

# Status Report on Recommendations 2022-23



OFFICE OF THE SENIORS' ADVOCATE



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## Message from the Seniors' Advocate

In June 2022, it was my honour to be appointed as the Seniors' Advocate for Newfoundland and Labrador. In one way or another, I have spent my entire career advocating for improvements in the lives and circumstances of the people of this province.

As Seniors' Advocate my mandate is to examine systemic issues impacting seniors and make recommendations for change. In September 2019 the Office of the Seniors' Advocate released a report titled **Long May Your Big Jib Draw: Setting Sail**. This report made 25 recommendations for action.



Sections 16(g) and 21 of the **Seniors' Advocate Act** outline my authority to inform the public, promote awareness of systemic issues and publish reports relating to the exercise and performance of my powers and duties.

This status report shows that 44 per cent of all recommendations in the 2019 report have been fully implemented, 44 per cent have been partially implemented, and 12 per cent of the recommendations have had little or no progress.

There is no doubt that improvement takes time, and we have all gone through significant change and uncertainty since the release of the 2019 report. I acknowledge that many departments of the Government of Newfoundland and Labrador had their priorities altered to respond to the Covid 19 pandemic and this may have impacted their response to the recommendations. Regardless, I recognize progress has been made and many have worked to improve seniors' services in Newfoundland and Labrador.

Moving forward I expect to see progress on the outstanding recommendations. I will monitor all current and upcoming recommendations until I am satisfied that each has been sufficiently addressed. This Status Report will become an annual feature.

We still have a ways to go but we are moving forward, which is always the right direction. Seniors deserve no less.

A handwritten signature in blue ink that reads "Susan Walsh". The signature is fluid and cursive.

Susan Walsh, MSW RSW  
Seniors' Advocate



# Table of Contents

Message from the Seniors' Advocate .....	iii
Monitoring Procedure.....	1
Definitions.....	2
Overall Status of Recommendations.....	3
Status of Recommendations .....	4
Highlights .....	7
Recommendations Partially Implemented .....	8
Recommendations Not Implemented.....	19
Conclusion .....	21



# Monitoring Procedure

## Authority

The **Seniors' Advocate Act** provides the Office of the Seniors' Advocate with legislative authority to make recommendations to improve any seniors' services that are related to health care, personal care, housing, transportation or finances. Further, by the authority provided under Section 16 of the **Seniors' Advocate Act**, the Seniors' Advocate can request information under the Act and must be provided with that information.

## Process

Recommendations are made with the intention of encouraging improvements in seniors' services. All recommendations are made after carefully considering input from seniors and families and analysis of the issue and potential solution.

Every recommendation made by the Office of the Seniors' Advocate will be monitored. The Seniors' Advocate requests annual written updates on the progress made in implementing recommendations. If needed, meetings may be requested for clarification or further information.

The Office of the Seniors' Advocate assesses the progress made on each of the recommendations and assigns one of the following four categories: implemented, implemented ongoing, partially implemented, or not implemented. If a recommendation falls under the jurisdiction of more than one entity, the recommendation will remain in the partially completed category until all elements of the recommendation are implemented.

Updates on each recommendation are requested annually until the Seniors' Advocate is satisfied that the recommendation has been addressed. The results are reported publicly and can be found at: <https://www.seniorsadvocatenl.ca/reports.aspx>

# Definitions

The status of each recommendation falls under one of four categories:

<b>Implemented</b> <hr/>	The recommendation has been completed to the satisfaction of the Office of the Seniors' Advocate.
<b>Implemented – Ongoing</b> <hr/>	The recommendation has been completed to the satisfaction of the Office of the Seniors' Advocate. The initiative has been implemented but is expected to grow and continue to be enhanced.
<b>Partially Implemented</b> <hr/>	There has been some progress but there are still outstanding issues to be addressed to satisfy the recommendation.
<b>Not Implemented</b> <hr/>	There has been no substantive progress made at this point on the recommendation.

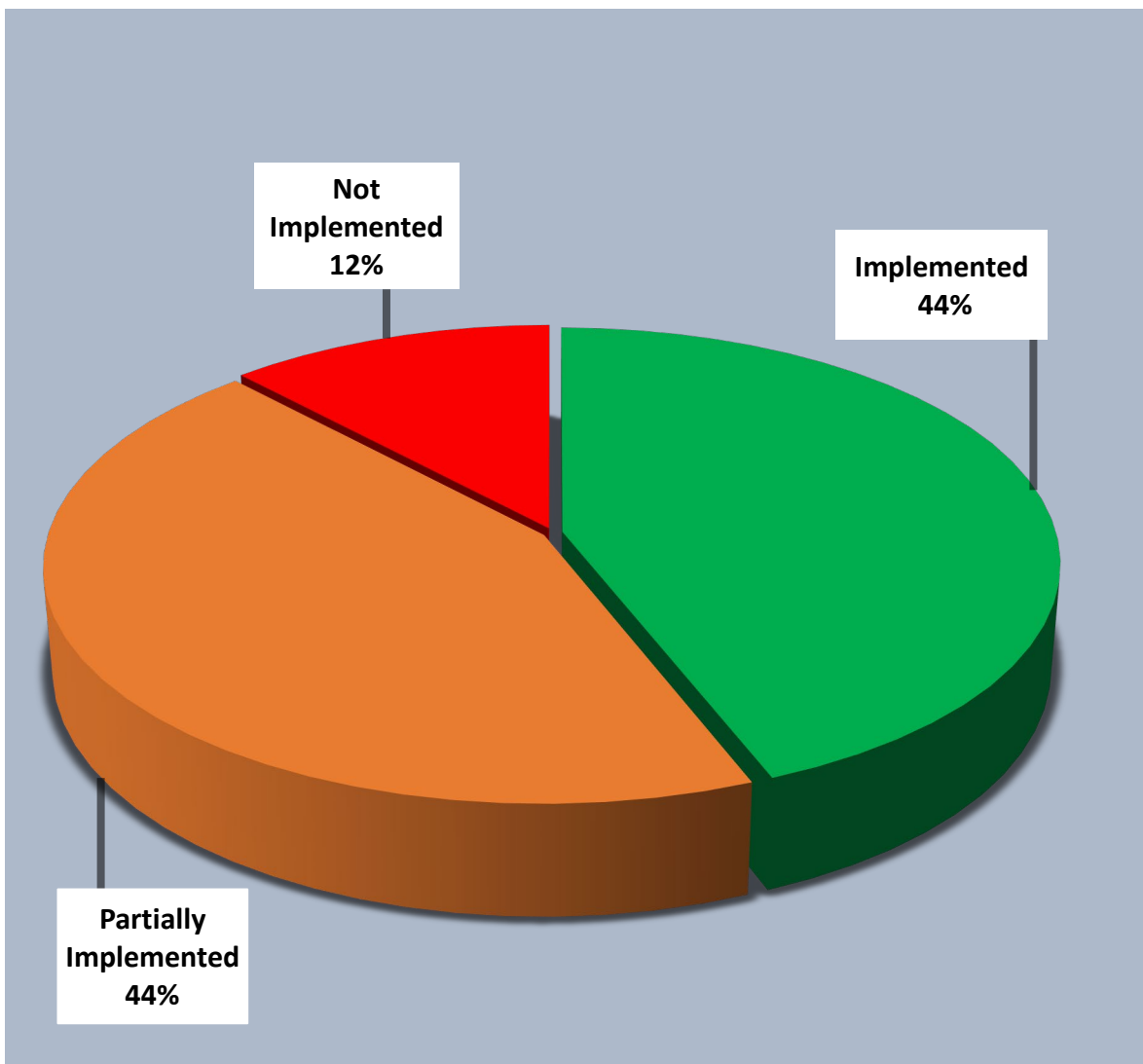
This report also identifies recommendations that are implemented but are ongoing programs/services; there is an expectation that the initiatives will grow and continue to be enhanced.

As well, this report profiles some of the highlights and accomplishments in improvements for seniors' services which warrant special mention.















## Overall Status of Recommendations






As of October 2022, of the 25 recommended actions, 44 per cent have been implemented (including those that the Office of the Seniors' Advocate has deemed to be implemented-ongoing); 44 per cent are underway; and 12 per cent are not implemented.



## Status of Recommendations

Recommendations	Implemented	Implemented - Ongoing	Partially Implemented	Not Implemented
Enhance, expand and maintain age-friendly communities throughout NL.				
Improve housing options and housing programs for seniors.				
Monitor results of NL Housing's portable versus fixed subsidies pilot study.				
Integrate accessibility principles into building codes for all private and public buildings.				
Expand and enhance the Provincial Home Repair Program.				
Monitor electricity rates and the impact on seniors.				
Closely monitor the implementation of the Provincial Home First Initiative as well as the recommendations from the Provincial Home Support Program Review.				
Review the status and scope of homelessness among seniors in NL.				
Review how to best support vulnerable seniors' and others who have capacity to understand and appreciate risk however are being abused and/or neglected.				

Recommendations	Implemented	Implemented - Ongoing	Partially Implemented	Not Implemented
Raise awareness and provide affordable opportunities for seniors to access Advance Health Care Directives, Enduring Powers of Attorney, and Wills				
Integrate the cost of driving medicals for those age 75 years and older into the Medical Care Plan (MCP).				
Review the province's personal care homes and long term care homes.				
Increase the number of health care professionals with gerontology expertise (specifically, geriatric specialists) and community-based occupational therapists and physiotherapists.				
Offer the shingles vaccine free of charge to low income seniors and others with compromised immune systems.				
Monitoring the development and implementation of a Provincial Dementia Care Plan.				
Supports the work of the Provincial Alzheimer's Association and encourage consideration of multi-year funding.				
Include dental, hearing and vision care as part of overall health care and chronic disease strategies.				
Review adult dental health services for low income seniors.				
Review vision care needs of seniors.				
Review hearing needs of seniors.				

Recommendations	Implemented	Implemented - Ongoing	Partially Implemented	Not Implemented
Explore how dental, hearing and vision care needs of low income seniors be included under the <b>Canada Health Act</b> .				
Expedite the transfer of funding responsibilities for the hearing aid and vision care programs (that is, moved from the Department of Immigration, Population Growth and Skills to the Department of Health and Community Services).				
Review the Medical Transportation Program.				
Partner with stakeholders to host a summit on older workers in November 2019.				
Examine “age” within the context of the Human Rights Act and its impact on pension/retirement plans, as well as employee insurance plans.				

## Highlights

Some of the provincial government departments and agencies implemented the recommendations but went even further in making efforts to enhance programs/services for seniors. The Office of the Seniors' Advocate would like to highlight these accomplishments. This is not necessarily an inclusive list; it is meant to offer examples of how progress is being made to improve the lives of Newfoundland and Labrador seniors.



The Department of Justice and Public Safety provided funding to the Public Legal Information Association of NL (PLIAN), which offers valuable legal information. Specific to seniors, PLIAN has enhanced its website by devoting a section to “seniors and the law” <https://publiclegalinfo.com/seniors-and-the-law/>



The Department of Health and Community Services and the Regional Health Authorities are implementing recommendations from a review on occupational therapy and physiotherapy services, and funding to support these resources have been provided through Home First.



In 2021, the Department of Health and Community Services began covering out of hospital cataract surgery in designated facilities to improve patient access to this procedure and to reduce wait times. The majority of these patients are over the age of 65.



Related to Core and/or Multi-Year funding to community organizations, the Department of Finance has advised that government is completing a review of core funding. The Office of the Seniors' Advocate is hopeful that this will create opportunity for community organizations to apply for core funding and a restart of multi-year funding.



The Department of Children, Seniors and Social Development continues to promote the Age-Friendly Communities Program. CSSD is working in collaboration with the Department of Municipal and Provincial Affairs and the Department of Health and Community Services to develop a common community assessment tool. Age-Friendly Communities will always be an evolving process and certainly one that the Office of the Seniors' Advocate supports, as Age-Friendly Communities benefits all members of communities, not just seniors.

## Recommendations Partially Implemented

The following details recommendations that are at some stage of implementation but not yet completed.

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

### Government's/Agency's Response

In March 2018, the Buildings Accessibility Advisory Board (the Board) was tasked with reviewing the **Buildings Accessibility Act** and to present recommendations. In July 2021, the Department of Digital Government and Service NL received the Board's response, which included recommendations to extend the application of the Act to buildings built before 1981 and to private homes. As part of the review process, an open invitation was issued so residents and interested parties could provide their opinions and positions on the Board's recommendations. The Board and Department were aware of the Office of the Seniors' Advocate's recommendations and the department is working towards changes to the **Act** for the near future.

Accessibility is essential to living independently regardless of age. Simple adjustments during the building/renovation process including wider doorways, lower light switches, accessible sinks and showers can mean the difference between independent living and institutionalization. The application of universal design principles to public buildings and those built by NL Housing, is a very progressive move and the Office of the Seniors' Advocate will continue to support the expansion and promotion of accessible housing designs and principles. The Office of the Seniors' Advocate has discussed with government the importance of considering how legislation might be amended to be applied to newly constructed private buildings and renovated older buildings, which currently are exempted from universal design principles.

**Action**

The Advocate supports an expanded and enhanced Home Repair Program.

**Government's/Agency's Response**

NL Housing's Home Repair Program continues to be an important tool to help more seniors stay in their home longer. The 2021-22 fiscal year saw 1,223 home repair projects funded (representing 1,629 homeowners). Of the 1,629, 79% were 65+ years of age, with the average homeowner accessing the program being 71 years of age.

The Home Modification Program reported 355 applications with 78% from applicants that were 65+ years of age. With an average homeowner being 72 years of age.

Under the National Housing Strategy, NL Housing expanded its budget for home repair from \$5.5M to \$8.78M in 2022-23. In addition to the above, there are 43 dedicated seniors' buildings which provide a total of 450 social housing units.

As they age, seniors are concerned about where they will live and whether that housing will be affordable and accessible. Further, seniors who own their own homes often wish to remain in these homes. However, home repairs can often be difficult to afford and it can be difficult to access services required to do the necessary repairs.

NL Housing's Home Repair Program is in high demand. With this program serving mostly seniors, as the numbers of seniors will continue to rise, annual funding increases would be expected.

Further, as noted in the Office of the Seniors' Advocate's 2019 Report, the wait time between an initial application for repairs and 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. We will monitor to see whether this extra funding will also alleviate lengthy wait times between an initial application for repairs and subsequent approval.

**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.

**Government's/Agency's Response**

The Department of Health and Community Services, in collaboration with the Regional Health Authorities, is implementing a Home First approach. Home First Integrated Networks have been established in all health authorities and additional resources have been provided to the health authorities to support implementation.

The Home Dementia Care Program providing support to people with moderate to advanced dementia who live at home has been implemented in Eastern Health and Central Health and expansion to Western Health is planned for fall 2022.

Research and anecdotal evidence supports the idea that most seniors prefer to age in their own home or a place of their choosing. Sometimes all that is standing in the way of aging in place versus an institution is support in and around the person's home and to access the community. If individuals, families and caregivers are appropriately supported, more people can age in place. Support for aging in place initiatives is a more cost effective approach to help seniors remain independent in their homes and communities, and avoids unnecessary hospitalization and/or premature admission into a care facility. The Office of the Seniors' Advocate supports all advances in home support options.



## 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.

## Government's/Agency's Response

The Federal/Provincial/Territorial Seniors Forum has selected senior abuse as a topic for its 2022-25 work cycle and the Federal Government seeks to establish a national definition of senior abuse and to amend the Criminal Code to help better protect seniors. The Department of Children, Seniors and Social Development is a member of the Senior Abuse: During the Pandemic and Beyond working group.

It is anticipated that the public awareness campaign on the provincial government's new **Adult Protection Act**, along with the ongoing advocacy of the NL Network for the Prevention of Elder Abuse (NLNPEA), will help normalize the conversation about abuse, and encourage individuals to seek help. The Department participates on, and supports the work of the NLNPEA.

The current **Adult Protection Act**, and the new Act expected to be proclaimed in the coming weeks, offer protection against abuse and neglect to adults who lack capacity to understand that they are being abused or neglected. Seniors who have capacity may be aware that they are being abused/neglected but feel powerless to stop the abuse. Other seniors are aware and choose to accept the situation for a variety of reasons. While all capable people are free to live as they choose, the issue becomes more complicated if the decision is rooted in vulnerability. Vulnerability can be linked to dependence on another person or feelings related to duty or responsibility; a person feels they cannot – or should not – change the circumstances thereby continuing to live with abuse/neglect. The Office of the Seniors' Advocate has recommended that government consider how protection can be offered to vulnerable seniors living in these situations.

**Action**

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

**Government's/Agency's Response**

The Department of Justice and Public Safety continues work towards modernizing its legislation to support vulnerable populations requiring legal assistance with personal and financial matters. The Department has provided funding to support the Public Legal Information Association of NL (PLIAN), which now includes a section on its website to provide valuable information to seniors regarding financial and estate planning, as well as separation or divorce.

The Department of Health and Community Services is leading the development of updated advance planning resources.

The Department of Justice and Public Safety's support to PLIAN is positive. The Association provides valuable legal information and, specific to seniors, its enhanced website devoting a section to "seniors and the law" is a progressive move.

The Office of the Seniors' Advocate supports the planned updates to advance planning resources. Consideration should be given to also update and/or develop resources promoting the importance of estate planning such as wills and enduring power of attorneys. Further, the development of a promotional plan would increase use of these documents; outlining how these resources will be broadly shared with seniors and, perhaps just as importantly, a communication effort to promote the critical importance for seniors - all citizens in fact - to complete and regularly update these documents.

**Action**

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

**Government's/Agency's Response**

The Department of Health and Community Services has completed a review of the Provincial Personal Care Home Operational Standards and a draft is under review.

The Department is completing a review of the Provincial Long Term Care Operational Standards and a preliminary draft has been prepared.

In addition to the core staffing review, the department has committed to undertaking a comprehensive review of long term care homes with a focus on resident quality of care, quality of life, dignity and respect. To meet the objectives described, the review will also include a deep analysis of staffing models, including nursing and other clinical staff, clinical oversight, staff engagement and culture.

The Department, in conjunction with the Registered Nurses' Union will engage an external consultant to complete a core nursing staffing review. Two long term care homes will be included in this review.

The Health Standards Organization (HSO) and Canadian Standards Association (CSA) have partnered to develop two complimentary standards for long term care homes. Draft standards are undergoing review through a comprehensive public engagement process. The Department sits on a national Government Advisory Table formed by HSO and CSA to facilitate information sharing on development of the standards.

The Office of the Seniors' Advocate considers this recommendation to be a very high priority, and is pleased to see that the Department of Health and Community Services updated its response to reflect it will complete a review of long term care homes. The Advocate has recommended that the review also include personal care homes given the consistent and concerning information received from family members.

A review of the standards for personal care homes was long-overdue and the Office was pleased to provide input in 2020. The Office of the Seniors' Advocate is looking forward to the review of long term care standards and seeing the standards for both long term care and personal care being released publically and implemented with a plan for oversight.

## 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.

## Government's/Agency's Response

Western Regional Health Authority has one geriatrician and one physician with Care of the Elderly training. Eastern Health has two geriatricians and two physicians with Care of the Elderly training. Central Health has one physician with Care of the Elderly training.

The Department of Health and Community Services is implementing recommendations from a review on occupational therapy and physiotherapy services. Funding to support these resources has been provided through Home First.

As people age they often require physicians, occupational therapists and physiotherapists with specialization in the unique health needs of older adults. The hiring of occupational therapy and physiotherapy services is good news. As of September 2021, 244,658 people in this province (47%) are aged 50 and older. This province is aging more rapidly than any other province in the country, with the province's median age (48.4 years) nearly seven years higher than the Canadian median age (41.6 years). Given the fact that this effect will be even more pronounced in many rural communities in the province, the need for more geriatric specialists is critical. The Office of the Seniors' Advocate looks forward to a continuation of this hiring trend and, if necessary, efforts to retain those currently hired.

**Action**

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

**Government's/Agency's Response**

The Department of Health and Community Services, in collaboration with the Public Engagement and Planning Division, led an extensive consultation process to inform development of a Dementia Care Action Plan. The Department has developed a draft Dementia Care Action Plan and has formed a Dementia Action Council to inform finalization of the draft and support implementation of actions.

As the number of older adults increases, so will the number of people living with a dementia. Caregivers/supporters require support to reduce incidences of premature institutionalization for the person living with a dementia.

The Office of the Seniors' Advocate was pleased to see government launch a consultative process for its Dementia Care Action Plan in 2019 and was appreciative of the opportunity to participate. A summary of the feedback received during this public engagement exercise was released June 2020. The Office would like to see government's Dementia Care Action Plan released publically with timelines for implementation of Actions.

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

### **Office of the Seniors' Advocate's Response**

The **Canada Health Act** does not presently include dental, hearing or vision as required health care services unless a procedure takes place in a hospital. While the Office of the Seniors Advocate will bring this matter directly to the attention of the Government of Canada, the Office does not have any federal jurisdiction. The Office will also bring the matter to the provincial Department of Health and Community Services to determine if there is interest in the province bringing the inclusion of these benefits to the Government of Canada.

The **Canada Health Act** establishes the criteria and conditions that provincial health insurance plans or extended health care services must meet to receive full cash contributions under the Canada Health Transfer. Advancement of this recommendation, as written, will require Federal Government engagement and potential legislative amendment. However, while the **Canada Health Act** does not currently include dental, hearing or vision as required health services unless a procedure takes place in a hospital, research indicates that a province/territory is not prevented from including them as one of its insured services. Further exploration and discussions are ongoing.

**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 Children, Seniors and Social Development to the Department of Health and Community Services).

**Government's/Agency's Response**

In November 2019, the Regional Health Authorities assumed service delivery responsibility for clients of long-term care and community support services (LTC CSS). Clients in receipt of both Income Support and LTC CSS continue to access vision care services through the Department of Children, Seniors and Social Development.

The Department of Children, Seniors and Social Development currently completes financial assessment for clients and refers them to the Provincial Hearing Aid Program at Eastern Health.

The Department of Children, Seniors and Social Development only considers requests for vision care and hearing aids from those not in receipt of services from Regional Health Authorities. Individuals who are currently not in receipt of Income Support benefits must have financial eligibility determined. If eligible, financial assistance is provided to those who qualify for vision care; however, an authorization for benefits is sent to the Audiology Department of the Regional Health Authority to fund and issue hearing aids.

The Department of Health and Community Services has established a working group to review the Provincial Hearing Aid Program, including the financial eligibility component, to develop a streamlined and more efficient process for clients and staff.

In 2021, the Department of Health and Community Services began covering out of hospital cataract surgery in designated facilities to improve patient access to this procedure and to reduce wait times. The majority of these patients are over the age of 65.

Historically the funding responsibilities for both of government's vision and hearing programs were shared responsibilities of the Department of Health and Community Services and what is now known as the Department of Children, Seniors and Social Development. Shared government programs tend to be less efficient and more

confusing for clients attempting to access services. The Office of the Seniors' Advocate is pleased to learn that government is reviewing the hearing aid program. The Office of the Seniors' Advocate looks forward to seeing all aspects of the hearing aid and vision care programs transferred to the Department of Health and Community Services. The Office is interested in learning about the efforts of the Working Group which has been tasked with undertaking this review. Seniors will welcome improvements to the current program model and eligibility criteria.

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

### **Government's/Agency's Response**

The Department of Health and Community Services is completing a review of its Medical Transportation Assistance Program including the policy, applications, and guidelines. The Department is reviewing comments received.

Seniors report that the model for government's current Medical Transportation Assistance Program does not meet their needs, particularly the eligibility requirements especially as they relate to the distance a person must travel, process requiring upfront payment and subsequent lengthy waits for reimbursement. The Office of the Seniors' Advocate looks forward to planned improvements to this program in the near future.



## Recommendations Not Implemented

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

### **Government's/Agency's Response**

The Department of Health and Community Services recognizes having a driver's license supports independence, using a Health in All Policies lens, the department will explore the feasibility of including this under MCP.

Government's commitment to the Health-in-All-Policies approach should strengthen peoples' health status. The loss of independence due to the loss of a driving license is a major contributor to social isolation and resulting health issues. The loss of a driving license because a person cannot afford to pay for the completion of the medical form or because there is no family physician to complete the form is devastating. Exploring ways to include driving medicals under MCP is very important work and we look forward to a favourable response from government. Further, exploration is needed on how other health professionals may be authorized to complete these vital forms in the absence of access to a family physician.

**Action**

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

**Government's/Agency's Response**

The Department of Health and Community Services continues to work with National Advisory Committee on Immunization recommendations.

Seniors are appreciative of opportunities to receive the flu shot and Covid-19 vaccines free of charge. While more and more seniors are realizing the importance of having the Shingles vaccine, it remains too expensive. The Office of the Seniors' Advocate would strongly encourage the province to explore how the cost of the Shingles vaccine may be offset making it more affordable for more people.

**Action**

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

**Government's/Agency's Response**

None provided.

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 also 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, falls and depression.

Untreated/undiagnosed hearing loss can negatively skew the results of cognitive tests causing inaccurate results. Any or all of these barriers can contribute to seniors becoming socially isolated. Oral health care, hearing and vision care must be considered as a basic component of general health promotion strategies aimed at the reduction of common health risk factors.

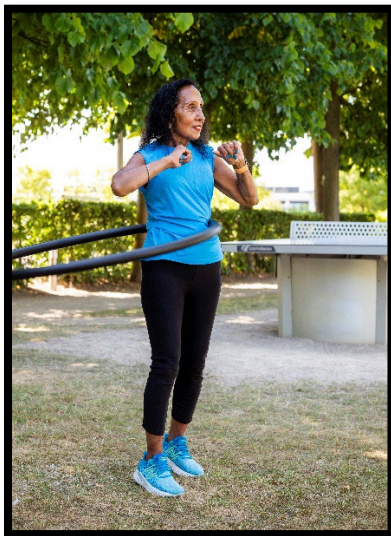
## Conclusion

As previously noted, 44 per cent of the recommendations have been implemented, 44 per cent have been partially implemented and 12 per cent have not been implemented.

For full transparency and accountability, the Office of the Seniors' Advocate will continue to monitor and report on all outstanding recommendations until all have been satisfactorily addressed.

The Office acknowledges the progress made thus far and was pleased to see areas where the recommendations were addressed beyond what was suggested. For those recommendations requiring more attention, the Office is confident even more positive strides will result in the near future.

Every Newfoundlander and Labradorian has a vested interest in all improvements benefitting seniors because, if we are fortunate, we will all be seniors some day.







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