

2020-21

ANNUAL REPORT

of the Office of the Seniors Advocate



OFFICE OF THE
SENIORS ADVOCATE
BRITISH COLUMBIA



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August 2021

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 2020/21 Annual Report of the Office of the Seniors Advocate in accordance with Section 4(4) of the *Seniors Advocate Act*.

This is the seventh annual report from the Office of the Seniors Advocate and reports on the period of April 1, 2020 to March 31, 2021.

Sincerely,

Isobel Mackenzie
Seniors Advocate
Provinces of British Columbia

Message from the Seniors Advocate



This past year has presented extraordinary challenges and opportunities for the Office of the Seniors Advocate (OSA). Along with everyone across the globe, our office responded to a pandemic in late March 2020 that changed the way we worked and lived. Staff quickly pivoted to working from home while maintaining crucial services for seniors, many of whom were deeply impacted by the initial pandemic restrictions.

A large focus for the OSA at the start of the pandemic was collaboration with the provincial government and community agencies throughout B.C. to ensure seniors continued to receive groceries, medications, meals, and social interaction. The *Safe Seniors Strong Communities* program was created to ensure that seniors could meet basic needs as the pandemic unfolded. The program will continue indefinitely and leaves a positive legacy for seniors. I wish to extend my profound gratitude to the MLAs of all three parties, local United Way agencies, and staff from the Ministry of Health and OSA who were instrumental in bringing this program so quickly to fruition.

Throughout the past year, the Office of the Seniors Advocate has continued to engage with seniors throughout the province, albeit in a different format than usual. Where town hall meetings and visits to senior centres and care homes were once the norm, this year it was Zoom calls, virtual town halls and podcasts that allowed us to connect. Technology allowed family members and seniors to connect during a time of social distancing and public health restrictions, bringing some joy and positivity into our lives during such a challenging time. However, we are all looking forward for more in-person engagement and connections in 2021/2022.

The OSA continued to publish its Directory for Long-term Care and annual Monitoring Report and undertook a systemic review of the visit restrictions in long-term care homes during COVID-19 public health

restrictions. This review gathered input from over 13,000 residents and family members and has been one of the most pressing issues that our office has managed. Work continues on other issues as our office is engaged in systemic reviews on seniors abuse and the financial burden of health care costs as we age. These reports will be released in the next year.

As we look back on 2020/21, I want to thank the dedicated staff at the OSA, B.C.'s health authorities, government ministries, and service providers. The staff have worked tirelessly throughout the pandemic to ensure services were delivered and that information was provided to seniors.

This past year brought sacrifice and heartache to many seniors. However, we also saw hope and opportunity for a better future. Governments at all levels galvanized in their focus on issues related to seniors and they promised change to long-term care. Meaningful action to financial support, such as the BC Seniors Supplement and the federal Old Age Security, are but two examples of where we saw improvements for seniors. Overall, it is clear that British Columbians care deeply about the health and well-being of its oldest citizens. Whether it was crashing phone lines calling in to volunteer to help or burning up the airways with calls for change, it was clear that our seniors are valued and cherished. This more than anything gives hope for a better tomorrow.



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1. 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 care. 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 seniors' well-being
- making independent recommendations to government and service providers
- collaborating with persons delivering seniors services to improve efficiency and effectiveness of services
- 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 in 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 those issues.

To fulfill our legislated mandate, the office focuses on four main areas of activity:

- outreach and engagement
- information and referral – through a partnership with bc211, the information and referral line is available 24/7
- 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 B.C. seniors.

2. 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 the office to further understand systemic issues and challenges facing B.C.'s seniors, as well as those who provide services and supports for them. While the COVID-19 pandemic prevented travel, meetings with community organizations continued to occur in virtual settings across all five health authorities as well as provincial and national organizations and governments.

In 2020/21, the Seniors Advocate participated in 62 public engagement opportunities, in addition to presentations to federal and provincial committees and editorial submissions. Stakeholder presentations also occurred, which included several national organizations, such as the Canadian Association of Retired Persons and the Canadian Federation of University Women clubs.

Additionally, 2020/21 saw a significant increase in media requests to the OSA with both provincial and national media turning to the Seniors Advocate for commentary and insight on issues related to seniors, the pandemic, and long-term care.



3. Information and Referral

The OSA provides thousands of seniors with information regarding the supports and services available to them. We operate a 24-hour toll-free information and referral phone line and a website that provides direct links to the *BC Seniors Guide*, our reports and publications, and the Long-Term Care Quick Facts Directory. In addition to providing information to seniors, the OSA receives information from seniors through telephone calls, emails and public engagements. The feedback from seniors on the issues that matter to them is integral to the work of this office.

3.1 METHODS OF CONTACT

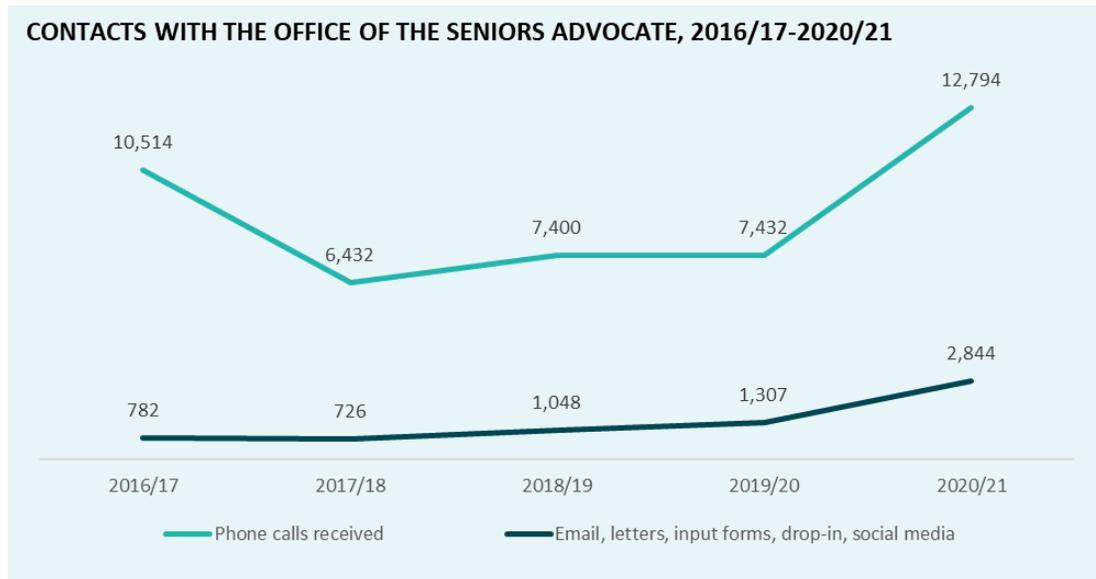
The OSA records all contacts with our office by every method of communication. We track and monitor information about each contact, the area of concern, and our response and follow-up. This information helps identify the systemic issues that are important to B.C. seniors and highlights possible areas for future research. In addition to phone calls, letters, emails and our online input form, the public can also pose questions to our office using our social media.



3.1.1 DIRECT CONTACTS WITH THE OFFICE OF THE SENIORS ADVOCATE

Members of the public have several avenues to access the OSA directly, including by 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. The OSA website 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.

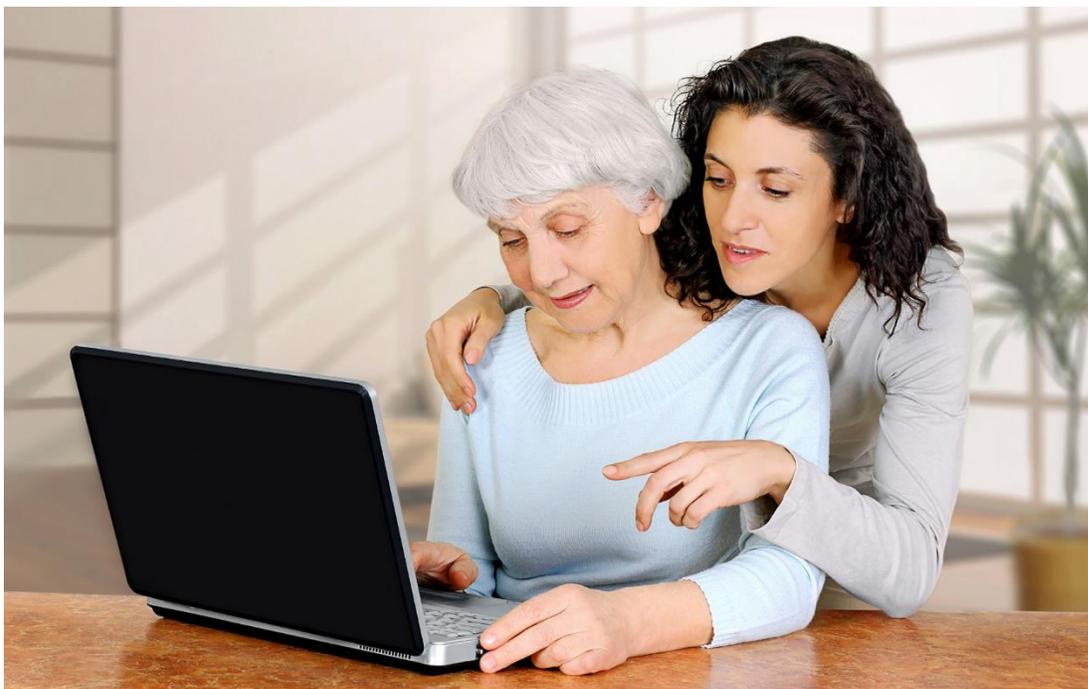
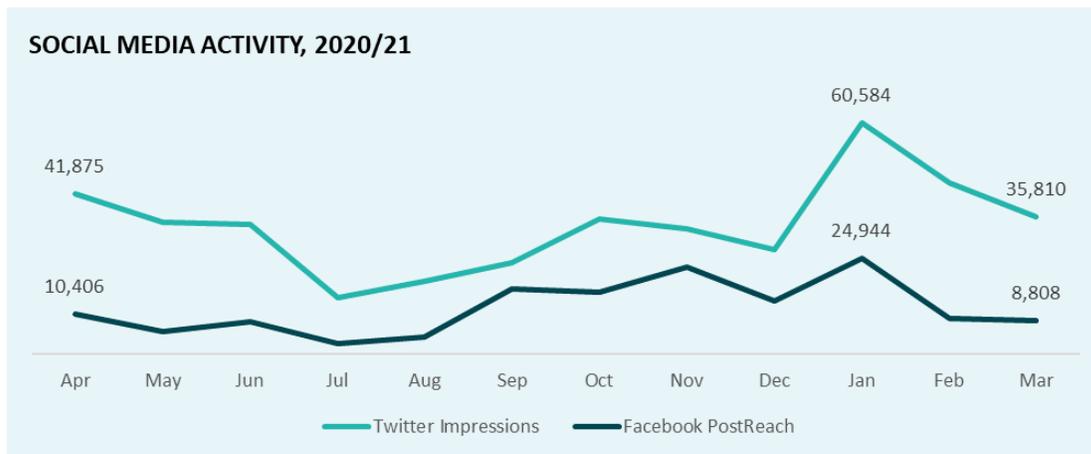
Staff responding to phone calls and correspondence have a wide variety of knowledge and experience. Some are health professionals with many years of experience working with seniors, community-based programs, and the health care system while others have extensive experience with government programs and 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 2016/17, the OSA launched the Residential Care Survey resulting in many calls and letters from the public requesting information or providing feedback about the survey. In 2020/21, the OSA received many questions related to the COVID-19 pandemic and launched the Staying Apart to Stay Safe survey, both of which resulted in almost 80% more contacts compared to last year.

3.1.2 SOCIAL MEDIA

This year, the OSA has been more active in its use of social media, specifically Twitter and Facebook, to interact with the public about current events and relevant topics. Tweets were shown to users a total of 404,527 times, and there were 144,773 views of our Facebook posts throughout the year. Twitter and Facebook use was high at the beginning of the fiscal year due to the COVID-19 pandemic and were significantly higher in January 2021 coinciding with the start of the vaccination program.



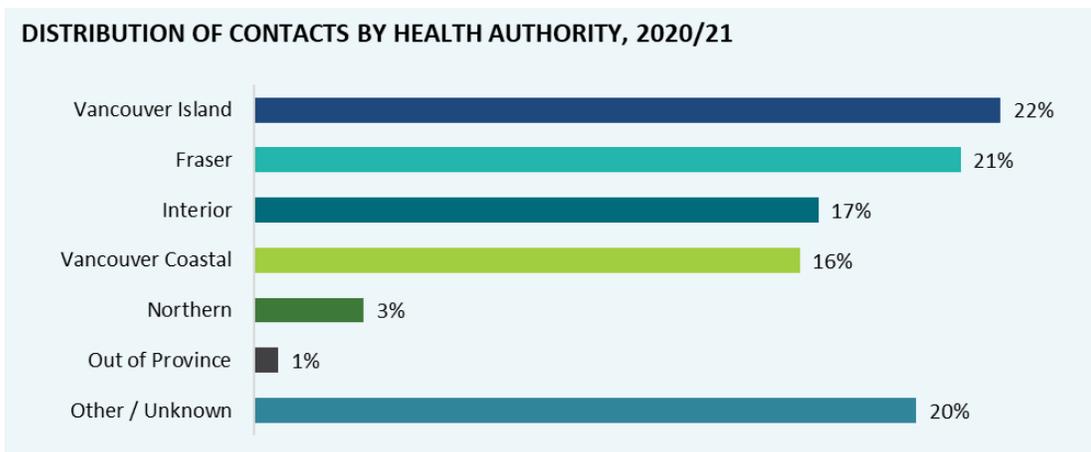
3.1.3 WEBSITE

There was a total of 92,306 visits to the OSA website in 2020/2021. Activities included 2,718 searches of the online Long-Term Care Quick Facts Directory and 19,405 downloaded files. The chart below shows the site views and page views for 2020/21; site access was high early in the year at the beginning of the COVID-19 pandemic and fluctuated throughout the rest of the year.



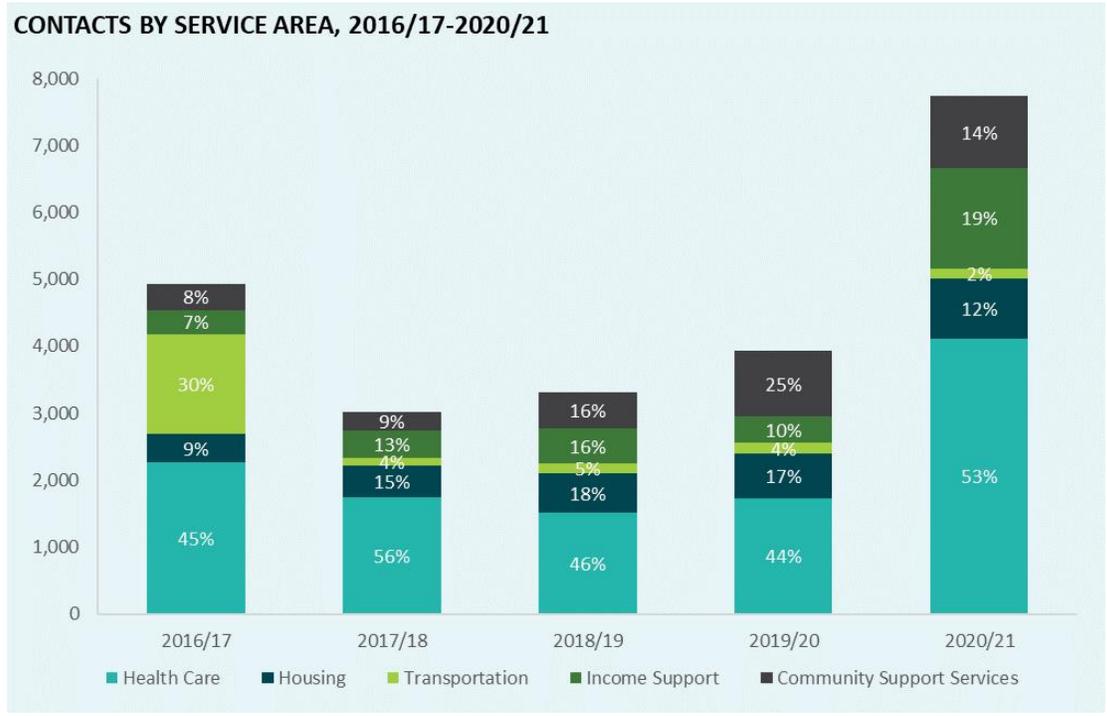
3.2 DISTRIBUTION OF CONTACTS

Wherever possible, the geographic location of the person contacting our office is captured and recorded by health authority. There has been little variation in the distribution by health authority over the five years between 2016/17 and 2020/21 with the highest number of contacts initiating from within the Vancouver Island Health Authority each year.



3.3 REASONS FOR CONTACTING THE OSA

In addition to the geographic location from which people are contacting us, we also track why they contact us. The most consistently generated questions are related to health care. Last year, the second most common questions were related to community supports, but this year it was income support, likely influenced by financial insecurities due to the pandemic.

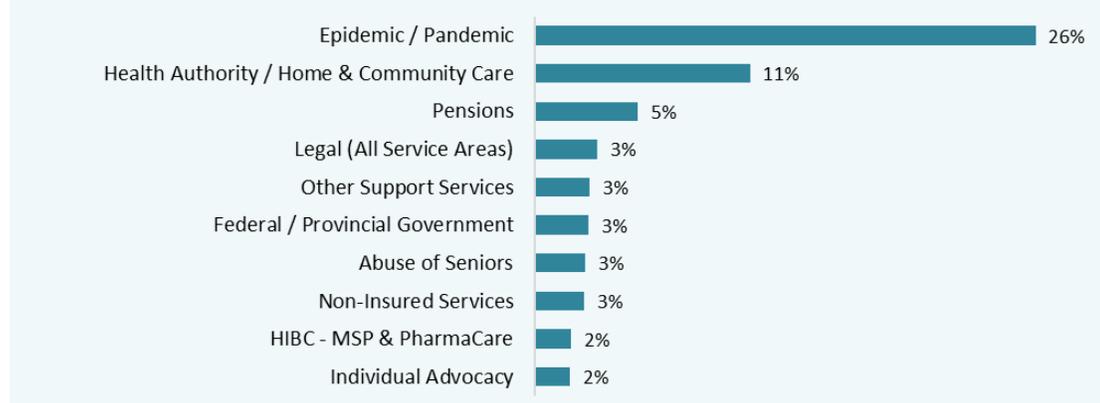


We continue to receive many requests for the latest edition of the *BC Seniors' Guide*, which was initially released in 2016. In 2020/21, we distributed over 12,000 copies, which is 43% less than last year. Factors that could have contributed to this drop include the COVID-19 pandemic and the anticipation of the release of the 12th edition of the guide. The COVID-19 pandemic also closed several MLA offices and senior centers that distribute the guide, which may have also contributed to this drop. The guide is available in English, French, Punjabi, Chinese (Traditional), Farsi, Korean, and Vietnamese.

Most of the remaining enquiries to the office fall into one of the 10 service themes highlighted in the chart below. The most common theme this year was the COVID-19 pandemic followed by Health Authority/Home & Community Care. Questions about pensions were

more common this year than in previous years. Health Authority/Home & Community has traditionally been the most common theme, with others including affordable housing, abuse of seniors, legal questions, and questions about Health Insurance BC.

CONTACTS BY TOP 10 SERVICE THEMES, 2020/21



Note: Other categories not included in this chart are surveys (10%), general enquiries (8%), publications (8%), affordable housing, homeowners and renters (2%), reports (2%), case management (2%), community programs (1%) and 27 other service categories with less than 1% each that together sum to approximately 8%. Surveys, general enquiries and publications are excluded from the top 10 as they do not identify themes related to seniors' issues.

Some examples of why individuals contacted our office include:

- Increase cost of groceries and other necessities during the pandemic
- Interpretation of Public Health Orders
- Visitation restrictions in long-term care homes
- Inconsistent communication with families and caregivers in long-term care and assisted living during the pandemic, particularly during outbreaks
- Inconsistent application of COVID-19 precautions and visitation in Independent Living facilities
- Assistance with registration and access for COVID-19 vaccinations
- Cost of internet, cell phones and computers
- Increased difficulty accessing online registrations and support for seniors who do not have access to the technology or skill to manage online processes
- Information about Power of Attorney and representation agreements
- Assistance for seniors experiencing abuse, neglect or self-neglect

3.4 REFERRALS TO SERVICES

Many of the people contacting our office, particularly those contacting us by telephone, were referred to another agency or service that could provide further assistance. The OSA provided 6,408 referrals in 2020/21, more than three times the number in the previous year. While most people were referred to the Health Authority or Home and Community Care programs in previous years, this year most were referred to local area service providers or organizations, such as the Silver Threads service or a tax preparation clinic for seniors. Referrals to the Patient Care Quality Offices in health authorities remained high this year.



3.5 SYSTEMIC ISSUES IDENTIFIED

Individuals contact the OSA to inform us of systemic challenges facing seniors related to health care, housing, transportation, income supports and community support. Listed here is a summary of issues that were frequently reported to us.

3.5.1 HEALTH CARE

- Access to home health and home support services including limited hours of care and inconsistent scheduling of service
- Decreased physician availability and access to family doctor
- Assistance with understanding hospital discharge planning
- Increased expectation of individuals to pay for private long-term care while waiting for subsidized long-term care
- Cost of non-insured services such as glasses, dentures, hearing aid and assistive devices

The COVID-19 pandemic had a disproportionate impact on seniors living in long-term care and assisted living. The most poignant concerns about visitation restrictions in care homes came from people whose loved ones were in the final stages of life.

When Thomas called us, he was desperate for someone to listen to his family's story and to find help. His father had been a resident in a long-term care facility for many years in the Lower Mainland where he had always received excellent care. The facility was able to successfully contain their COVID-19 cases with the new policy regulations in place. Only Thomas's mother had been able to have brief visits with his father for months. When the staff at the facility told them that he had only a few days left to live, they were all allowed to visit but only one at a time and for 30 minutes each. The family wanted to be together in their father's room to provide comfort to him and each other.

Although we referred Thomas to the Director of Care at the facility and the Patient Care Quality Office at the health authority, the situation quickly worsened and there was not enough time to pursue these usual routes. We were able to contact the Medical Health Officer and Health Authority directly to ask for an exception to the visitation regulation on behalf of the family. As a result, they were able to be together at their father's bedside during his final days.

HEALTH CARE (CONTINUED)

Calls, letters and emails on the issue of visit restrictions in long-term care and assisted living during the COVID-19 pandemic dominated the contacts with the Office of the Seniors Advocate more than any other issue in the history of this office.

Like many family members, Kiersten was concerned about her mother in long-term care last year. Her 90-year-old mother had been living in a long-term care home in the Lower Mainland for several years. Despite declining health, she was very happy and received excellent care. Kiersten and her brother were able to visit frequently to provide social interaction and monitor her health.

However, when an outbreak of COVID-19 occurred in the facility, the siblings became very concerned when they were no longer allowed to visit their mother. She began to sound very frail and disoriented during their regular phone calls. Worried about her mother's physical and emotional health, Kiersten called our office to learn if there were any options available for alleviating the situation.

We were able to provide her with information about B.C.'s Public Health Orders, the essential visitor policy and the process for removing a patient from long-term care. When Kiersten expressed an interest in bringing her mother home to live with her, we encouraged her to consider all the ramifications of making this decision by reviewing statements from the Public Health Office about removing residents from long-term care and speaking with her mother's case manager. When she and her brother decided that this was the best course of action for them, we provided further information by referring them to the Choice in Supports for Independent Living (CSIL) program which provides funding for families to purchase private home care for their loved one.

By providing information and referral to the right programs we were able to support Kiersten through her decision-making process. Kiersten's mother is now living comfortably at home with her daughter with appropriate supports funded by the CSIL program.

3.5.2 HOUSING

- Increasing costs of supplies for home renovations, adaptations, maintenance, and repairs to remain living at home
- Timely access to long-term care and assisted living
- Lack of affordable housing and long waitlists
- Sufficient income to meeting increased rent and utility costs
- Legislation governing independent living vs long-term care and assisted living

Housing is a crucial issue for seniors and some find themselves in situations where they cannot afford the rent or maintenance of the home. This situation is exacerbated when they face unexpected costs or a dispute with the landlord or strata council. Fortunately, there are some organizations which can assist seniors to understand their rights and responsibilities and can explain their options for responding in these situations.

When Lorna phoned us in October, she was very upset and didn't know where to turn. She and her husband had moved into their co-op housing ten years ago and were hoping to continue to enjoy their retirement in the same complex, but a recent dispute with the co-op council was causing them a great deal of anxiety. Two years previously they had noticed some mould on their living room ceiling and had worked with the council to get it remediated. The work had dragged on over several months. When the final bill came in, it was higher than expected and the council refused to pay for work. Lorna and her husband were now faced with an overdue invoice they couldn't afford to pay and had been served with a letter from the Co-op's lawyer demanding they settle the bill with the contractor.

We were able to refer Lorna and her husband to The Agency for Co-operative Housing and the Co-operative Housing Federation of BC, both of which could provide information and advice about their situation. In addition, we provided information about Seniors First BC, a non-profit society helping seniors with legal issues, if they felt they were being unfairly targeted due to their age. Lorna was pleased with the information and felt positive about being able to resolve the issue now that she knew who to contact for assistance.

3.5.3 TRANSPORTATION

- Difficulty accessing reliable and cost-effective public transportation in rural areas and smaller communities to travel to medical appointments
- Lack of financial assistance for ambulance fees for low-income seniors who live in communities without acute care infrastructure and rely on ambulance services to access emergency and acute care services
- HandyDART services including access to the service and cost
- Access to renew drivers' licences throughout the pandemic

The ability to move around freely is important for seniors' well-being. As health challenges grow, many seniors rely on public transportation to maintain their independence in meeting their daily needs and participating in social activities.

When Richard phoned OSA he was very upset about a change to his HandyDART service. Richard is 79 years old with severe mobility issues and is confined to a wheelchair. For several years he had used HandyDART to be able to attend the local seniors centre and his medical appointments.

Richard lives in a bungalow at the top of a long driveway and the HandyDART bus had always come right up to the house to pick him up and drop him off. When a new driver was assigned to the route, however, he felt that the turn-around space at the top of the drive was too tight to be safely navigated. The driver requested a review by his supervisor who confirmed the service would no longer be provided to Richard's house. Richard was devastated as it meant he was isolated at home with no access to his social activities and other appointments.

We were able to connect Richard with the appeal process at TransLink to have the decision reviewed, resulting in a compromise being reached; HandyDART agreed to provide pick-up and drop-off on the street at the end of the driveway. We were also able to connect Richard with some other options, including taxi saver coupons and volunteer rides for medical appointments.

3.5.4 INCOME SUPPORTS

- Assistance in understanding eligibility for the BC Seniors Supplement
- Income related concerns arising from the loss of a spouse
- Financial hardship due to involuntary separation of a spouse due to admission to long-term care
- Accessibility of Canada Revenue Agency and Service Canada through in-person or telephone

Low income seniors were hit hard by the financial impact of the pandemic. Higher costs and worries about how to make ends meet caused a lot of anxiety. The BC Recovery Benefit was particularly important to many low-income seniors.

Hayden and his wife and brother are all low-income seniors qualifying for Guaranteed Income Supplement. When Hayden called us in February 2021, he was very concerned that he had not received the BC Recovery Benefit for himself, his wife or his dependent brother. He is the trustee for his brother with disabilities and manages his finances.

Hayden had applied the benefit as soon as it was available, but when he telephoned the BC Recovery Benefit Support team, he was asked to send them an email about his concerns. Frustrated and unsure how to proceed, Hayden contacted the OSA. As we had heard the same issue from several other seniors, we contacted the appropriate office and confirmed that concerns would be addressed but that high demand was causing a delay in response times.

In Hayden's case, they were able to contact him within a couple of weeks, explaining that the application had not been processed earlier because they had to look into why he and his brother had the same bank account. Once Hayden told them that he was his brother's trustee they were able to get the payments to him within five days. Hayden phoned us and let us know how grateful he was for our help and that he also appreciated the information available in the BC Seniors Guide we sent him.

Hayden's experience is typical of the frustration seniors can experience when they navigate the many income and benefit programs at both the federal and provincial levels. Often, we are able to help by ensuring they can connect with the right program or government website which can provide the information they need.

3.5.5 COMMUNITY CARE

- Lack of adult day programs and respite services through the pandemic
- Decreased support and assistance from caregivers and families in long-term care
- Seniors centres, library and recreation program closures throughout the pandemic contributing to the feelings of social isolation
- Assistance to access Better at Home programs in rural areas

Self-neglect is a growing concern among seniors and has been especially prevalent since the COVID-19 outbreak, as seniors have not been able to undertake their usual activities or receive regular services that ensure they can live safely in their own homes.

When Jacob first phoned us, he sounded very frail and upset. Jacob is an 85-year-old immigrant to Canada. He and his wife had managed together well in the early years of their retirement, but after she passed away three years ago, Jacob struggled to provide everyday care for himself. He told us that he was not eating properly, did not know how to do laundry and doesn't clean his apartment or wash dishes. He said he cannot remember things and has dementia but doesn't want to discuss this with his physician. When we asked about finances, he shared that he hadn't done his taxes in two years and therefore didn't think he was getting any benefits. He believed he had quite a bit of money in a registered retirement income fund (RRIF) but couldn't access it as only his wife knew the access code.

We were concerned that Jacob was subject to self-neglect and not able to look after his personal health and financial needs. OSA staff reached out to the Health Authority's Home and Community Care program and the designated agency which investigates cases of suspected abuse and neglect, including self-neglect. We were able to connect him with the Better at Home program, who arranged Meals-on-Wheels and housekeeping services, and the local seniors centre who made sure he was part of their friendly visitor telephone program. Staff were especially pleased to hear how well Jacob sounded when he called to thank us a couple of months later. He was eating properly, receiving services from Home and Community Care and Better at Home, and had even filed his taxes with support from the seniors centre volunteer tax clinic.

4. Monitoring Seniors Services in B.C.

4.1 MONITORING SENIORS SERVICES REPORT



The Monitoring Seniors Services report highlights where seniors' needs are being met and where improvements are most needed. With a growing senior population, the focus on key services falling under the Advocate's legislated mandate becomes more significant. Access to health care and personal supports, appropriate housing, adequate transportation, sufficient income, and protection from abuse and neglect are key to the health and well-being of seniors. The sixth annual edition was released in December 2020 covering the fiscal year 2019/20. Most of the timeframe covered in the monitoring report pre-dates the COVID-19 pandemic.

HEALTH CARE

- The adult day care program has been expanded with 12% more clients and 14% more program days resulting in a 21% decrease in the waitlist.
- Home support hours increased for long-term (2%), short-term (9%) and CSIL (1%) clients.
- There were fewer subsidized registered assisted living units (-3%), and only marginally more funded long-term care beds (1%). Both assisted living and long-term care had more people waiting with longer wait times.

HOUSING

- Despite increasing costs, most seniors own their own homes. There was a 5% increase in the number of Home Owner Grants for Seniors, and 10% more seniors took advantage of the Property Tax Deferment Program.
- Seniors renting in B.C. face significant challenges with low vacancy rates (1%), SAFER subsidies that have not kept pace with rent increases, and longer wait times for subsidized housing (13%).

COMMUNITY AND PERSONAL SUPPORTS

- The New Horizons for Seniors Program approved 283 new community-based projects in B.C. with total funding of \$5.3 million, a 7% increase over 2018/19.
- First Link® dementia support served 13,594 unique clients in 239 communities. There were 18% more clients and 128% more communities served.
- The Better at Home program supported 11,935 active clients who received 191,147 services, both increasing slightly from 2018/19.



TRANSPORTATION

- In 2019, 79% (745,200) of seniors in B.C. aged 65 or older and 50% (114,600) of seniors aged 80 or older maintained an active driver's licence.
- There were 75,300 driver fitness cases opened in 2018 for seniors aged 80 or older; 80% were ultimately found fit to drive. Only 6% were referred for an enhanced road assessment (ERA).
- Active HandyDART clients increased 1% to 46,109 but ride requests decreased 11% from almost 2.6 million to just under 2.3 million.

INCOME SUPPORTS

- Between October and December 2020, low income single seniors in B.C. could receive up to \$1,580.73 per month in federal and provincial income supports.
- The maximum Canada Pension Plan benefit was \$1,175.83 per month, almost 2% more than last year.
- Seniors or their third-party insurers pay the majority (67%) of prescription medication costs. The Fair PharmaCare program pays 100% of costs for B.C. residents with incomes up to \$13,750 but those with higher incomes pay for medications up to family maximum amounts based on net income levels.

ELDER ABUSE

- The Seniors Abuse and Information Line (SAIL) received 17% more calls related to abuse and the bc211 Helpline received 15% fewer calls.
- Designated Agencies responded to 2,138 suspected cases of abuse in 2019 where 83% were for seniors aged 65 or older.
- The Public Guardian and Trustee received 1,723 referrals in 2019/20 with 51% proceeding to investigation.
- Reports of abuse against seniors to both the RCMP and the Vancouver Police Department increased substantially in 2019.

4.2 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 B.C. and has been a highly sought after resource since initial publication in March 2016. Our office spends a great deal of time each year ensuring that the information within the directory remains current and relevant. The sixth edition, released in December 2020, included more reportable incidents and influenza vaccination coverage for residents and health care workers in long-term care. Most data reflects the 2019/20 fiscal year and pre-dates the COVID-19 pandemic.

FACILITY CHARACTERISTICS

- The Long-Term Care Directory contains information for 296 long-term care facilities in B.C. that have 27,505 publicly subsidized beds.
- 109 facilities are operated directly by the local health authority and 187 are operated by a contractor with funding from the health authorities.
- 89% of rooms are single-occupancy rooms, 7% are double-occupancy, and 4% are multi-bedrooms (3 or more beds).

RESIDENT PROFILE

- The average age of residents in long-term care is 84 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 are assessed as “low” on the social engagement scale (ISE 0-2).

SERVICES

- On average, facilities were funded for 3.28 direct care hours per bed per day, a 0.9% increase over 2018/19; 50% of facilities meet the 3.36 guideline.
- The average per diem rate in contracted facilities was \$231.76 per bed per day, a 3.3% increase over 2017/18.
- The average actual raw food cost increased 3% to \$8.38 per resident per day, with a range across all facilities of \$4.34 to \$17.22.
- Residents receiving physical therapy (10%) and occupational therapy (6%) are on a decreasing five-year trend; recreation therapy (30%) increased.
- 85% of residents and 69% of health care workers were vaccinated against influenza; this was a 2% decrease for residents and a 7% decrease for staff.

5. Initiatives and Progress to Date

5.1 COVID-19 RESPONSE

5.1.1 SAFE SENIORS, STRONG COMMUNITIES



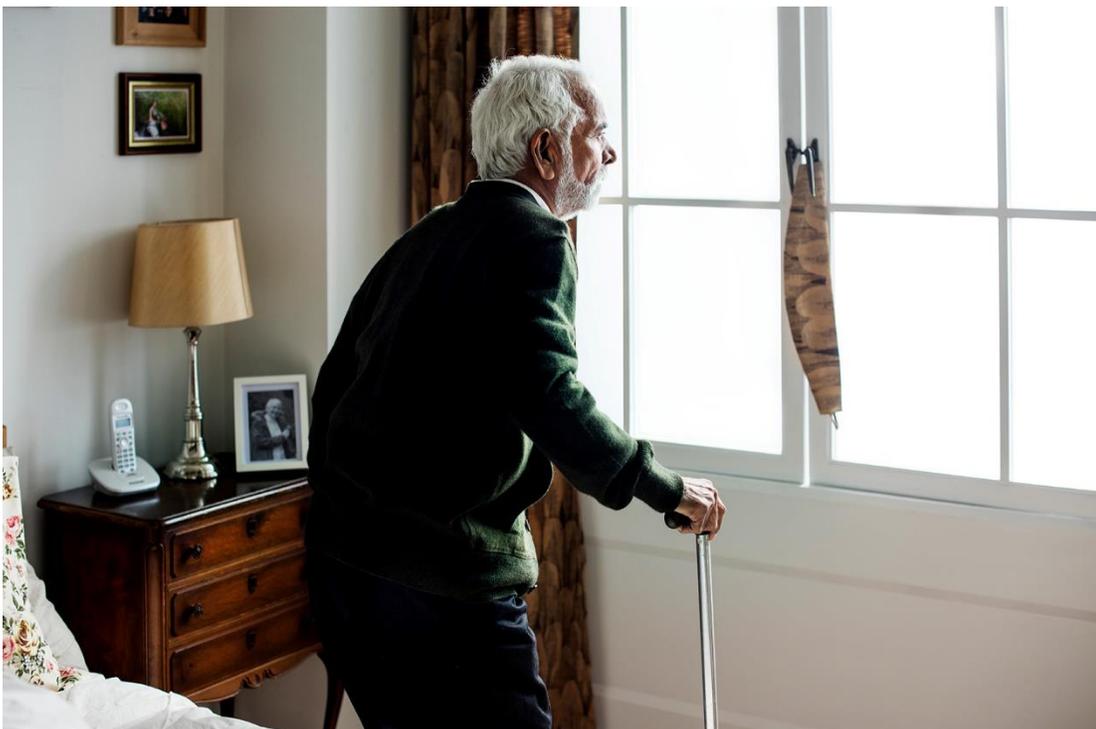
On March 26, 2020, the Ministry of Health announced a new program called Safe Seniors, Strong Communities (SSSC) in response to the COVID-19 pandemic. The program was created by a bipartisan committee of the Legislative Assembly of B.C., co-chaired by the Seniors Advocate, Isobel Mackenzie, and the Minister of Health. The program matches seniors in need of non-medical support with volunteers in their community that are willing to help. The Province provided funding to bc211, a B.C. wide information and referral service, and the United Way's Better at Home program to expand services to seniors whose support network was affected by the COVID-19 outbreak. Between March 26, 2020 and March 31, 2021, bc211 and community agencies involved with the SSSC registered over 13,000 volunteers to support over 24,000 seniors in the SSSC program in all areas of the province. A total of 791,026 services were delivered in the first year of operation: 44% for wellness/social visits and needs assessments, 29% for meals prepared or delivered and 9% for groceries delivered. Other services included prescription pick up and delivery, transportation services, and laundry services.



5.1.2 STAYING APART TO STAY SAFE: THE IMPACT OF VISIT RESTRICTIONS ON LONG-TERM CARE AND ASSISTED LIVING SURVEY



This report presents the results of a province-wide survey conducted by the OSA, reflecting the experience of more than 13,000 residents and their family members during the COVID-19 pandemic. The report highlights that the provincial government acted swiftly and decisively early in the pandemic, bringing in several prevention measures that saw B.C. perform relatively well in managing COVID-19 in long-term care and assisted living. However, the survey results found that limiting visits, which was one of several measures introduced, resulted in heightened anxiety and negative health impacts for residents and visitors. Recommendations highlight the need for residents and family members to have a collective voice in the decision-making process: (1) allow all residents to designate an essential care partner, (2) allow social visitors to balance the risk of COVID-19 with the risk to residents' health, and (3) create a provincial association of long-term care and assisted living resident and family councils. A compendium report will be released in 2021 to share some of the personal stories told by residents and visitors of their own experiences during the pandemic.



5.2 SYSTEMIC REVIEWS

The Office of the Seniors Advocate prepares reports based on our systemic reviews of major issues affecting seniors in British Columbia. Due to the amount of work related to the COVID-19 pandemic, this office did not release any reports on systemic issues in 2020/21. However, work is well underway on several issues. Reports will be released later in 2021.

5.2.1 REVIEW OF COVID-19 OUTBREAKS IN CARE HOMES

The COVID-19 pandemic has disproportionately affected residents in long-term care homes across Canada. This review will examine a wide range of data to determine if particular factors were associated with a site experiencing a COVID-19 outbreak and to identify strengths and weaknesses in pandemic protocols. Several surveys will be conducted during this review to gather staff feedback about their experiences during this time as well as management and financial information about each facility. The goal is to provide recommendations to improve practices and better manage future outbreaks in care homes.

5.2.2 HOME SUPPORT SURVEY

Home support offers personal assistance with activities of daily living such as mobility, nutrition, bathing and dressing and other tasks supporting seniors and people with disabilities to keep living safely in their own homes for as long as possible. The OSA will be launching the second *Provincial Home Support Survey (HSS)* in 2021 as a follow up from the initial survey in 2015. The survey will gather information about the experiences and satisfaction of clients and their families to learn more about what is working well and where improvements can be made in the home support program.



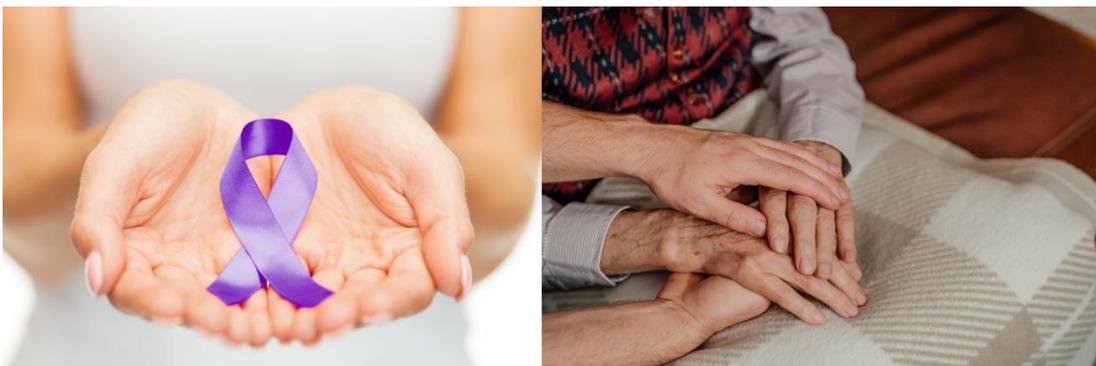
5.2.3 IMPROVING INCOME SECURITY FOR SENIORS

Poverty among Canadian seniors has been well-publicized, but the relationship between low-income seniors and the government benefit and income tax programs designed to assist them is less well understood. This review will take a closer look at the relationship between income and out-of-pocket expenses for seniors, particularly low- and moderate-income seniors, and how effective government income programs and tax measures and incentives are working to reduce the income disparity of seniors in British Columbia.



5.2.4 SENIORS ABUSE AND NEGLECT IN BRITISH COLUMBIA

Although there has been some public awareness of seniors abuse and neglect in British Columbia, the extent of the problem is unknown and remains largely under-reported. This review will examine systemic issues and challenges related to seniors abuse and neglect in British Columbia, looking at how well the system responds to and supports seniors who have experienced abuse and neglect. The goal is to provide recommendations for reducing fragmentation in the system and more effectively help seniors in these situations.



5.3 SUBMISSIONS AND PRESENTATIONS

5.3.1 PRESENTATION TO HOUSE OF COMMONS STANDING COMMITTEE ON HEALTH

In May 2020, the House of Commons Standing Committee on Health met to receive evidence relating to the government response to the COVID-19 pandemic. The Seniors Advocate presented four issues: low cost internet is required in all parts of Canada to keep seniors connected, the impact of the pandemic is disproportionately high for seniors living alone, seniors need more support with their activities of daily living, and the inability to visit with loved ones in care homes had a profound effect on residents and visitors. A survey performed by the OSA found that the more help that seniors needed during this pandemic, the less satisfied they were with available services. The expanded bc211 program connecting seniors in need with volunteers is one example of how things can be made better in B.C.

5.3.2 PRESENTATION TO SELECT STANDING COMMITTEE ON FINANCE

In June 2020, the Select Standing Committee on Finance and Government Services held an annual public consultation on the provincial budget where the Seniors Advocate presented two issues. First, while there was additional temporary money available for the lowest income seniors during the pandemic, the Advocate asked that support be considered in the budget to provide some relief for this vulnerable population on an ongoing basis. Second, she asked that the regulated co-payment for the home support program be reconsidered to enable seniors to find the support and care that they need in the community ensuring that the incentives for seniors to remain in their homes are at least equal to the incentives of going into long-term care.



5.3.3 MORTGAGE BROKERS ACT SUBMISSION

In July 2020, the Seniors Advocate presented a submission to the Ministry of Finance on the review of the *Mortgage Brokers Act*. The Advocate responded to four questions related to reverse mortgages: the benefits and costs of independent legal advice before taking out a reverse mortgage, the appropriate cooling off period of reverse mortgages, disclosure of the effects of interest rate changes and other disclosures or requirements that could better protect consumers wanting a reverse mortgage. Ultimately, the Seniors Advocate recognizes reverse mortgages as a way to provide additional cash flow for living expenses or capital expenditures but cautions that seniors enter into the transaction fully informed about the costs and future ramifications.

5.3.4 CONNECTING WITH THE OFFICE OF THE FEDERAL MINISTER OF SENIORS

Throughout the pandemic, the Seniors Advocate has connected with the Federal Minister of Seniors, the Honourable Deb Schulte, and her staff to address issues related to seniors income and the role of the federal government in long-term care.

5.4 REPORT REVIEWS, CORRESPONDENCE AND UPDATES

5.4.1 REPORT REVIEWS

In Plain Sight: Addressing Indigenous-Specific Racism and Discrimination in B.C. Health Care – In 2020, Dr. Mary Ellen Turpel-Lafond released the report ‘In Plain Sight’ which reviewed the racism, stereotyping and discrimination against Indigenous peoples in the B.C. health care system. The Seniors Advocate was asked to provide input to the review and shared what she heard from her visit to First Nations communities in the North prior to the COVID-19 pandemic. She heard directly from Indigenous Elders about their aging experience in the community; the many challenges related to the health care system, such as barriers to access, the lack of culturally relevant services and supports, the historical trauma of the residential school system and the desire for more traditional approaches to healing. The OSA will explore this issue in more depth as a part of our systemic review.

Public Policy Regarding Long-Term Care in Canada – In January 2021, the Institute for Research on Public Policy (IRPP) sent a document called *Canada's Challenges with Long-Term Care and Recommendations for Reform: A Summary* to the Seniors Advocate for review. As part of their *Faces of Aging* research program, the IRPP reviewed key reports on long-term care published by governments, civil servants, consultants, experts, and stakeholders over the past two decades and summarized the findings and recommendations made in each of these reports. In response to their request, the Seniors Advocate supported their summary of the recommendations and provided additional comments for consideration: (1) consistent and integrated services for home care recipients, (2) standards of care on long-term care homes, (3) resident and caregiver inclusion in the decision-making process, and (4) regulatory oversight of all health care providers. The Advocate also accepted their invitation to participate with a panel of experts that will focus on a path forward to reform long-term care.

The Impact of COVID-19 on Long-Term Care in Canada – In March 2021, the Canadian Institute for Health Information (CIHI) released the report *The Impact of COVID-19 on Long-Term Care in Canada* that presents early comparisons between the first and second waves of the pandemic in long-term care homes in Canada. The Seniors Advocate was a member of the expert and panel advisory groups to provide advice and recommendations for the report.

5.4.2 EDITORIALS AND COMMENTARY

COVID-19: New supports and an outpouring of goodwill promise to make things better for B.C. seniors (Vancouver Sun, April 2020) – The elderly and those with underlying health conditions are at much higher risk of developing serious complications from COVID-19 and restrictions for self-isolating can be more onerous for seniors. The Seniors Advocate stated that new supports and an outpouring of goodwill promised to make things better for B.C. seniors. The *Safe Seniors, Strong Communities* program, launched in late March 2020, expanded the bc211 program to recruit volunteers and help more seniors. Within the first 48 hours, thousands of calls were received from seniors and volunteers.

Telecommunications for low-income seniors during COVID-19 (April 2020) –The Seniors Advocate met and corresponded with the Ministry of Social Development, petitioning lower costs of telecommunications for low-income seniors. The internet has become a necessary basic need in telecommunications and the Advocate recommends focussing on the provision of low-cost internet that will enable seniors to keep informed of the latest pandemic developments and stay connected with the outside world.

The State of Aging (Black Press Media, August 2020) –An editorial focused on the opportunities and challenges of aging. Staying physically and mentally active with moderation in eating and drinking have enabled most seniors to stay in their own home longer and remain more socially connected. However, many seniors still face low income, illness and chronic disease causing an increase in the burden of family caregiving. The diversity of experiences and conditions show that the state of aging is not static.



The Age of Wisdom: Advocating for senior citizens in the time of COVID-19 (University of Victoria Business Class, November 2020) –

The Seniors Advocate was featured in the University of Victoria School of Business's publication 'Business Class', which shared her observations about the impact of the COVID-19 pandemic on seniors. Issues discussed included ageism, isolation, sub-standard care in nursing homes, financial challenges, safety, and the lack of independence. The Advocate indicated the depth of which British Columbians care was evident by the way that communities rallied around vulnerable seniors, with merchants delivering essential goods and services and volunteers donating their time to help seniors out.

Communique to B.C. Seniors (Mar 2021) – The Seniors Advocate provided written communique to all seniors in the province in receipt of the BC Seniors Supplement acknowledging the difficulties over the past year and offering information about the services that our office can provide through our outreach program, monitoring of seniors services, and systemic reviews of issues affecting seniors in B.C. In addition, the Advocate directed seniors to the free services available through the *Safe Seniors, Strong Communities* program and provided information about the provincial government's support with temporary increases in the BC Seniors Supplement and the Recovery Benefit.

5.4.3 OFFICE OF THE SENIORS ADVOCATE UPDATES

In March 2021, this office restarted its regular newsletters. The monthly publication includes information about current events, provincial and national news, recent provincial and federal government announcements affecting seniors, and recent research papers related to seniors issues. These updates are mailed out to our contacts and are also posted on our website.

5.5 ISSUES IDENTIFIED BY THE SENIORS ADVOCATE

The responsibilities of the Seniors Advocate, as defined in the *Seniors Advocate Act*, include analyzing issues that she believes to be of importance to the well-being of seniors and advocating in the interests of seniors. There are several areas of concern that the Advocate continues to champion, including investment in long-term care, increasing funding and services in home support and improving financial support for low-income seniors. Improvements were seen in each of these issues this year.

5.5.1 INVESTMENT IN LONG-TERM CARE

The amount of direct care delivered by nursing staff, care aides and allied health care workers such as physical, occupational or recreational therapists, speech language pathologists, social workers and dieticians to clients in long-term care has long been an issue of concern to the Seniors Advocate. The 2018 provincial budget included \$240 million, invested over three years, to increase direct care hours in long term care homes; actual allocations to health authorities were \$48 million in 2018/19, \$74 million in 2019/20 and \$100 million in 2020/21. Direct care hours have improved on average across health authorities, but there are still some care homes that are below the guideline of 3.36 hours of direct care per resident per day.

Seniors who live in care have been particularly vulnerable during the COVID-19 pandemic. Both the provincial and federal governments provided additional funding for long-term care and assisted living to support the pandemic response in care homes. British Columbia implemented the *Single Site Order* so that health care workers were no longer allowed to work at more than one long-term care or assisted living facility. This was coupled with wage levelling to bring all frontline workers to the top wage rate. These orders were estimated to cost \$10 million per month. Another \$10 million was committed to enhance infection prevention and control and improve quality and safety in long-term care and assisted living homes in B.C. Additionally, the 2021 provincial budget committed \$585 million over three years to train and hire up to 3,000 new health care workers and the 2021 federal budget allocated \$3 billion over five years to support provinces and territories in ensuring high standards of care in long-term care.

5.5.2 INCREASING HOME SUPPORT

Since the creation of this office, the Seniors Advocate has recognized the significance of the home support program in maintaining the ability of seniors to live independently. The OSA highlighted concerns about the program when the first home support survey was completed in 2016 and again in the *Home Support: We Can Do Better* report, released in 2019. This year's provincial and federal budget announcements committed significant funding to improve home care. The provincial budget allocated \$68 million over three years to increase the number of care aides and other community care providers to deliver quality home care and a further \$12 million to provide seniors with complex needs care in their home. The federal budget allocated \$90 million over three years to launch the Age Well at Home initiative. Both commitments are a good start to help meet the needs of more seniors wanting to age in their own homes.



5.5.3 SUPPORT FOR LOW INCOME SENIORS

The Seniors Advocate has raised the issue of low-income seniors with both the federal and provincial governments. The Old Age Security (OAS) and the Guaranteed Income Supplement (GIS) are two federal pension programs, both of which increase each year. As of October 2020, the maximum OAS pension was \$614.14 and the maximum GIS amount was \$917.29. By the end of 2020, the most vulnerable seniors received over \$1,000 more per year than they would have in 2016. In addition, the 2021 federal budget announcement included a one-time payment of \$500 in August 2021 and a 10% increase in OAS starting July 2022 for seniors aged 75 or older as of June 2022. During 2020/21, the provincial BC Senior's Supplement remained at \$49.30 for a single senior and \$120.50 for seniors couples, the same level it has been since 1987. However, in response to the COVID-19 pandemic, the provincial government provided temporary increases of \$300 per month for the period of April to December 2020, and \$150 per month for the period January to March 2021. Effective April 2021, the regular BC Seniors Supplement doubled to a maximum of \$99.30 per month for a single senior and \$220.50 for senior couples.



6. Council of Advisors

The Office of The Seniors Advocate has a 30-member Council of Advisors (COA) that serves as both a sounding board for the Seniors Advocate as well as a conduit to the Advocate for communicating information and concerns about seniors from all regions of the province. Members are engaged and connected seniors that represent the province's five health authority regions and come from a wide range of educational, professional, and socio-economic backgrounds. Due to the COVID-19 pandemic, the council was not able to meet in person for their semi-annual conferences. Members had the opportunity to update the Seniors Advocate and the council about their communities through virtual meetings. There were consistent themes around rural challenges and rallying communities with different approaches during this difficult year.

We would like to acknowledge the services of several of our members over this past year. First, we thank Mohammad Rafiq for his service. He sadly passed away from COVID-19 earlier this year and the Seniors Advocate and her staff extend their sincere condolences to his family and friends. We would also like to acknowledge the contributions of Gladys Latty and John Barry Worsfold who both retired from their positions on the council in the fall of 2020.

This year provided an opportunity to step back and review the past five years of the COA. An independent consultant was hired to review best practices including reviews of other advisory councils, committee structure and length of terms. This review is on-going and a plan for the future of this advisory group will be completed by the summer of 2021.

MEMBERS OF THE COUNCIL OF ADVISORS

FRASER REGION	INTERIOR REGION	NORTHERN REGION
Alfred Woo	George Atamanenko	Bernice Magee
Bong-Hwan Kim	Greg Howard	Dawn Hemingway
Gwynne Cafik	Heather McDonald	Margaret Sutton
Jerry Gosling	Leo M. Campeau	
John Barry Worsfold	Linda Martin	
Mohammad Rafiq	Sandy Zeznik	
Royce Shook Port		
Vincent Kennedy		
VANCOUVER COASTAL REGION	VANCOUVER ISLAND REGION	
Barb Mikulec	Bill Routley	
Diane Jeffries	Geraldine Hinton	
Marnie Simon	Gladys Latty	
Penny Goldsmith	Joseph Forsyth	
Robie Scholefield	Margaret Monro	
Samuel Gerszonowicz	Ursula Banke	
Serge Haber		

7. 2020/21 OSA Operating Budget

The OSA budget for 2020/21 was \$2.51 million with total expenditures of \$2.27 million, representing 90% of the total budget. The single largest expenditure was for salaries reflecting the core OSA staff as well as subject matter experts who are temporarily employed directly or through professional services contracts. Expenditures were also focused on monitoring key services to seniors, conducting a province-wide survey to examine the impact of visit restrictions on long-term care and assisted living during the COVID-19 pandemic, as well as advertising and publications to inform seniors and their families of available resources. As expected, the COVID-19 pandemic and related travel restrictions resulted in zero expenditures for travel related activities.

In 2021/22, the Seniors Advocate will be releasing the results of several systemic reviews and surveys which will result in some increased expenditures.

EXPENSE TYPE	2020/21 BUDGET	2020/21 ACTUALS
Salaries	\$1,221,000	\$1,285,519
Employee Benefits	310,134	337,088
Travel	85,000	0
Legal Services	45,000	1,070
Professional Services	324,771	324,771
Information Services	40,000	33,569
Office, Business and Reporting Expenses	481,100	240,292
Advertising & Publications	0	44,529
TOTAL EXPENSES	\$2,507,005	\$2,266,838

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BY MAIL

Office of the Seniors Advocate
6th Floor, 1405 Douglas Street
PO Box 9651 STN PROV GOVT
Victoria, BC V8W 9P4

ONLINE

EMAIL: info@seniorsadvocatebc.ca

WEB: seniorsadvocatebc.ca

TWITTER: [@SrsAdvocateBC](https://twitter.com/SrsAdvocateBC)

FACEBOOK: facebook.com/SeniorsAdvocateBC



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