

# Summary of Consultation on an Office of the Seniors' Advocate

## June 11, 2012, Parksville, British Columbia

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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: independent of government, accountable to the public; integrity; broad and flexible accessibility; empowerment; dignity; maintain seniors' connections with their social networks
- Reconsider the use of the word capability, seniors who need help may not be capable

#### **Scope of the Office of the Seniors' Advocate**

- Broad scope, including transportation, elder and financial abuse, and housing
- Consumer protection is an issue, but do not include it in the scope of the Office
- Consumer protection is a crucial issue that must be included in the scope of the Office
- Agency to inform government on key issues and to inform policy/legislative decisions
- Transition points; support capable seniors at critical points (i.e. spouse into care)
- Support family councils and caregivers; support community capacity building
- Support for First Nations
- Whistleblower protection

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

- Do not define eligibility by age; education and financial security impact people's need for support and ability to plan
- Target to age 65, but flexible based on need; self-identification based on need
- Expect to deal with children and grandchildren who are acting on behalf of a senior
- Change the language from "senior" to "older adult"
- First Nations self define (e.g., "older adult" or "respected elder" – generally age 55+)

#### **Key Functions of the Seniors' Advocate**

##### **a) Advocacy Services**

##### **i. Systemic Advocacy**

- Stronger regulations around residential care (i.e. issue of over-medication)
- Implement the Ombudsperson's report
- Transportation, particularly the need to relinquish driver's licence

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### ii. Individual Advocacy

- Suggestion to have a Seniors' Advocate in Service BC locations
- Support the existing system of advocates and advocacy supports for First Nations
- Comprehensive database to connect people to appropriate services
- Build connections with ethnocultural communities and translation services
- Could encounter confidentiality issues in smaller communities
- Community Living BC Model – recruit advocates on a volunteer basis to serve needs
- Provide referral services and seamless system navigation assistance

### b) Information and Advice

- Office must be extremely knowledgeable
- Maintain a database of available services and service providers; identify gaps
- Use and improve existing infrastructure – MLA's office, health authorities
- Support information exchange at the local level; provide advocacy training
- Crisis-management — it is critical that information is shared with the family
- Information and advice to improve health literacy
- Recognize the need to provide information beyond online resource
- Instead of “information and advice”, should be “information and choices”

### c) Receiving and Referring Concerns and Complaints

- Work with doctors, social workers and case managers
- Help people make informed selections around residential care
- Respond to the Ombudsperson's report re: systemic issues and complaints processes
- Need good understanding of existing complaint services; connect people to processes
- Encourage organizations to tighten and implement complaint processes
- Referrals and resolution oriented follow-up

### d) Public Awareness and Communications

- Focus on how to access information
- Transition planning for seniors; emphasize transitioning and advance planning
- Accessibility is key: no phone trees, don't rely on computers, provide central location in community, recognize heterogeneity of the seniors population (language, culture, sexual orientation, computer literacy)
- Create a directory of services available in each community
- Increased public awareness would decrease the need for a Seniors' Advocate
- Don't use valuable resources on this function; public reporting will raise awareness

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### e) Collaboration and Engagement

- Public forums for community to share materials and foster increased knowledge
- Create intergenerational opportunities; recognize valuable contributions of seniors
- Support family councils and other community advocacy organizations
- Round table events would be effective to drive policy priorities
- Collaborate with Aboriginal organizations

### AFTERNOON SESSION:

#### Principles

- Suggested principles: empowerment instead of independence for seniors; dignity and respect; recognize interdependence and importance of listening; education empowers
- Should be an office independent of government – more credibility, report to Legislature
- Support for seniors as caregivers
- Ease of access, “one-stop shopping” for seniors

#### Scope

- Monitor private health care; accountability in public care including follow-up
- Standardization of all services for seniors (home care, residential care)
- Broad scope to avoid confusion around where to take issues
- Financial obstacles that effect people
- Address residential care restrictions (first available bed)
- Do not duplicate existing services
- Avoid being seen as a lobby group; focus on human rights issues

#### Eligibility

- Don't need an age restriction; self identification
- Age 65 and over; target age 65, but let people self identify and be flexible
- Many people younger than 65 need support
- Use the Ombudsperson's Report definition; be flexible about age
- Consider from a legal standpoint – might violate Charter of Rights if people are excluded

### Key Functions of the Seniors' Advocate

#### a) Advocacy Services

- Recognize there are confidentiality issues; do not disclose personal information
  - i. **Systemic Advocacy**
    - Healthcare providers need to be respectful that informal advocacy is an important role
    - Need for whistleblower protection

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- Support advocacy at the local municipal level
- Review legislation that affects seniors and work towards improving it
- To influence change, report on systemic issues that are indentified

### **ii. Individual Advocacy**

- Support people to deal with systems; need advocacy options in each community
- Encourage self-advocacy, but recognize need; focus on highly vulnerable seniors
- Help people navigate services both at a community and systemic level
- Need to support people with mental health issues through advocacy

### **b) Information & Advice**

- Identify gaps in service and record resolutions for the purpose of quality control
- Two-way communication, feedback information to community groups
- Ensure that there is a satisfactory conclusion to the issue – follow-up
- Collaborate with community service providers to understand local issues
- Government should be advisors, do not rely too heavily on volunteers

### **c) Concerns & Complaints**

- Clarify when people should approach their MLA vs. approaching the Seniors' Advocate
- Leverage existing local advocacy networks for referral purposes
- Authority to launch investigations; recognize time sensitivity; accessible/user friendly
- Independent of government to operate effectively, regardless of partisan issues
- Support family councils to address issues around care
- Outlet for systemic complaints and complaints around private healthcare services

### **d) Public Awareness & Communications**

- Do not focus on education, focus on more important issues (food, housing, health care)
- Publish an annual report card on seniors; raise awareness about available services
- Advertising campaigns useless; recognize many seniors not computer literate
- Ensure people are aware of the Office of the Seniors' Advocate
- Educate seniors throughout the province about how to navigate the system
- Provide free community seminars, through community groups

### **e) Collaboration & Engagement**

- Involve communities through forums - alternate communities to ensure good coverage
- Create advisory committees with geographic representation

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- Surveys (mail/online), all the public to have input
- Adequately fund community services to attend to needs of seniors