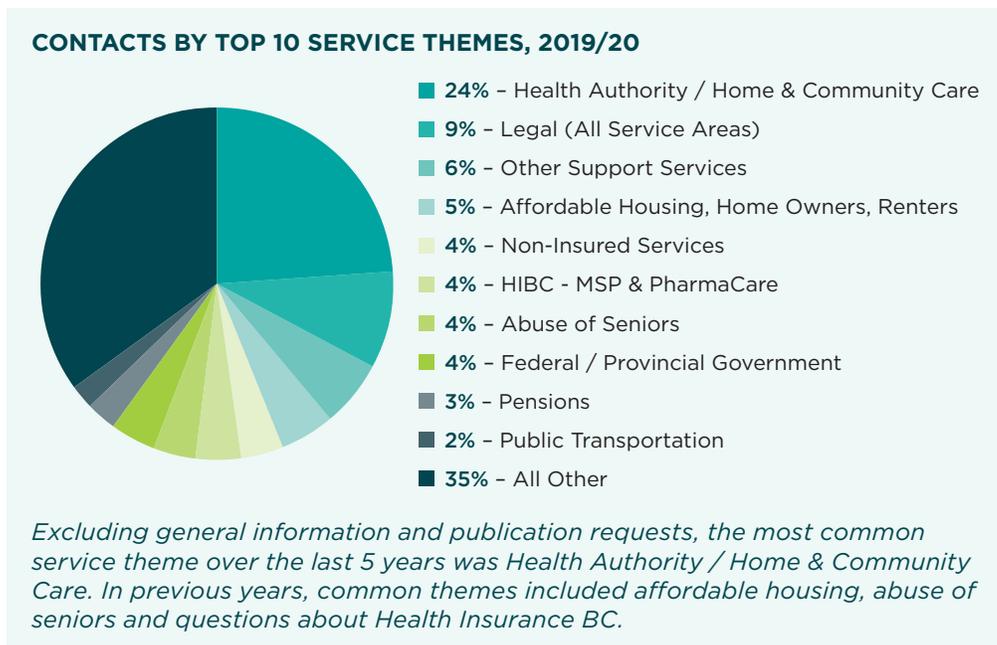
Wherever possible, the geographic location of the person contacting our office is captured and recorded by health authority. While only 2019/20 data is shown below, there was little variation in the distribution by health authority over the five years between 2015/16 and 2019/20 with the highest number of contacts initiating from within the Vancouver Island Health Authority each year.

DISTRIBUTION OF CONTACTS BY HEALTH AUTHORITY, 2019/20

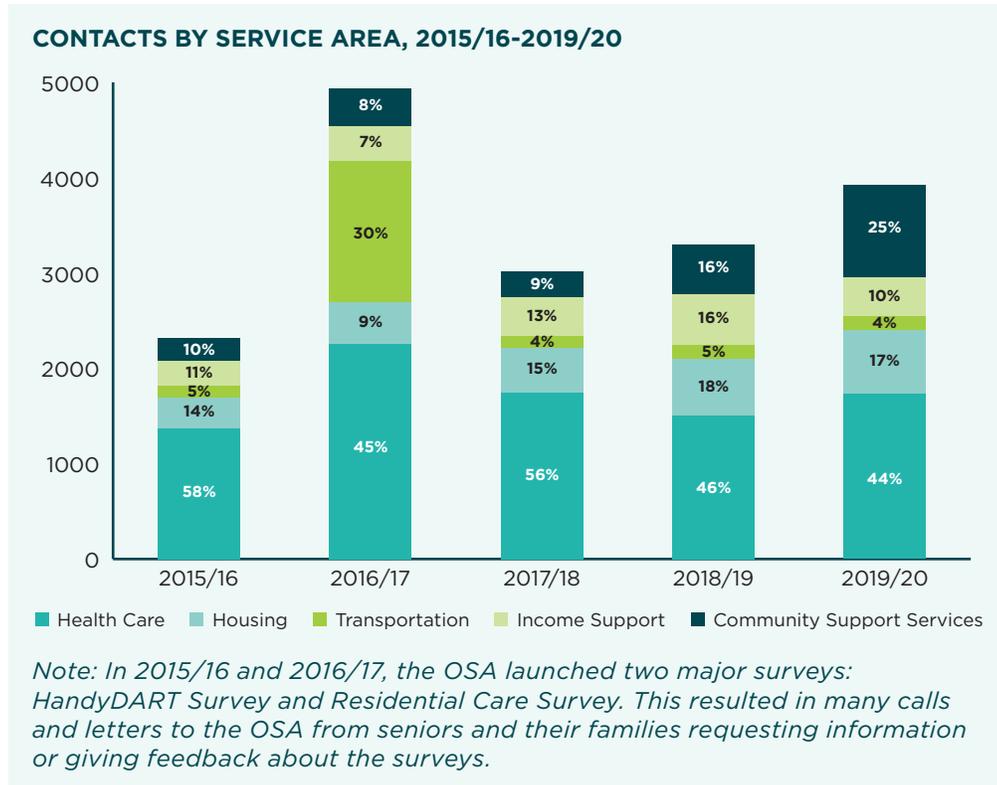


REASONS FOR CONTACTING THE OSA

In addition to where people are contacting us from, we also track why they contact us. We continue to receive many requests for the latest edition of the *BC Seniors' Guide*, which was released in 2016. In 2019/20, about 900 individuals and seniors' organizations contacted us for copies of the *BC Seniors' Guide* and we distributed over 21,000 copies. The *BC Seniors' Guide* is available in English and six other languages: French, Punjabi, Chinese (Traditional), Farsi, Korean, and Vietnamese. Most of the remaining inquiries to the office are in one of the 10 service themes highlighted in the chart below.



The chart on the next page tracks service themes over time. It shows that health care consistently generated the most calls, emails and letters.



SUMMARY OF REASONS FOR CONTACTING OSA

In 2019/20, we heard from seniors and their families with questions about existing programs and new initiatives. Some of the issues included:

- Assistance with understanding Fair PharmaCare
- Support for family caregiver burnout
- Help for seniors experiencing abuse, neglect or self-neglect
- Accessing equipment seniors require, and affording supplies required to live at home
- Services for seniors who can no longer care for themselves, allowing them to age in place such as the home support and Choices in Supports for Independent Living (CSIL) programs
- Help with the long-term care placement process including facility selection, understanding the new facility consent legislation and the new long-term care preferred choice and wait-list process
- Help to navigate transition to a different type of housing due to age, increasing complexity of needs, or changing physical abilities

- The BC Bus Pass Program, HandyDART, and the Taxi Saver Program
- Low levels of income support available through government programs
- Federal and Provincial COVID-19 related income supports
- Looking for help with housework, yard work, medical appointments, transportation, small renovations, meal preparation, snow removal, and assistance moving

COVID-19: Community Support Information Requests

- Online sign-up for *Safe Seniors, Strong Communities* initiative
- Housework, rides to appointments and other personal needs
- Grocery shopping in areas not served by Better at Home
- Volunteers seeking to assist seniors
- Services inaccessible in person

ISSUES IDENTIFIED

Many individuals contacted the OSA to inform us of systemic challenges facing seniors in relation to health care, housing, transportation, income supports and community support.

HEALTH CARE

- Inability to find a family doctor, walk-in clinic capacity, or physician visits where only one issue per appointment can be discussed
- Wait times to see specialists and for surgeries
- Cost of non-insured services including physiotherapy, occupational therapy, dental care and counselling
- Discharge from hospital before a senior feels ready to care for themselves at home or without enough professional or family support
- Home support continuity of care, staffing shortages resulting in cancellations, and lack of predictability of when home support staff might arrive during the day

- Transition from contracted to health authority delivered home support in Vancouver Coastal, Fraser Health and Vancouver Island Health Authorities
- Care received through a health authority, or unhappy with complaint process results
- Wait times for assisted living or long-term care, waiting for preferred facilities, or being moved back from hospital to home to wait for assisted living or long-term care
- Cost of subsidized assisted living or long-term care and the ability of a spouse remaining at home to afford to continue to live at home
- Concerns about the foreign ownership and private management of long-term care homes
- Concerns that medications are used to manage behavior or to address staffing shortages in long-term care
- Concerns with quality of care, staffing, and food in long-term care

COVID-19: Health Care Related Issues

- Concerns with COVID-19 restrictions on long-term care and assisted living visitation resulting in emotional challenges for seniors and families
- Application of assisted living and long-term care visitation guidance to independent living and other senior residences, resulting in restrictions on seniors' freedom of movement and ability to receive personal care, social and other visits
- Concerns regarding the availability of personal protective equipment for the protection of seniors, families, and staff in community settings
- Lack of access to services during COVID-19 such as personal care, transportation, assistance for daily tasks, government services, and tax clinics
- Prescription refill limits intended to safe-guard the drug supply during COVID-19 resulting in multiple dispensing fees, causing hardship for low income seniors
- The lack of access to COVID-19 testing

Family members often call the office to ask for tools that will help them to decide where to place their loved ones when they need to enter a long-term care home.

Mark phoned our office when his 87-year-old dad was assessed to go into long-term care. The new placement process came into effect on July 15, 2019 allowing families to choose up to three preferred facilities where they would like their loved one placed.

Mark was feeling overwhelmed with this task and did not know where to begin gathering reliable information on which to base this significant decision. Mark called the OSA to discuss this process and we guided him to the Long-Term Care Quick Facts Directory on our website. This database is updated annually by the OSA and provides in-depth data on each publicly subsidized long-term care home for seniors in the province including a link to each home's website. We searched the homes in his dad's health authority and explained to him how to interpret the information for each facility.

Mark was very appreciative of the assistance and impressed with the information provided. He stated it was going to make the process of placing his father in a long-term care home so much easier for him.



HOUSING

- Sufficient income to meet increasing rental costs
- Evictions due to renovations
- Increases in the costs of hospitality services and annual fees in some independent living and other supportive seniors housing sites which are above the cost-of-living adjustment
- Independent living and other supportive seniors housing not meeting the standards they had set out in their original agreements
- Levies imposed by strata/increased condo fees, making it unaffordable for seniors on fixed incomes to remain in their homes
- Affordability of renovations such as adding an accessible bathroom, or regular repairs such as replacing a roof in order to remain living at home
- Landlord tenancy issues



When seniors contact us about their housing situation, they are often dealing with a crisis after several months or years of increasing financial hardship. Rather than having to admit they can't make their rent or mortgage payment, they often skimp on other necessities, including food and medications, to be able to ensure a safe place to live.

When Lucinda phoned our office, she was desperate to talk to someone about her worsening situation. She lived alone in a small studio apartment in Kamloops with only her public pensions for support. She receives the full Old Age Security (OAS)/Guaranteed Income Supplement (GIS) and the BC Seniors Supplement and with a small grant from the Shelter Aid for Elderly Renters (SAFER) program was able to just make ends meet. With the allowable rent increases, the increased cost of food and utilities Lucinda was finding she didn't have enough remaining each month for her rent. She had no close relatives and was terrified of admitting to her landlord she didn't have enough for the rent as she is worried about eviction.

We were able to talk to Lucinda about other community programs available, such as the BC Hydro Crisis Fund, which would help her pay her hydro bill in the short term. We encouraged her to talk to BC Housing about accessing subsidized housing.

TRANSPORTATION

- HandyDART services including limited hours of service, limited service locations, and low capacity compared to level of need and frequent cancellations
- Low income seniors who are as much as \$1 over the Guaranteed Income Supplement (GIS) limit not qualifying for the annual bus pass but even those seniors who do qualify have to pay a \$45 annual administration fee
- Lack of public transportation options in smaller centers and rural areas having impacts on seniors' access to health care services and community supports
- Lack of financial assistance for transportation to medical appointments where public transportation is not available
- Fairness and lack of a standardized fee for the Driver's Medical Examination Report

Many seniors are not aware of the programs available in their communities to help them with health-related transportation issues.

We received a call from an elderly woman who sounded very upset saying she and her 90-year old husband needed help getting to the cancer clinic. Shirley and her husband Will had just returned from a visit to their physician in Maple Ridge who had the results of Will's latest MRI. It showed his cancer had spread and the doctor said the Cancer Clinic in Vancouver was recommending seven weeks of radiation treatment. The treatment would be five days a week.

Shirley and Will were overwhelmed with this news as his previous treatment had been a surgery, and they were not expecting to hear about the spread of the disease or the need for such extensive treatment. They had both given up driving several years previously and were able to manage independently in an apartment close to the services they need. The thought of having to travel into Vancouver five days a week was very upsetting to them, and with limited funds available and Will too ill to contemplate making the lengthy journey by public transportation, they did not know where to turn.

When we spoke to Shirley, we were able to explain there were several options they could explore. First, we provided the phone number for the BC Cancer Patient and Family Counseling team in her area who are the liaison between patients and transportation services. We explained they might be referred to the Volunteer Cancer Drivers Society or the Freemasons Cancer Car Program. As the treatment time was quite long and included time over the holidays, we thought they might need more options and explained about HandyDART, transportation information through bc211 and the Seniors Transportation Access and Resources (STAR) Program in Vancouver which provides referral for senior's transportation services.

Shirley was very appreciative of the information we were able to provide as she realized there were affordable and appropriate options available for accessing Will's treatment.

INCOME SUPPORTS

- Cost of medications, vaccinations and non-insured services, such as prescription glasses, dentures, dental work, hearing aids, electric wheelchairs and scooters
- Cost of Fair PharmaCare deductible in the early months of the calendar year
- Lengthy processing times for government bodies that impact seniors' income and access to services
- Accessibility of Canada Revenue Agency and Services Canada through telephone or in-person centers
- Income related concerns arising from the loss of a spouse
- Impact of cashing in registered savings plans resulting from hardship or unexpected life events, and subsequently being penalized on income-based government benefits and services in the next year, such as the Guaranteed Income Supplement (GIS)
- Level of rent supplement for Shelter Aid for Elderly Renters (SAFER)
- Travel costs associated with appointments, treatments and procedures not covered by the Travel Assistance Program (TAP BC), such as accommodation, food, and mileage

COVID-19: Income Supports Related Issues

- Seniors not able to access government services to resolve issues related to income and other matters during COVID-19 lockdown. Individuals sometimes faced with 3-4 hour telephone wait times
- Seniors concerned with the closure of tax clinics, resulting in potential delays in filing taxes, and whether this would impact income and services reliant on 2019 tax returns
- Seniors facing financial difficulties needing information on income supports available through government services
- Lack of online access/literacy when information and services moved online due to COVID-19 restrictions and social distancing recommendations for seniors
- Prohibitive cost of home internet and the closure of public internet access points such as libraries during COVID-19 lockdown

We receive many calls from seniors who are struggling to live on a fixed income and afford basic necessities. The median income for a single senior in B.C. is approximately \$27,000 per year, meaning half the senior's population in B.C. must make ends meet on this amount or less.

Betsy is 83 years old and lives by herself in the Interior of B.C. in a small rented apartment. She receives OAS and the GIS and a small amount of Canadian Pension Plan (CPP). With the help of a Shelter Aid for Elderly Renters (SAFER) grant, Betsy is currently able to manage her monthly expenses, although she worries about the increasing costs of rent and food. Betsy is enrolled in Fair PharmaCare and pays a \$300 deductible every year.

Although Betsy has always managed independently, she is now experiencing some health challenges which have meant she needs additional supports. When her daughter Joanne phoned us, it was because she wanted information about how her mother could access more financial help. Betsy was no longer walking as steadily as she once did and Joanne wanted her to be able to install grab-bars in her bathroom and purchase a walker. As an eye test is an insured benefit, Betsy had also recently had her eyes tested and she now needs new glasses. In addition, Betsy had been saving money by not going to the dentist regularly and Joanne was now worried that her mother would soon need extensive dental work and possible dentures.

The OSA was able to provide information about the Home and Community Care program at Interior Health and suggested she request her mother be assessed for possible home support as appropriate. We also referred her to PharmaCare to ask about the Monthly Deductible Payments Option (MDPO) so that Betsy could pay her deductible in twelve equal monthly payments. The OSA was also able to refer Joanne to the Red Cross in their area which could loan her mother a walker. The need for dental and vision care was more challenging. The OSA was able to suggest one or two non-profit organizations and service clubs in their community who might have been able to assist.

We often hear about seniors having trouble paying for medications. Fair PharmaCare helps B.C. families pay for eligible prescription drugs, dispensing fees and some medical supplies.

Elizabeth called the OSA as she and her husband were having trouble paying for their medications even though they were enrolled with Fair PharmaCare. Their deductible for Fair PharmaCare was \$800 based on their combined income.

Under Fair PharmaCare's usual guidelines, clients pay the full deductible at the beginning of each year until they reach the maximum amount and then they are no longer charged for their medications. As for many low-income seniors, Elizabeth and her husband were struggling to pay the full deductible during the first few months of the year, resulting in temporary financial hardship. Elizabeth wondered if there were any programs to help them out of this dilemma and mentioned neither she nor her husband used a computer and therefore were unable to go to the PharmaCare website for information.

The OSA let them know about the Monthly Deductible Payment Option (MDPO) which would allow them to pro-rate their deductible to 12 equal payments of \$66.67 per month. PharmaCare would pay 70% of the remainder until the family maximum was reached. Elizabeth was very happy that this option was available to them and called Health Insurance BC to enrol. She commented on how it will improve their financial situation by spreading their costs over the entire year.

COMMUNITY SUPPORTS

- Lack of availability of Better at Home services in some smaller communities, as well as the cost and availability of some services even in larger communities
- Services and financial assistance to repair mobility scooters, particularly in smaller centers

COVID-19 RESPONSE

On March 26, 2020, the OSA announced a new program called *Safe Seniors, Strong Communities* in response to the COVID-19 global pandemic.

Since the beginning of the pandemic, there has been an outpouring of support from community members wanting to help seniors. Given the seriousness of COVID-19 for older adults, seniors living independently are encouraged to remain at home and allow their family, friends and neighbours to help them with things like grocery shopping, prescription pick up, meal arrangement, and to have virtual visits if possible.

Safe Seniors, Strong Communities matches seniors who need help with volunteers who can help bring groceries, medications, and prepared meals to seniors, and who can also provide a friendly phone call or virtual visit. The program is funded by the provincial government in partnership with bc211 and United Way's Better at Home program. *Safe Seniors, Strong Communities* is available throughout B.C., thanks to the expansion of bc211, a province-wide information and referral service.

One of the legacies of the program will be the lasting relationships formed between seniors and volunteers and the strength of all parties within government coming together to deliver an important service for seniors.



By March 2020, the OSA was starting to receive many calls and emails about the COVID-19 outbreak and what it would mean for seniors. The following story illustrates some of the issues faced by seniors during the COVID-19 outbreak and the remarkable response of British Columbians to ensure their senior friends and family were safe.

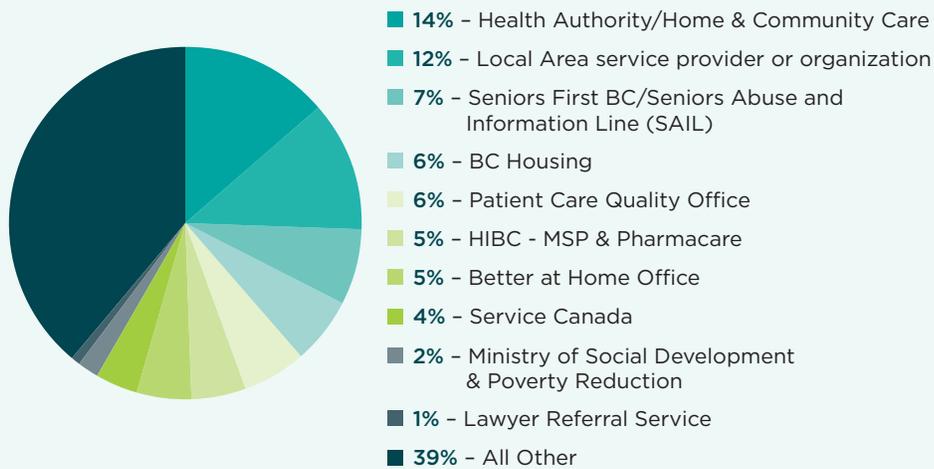
We received an email from Bill, an accountant with a property management firm in Prince George. His firm manages an older apartment building where several tenants are low-income seniors. Colleen, an 87-year-old woman who lived alone in the apartment building, was causing him some concern. He explained to us that even before the outbreak she had been struggling to make the rent on-time for a few months. He knew from her paperwork that she had no next of kin listed and when he had met her initially to set up her lease, she had seemed lonely but also proud of her independence.

Bill told the OSA that he was worried how Colleen was managing during the pandemic as she was isolated and didn't have any family or many social connections. Bill approached us to find out if there was a way to have someone check in with her on a friendly basis. The province had recently partnered with the United Way and Better at Home to provide grocery/pharmacy delivery and friendly visits to seniors who were self-isolating called the Safe Seniors, Strong Communities Program. We were able to contact the community association in Prince George responsible for these services through the program. When we spoke to the manager of the program, she agreed to have one of her regular volunteers contact the senior for a chat and to offer access to the support services she needed. All that remained for us to do was connect Bill with the Manager of Better of Home and the circle was closed: a vulnerable senior was offered the support services available in her community and was also able to access the provincial programs she might need.

REFERRALS TO SERVICES

Many of the people contacting our office, particularly those contacting us by telephone, raised issues that resulted in a referral to another agency or service that could provide further assistance. The OSA provided 2,061 referrals in 2019/20. Most people were referred to the Health Authority or Home and Community Care programs areas, or to local area service providers or organizations.

TOP 10 AGENCIES AND SERVICES REFERRED TO, 2019/20



Between 60% and 68% of referrals are to the same top 10 agencies and services each year between 2015/16 and 2019/20.



MONITORING SENIORS SERVICES IN B.C.

MONITORING SENIORS SERVICES REPORT



The fifth annual *Monitoring Seniors Services* report was released in December 2019. Focussing on key services that fall under the Advocate's legislated mandate, the report highlights where seniors' needs are being met and where improvements are most needed. Access to health care and personal supports, appropriate housing, adequate transportation, enough income to meet basic needs and protection from abuse and neglect are key to the health and well-being of seniors.

HEALTH CARE

- More seniors received the flu vaccine in 2018/19 with 87% of seniors in long-term care receiving the vaccine and 37% of all seniors living in the community receiving the vaccine.
- The number of home support clients increased by almost 2%: short-term clients increased 5% but there was a minor decrease of less than 1% in long-term clients. During this time, however, the target population of seniors aged 80 or older increased 3%.
- In 2018/19, the average and median wait times for admission to long-term care increased and the number admitted within 30 days declined from 70% in 2017/2018 to 67% in 2018/2019. The waitlist for admission at the end of 2018/19 grew 28% over last year from 1,379 to 1,767 people.

COMMUNITY AND PERSONAL SUPPORTS

- First Link® dementia support served 11,567 unique clients in 105 communities. This was a slight increase over 2017/18. There were over 5,000 new clients in each of the last two years.
- The Better at Home program supported 11,787 active clients who received 185,910 services. This was an increase over 2017/18. However, the number of new clients has been declining for three years.
- The New Horizons for Seniors Program approved 265 new community-based projects in B.C. with total funding of \$4.9 million resulting in a slight increase over 2017/18.

HOUSING

- The Property Tax Deferment program had been growing each year but in 2018/19 there were fewer new users for the first time in many years.
- At the end of 2018/19 the Shelter Aid for Elderly Renters (SAFER) program provided subsidies to 24,233 recipients, 6% more than the previous year and of those clients, 4,458 were new to the program. The average subsidy provided increased 14% over the last year and 21% over the past five years.
- The number of subsidized housing units continues to decrease, while demand for the program continues to increase. In 2018/19, there was a 1% decrease in the number of units available while there was a 14% increase in the number of applicants waiting at the end of the year. The median wait time for these applicants at March 31, 2019 was 1.5 years, reflecting no change from the previous year.

TRANSPORTATION

- In 2018, 78% (714,300) of seniors in B.C. maintained an active driver's licence. Taking into account the population growth, the proportion of seniors with an active driver license remained the same as last year.
- There were 72,000 driver fitness cases opened in 2018 for those aged 80 or older; 5,249 cases were referred for an Enhanced Road Assessment (ERA), newly introduced in March 2018, and 90 were referred for a DriveAble cognitive assessment. Referrals for testing are not comparable to previous years as use of the DriveAble test had already been declining for years with only the most critical cases being referred.
- The number of active HandyDART clients with TransLink, serving Metro Vancouver, increased 5% in 2018 and a further 4% in 2019 while the number of active HandyDART clients with BC Transit, serving the rest of the province, decreased 12% and 4% over these same two years. Overall, ride requests decreased 4% in 2019.

INCOME SUPPORTS

- Between October and December 2019, low income single seniors in B.C. could receive up to \$1,579.21 per month in federal and provincial income supports, an increase of 2% over the same time, last year.
- The maximum Canada Pension Plan benefit was \$1,154.58 per month, almost 2% more than last year.
- As of January 2020, MSP premiums were eliminated and replaced by the new Health Employer Tax.

ELDER ABUSE

- Seniors Abuse and Information Line (SAIL) received 4,372 calls in 2018 (13% decrease) with 31% related to abuse.
- bc211 Helpline received 408 calls about elder abuse in 2018/19 (36% increase).
- Designated Agencies responded to 1,626 suspected cases of abuse in 2018 where 81% were for seniors aged 65 or older.
- Public Guardian and Trustee received 1,787 referrals in 2018/19 where 44% proceeded to investigation, 46% did not proceed to investigation and 10% were general inquiries.
- RCMP responded to 1,153 reported victims of violent offenses (5% increase) and 16,081 complainants of property offenses (1% decrease) against seniors in 2018.
- Vancouver Police Department responded to 183 reported victims of physical abuse (6% increase) and 253 of financial abuse (2% increase) against seniors in 2018.

LONG-TERM CARE QUICK FACTS DIRECTORY



The *B.C. Long-Term Care Quick Facts Directory* lists information for publicly subsidized long-term care facilities in British Columbia and 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 spends a great deal of time each year updating information on beds, room configurations, funding for services, licensing complaints and inspections, resident profile indicators, and care services indicators.

The fifth edition of the online directory was released in October 2019. This year, more detailed information on facility inspections and licensing infractions were included. In addition, the food costs were changed to actual expenditures rather than funded amounts reported previously. To aid in the process of providing accurate information on long-term care options, our office will continue to update the directory annually and seek out the most useful information to provide to seniors and their families.

FACILITY

- The Quick Facts Directory contains information on 294 long-term care facilities in B.C. that have 27,284 publicly subsidized beds.
- 111 facilities are operated directly by the local health authority and 183 are operated by a contractor with funding from the health authorities.
- 88% of rooms are single-occupancy rooms, 8% are double-occupancy, and 4% are multi-bed rooms (3 or more beds).

RESIDENT PROFILE

- The average age of residents in long-term care is 85 years.
- 31% of residents are totally dependent on staff for their activities of daily living (ADL 5+), such as bathing, getting dressed, and getting out of bed.
- 29% of residents have severe cognitive impairment (CPS 4+).
- 48% of residents score as “low” on the social engagement scale (ISE 0-2).

SERVICES

- On average, facilities were funded for 3.25 direct care hours per bed per day, a 3.8% increase over 2017/18.
- The average per diem rate in contracted facilities was \$221.57 per bed per day, a 4.6% increase over 2017/18.
- The average actual raw food cost in long-term care facilities was \$8.11 per resident per day, a 3.2% increase, with a range across all facilities of \$5.21 to \$19.88 per resident per day.
- The proportion of residents receiving physical therapy (11%) and occupational therapy (7%) are on a decreasing five-year trend and recreation therapy (29%) has increased.

REVIEWING SYSTEMIC ISSUES

The OSA prepares reports and issue papers based on our systemic reviews of major issues affecting seniors in B.C.

Reports are posted on the OSA website and can be found under *Reports and Publications* at www.seniorsadvocatebc.ca. Brief highlights of the systemic reviews completed in 2019/20 are presented below.

HOME SUPPORT... WE CAN DO BETTER



This report is a comprehensive review of the B.C. home support program. Seniors overwhelmingly express a desire to age in their homes for as long as possible. Home support, which can include assistance with dressing, bathing, meal preparation and other tasks, is intended to allow seniors to live independently as they age. However, this report demonstrates that 61 percent of seniors entering long-term care received no home support in the months leading up to their placement and 62 percent of these seniors have a family caregiver in distress. The report's recommendations focus on making the program more affordable for seniors, increasing service levels, exploring a client direct-funding model, providing seniors with consistent and comprehensive information on the services available to them and exploring ways to make the job of being a community health worker more attractive.

A BILLION REASONS TO CARE



This report is the first provincial review of the \$1.4 billion-dollar publicly contracted long-term care sector in B.C. The review examined industry contracts, annual audited financial statements and detailed reporting on revenue and expenditures for the years 2016/17 and 2017/18 for 182 contracted long-term care homes. Overall, the contracted long-term care sector generated \$1.4 billion in revenue, of which \$1.3 billion came from public funding. The review found that expenditures and profits

were not evenly distributed between care homes and there was a distinct difference based on type of ownership with not-for-profit care homes spending more on direct care and less on building expenses. The review found that for-profit care homes have lower costs than not-for-profit care homes for each worked hour of direct care across all direct care classifications. The review also found problems with accountability of publicly funded building costs, and how operators engage with related businesses. The report resulted in recommendations to improve standardization and accountability for public spending in contracted long-term care facilities.



ISSUE PAPERS, SUBMISSIONS AND PRESENTATIONS

ATTITUDES AND AWARENESS SURVEY

The OSA's Attitudes and Awareness survey examined awareness of, attitude to, and utilization of various seniors services and programs provincially and federally. In addition, it probed preparedness for retirement and assessed financial security. While the survey is largely about seniors services and topics relevant to seniors, the OSA wanted to also understand - particularly on the topic of preparedness for retirement - non-seniors' awareness of topics typically viewed as only relevant to seniors.

Some of the highlights resulting from this survey include:

- Only 39.3% of seniors say they primarily get their information from the internet.
- Awareness around financial programs varied by program; for example, most respondents were aware of pension splitting, but few were aware of the Home Accessibility Tax Credit or the Home Adaptations for Independence program.
- Many respondents are planning ahead with 81% having a will, but only 61% have a Power of Attorney, and less than half, only 39% have a Representation Agreement.

TRANSPORT 2050 | METRO 2050 SUBMISSION

In September 2019, the Seniors Advocate presented a submission to Metro Vancouver and TransLink as part of the Transport 2050 | Metro 2050 consultation process. With the number of seniors holding an active driver's license dropping from 90% at age 65 to 54% at age 85, seniors may increasingly rely on friends and family or some form of public transit. However, the ability to use traditional public transit may be limited by the very impairments that have also limited their ability to drive. The Seniors Advocate had three specific suggestions to consider in the development of transportation services over the next few decades:

- provide a well-promoted, comprehensive education program to assist seniors using the transit system;
- the addition of benches to as many bus stops as possible; and
- the development of a ride-hailing service tailored to the needs of seniors.

REVIEW OF SENIORS ABUSE AND NEGLECT

Over the past four years the OSA has reported on seniors abuse and neglect through its yearly *Monitoring Seniors Services Report*. Review of the reported measures found that they are fragmented with different definitions, collection systems and disclosure requirements. Seniors abuse and neglect is an issue that the Seniors Advocate hears about in community meetings with seniors throughout the province and the impact it has on the safety and security of seniors can be profound. For these reasons, the OSA initiated a province wide systemic review of Seniors Abuse and Neglect. The systemic review has three main parts: consultation with key stakeholders; a review of current legislation, policies, data collection and monitoring; and a survey to measure public awareness and understanding.

SELECT STANDING COMMITTEE ON FINANCE

In June 2019, the Select Standing Committee on Finance and Government Services held an annual public consultation on the provincial budget. The Seniors Advocate presented the OSA report *Home Support - We Can Do Better* and made recommendations for improvement to the health care program.

INTERNATIONAL FEDERATION ON AGEING

In June 2019, the Seniors Advocate participated in an expert panel on “Adult Influenza Vaccination: Calling Canadian Patient Organizations to Action” convened by the International Federation on Ageing (IFA). This meeting gathered experts in influenza, immunization, aging, and vaccine preventable disease to study the importance of influenza vaccination for at-risk Canadian seniors, with a focus on the variance of schedules and access to vaccines among provinces.

CANADIAN ASSOCIATION OF GERONTOLOGY

In October 2019, at the 48th annual conference for the Canadian Association of Gerontology, the Seniors Advocate chaired a session on Health and Social Utilization and presented the OSA report *From Residential Care to Hospital: An Emerging Pattern*.



PROGRESS TO DATE

INVESTMENT IN LONG-TERM CARE

As announced in Budget 2018, \$240 million is being invested over three years to increase direct care hours in long term care facilities (\$50M in 2018/19, \$80M in 2019/20, and \$110M in 2020/21). In 2019/20, the second year of this initiative, \$74 million was allocated to health authorities to increase direct care staffing hours.

MONITORING OF DIRECT CARE HOURS IN LONG-TERM CARE

Since 2009, B.C. has had a long-term care staffing target of 3.36 hours per resident day. In 2016, the OSA produced the *Long-Term Care Facilities Quick Facts Directory*, which indicated that 81% of facilities were operating below this target. At this time the Health Minister asked the Parliamentary Secretary to work with the OSA and the Ministry of Health to examine three core areas – quality of care (including outcomes), staffing levels and funding in long-term care facilities. This resulted in the *Residential Care Staffing Review* that was published by the Ministry of Health in March 2017. Based on the recommendations in this report, the Ministry of Health began a project to work with health authorities and the long-term care industry to implement a process to increase hours per resident day for areas with identified gaps. There is currently an ongoing project to monitor direct care hours to ensure that each health authority averages 3.36 hours per resident day across all their facilities.

ACCESS TO LONG-TERM CARE

In July 2019, a new long-term care access policy came into effect allowing seniors or their family members to select up to three preferred care homes. Once it has been determined that a senior qualifies for publicly subsidized long-term care services, the health authority will provide detailed information on the long-term care homes in the chosen geographic area that meet the senior's care needs. If the senior cannot safely wait at home, an interim bed will be offered. However, the new policy ensures that a senior who accepts an interim placement will not lose their place on the waitlist for their preferred home. While there may be exceptions, the primary criteria for offering accommodation in a care home is wait time, i.e., those that have been waiting the longest get the highest priority. Wait times vary for each care home and can fluctuate over time. Revisions to this long-term care access policy address recommendations made by the OSA in the *Seniors' Housing in B.C.* report from 2015.

HEALTH CARE (CONSENT) AND CARE FACILITY (ADMISSION) ACT (HCCCFAA)

Part 3 of the *Health Care (Consent) and Care Facility (Admission) Act (HCCCFAA)* and associated regulations came into force in November 2019. This section of the HCCCFAA formally establishes the requirement for consent to be sought and obtained for adults being admitted into care facilities. The changes officially formalize the admission process to ensure an individual or their formal representative provides consent to the long-term care home. It will establish the means of appointing a substitute decision maker when a person has been assessed by a health-care provider or medical practitioner as being incapable of making a decision. If a family member or friend is not available, a public guardian and trustee will choose, or act as, a substitute decision maker.

OAS, GIS AND SENIORS SUPPLEMENT IMPROVEMENTS

On July 1, 2019, the maximum OAS pension amount increased to \$607.46, and the maximum GIS amount increased to \$907.30 for single seniors and to \$546.17 for each member of a couple. The most vulnerable single seniors will have received, by the end of 2019, \$2,097 more in OAS/GIS benefits compared to what they would have received in 2015. It is estimated that about 500,000 low-income single seniors in Canada (about 8% of seniors) will have benefitted from the maximum additional annual amount of \$2,097 in 2019 compared to what they would have received in 2015. In response to the additional cost pressures of COVID-19, the provincial government increased the Seniors Supplement by \$300 per month for the period of April to December 2020.

MSP PREMIUMS ELIMINATED

In Budget 2017, the B.C. government committed to eliminating the Medical Services Plan (MSP) premium by 2020. On January 1, 2020, the MSP premium was eliminated. Seniors will benefit the most from the elimination of MSP premiums as those 65 or older have disproportionately lower incomes. To replace the revenue from MSP premiums, the employer health tax was implemented on January 1, 2019.

ANNOUNCEMENT OF ONLINE PROPERTY TAX DEFERRAL

In February 2020, the B.C. Ministry of Finance announced that the property tax deferral application will become an online application. The online application allows for faster processing times and automatic renewal. Previously, paper-based applications could take up to five months to process, and applicants would be required to renew every year even if they continued to meet the program's requirements.

COUNCIL OF ADVISORS

The OSA has a thirty-member Council of Advisors (COA) that provides valuable insight into seniors issues in B.C. This group of engaged and connected seniors represents each of the province's five health authority regions who come from a wide range of educational, professional and socio-economic backgrounds. The COA serves as both a sounding board for the Seniors Advocate as well as a conduit to the Advocate for information and concerns from all regions of the province.

The Council meets in person twice yearly and participates in facilitated discussions on a range of topics. Five COA sub-committees were formed in 2018/19, each focusing on areas of importance to seniors:

- Federal Advisory Committee
- Rural Issues Advisory Committee
- Disability Issues Advisory Committee
- Active Aging Advisory Committee
- Multicultural Issues Advisory Committee

Over the past year, council members have been engaged in their local communities and regions representing the Office of the Seniors Advocate at several events and presentations, including the Union of BC Municipalities Convention and various seniors' health and wellness events.



COUNCIL OF ADVISORS BIOGRAPHIES

Fraser Region – eight representatives

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.

Vincent Kennedy - Langley. Retired provincial government employee of 33 years; former Program Coordinator and Advocate for Deaf and Hard of Hearing Seniors at Wavefront Center for Communication Accessibility; eBroadcaster for Happy Hands Club of the Deaf, a social/recreational club for Metro Vancouver deaf seniors.

Royce Shook - Port Coquitlam. Senior Vital Issue's team member looking into the issue of senior isolation; sits on the Port Coquitlam Mayors Round Table. Former board member, Share Family & Community Services Society; award winning blogger on senior issues; 43 years in public education teaching grades 8 to 12 in Surrey; 10 years in postsecondary education as area chair for the University of Phoenix in curriculum development; currently a workshop facilitator, mentor and trainer for COSCO Health and Wellness Institute.

Gwynne Cafik - Port Moody. As a full-time Wealth Advisor and CPCA (Certified Professional Consultant on Aging) with Credential Securities at Vancity, Gwynne works with clients, coaching them through various stages of their life cycle and assisting them through major life events. Her focus is on growing financial assets, retirement income planning and estate planning. As an advocate for senior clients, she provides appropriate resources, so clients can age well, living their best well-planned life.

Jerry Gosling - Abbotsford. Transit operator, aiming to help seniors across the province improve their lifestyle when it comes to housing, public safety and healthy eating. Jerry is working to become better informed of senior's issues and to advocate for B.C. residents. He is the recipient of the Order of Abbotsford in recognition of volunteer service and community involvement.

Bong-Hwan Kim - Port Moody. Retired Government of Manitoba civil servant. Served as President, Korean Society of Manitoba; President, Korean Canadian Housing Corporation Inc.; Chair, Refugee Concerns Committee, Winnipeg Presbytery, United Church of Canada; Vice-president, Folk Arts Council of Winnipeg; received a Doctorate in Sociology from the University of Manitoba; currently serves as the Vice-president of the Korean Senior Citizens' Society of B.C.

Fraser Region *continued*

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.

Alfred Woo - Burnaby. Retired lawyer with career service as a Crown attorney, executive experience with regulatory bodies, and in private legal practice at retirement; currently serves on board of directors in a seniors outreach services society and as a peer counsellor; member of and a past president of his Lions club; volunteers with a seniors community centre; member and past president of his military veterans unit.

Interior – six representatives

Sandy Zeznik - Cranbrook. Sandy is a retired teacher/principal and district principal. She is a community volunteer with Rotary, Cranbrook Public Library, CARP East Kootenay, Seniors in Partnership, Age Friendly Committee, Chamber Information Centre, Cranbrook Health Care Auxiliary, Cranbrook Seniors Hall, Co-chair of 2018 55+ games (Kimberley/Cranbrook) and other non-profits. Sandy loves to travel and is an active Dragon Boat paddler.

George Atamanenko - 150 Mile House. Community activist and consultant, regional planner and rancher; past-president of the Museum of the Cariboo Chilcotin Board of Directors; chair of the Accessibility Advisory Committee; speaks English, Russian and Ukrainian, and is active in preserving heritage and culture.

Leo M. Campeau - Lavington. Leo is a retired BC Ambulance Paramedic (EHS) and former fire chief - Kootenay Boundary Fire Services. He is a member of the BC Fire Chiefs, Canadian Fire Chiefs, and a local assistant fire commissioner. His volunteer service includes PEP Area Coordinator, North Okanagan Therapeutic Riding Association, North Okanagan Community Life Society, North Okanagan Valley Gleaners Society, Schubert Seniors Centre, and Habitat for Humanity (Vernon B.C.)

Linda Martin - Passmore. Retired self-employed home care caregiver and president of the Passmore Seniors Branch #116; working to make a difference and be a voice and advocate for B.C.'s seniors; past board member of Slokan Valley Seniors Housing Society for the Passmore Lodge; member of West Kootenay Seniors Transportation Committee; secretary-treasurer/grant writer of Bee Awareness Society, educating children about honeybees; volunteer and participant in the 55+ BC Games in Track and Field.



Interior *continued*

Heather McDonald - West Kelowna. Retired from Coquitlam School Board; member of Senior Citizens Service Association; Certified Seniors Advocate; in 2014 joined Westside Health Network Society 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; volunteered for Red Cross, Salvation Army, Gospel Mission and Food Bank.

Greg Howard - Kamloops. Retired educator with 43 years in public education; volunteer with Operation Red Nose, Rotary, B.C. Winter Games, and B.C. Career Education Society; caregiver for his father and in-laws and believes education is key to assisting seniors.

Northern - three representatives

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 B.C. 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.

Bernice Magee - Burns Lake. Trained as a registered nurse; former photographer, realtor, and mayor and councillor of Burns Lake; current president of the Burns Lake and District Community Foundation; treasurer of the Burns Lake and District Seniors Society; secretary of the Lakes District Family Enhancement Society; membership chair of the Nechako Lakes Liberal Association; Terry Fox Run volunteer; volunteer with the Emergency Social Services Reception Centre during wildfire season.

Margaret Sutton - Dawson Creek. Retired teacher (39 years - UK, Singapore, Sask., B.C.); committee member and past director of BC Retired Teachers' Association; founder and facilitator of "Meals for You" (volunteers providing frozen meals for seniors); founding member of S.P Seniors Access Service Society providing support for seniors; secretary of South Peace Health Services Society; facilitator for "Grief Share"; recipient of the Governor General's Caring Canadian Award.

Vancouver Coastal – seven representatives

Samuel Gerszonowicz - Vancouver. Mediator; Mediate BC Civil Roster, Washington State Foreclosure Fairness Program, WA Mediation Association board member; Dispute Resolution Center volunteer; community/condominium board service; business owner; bio-technology analyst. Retirement is counter-indicated. What should matter to us: how we leave the world matters! A call to seniors action!

Diane Jeffries - West Vancouver. Trained in the UK as RN and Midwife; immigrated to Canada in 1960; graduated from UBC with a nursing degree and a Masters, Clinical Care of the Older Adult; took gerontology courses at SFU; worked as Clinical Specialist Geriatrics at VGH and Coordinator in Health Centre on Gulf Islands; presently volunteer in the Anglican Church, Seniors Centre, West Vancouver, Berkley Care Home, North Vancouver - Spouse Support Group Facilitator; husband has been resident of the Berkley Care Home for 3 1/2 years with Lewy Body Dementia.

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 five years representing the Sea to Sky corridor; currently a member of the fundraising committee for the Sea to Sky Hospice campaign; a Rotarian; president of the Pemberton Arts Council for the past four years.

Barb Mikulec - Vancouver. Retired teacher and director of the B.C. Retired Teachers Association; feels the top three issues facing seniors today are housing, healthcare and outliving their resources; takes part in Salish weaving, oil painting and Scottish country dancing; board member of the Kerrisdale Community Centre; committee member of the National Pensioners Federation; director of BC Forum; secretary of Metro Vancouver Cross Cultural Seniors Network; involved with the Council of Senior Citizens Organizations of B.C. (COSCO).



Vancouver Coastal *continued*

Robie Scholefield - Vancouver. Former BC TEL (now TELUS) marketing manager. Robie has been a member and volunteer for many associations. He is dedicated to improving the quality of life for seniors and persons with disabilities.



Penny Goldsmith - Vancouver. Former co-ordinator of PovNet, an online network for anti-poverty advocates for 18 years, until 2015; hosted online courses on elder law and seniors long-term care for advocates, care providers and community workers; facilitated an older adults' email list for advocates assisting seniors; currently a member of 411 Seniors Centre Society seniors issues committee; chair of Highs & Lows, an intergenerational mental health choir.

Serge Haber - Vancouver. Involved in Seniors Advisory Council for Greater Vancouver; founder and past president emeritus of the Jewish Seniors Alliance of Greater Vancouver; currently involved in outreach, research, advocacy and peer support programs for seniors in Greater Vancouver; contributed to improvements in HandyDART system; attends regular meetings of COSCO, B.C. Health Coalition, and B.C. Coalition of People with Disabilities.

Vancouver Island - six representatives

Geraldine Hinton - Victoria. Former nurse clinician with a focus on teaching geriatric care to nursing students; former organizational consultant to the Victoria Institute of Gerontology at the Fairfield Health Centre; retired executive director of the B.C. Government Office for Seniors; long history of service with St John Ambulance; developed a revolutionary program for seniors facing loneliness and poverty; awarded the Alzheimer Society of B.C.'s Clyde and Lanny Slade Memorial Leadership Award; YM/YWCA Women of Distinction Lifetime Achievement Award; current member of Alzheimer Society of B.C., Government House Board of Trustees, and Veterans' Memorial Lodge at Broadmead, among many others.



Vancouver Island *continued*

Ursula Banke - Tofino. Having lived and worked on the west coast for over 50 years, Ursula understands the challenges facing rural communities. She has served on committees and boards of local organizations and gained experience in reviewing proposals, research materials, plans, reports and budgets. Bringing a multi-cultural understanding on current issues and challenges for seniors, she aims to find creative ways to support seniors who wish to age in the rural communities they helped build.

Bill Routley - Chemainus. Bill began his career in the forest industry working at the Youbou sawmill where he served as safety chairman and then as plant chair. His passion for helping people earned him election as president of IWA Local 1-80 Duncan BC; now USWSteelworkers Local 1-1937. He was a union representative from 1985 to 2009. Bill served as a pension trustee on the IWA-Forest Industry Pension Plan and was a trustee on the IWA Forest Industry Health and Welfare Benefit Plan. Bill's service to the community also includes five years as a school trustee in Lake Cowichan. Bill was elected MLA for the Cowichan Valley for two terms from 2009-2017.

Gladys Latty - Courtenay. Retired former campus director and college instructor; says the COA gives seniors an opportunity to voice their concerns and get government's attention; feels lack of money, healthcare, and loneliness are the top issues facing today's seniors.

Joseph Forsyth - Parksville. Retired consultant on privacy issues; former Assistant Deputy Minister, Individual Rights and Citizenship in Alberta; experience in government with respect to senior's and women's issues, and human rights; wants B.C. seniors to obtain the supports needed to remain in their homes for as long as possible.

Margaret Monro - Salt Spring Island. Margaret is a retired registered nurse and received her BSN at the University of Victoria. She had a career in the Canadian Forces and moved to Salt Spring when her husband retired. On Salt Spring, Margaret changed her focus to geriatric nursing and became interested in care for caregivers. She started a Support Group for Caregivers that has met weekly for over 20 years. She is a member of Family Caregivers of BC and the Alzheimer Society of BC and is on the board of the Gulf Islands Seniors' Residence Association.

2019/20 OSA OPERATING BUDGET

The OSA budget for 2019/20 was \$2.44 million with total expenditures of \$2.12 million, representing 87% of the total budget. The single largest expenditure was for salaries and this reflected the core OSA staff as well as subject matter experts who were temporarily employed directly or through a professional services contract. The 2019/20 increase in advertising and publications was in large part due to COVID-19 measures in promoting the bc211 and *Safe Seniors, Strong Communities* initiatives.

In 2020/21, the Seniors Advocate will continue with planning for the next province-wide long-term care survey and this expenditure will be reflected in the professional services budget.

EXPENSE TYPE	2019/20 BUDGET	2019/20 ACTUALS
Salaries	\$1,175,000	\$1,195,883
Employee Benefits	298,450	313,731
Travel	85,000	51,764
Legal Services	45,000	505
Professional Services	324,771	279,166
Information Services	40,000	22,106
Office, Business and Reporting Expenses	474,000	93,346
Advertising and Publications	0	170,433
TOTAL EXPENSES	\$2,442,221	\$2,126,934

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