

Summary of Consultation on an Office of the Seniors' Advocate

June 5, 2012, Vancouver, British Columbia

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

- Principles should include: proactive; accountable; culturally sensitive; inclusive; empowerment; ethical; promoting social justice, human rights and competency
- Office should be independent from government – an Officer of the Legislature – and should report annually to the public and play a watchdog role
- “Independence of the senior”, with a caution to be culturally sensitive
- A suggestion to replace the word “care” with “services” or “ethic of care”
- The definition of justice is absolute fairness for all – seniors need to be included in this

Scope of the Office of the Seniors' Advocate

- Focusing on healthcare is too narrow; scope must be broad and include the social determinants of health such as transportation, housing, etc.
- Identifying core issues around healthcare and housing is important; Office should also look at big picture – isolation, loneliness etc. – which often exacerbates health issues
- Do not include consumer protection in the scope of the Office's work
- Judicial services should be included
- Focus on health vs. health services
- Focus on systemic advocacy, but be prepared to do individual advocacy
- Create focused channels of assistance with specialized staff
- Resources could be quickly exhausted if the scope is too broad

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

- Exercise caution around setting age limits – seniors can be 45 years and older
- Vulnerability and age should be the determinants
- Avoid defining “vulnerable”; a senior contacting the Office indicates vulnerability
- Case-by-case determination of eligibility; age should not be the determinant
- Support families of seniors

Key Functions of the Seniors' Advocate

- Avoid overlapping with, and duplication of, existing services
- Clear responsibilities for assistance and support
- Knowledgeable, well-trained staff (including an understanding of legislation, provincial and federal services, particularly for Aboriginal peoples)
- Regional offices that serve the varying needs of communities

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- There must be strong evaluation measures
- Manage expectations

a) Advocacy Services

i. Systemic Advocacy

- Focusing on ensuring existing systems are working well, strengthening the continuum of services, identifying gaps and trending issues
- The Office should have discretionary power around system advocacy
- Consider needs of unique populations (e.g., immigrant seniors and individuals with developmental disabilities)
- Problem solving research role would be a very valuable component

ii. Individual Advocacy

- Individual advocacy is not the best use of resources
- Develop a coalition of community providers that can resolve individual advocacy issues
- Focus resources and provide outreach to vulnerable and isolated seniors

b) Information and Advice

- Should not be an official function; do not brand the Office as an information service
- Do not duplicate existing services; work with existing service providers; identify the gaps
- Build capacity in existing organizations
- Ensure that individuals know the services they are entitled to; multilingual access
- Develop a naming protocol to clarify the purpose of the various help lines numbers
- Create an inventory/database of services and providers

c) Receiving and Referring Concerns and Complaints

- Should collaborate with Ombudsperson to implement the Ombudsperson's recommendations; focus on the issues that cause the complaints in the first place
- Deal with concerns and complaints that have not been resolved by other mechanisms
- Triage and referral services
- Follow up on referrals; ensure resolution of issues
- Receiving complaints is a reactive role, but the Office should be proactive

d) Public Awareness and Communications

- Convey a clear message about what the Seniors Advocate can and cannot do
- Office should coordinate public education with government policy
- Public awareness and communications should primarily be a role of government
- Address perceptions of seniors, including ageism; educate people around social change
- Involve partners, such as the education system
- Gather information from other organizations; knowledge exchange

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- Information, education and capacity building for seniors to promote self-advocacy
- Education for Aboriginal people about their right to service
- Intergenerational efforts to affect change around the perception of Aboriginal elders

e) Collaboration and engagement

- Create stronger connections with researchers to maximize knowledge exchange
- Consult and collaborate with other ministries and all levels of government
- Work in partnership with and build capacity in community-based services
- Play a role in improving relationships among community-based organizations
- Outreach to seniors in communities; seek input from seniors, particularly vulnerable
- Multi-lingual outreach

AFTERNOON SESSION:

Principles

- Principles should include: advocacy; equity and compassion rather than “independence”; autonomy; self-determination; inclusivity; safety and security; diversity; individuality
- Efficiency and accountability to show that needs of seniors are being met
- Need to enshrine difference between advocate and ombudsperson
- Show how the principles are all inter-related, help ensure understanding
- Independence from government, report to the Legislature and the public
- Commitment to permanency of the Office

Scope

- Housing , transportation, education and income security, not just healthcare
- Oversight over both private and public health care facilities and services
- Healthcare too narrow - look at well-being of seniors, health in the broadest sense
- Healthcare system too much to take on - start small and show results and then build
- Focus on families of seniors
- Many seniors don't have families – focus on systemic advocacy issues for all seniors

Eligibility

- Determine role and mandate first then people will self-identify
- Stay flexible in terms of eligibility
- Consider disabled people also, because they may reach senior-hood earlier
- Broad definition of senior – very heterogeneous group with diverse needs

Key Functions of the Seniors' Advocate

a) Advocacy Services

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i. Systemic Advocacy

- Systemic advocacy is most important and ultimately addresses the individual issues
- Make sure services are available – prioritize change to fill in gaps in services
- Lobby government on behalf of seniors
- Affect change through reporting and recommendations
- Advocacy hinges on trust and persistence

ii. Individual Advocacy

- Utilize existing community resources (e.g., general practitioners) for individual advocacy
- Advocate for seniors who are vulnerable and have nowhere else to turn
- Need individual capacity-building component

b) Information and Advice

- Staff members need to be well trained
- Resources better spent on improving existing system
- Improve access to information about pensions and benefits - financial literacy
- Provide in-person, telephone, computer based and print information
- Encourage self sufficiency among seniors (e.g., Advance Care Planning)
- Encourage appointment of seniors to Corporate Boards (e.g., ICBC, Consumer Protection, Lottery Corp., etc.) to encourage senior-friendly policies
- Culturally sensitive and multi-lingual

c) Receiving and Referring Concerns and Complaints

- Ensure that existing services are transparent; access to complaints and reviews
- Should first direct people to advocacy services in the community who can help
- Ensure that complaint services are user friendly; improve existing complaint mechanism
- Investigating and reporting out of findings on high risk areas

d) Public Awareness and Communications

- Outreach needed for vulnerable, isolated seniors who do not have advocates
- Utilize seniors' centers - provide workshops, forums, and training for staff and seniors
- Don't waste resources asking the same questions year after year
- Two-way communication with community organizations
- Education and Awareness can be resource intensive with limited results
- Focus on gaps in communications, conduct surveys to determine gaps

e) Collaboration and Engagement

- Provide support for advocates in communities; build capacity of existing organizations
- Get involved with Patients' Voices Network

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- Encourage families to become more involved in family councils, residential home forums, etc.
- Cultivate champions/ community advocates
- Do inventory and create a databases of existing services