

Long May Your Big Jib Draw: Setting Sail



Message from the Seniors' Advocate

On November 7, 2017 I had the honour of being appointed Newfoundland and Labrador's first Seniors' Advocate. What a busy time it has been! In addition to calls, emails, visits and letters, I have been traveling throughout the province listening to seniors, their families and supporters. I have heard stories which buoyed my spirit and other times laid me very low.

There is no doubt that many seniors and aging issues are being addressed and I applaud these efforts. Many seniors are living happy, healthy, productive lives. But on the other hand far too many seniors face serious challenges.

This report summarizes the major issues I have heard and my plans to move forward to ensure change. While the matters brought to my attention thus far have been numerous and varied, some topics come up over and over again. It is clear that these concerns must take priority.

I believe that at the core of most issues are two refrains: ageism and an absence of kindness and compassion. We need to stop ageist, paternalistic thinking and begin viewing aging as a time of positivity and opportunity. Secondly, we need to practice basic human kindness. Simple principles that are neither costly nor onerous.

It seemed fitting to use a nautical theme for this first report. We are on an incredible voyage. As seafaring people, Newfoundlanders and Labradorians know the importance of a drawn jib that is full of wind to propel us forward; moving swiftly toward a goal.

Sincerely,



Suzanne Brake, PhD
Seniors' Advocate



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Casting Off

The Office of the Seniors' Advocate was created through the **Seniors' Advocate Act**. On November 7, 2017 Newfoundland and Labrador appointed its first Seniors' Advocate.

The Act gives legislative authority for the Seniors' Advocate to address systemic issues impacting seniors and to make recommendations for change. Specifically, *Section 3* of the Act states the Office of the Seniors' Advocate was established to:

- (a) identify, review and analyze systemic issues related to seniors;
- (b) work collaboratively with seniors' organizations, service providers and others to identify and address systemic issues related to seniors; and
- (c) make recommendations to government and government agencies respecting changes to improve seniors' services.

Although the scope of the issues under the Seniors' Advocate's authority are quite broad, all fall within five categories: health care, personal care, housing, transportation and finances.

The Office of the Seniors' Advocate works with seniors' organizations, public or private service providers (as per the regulations in the Act) that fund or deliver seniors' services, and others to identify and address systemic seniors' issues.

While this Office is not mandated to address individual seniors' issues it does receive numerous calls which are individual issues. When the Seniors' Advocate becomes aware of individual matters, the issues are tracked and referred to the Office of the Citizens' Representative or other appropriate resources.

Seniors who need information on programs or services are referred to SeniorsNL which can help seniors anywhere in the province. SeniorsNL records the details from all calls on its electronic tracking system. This Office works closely with SeniorsNL to identify current and emerging issues.

One duty of the Office of the Seniors' Advocate, as outlined in *Section 16 (g)* of the Act, is to inform the public. As well, *Section 20* authorizes the Seniors' Advocate to publish reports relating to the exercise and performance of powers and duties.

The purpose of this report is to provide a summary of what was heard since the establishment of the Office. This report will also outline a plan for the future.

It is essential to remember that systemic issues are complex and multi-faceted. In order to address systemic issues we must look at the operation of the system as a whole and develop responses that go beyond the actions of individuals. As noted recently in **Ontario's Public Inquiry into the Safety and Security of Residents in the Long Term Care Homes System**, an effective systemic response requires all those in the system, both individuals and organizations, to work together to address systemic issues. This requires collaboration, co-operation, and communication.

Whenever possible, documents produced by this Office follow clear language guidelines by using plain text and setting up pages with a left-side alignment. Documents also follow Canadian National Institute for the Blind's accessibility guidelines. In this report, bold fonts are primarily used rather than italics or underlining. As well, the font is a sans-serif style in a minimum 12-point size.



Navigating

The world's population is aging due to lower fertility rates, longer life expectancy and the aging of the baby boomers. Most developed countries in the world are experiencing population aging. According to the most recent census (2016) 16.9 per cent of Canada's population is 65 years and older. In Newfoundland and Labrador, almost 20 per cent of the population (about 108,000 individuals) is 65 years or older.

Interestingly, if 20 per cent of the population is 65 years and older, then 80 per cent of the population is 64 years or younger. From this perspective, the size of the older population does not seem quite as catastrophic; certainly not something worth being viewed as a "tsunami"! Small but consistent increases will be seen in this population group for the next 25 years. These increases are not surprising as they have been predicted since the last of the baby boomers were born in 1966.

Seniors are concerned about being marginalized. Seniors feel that too often negative stereotypes about aging taint perceptions, especially amongst youth. The focus on a crisis approach to policy development has led to something the Seniors' Advocate refers to as "generational angst"; where competition for limited resources pits younger and older generations against each other. This attitude needs to change.

Seniors - all people in fact - want due respect and recognition. While most negative "isms" like sexism and racism are globally denounced, ageism is too often regarded as less serious.

As a population group, seniors share some qualities and concerns but this group is far from homogenous or all the same. In fact everyone is so different. The Seniors' Advocate recognizes that seniors are geographically diverse, living in urban, rural and remote communities. The Advocate has met Indigenous seniors and Elders who embrace an intergenerational and land-based culture; seniors who are financially stable and others who are struggling; seniors who identify as lesbian, gay, bisexual, transgendered, queer, intersex and 2-spirited (LGBTQI2S); seniors who are single or living as a couple; seniors who have immigrated to Canada and embraced Newfoundland and Labrador as their home; seniors who are living with disability; seniors who are lonely and those who are fully socially engaged; and seniors who are from a broad range of ages. The bottom line is that seniors are as diverse as the whole population but with more life experience.

The definition of a “senior” continues to be debated. The Act considers seniors to be 65 years and older but also includes those from age 50 upwards who access seniors’ services.

There is no other population group with as large an age span. Seniors can be further subdivided by younger seniors, older seniors and the very old. Within each grouping there are very different traits, abilities and needs.

Even the United Nations recognizes that there are, and will be, impacts on labour and financial markets, on goods and services as well as family structures and intergenerational ties. How we approach these impacts speaks to who we are as a society.

Although it is inevitable to experience health issues in older age such as declining vision, hearing, oral health and mobility challenges, people are beginning to move into older age with better health and are living longer. These are facts which should be celebrated!

While some seniors retire and live with good health and financial stability, other retirees live with health problems and/or poverty or low income. Sometimes a health challenge can generate other problems such as financial instability or social isolation. For example, a senior with health issues may stay at home more. They may not feel well enough to socialize or simply cannot afford it. Living apart from family and friends with few social interactions can worsen health challenges.

Recent income statistics reveal that this province has approximately 30,000 senior couples (both aged 65 or older) with annual median incomes of \$41,200 (therefore 15,000 of these couples have income between \$27,000 and \$41,200). Also 22,000 single seniors have a median income of \$24,300 (therefore 11,000 of these single seniors earn between \$18,000 and \$24,300 a year). These numbers are significant. The financial burden on these individuals must not be ignored.

In 2007 the Province released the **Healthy Aging Policy Framework** followed by a **Status Report** in 2015. It contained five priority directions and 28 goals. The Framework has not been revised or updated since its release and is no longer referenced as a guiding tool. In June 2017, the province’s Auditor General released the **Report to the House of Assembly on Performance Audits of Departments and**

Crown Agencies. The Auditor General examined government's preparedness for the changing demographics and found that Government is not prepared for the impact of changing demographics and has not assessed future service needs, nor planned for future costs. Government is expected to address these issues by Fall 2020. The Seniors' Advocate will be monitoring government's response to the Report and is prepared to work with government to ensure this province provides the programs and services required by its citizens.

Regardless of how we view aging, there is no doubt that as the population ages there will be socio-economic implications and adjustments for decision-makers in all sectors of society. It is the role of the Seniors' Advocate to identify the issues which impact seniors as they age and make recommendations to support aging in a healthy and inclusive way.



What We Have Heard

Since the establishment of the Office of the Seniors' Advocate, the Seniors' Advocate has participated in numerous public engagement events throughout the province. These sessions engaged seniors, their families and supporters, and provided learning and sharing opportunities for everyone. The provincial outreach is not limited in scope, so all regions of the province will be visited during the Advocate's tenure.

This past year has afforded the Seniors' Advocate many opportunities to discuss the role of the Office; but more importantly, the Advocate has been listening.

The Seniors' Advocate has heard many positive stories about living well and being included in society. She has attended 50+ Federation Club meetings and recognizes the strength and support seniors' organizations and retiree groups provide. But she also has heard about the challenges faced by many seniors. She heard the gentleman who feared he would lose his sight while waiting for eye treatment. She heard the lady who was upset about the treatment her aunt received while living in a long term care facility and she heard the older worker who would lose his health benefits when he turned 70. She met the lady who showed her broken dentures because she could not afford the repair bill. She has been listening carefully and has taken note.

This report highlights some of the many issues that have repeatedly and consistently been brought to the attention of the Seniors' Advocate. There are other issues emerging which the Advocate expects will garner more attention in the future. The following issues have been categorized alphabetically, not in order of importance.

Aging in Place

Age-Friendly Communities

An age-friendly community benefits all citizens regardless of age. Age-friendly Communities is an international movement where communities assess their overall "age-friendliness" and work toward making positive changes. An assessment examines

outdoor spaces and buildings, transportation, housing, social participation, respect and social inclusion, civic participation and employment, and communication and information. A number of municipalities in Newfoundland and Labrador have completed self-assessments and moved forward with implementing initiatives.

Being socially included may be through families, friends, community events, church services, volunteering, and participating in recreational and social programs. Seniors report that participating in seniors' organizations and retiree groups, such as the 50+ Federation with its 130 clubs and over 6,000 members throughout the province, helps with positive mental and physical health. However, in this province, long difficult winters can hinder socialization opportunities.

Finding out about programs and services, or changes to them, can be challenging for seniors. SeniorsNL provides information and referral services. This organization requires ongoing support in order for it to be sustained and expanded throughout the province.

Seniors report that once they learn about programs they encounter hurdles navigating the system such as wading through bureaucracy and paperwork. As service providers depend more on technology to communicate, the challenges can be compounded for seniors. It is critical for governments and the private sector to consider the technological abilities of seniors which range from being highly computer literate to no computer experience at all. Further, even seniors with high computer skills may have limited access to computers and to the internet.

We need a range of options which support our changing needs.

Even in a technologically advanced society many people, particularly older seniors, are challenged by low levels of reading and writing skills. Service providers need to constantly monitor their methods of communication to ensure their messages are being received and the needs of seniors are being met.

Housing

Seniors are concerned about where they will live as they age. They are concerned about their ability to live independently while living on fixed incomes in the face of rising costs and increased taxes. Seniors want to be able to age in the place of their choosing. In Newfoundland and Labrador more than 80 per cent of seniors own their own homes.

Many expressed concern that as their financial situations and care needs change, their ability to age in place is compromised.

Seniors expressed concern about the availability of affordable, accessible and energy efficient housing options. Maintaining a house becomes more challenging as we age. While downsizing may be more appealing, access to smaller more affordable homes is not always possible.

Low income seniors may be eligible for a rent subsidy from Newfoundland Labrador Housing. These subsidies are mostly “fixed” which means the subsidies are attached to certain dwellings. A pilot project is underway to explore the option of “portable” subsidies so that the subsidy is attached to the person and not the dwelling. In this case, seniors can choose where they want to live and the



subsidy moves with them. The Seniors' Advocate will be watching for the results of this pilot, as self-determination plays a key role in maintaining independence.

Accessibility is essential to living independently regardless of age, yet construction and renovations continue to take place without considering the principles of universal housing design. Simple adjustments such as wider doorways, lower light switches, accessible sinks and showers can mean the difference between continued independent living and institutionalization. Legislation to ensure these principles are automatically integrated into building should be considered.

People who wish to continue to live at home often require funding assistance to make renovations to their homes. They have expressed concern about eligibility and long waitlists for Newfoundland Labrador Housing's **Home Repair Program**. This program serves about 350 clients (mostly seniors) each year. Seniors report that the funds released on April 1 were depleted by June 15. Seniors must wait until next fiscal year to apply again. The Seniors' Advocate learned that this year additional funds were secured, however the demand continues to exceed the budget.

In addition, seniors report that the wait time between an initial application for repairs and a subsequent approval can be lengthy; too long for any person but more so for older homeowners. If successful in receiving a grant, a person must wait seven years to be eligible again. The availability of these programs are barriers to aging in place and can influence a person's decision to move into a personal care home or long term care facility prematurely or leave the community in search of alternative housing.

I got my power bill this week and I was shocked to see that it has now increased by \$40.00. I don't have that much more money so what do I do?

Many seniors, especially those in low income, are worried about the increasing cost of electricity. They simply cannot afford increases and although assurances have been given that mitigation will occur, seniors are not convinced this is possible and seek clearer explanations. Some seniors are interested in programs that help them lower their electricity use such as energy efficient lights and heat pumps; however purchasing up front (even with a plan to pay off over time) is a burden for an older adult on a fixed income.

Home Support Services

Most seniors prefer to age in their own homes. However, they sometimes require assistance with a range of supports and activities. The **Provincial Home First Initiative** promotes access to home support services, equipment and supplies and health professionals. This cost effective approach helps seniors remain independent in their homes and communities, and avoids unnecessary hospitalization and/or long term care. For this approach to be fully implemented, changes must occur in the way the system currently operates.

Seniors are pleased with the changes to the financial assessment process whereby contributions are now based on "income only". However, this approach has not been implemented universally throughout the system. For example, funding for hearing aids

and vision care is still based on income and assets. The transition to assessments based on income only for all services must occur as soon as possible.

The **Provincial Home Support Program**, released in 2017, supports a Home First philosophy. Proposed improvements are in four broad areas: program intake and referral; assessment, planning and coordination; home supports delivery; and monitoring and policy development.

While work is underway to implement changes to the **Provincial Home Support Program**, seniors are still expressing concerns about a range of issues including the length of time to complete an assessment and re-assessment, consistency of staffing (including home support workers, nursing and social work), lack of management/oversight, training of staff, difficulties in accessing information and lack of case management.

Seniors in Labrador report that accessing home support services is almost impossible. With no private home support agencies in Labrador many seniors and families must make difficult decisions to move in order to access care outside of Labrador.

A strong philosophical approach focusing on aging in place and a well-integrated home support program is essential.

Homelessness

The Seniors' Advocate also heard about and is very concerned about the growing number of seniors who are experiencing homelessness or living in substandard living arrangements. Seniors are living on the streets, in slum conditions or couch surfing. The Gathering Place in St. John's reaches out to the most vulnerable people in society; they provide meals three times a day, seven days a week, provide clothing, address dental issues, offer foot care, and provide information and connect guests to supports and resources. One in two registered guests is age 50 years and older while one in four is age 65 years and older. Many live with chronic mental health challenges and/or addictions. These are some of the most vulnerable citizens in our province.

The Seniors' Advocate has received reports about seniors being evicted from personal care homes and left homeless. While the Advocate appreciates and understands the challenges of providing services to residents living with complex needs, a more comprehensive and supportive process should be implemented.

There are homeless shelters that accommodate older adults. Connections for Seniors, located in St. John's, is an example of a seniors-only shelter that offers temporary accommodations as well as wrap around services and support. This ensures seniors' needs are addressed and they are able to transition into more permanent housing. Much more support is required to expand this model.

To fully understand the scope of homelessness among seniors in our province the Seniors' Advocate is currently reviewing the status of seniors and homelessness in Newfoundland and Labrador. Findings and recommendations will be shared later this year.



Safety and Security

Vulnerability – real or perceived – means being susceptible to violence due to dependence on others for assistance and support. Unquestionably, this is an area of concern for seniors.

While there is legislation that reaches out to very vulnerable adults including seniors (**Adult Protection Act, 2014**), protection under this Act is limited to those adults who are being abused or neglected and are incapable of understanding and appreciating risk. Seniors and families report there are seniors who are capable however still very vulnerable and experiencing abuse or neglect. There is a need to further explore how these individuals can be better supported.

Violence Against Older Persons (elder abuse) continues to be a concern. While it has been recognized that nine main types of violence are experienced by older persons: physical, psychological, emotional, verbal, sexual, financial, neglect, spiritual and cultural, there is still a need to create greater awareness. The Seniors' Advocate

applauds SeniorsNL as a leader in providing information and knowledge through ongoing education and research.

Discussing illness and death is an uncomfortable conversation that many people avoid. However, one of the best ways to ensure seniors are less vulnerable is through future planning. Completing an **Advance Health Care Directive** will ensure that your medical wishes are clear and carried out by a substitute decision maker of your choosing. An **Enduring Power of Attorney** will ensure that your financial affairs are managed by the person of your choice. Lastly, a **Will** ensures that your estate is distributed as you wish.

The number of seniors who complete these documents is too low. While people may be uncomfortable discussing these issues, cost is also a deterrent. The Public Legal Information Association NL (PLIAN) is a non-profit organization which provides general information including information about wills and estates. Some lawyers occasionally offer to complete this work for seniors, free of charge.

The time has come to normalize this conversation through raising awareness and providing opportunities for seniors to access affordable legal advice and services.

Transportation

Access to transportation means independence. Staying at home, running errands, getting to appointments and socializing are all very important to a person's health and well-being.

For seniors who do not have their own vehicles, finding reliable transportation means depending on a friend or relative or paying transportation fees. There are few public transportation options, although models are slowly emerging throughout the province especially through funding and support of the **Newfoundland and Labrador Community Transportation Program**.

We need to get out to buy groceries, go to drug store or meet with friends. No transportation bars us in.

The Random Age-Friendly Transportation Program in Clarenville is an excellent example of how community, with support of government, can provide a transportation program that supports seniors and others to access social and recreational events, everyday activities such as shopping and access to medical appointments. Also, MetroBus in St. John's, with support from the same provincial

program, has implemented a small bus service which visits seniors' apartment buildings on a regular basis and again allows seniors to access services and programs and remain independent. This need exists throughout the province and seniors note that one size does not fit all. Options need to be innovative and fit the clientele of the diverse geography of the province.

Seniors who do have their own vehicles have to be able to afford to maintain and operate the vehicle and remain healthy to retain a driver's license. Mandatory tests to determine a senior's fitness to retain their driving privileges begins at age 75. Although there is a fear of driving restrictions, most seniors are not complaining about the need for these assessments; the complaints center on the fees. The Medical Care Plan (MCP) does not cover the cost of these assessments and the fees paid to physicians range from \$0-\$100 which can be unaffordable for many seniors. The province should consider inclusion of this fee within MCP as the unavailability of transportation services or losing one's ability to drive, is one of the greatest contributors to loss of independence and social isolation.

Healthcare

Residential and Health Care

The Seniors' Advocate has heard that issues within residential and health care facilities are complex, varied, numerous and inter-related, and are summarized as follows:

Policy	Care and Treatment	Staffing
<ul style="list-style-type: none"> • Institutional or community based ways of living • First available bed policy • Keeping couples together • Sensitivity and respect for culture, religion and sexual orientation 	<ul style="list-style-type: none"> • Medication use • Urinary tract infections • Use of restraints • Oral health care • Foot care • Bathing • Meals • Aggression and injuries 	<ul style="list-style-type: none"> • Resident-staff ratio and skills mix • Education and training • Access to medical professionals • Records management • Hours of care • Management/Oversight • Communication • Respect and kindness

There has been significant concern expressed by seniors and their families regarding care in hospitals, personal care homes and long term care facilities. The Seniors' Advocate is especially concerned about repeated reports from residents and families about fear of reprisal if they report their concerns. It is extremely concerning that families feel unable to speak about the issues with staff and management as they do not wish to be labelled a "trouble family" and fear repercussions toward their loved one. This highlights the need to create a forum where residents and families can express their concerns or suggestions in a non-threatening way. It is important to reach out to those individuals and families who have lived experience. The Advocate is committed to completing a confidential survey with residents who live in care facilities and/or their next of kin.

I live in Labrador and when my wife got sick they moved her to a home in Central Newfoundland. There is no home care here. My heart is broken.

Concern is expressed over the "first available bed" policy whereby a person who is waiting to enter a residential care facility must take the first facility opening offered, even if it is not a preferred location. A resident can apply to be transferred but that may take time and research shows that multiple transfers, even within the same facility, can have very negative effects on residents and loved ones.

Policies which separate senior couples with differing care needs are distressing for families. Sometimes senior couples may have to wait a long time to find a home where both can live in the same facility or at the very least in the same community.

If I need to live in a long term care home I am worried that a straight man might not want to share his room with a gay man....and will the staff accept me for who I am?

LGBTQI2S seniors and visible minority seniors have expressed vulnerability concerns related to discrimination and general comfortableness, especially if they are living in a residential care setting. The fear of having to hide one's sexuality or suppress one's culture or beliefs, while living in close quarters with a stranger, is very real.

Primary Health Care

Seniors support a primary health care system where they can access services that promote health and wellness, prevent illness, treat health issues or injuries, and diagnose and manage chronic health conditions. This includes meeting dietary, medical, nursing, pharmaceutical, social work and other health needs. The commitment to expanding primary health care teams throughout the province is important.

The lack of geriatric specialists, community-based occupational therapists and physiotherapists is especially concerning. As people grow older, health needs may become more complex and require a team knowledgeable and skilled in aging issues.

Seniors appreciate opportunities to receive the flu shot, free of charge. However it must be noted that the uptake is not as high as in other provinces. Efforts to advertise the importance of vaccinations, when and where clinics are located, and sessions to educate seniors must continue.

Seniors recognize that shingles is a debilitating disease that can cause much suffering as well as increased costs to the health care system. Most health care plans do not cover this cost including the pharmaceutical care plan. Many seniors report that the cost is up to \$300 for the two inoculations; many cannot afford this cost.

Dementia

As the number of older adults increases, so will the number of people living with a form of dementia. Caregivers/supporters report that they are seriously challenged when addressing the complex behaviours of their loved ones living with dementia. Yet,

I was never trained to know how to care for mom. I am lost.

research shows that by supporting families and caregivers, institutionalization can be reduced. There are few adult day programs and respite is almost non-existent. Families report that paid caregivers are not always trained appropriately to care for a senior living with dementia. While the Alzheimer Society of NL focuses on education and support to families and others regarding all forms of dementia, they are seriously under resourced and do not have multi-year funding.

The Seniors' Advocate was pleased to see the Federal Government release **A Dementia Strategy for Canada: Together We Aspire**. It has three primary objectives: prevent dementia, advance therapies and find a cure, and improve quality of life of people living with dementia and caregivers. Newfoundland and Labrador must now move forward with how to best integrate these objectives. The Seniors' Advocate is very interested in how the provincial government will move forward to implement these objectives.

Dental, Hearing and Vision Care

As people age, health care needs change. Most people will experience challenges with dental, hearing and vision care. For people without sufficient health insurance coverage or eligibility for government assistance, access to oral health care, eyeglasses, and hearing aids is simply too expensive.

The **Canada Health Act** does not include dental, hearing or vision as required health care services unless a procedure takes place in a hospital. Therefore, provinces and territories may provide different services.

Low income seniors have reported concern about the lack of a **dental care** program. Age-related illnesses and medications may damage teeth, highlighting the importance of preventative measures.

The Seniors' Advocate has heard from a large number of seniors about affordability of dental services including cleanings, fillings, extractions, dentures or denture repairs. It would appear that while a few dentists offer a repayment program, this is not the norm and bills are expected to be paid immediately.

My sister, who, at 83, is subsisting on OAS and GIS monthly and is now faced with a dental bill of over \$2500 because she requires all of her upper teeth to be extracted, has an infected bone in her mouth, and will need dentures. She will have to borrow the money.

It is positive that dental services are being provided free of charge by volunteer dentists at The Gathering Place to a very small number of the most vulnerable people, including those homeless or those living in precarious situations. Unfortunately, a large cohort of the senior population remains without dental services.

It's like my mouth is divorced from the rest of my body; health care addresses the rest of me but not my mouth.

As people live longer, the demand for oral health care will increase and for many seniors, out-of-pocket dental care is out-of-reach. Oral health care goes beyond cosmetics, as the links between oral health and general health are irrefutable and influenced by income and social status, education, employment and personal health practices.

Research has linked acquired **hearing loss** to a number of health conditions including: cognitive decline and/or an increased risk of cognitive decline, diabetes, heart disease, chronic kidney disease and depression. Recently, a link has been made between hearing loss and falls.

Seniors who develop hearing loss sometimes do not seek help because they are embarrassed, accept it as a “downside of aging” or are put-off by the cost of hearing aids. Any or all of these barriers can contribute to seniors becoming socially isolated.

Untreated/undiagnosed hearing loss can negatively skew the results of cognitive tests causing inaccurate results. Hearing aids, devices and batteries are expensive. Like any piece of electronic equipment that is used daily, hearing aids may need repairs or complete replacement after a number of years. Depending on the type of device, the cost can be thousands of dollars.

Batteries and regular maintenance is another fee, if not included with the purchase of the devices. Some seniors can receive financial assistance through private pensions or the provincial government. All other seniors must pay out-of-pocket.



Vision care issues fall within several categories. Many seniors report concerns regarding cataract surgery, particularly the lengthy wait list. In a preliminary review, the Seniors' Advocate found that sometimes it takes up to a year for a patient to be seen by an Ophthalmologist. After the diagnosis, wait times for cataract surgery may be up to two and half years, depending on which Ophthalmologist is performing the surgery. Seniors are confused about what constitutes a "wait time"; that is, the length of time to see an Ophthalmologist, followed by the wait time to have surgery. Having a central intake, where a patient is referred to the next available Ophthalmologist, could potentially speed up the process. The process must be as fast as possible because having cataracts untreated can lead to significant stress and limitations in general life activities as well as vision loss.

Macular degeneration is another eye disease that is often age related and if untreated can lead to loss of central vision. While there is no cure, progression of one form of the disease (wet) can be slowed. Seniors report that coverage through the Newfoundland and Labrador Prescription Drug Program is limited to a lifetime maximum of 15 injections. This is also true of for some private insurance plans. Any additional injections must then be paid for by the patient. A preliminary review by the Seniors' Advocate finds that no other province limits the number of funded injections. Seniors report that they simply cannot afford any additional cost; the result of which is blindness.

The cost of eye glasses continues to be of concern as often age related changes require multi-focal lenses which are expensive. Many seniors do not have health insurance which covers at least a portion of the cost.

In summary, as we grow older we experience dental, hearing and vision challenges. Currently, seniors struggle to totally or even partially cover these costs, which leads to increased dependence, other health issues and poor quality of life.

Access to Appointments and Medical Transportation

Seniors describe lengthy wait times to avail of many programs and services. Even when a specialist is available to visit a remote area of the province to hold clinics, often times not everyone has an opportunity to be seen.

The distance to travel for appointments is a deterrent; seniors in Labrador and other rural and remote areas are especially impacted.

Seniors report that the **Medical Transportation Program** does not meet their needs. Even when travel costs are supported through the medical transportation program, it can take months to be reimbursed. Low income seniors describe situations where they are forced to cancel the appointment as they cannot afford the cost up front or wait for reimbursement.

Seniors suggest that consideration be given to streamline the process to ensure speedy reimbursements and consider alternative options such as flights be paid for by government directly.



Labour Force Participation

Seniors are concerned about how to stay attached to the labour market. There is no mandatory age of retirement. People choose to retire at different times dependent on their economic situation as well as their interest in continued attachment to the workforce.

As the current population trend continues, it is realistic to expect people to work well into their 60s and 70s. Yet, too often older workers are perceived to be less productive, less receptive to training, not cost effective, more resistant to change and at greater risk of accident or illness. However, research shows that these myths and stereotypes are false. Employers need to continue to retain and recruit older workers.

Seniors' concerns fall within three categories: continued attachment to the workforce, the stability of pensions and access to benefits.

Continued Attachment

Seniors who choose to remain attached to the workforce likely fall within two groups: people who want to continue working and people who must continue working.

Seniors have relayed incidents of being “forced” into taking retirement offers or being let go from their position. For seniors who have tried to rejoin the workforce, some have found employers looking to hire older workers, while most have found that employers hesitate.

Pension Stability

The **Human Rights Act** identifies “age” as a prohibited ground for discrimination. The Act, however, exempts retirement or pension plans.

Retired or soon-to- retire seniors with private pensions are expressing serious concerns over the stability of those pensions as pension plans become underfunded or companies declare bankruptcy. There is provincial legislation (**The Pensions Act**) and a Superintendent of Pensions who provides oversight to ensure pensions are administered properly. However, there have been instances when a company goes into insolvency and retirees are impacted. For example, in 2014 Cliffs Natural Resources (Wabush Mines) went into creditor protection and left the pension and medical plans underfunded, resulting in retirees losing up to 25 per cent of their payments. The pension plan was considered an unsecured creditor and not a priority of the company's debtors. After years of legal battles, a deal was approved and funds were put back into the plan. There is concern about the lack of legislation protecting retirees under these types of circumstances.

Access to Benefits

As noted above, the **Human Rights Act** identifies “age” as a prohibited ground for discrimination. The Act, however, exempts group or employee insurance plans.

Seniors have expressed great concern that some workplaces do not offer benefits upon reaching a certain age. Seniors reported losing their long term disability and health benefits at age 65 and 70 even though they continue to work. They also note that some employers do not offer any type of program where they can continue to purchase those health benefits. Seniors are especially concerned about the loss of health benefits including vision and dental as this can be devastating when living on fixed incomes.

Setting the Course

The Seniors' Advocate is legislatively obligated to bring attention to areas where improvements are needed and, if necessary, offer recommendations. The Advocate is also committed to supporting and highlighting the efforts of government and other service providers when programs are meeting seniors' needs. In both instances, the public will be informed.

The Seniors' Advocate has conducted numerous consultations throughout the province. The Advocate has met face to face and via telephone, received reports via email, submissions on website and via regular mail. A number of preliminary reviews, presentations and opinions on issues have been completed.

The following concerns have emerged as priorities for the Seniors' Advocate, with several clearly requiring immediate attention.

AGING IN PLACE

1. The Seniors' Advocate recognizes that an age-friendly community is friendly to all its citizens regardless of age.

Action: The Advocate supports and encourages all efforts to enhance, expand and maintain age-friendly communities throughout Newfoundland and Labrador.

2. The Seniors' Advocate is committed to better housing options for seniors.

Action: The Advocate will work with partners, service and program providers to improve housing options and housing programs for seniors.

Action: The Advocate will monitor results of Newfoundland Labrador Housing's portable versus fixed subsidies pilot study.

Action: The Advocate will encourage the integration of accessibility principles into building codes for all private and public buildings.

Action: The Advocate supports an expanded and enhanced Home Repair Program.

Action: The Advocate will continue to monitor electricity rates and the impact on seniors.

- 3. The Seniors' Advocate is committed to a home first philosophy whereby home support services, equipment and supplies, and appropriate health professionals are available to people in their own homes.**

Action: The Advocate is closely monitoring the implementation of the Provincial Home First Initiative as well as the recommendations from the Provincial Home Support Program Review.

- 4. The Seniors' Advocate recognizes the growing number of seniors who are experiencing homelessness or living in substandard living arrangements.**

Action: The Advocate is currently reviewing the status and scope of homelessness among seniors in Newfoundland and Labrador.

- 5. The Seniors' Advocate recognizes the importance of balancing vulnerability with independence and self-determination.**

Action: The Advocate encourages a review on how to best support vulnerable seniors' and others who have capacity to understand and appreciate risk however are being abused and/or neglected.

Action: The Advocate encourages raising awareness and providing affordable opportunities for seniors to access Advance Health Care Directives, Enduring Powers of Attorney, and Wills.

Action: The Advocate encourages the integration of the cost of driving medicals for those age 75 years and older into the Medical Care Plan.

HEALTHCARE

- 6. The Seniors' Advocate is committed to improving living and working conditions within personal care homes and long term care homes.**

Action: The Advocate recommends a significant review of the province's personal care homes and long term care homes.

- 7. The Seniors' Advocate supports the expansion of primary health care throughout the province.**

Action: The Advocate recommends concrete actions be taken to increase the number of health care professionals with gerontology expertise (specifically, geriatric specialists) and community-based occupational therapists and physiotherapists.

Action: The Advocate recommends that the shingles vaccine be offered free of charge to low income seniors and others with compromised immune systems.

- 8. The Seniors' Advocate recognizes that the number of older adults living with dementia is increasing.**

Action: The Advocate will be closely monitoring the development and implementation of a Provincial Dementia Care Plan.

Action: The Advocate supports the work of the Provincial Alzheimer's Association and encourages consideration of multi-year funding.

- 9. The Seniors' Advocate is committed to dental, hearing and vision care for seniors.**

Action: The Advocate encourages policy-makers to include dental, hearing and vision care as part of overall health care and chronic disease strategies.

Action: The Advocate will conclude its review of adult dental health services for low income seniors.

Action: The Advocate will review vision care needs of seniors.

Action: The Advocate will review hearing needs of seniors.

Action: The Advocate will explore how dental, hearing and vision care needs of low income seniors be included under the Canada Health Act.

Action: The Advocate recommends that the transfer of funding responsibilities for the hearing aid and vision care programs be expedited (that is, moved from the Department of Advanced Education, Skills and Labor to the Department of Health and Community Services).

10. The Seniors' Advocate recognizes that low income seniors cannot afford the cost of medical transportation.

Action: The Advocate recommends that a review of the Medical Transportation Program be completed.

LABOUR FORCE PARTICIPATION

11. The Seniors' Advocate is committed to older workers and age friendly workplaces.

Action: The Advocate will partner with stakeholders to host a summit on older workers in November 2019. It will bring together employees, employers, policy makers and others to explore the changing landscape of the workforce.

Action: The Advocate will further examine "age" within the context of the Human Rights Act and its impact on pension/retirement plans, as well as employee insurance plans.

Conclusion

The work of the Office of the Seniors' Advocate has only just begun. The concerns outlined in this report are certainly priority concerns at this time but as priorities evolve and shift, so might the Seniors' Advocate's focus.

Issues reviewed by the Seniors' Advocate may result with reports accompanied by recommendations, reports with findings but without recommendations, opinion pieces, correspondence and presentations. The work may take weeks or many months.

Regardless of how findings are presented, the Seniors' Advocate will expect suitable, timely responses. Recommendations will be closely monitored to ensure changes are implemented. Further, all reviews conducted by the Advocate and regular updates on progress will be made public, circulated amongst stakeholders when possible and easily available on the website of the Office of the Seniors' Advocate.

Every Newfoundlander and Labradorian should be very interested in the work of the Office of the Seniors' Advocate. If you are not a senior now, hopefully you will be one day. There is no doubt that achieving positive, lasting improvements takes time. But with commitment, effort, and collegial partnerships, advancement is certain. It is incumbent on each of us to ask questions, raise our voices against injustices and never stop seeking a better way; the work must never cease.

*Fair winds and following seas
and long may your big jib draw.*



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