

# Summary of Consultation on an Office of the Seniors Advocate

## June 1, 2012, Surrey, 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 from government, accessible; decentralized; empowerment; reaching out/connecting; confidential; sustainable; supporting seniors; respectful; safe; senior-centered; acknowledge cultural/linguistic diversity; support choices; responsive
- Self-advocacy is important but some people are unable to advocate and need assistance
- Good that the principles recognize the strengths of seniors

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

- Poverty and elder abuse; there should be an elder abuse hotline
- Healthcare, consumer protection, housing, income security and elder abuse important issues, however, the Office should be responsive to any issue that comes before it
- Let the scope of the Office evolve organically, while avoiding duplication of functions
- BC Housing needs to be involved with this process, especially as it related to immigrants
- Avoid creating silos of scope, as this will limit accessibility
- Focus on residential care facilities; support community-based agencies and volunteers

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

- Eligibility should be wide open and available to anyone, self-identification
- Take into consideration younger people living in residential care
- Must have an age limit if the office is going to specialize in seniors' issues and concerns
- Set age, but be flexible; cutoff to be determined by eligibility criteria of needed program
- Advocates of seniors should be able to access assistance

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

- Government funding must match the service expectations
- Manage expectations because the Seniors' Advocate cannot do everything

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

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

- Most important role is systemic advocacy on all issues; areas for systemic advocacy must be informed by experience
- Seniors' Advocate will become a repository for information
- Leverage, support and coordinate existing programs and services; do not create programming nor duplicate existing services

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- Build capacity in the individual and the service providers
- Most work at the community-based level is volunteer; workload is being downloaded to the volunteers; volunteers are becoming over-burdened; balance and support is needed
- Should advocate for funding for community-based programs and services, however, this can result in inconsistencies in access and service provision
- Need to address gaps in services (e.g., for immigrant populations); community agencies have already identified these gaps, the Seniors' Advocate does not need to do this

### ii. Individual Advocacy

- Only if no advocacy services are available in the community
- Self-advocacy may be possible for younger seniors, but not for older seniors
- Be prepared to: help people who have exhausted existing services; help individuals navigate the system; and provide immediate assistance for urgent matters
- Outreach to help connect the most vulnerable to services to connect them to services
- There are already many resources for, and organizations doing, individual advocacy – liaise with them and support them in their work
- Work with community-based agencies; agencies need funding; rely a lot on volunteers

### b) Information and Advice

- Important to provide many doors to access information and services
- There are too many entry doors; it becomes confusing
- Knowledge data-base to address regional needs; information must be kept up-to-date
- Replace the word “advice” in the heading, with “options”
- The Seniors' Advocate needs to take people directly to the required services; can model on successful pilots in temples where volunteers take people to the services
- Facilitate access and educate on how to reach out for services; particularly for isolated
- Information cannot be provided online; must be in print
- Senior volunteers can help with navigation, counseling, information provision
- Information dissemination not a role for Seniors' Advocate; communities already do this
- Cautioned against using a 1-800 number; must have person at end of line
- Seniorsbc.ca website can be a good resource for service contact

### c) Receiving and Referring Concerns and Complaints

- Received complaints may not be indicative of all the areas of concern
- People need to be better informed about existing services and processes for concerns and complaints; current system very difficult to navigate
- Seniors' Advocate and staff need to be trained to deal with all issues, highly responsive, referral, follow-up, and resolution; expect many calls about the cuts to programs
- Independent - because many concerns result from government policies/services
- The Office should not be addressing complaints; complaints mechanisms already exist
- Public libraries are an important resource for information dissemination

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### d) Public Awareness and Communications

- Information provision is responsibility of all levels of government/ministries
- TV/radio are best media for seniors (as opposed to social media); use ethnic media also
- Support intergenerational programming; combat ageism
- Awareness building to address Aboriginal and multi-cultural issues - radio and print; information must be available in a variety of languages; literacy issues

### e) Collaboration and Engagement

- Important to reach out and link to, work and coordinate with, and support community-based agencies and locally based seniors' advocates
- Forums are a practical way of engaging seniors and encourage seniors' hubs
- Forums for service providers to create and connect networks
- MLAs do outreach and provide communication avenues
- Must collaborate with all ministries to address issues; but not be part of government

## **AFTERNOON SESSION:**

### **Principles**

- The Office of the Seniors' Advocate should be independent of government.
- Other principles suggested included: protective, accessible, accountable, informed by seniors and seniors' organizations, welcoming and safe services, sensitive to cultural diversity, and transparent

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

- Should be broader than healthcare; also housing, transportation and everything that affects seniors; prevention focus
- Scope needs to be flexible and adaptable; needs of seniors will evolve over time

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

- Seniors, family members, caregivers or any individual assisting a senior

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

- Will be necessary to manage the expectations of the office
- The office requires legislative authority; should report out publicly; needs to have authority to hold government accountable; be sustainable and have sustainable funding
- The office should employ seniors and include the participation of volunteers

### a) Advocacy Services

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- Seniors' Advocate should address policies that affect seniors; be a change agent
- Primary role should be to identify wrongs and ensure consistency and accountability of performance in health authorities and professions
- Need whistleblower protection for people who work within the system
- Need to review standard of care in continuing care and over-medication of seniors
- Need to review legislation and Public Guardian and Trustee policies
- Seniors' Advocate should look at sufficiency of beds for seniors
- Need a centralized place to gather data and information to inform systemic advocacy
- Volunteer coordinators, and training for them, are needed; need patient navigators
- Special attention needs to be paid to immigrants and the multi-cultural community
- Need more transparency in data on abuse incidents in continuing care facilities
- Data collection shows that people lack expertise in this field
- **ii) Individual Advocacy**
- Triage function; staff should be well trained to fulfill this function

### **b) Information and Advice**

- Rely on and leverage existing information services to provide this role
- Information on a website accessible to local staff to provide information to seniors
- Government websites are outdated and phone trees make information inaccessible
- Need one-stop, accurate information on residential care

### **c) Receiving and Referring Concerns and Complaints**

- The Office of the Representative for Children and Youth can serve as a precedent
- The Seniors' Advocate's role should not be complaints based
- Processing complaints must be for the purpose of systemic change
- Timely, responsible and responsive complaint resolution in order to build credibility

### **d) Public Awareness and Communications**

- Public awareness and communications should be a role for the Seniors' Advocate
- Seniors' Advocate shouldn't be providing information; this is government responsibility
- Need to change public perceptions of seniors; intergenerational programs important
- Public awareness campaign for seniors, youth, and family to address seniors' issues, cultural issues and to promote positive attitudes about seniors
- Provide enhanced and improved tools and knowledge on standards of care in BC
- Information sharing in the multicultural community needs to be considered

### **e) Collaboration and Engagement**

- Community-based outreach to identify people who may not come forward
- Capacity building for community-based organizations; community agencies can provide these services if properly resourced; volunteers are over-burdened and need support
- More volunteers and young people should be recruited to care for seniors

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- BC Healthy Communities model is adaptable and could be used
- Municipalities should have a role
- There is no umbrella vehicle to coordinate or connect the community agencies