This is a summary of the input received during the consultation on an Office of the Seniors' Advocate. It is not a verbatim report, and is not intended to represent every point made during the session. All of the input collected about the role and function of the Seniors' Advocate will help shape options for government.

MORNING SESSION:

Principles

- Suggested additional principles: timely; responsive; accessible; self-determination; credibility; work with seniors, not for seniors; dignity; respect; and personalized
- Instead of an Office of the Seniors' Advocate, should fund existing services

Scope of the Office of the Seniors' Advocate

- Housing; social determinants of health, including food; non-medical home supports
- Keep things open; scope should evolve based on the type of enquiries received

Who should be eligible to access the Office of the Seniors' Advocate

- Based on need, not age; self-identification
- Age 65 plus, because there are other agencies that assist people below this age
- Age 65 with some flexibility

Key Functions of the Seniors' Advocate

- Avoid duplication of services
- Additional support for seniors living in rural communities

a) Advocacy Services

i. Systemic Advocacy

- Systemic issues which the Office should address: funding for program service delivery; systems navigation education; food quality in residential care; wait lists for seniors housing; identification of gaps; responsiveness of the Health Authorities; dementia care
- Concern about people in local communities being referred to centralized ministries

ii. Individual Advocacy

• Support for self and local advocacy concept, such as municipal or regional designates

b) Information and Advice

- Systems navigation assistance through community TV, radio, and newspaper
- Promote information exchange and awareness of available services and resources
- Directory of community services; this is a possible role for municipal government
- No phone trees; need for direct connect; live person answer the phone
- Avoid one centralized number

- Central number such as 211 that redirects to the appropriate regional district office
- Make BC211 service available province wide

c) Receiving and Referring Concerns and Complaints

- Effective referral, follow-up, resolution this will help minimize complaints
- Resolution of issues will build trust in the Office and help generate credibility

d) Public Awareness and Communications

- Disability programs and Age Friendly Business Booklet are useful resource s
- Central repository for information, which in turn is shared with communities
- Outreach to regional and community offices to raise awareness about new programs
- Easily accessible information; be proactive in providing information

e) Collaboration and engagement

- Regional district model, liaison between communities and the Seniors' Advocate
- Collaboration with community; engagement at the local level
- Attend provincial seniors conferences to raise awareness and engage
- Productive collaboration with local health committees
- Probe to find out the services that people really need
- Build capacity in the MLA offices

Model

- The Office needs to be empowered to hold government to account
- Should not evolve into an administrative role; Office must have the authority to effect systemic change
- Arms-length from the Health Authorities
- 3 5 year appointment
- Fund the position to ensure its sustainability
- Regional representatives instead of a centralized service
- Knowledgeable, well-trained staff

AFTERNOON SESSION:

Principles

- Independent of government and accessible to public
- Effect change, power to speak out on issues without repercussions
- Reflective of the needs of seniors and the diversity of seniors

Scope of the Office of the Seniors' Advocate

• There should be no definitive scope

- Regional differences need to be considered; specific needs of remote/rural populations
- Focus on fixing systemic issues
- Transportation is a major issue, especially in remote/rural communities
- Housing
- Vulnerable seniors; seniors at risk

Who should be eligible to access the Office of the Seniors' Advocate

- Anyone eligible for seniors' services
- Self-identification; flexible intake criteria

Key Functions of the Seniors' Advocate

- Local and regional view of advocacy needs
- Regional offices
- Community presence
- There is a need for regional representation that can direct information upward to provincial government

a) Advocacy Services

i. Systemic Advocacy

- Systemic advocacy should be a priority of the Office
- Mediation to address systemic issues
- Identify gaps to be addressed by systemic advocacy
- Systemic issues that the Office should address:
 - o Poverty
 - Medical transportation expenses and issues
 - o Beds and housing, especially applicable in northern communities
 - o Complaints resolution mechanisms— timeliness and lack of resolution
 - o Protection of farmers' rights and property investments
 - o Better engagement with industry on the impacts on seniors
 - o Food quality in care facilities
 - o Stronger home support that allows people to stay in their homes
 - o Help for people with mental health issues

ii. Individual Advocacy

• Help people connect and navigate existing services

b) Information and Advice

- Need for resource directories printed and web versions
- Hospitals can be used as a resource for healthcare issues
- Information resources for older farmers
- Multiple channels of communication (print, online, radio, and TV)

- Provide training and computer labs for seniors to use technology so they can selfinform/advocate
- Create an environment that is conducive for seniors to learn
- Recognize that some people don't want or aren't able to use a computer
- Address negative perceptions of seniors (e.g., they are a burden on the system)
- Recognize diversity of seniors and different ways they connect to information
- 911 is not effective in remote communities

c) Receiving and Referring Concerns and Complaints

- Tracking complaints will help identify systemic issues and gaps
- · Reporting results will increase credibility and trust

d) Public Awareness and Communications

- Public awareness and communications should be the role of government
- Done through reports (research, annual reports), arising through the work of the Office
- Undertake surveys and publish results
- Elder abuse education

e) Collaboration and engagement

- Partner with provincial and community-based organizations
- Annual conference of stakeholders
- Face to face meetings in communities with frontline workers
- Ongoing collaboration with communities to learn about local issues
- Communities need more volunteers; encourage people to get involved; train them

Model

Recruit from current talent pools of experts in seniors' issues