

2013

# Central Okanagan Better at Home Community Development Report

Together, we can give  
seniors a hand.



**Better  
at Home**

United Way helping seniors remain independent.

Myrna Tischer  
Final Report  
11/24/2013

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**1. Introduction**

**1.1 Better at Home program introduction**

Better at Home is a program that helps seniors with simple day-to-day tasks so that they can continue to live independently in their own homes and remain connected to their communities. The program is funded by the Government of British Columbia and managed by the United Way of the Lower Mainland, with services delivered by a local non-profit organization. The Better at Home program is designed to address the specific needs of local seniors, allowing communities to choose from the following basket of services:



The Central Okanagan region has been identified as a potential Better at Home site. Myrna Tischer was contracted as community developer to assess community readiness, identify seniors’ assets, needs and priorities in regards to the basket of services, and help identify a potential lead organization best suited in the region to deliver the Better at Home program.

This report reflects the findings of the community developer and will be used by the lead organization to design an appropriate local Better at Home program that meets community needs.

## 1.2 Description of the local community development approach

Due to the vast geography and large population base of the Central Okanagan region, the Community Developer took a strategic approach to reach the target audience and optimize exposure to obtain meaningful input from the senior population in the time frame within the contract. Living outside the region was an asset to approach the task with an unbiased eye, but also a liability in terms of being available on the ground. For this reason, Irene Woods was sub-contracted to assist with connecting to the seniors in the local communities while the Community Developer focused her time on connecting with service providers, key stakeholders and organizing and facilitating community meetings.

Initially, a focus group meeting was arranged to bring together local senior serving agencies to introduce the Better at Home model and to get to know the various agencies in the region. Twenty-one participants representing 13 organizations were in attendance. The intent was also to engage the agencies in assisting with gathering information from the senior population that they serve as well as encourage a dialogue on a community basis by assisting in the understanding the non-competitive community engagement process.

A survey requesting public input regarding the need for non-medical home support services was developed and distributed in various ways. Hard copies were made available to local agencies and seniors groups; an online version was available and a local newspaper ran a mail-in copy of the survey twice a week for six weeks as an attempt to broaden the reach of input from the community. In total, 264 surveys were completed.

Kelowna is the main centre of the region with three distinct outlying communities (Peachland, West Kelowna and Lake Country). Public meetings were held in the outlying communities first to provide an opportunity to hear the voice of the senior population that was pertinent and unique to their community. The local senior serving agency in each community assisted with organizing and advertising the meetings.

Ongoing promotion of the survey and request for input was done by approaching various senior groups, Interior Health Home and Community services and attending events geared to seniors. Local private, for-profit businesses were contacted to gather information regarding local services and average cost for these services.

The final public input meeting was held in Kelowna inviting the public and representatives from key stakeholders from the entire region which was attended by approximately 45 individuals, 23 of whom self-identified as seniors. Attendees included community members and representatives from various community organizations and businesses.

Two organizations were identified as potential lead agencies during the community engagement process. Although agencies were encouraged to collaborate from the onset of the community consultations, discussions following the final public meeting did not identify a way to collaborate or form a partnership in delivering the Better at Home program. Central Okanagan staff facilitated a private meeting between the two lead agency candidates, as a further attempt to determine a way to work together and bring clarity to 2 different proposed implementation models. At the request of the agencies involved, a follow up meeting was held gathering a Community Council to review and score the proposed service delivery models from each agency based on a set of criteria.

### **1.3 Marketing / Advertising**

A media release was issued outlining the Better at Home program and community consultation process.

Most of the marketing and advertising was done in the form of making connections to promote the survey, advertising for each of the meetings in the newspaper and by poster distribution. The survey was printed in the local newspaper 12 times, free of charge, running twice a week over a six week period.

The Community Developer was contacted by Norm Letnick, MLA for Lake Country requesting information about the program and he submitted full page article on the subject of seniors living at home. The article was entitled “Better at Home”.

See Appendix C



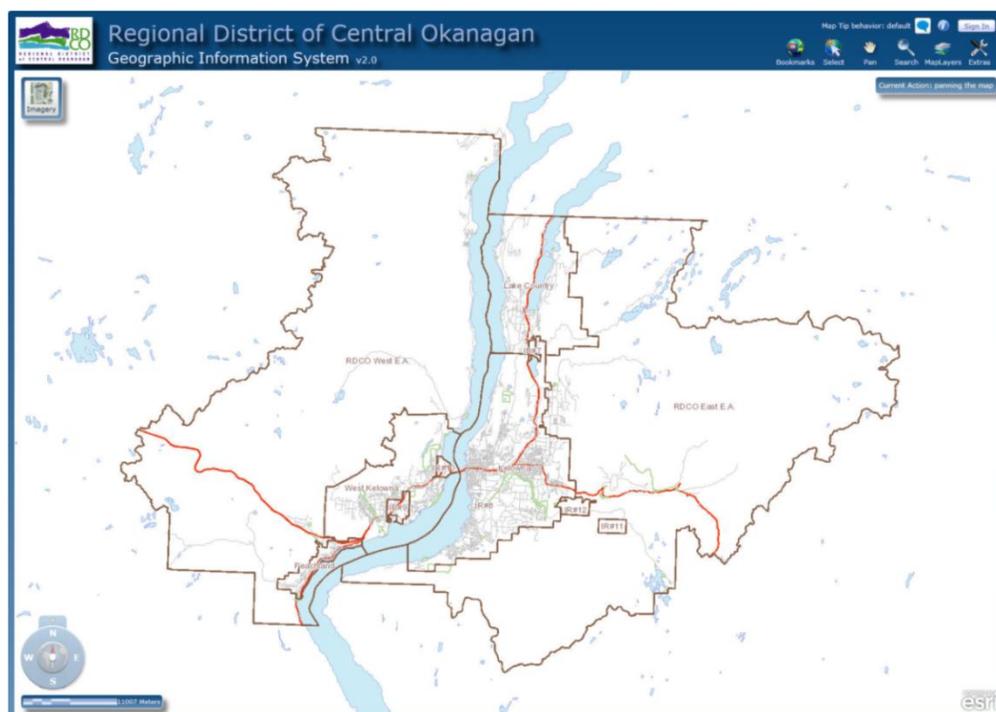
## **2. Community Profile**

The Central Okanagan is located in the Okanagan Valley approximately 400 kilometers outside of Vancouver in the interior of BC. The Okanagan has a mild climate which is considerably drier than many other regions in the province with hot summers and moderately cold winters.

An attractive retirement destination; a highlight of the region being the beauty of Okanagan Lake with 295 hectares of sandy beaches, nineteen golf courses, five ski hills, a thriving wine industry, and an international airport. The University of BC Okanagan is located in Kelowna and a new Southern Medical Campus program at Kelowna General Hospital giving medical students a strong foundation of medical knowledge and early clinical exposure.

The Central Okanagan is a growing region which has experienced a doubling of the population since 1986. The 2011 statistics indicate a total population of 179,839. The Central Okanagan Regional District includes the communities of Lake Country (Carrs Landing, Okanagan Centre, Winfield, Oyama), Kelowna (Okanagan Mission, Rutland), Westbank First Nation, West Kelowna (Westbank, Lakeview Heights) and Peachland. In terms of the number of households, Kelowna is fastest growing city in Canada.

The Westbank First Nation is physically located within the District of Central Okanagan but is governed separately under the Westbank First Nation Self-Government Act, which came into force on April 1, 2005. Services are provided to approximately 9000 residents living on WFN lands, 8500 of whom are non-band members.



**Figure 1 Central Okanagan region**

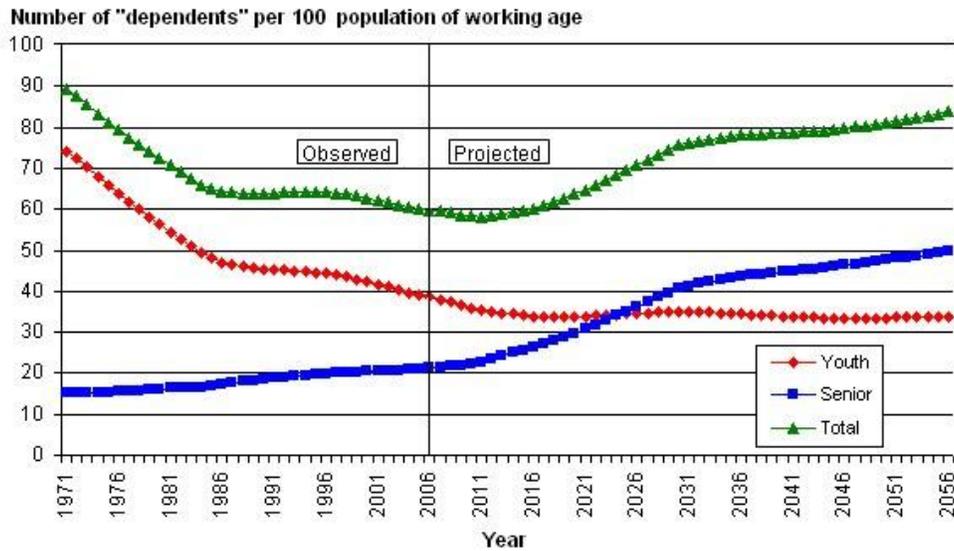
The median age in the region is 44.2 yrs but varies from a median age of 43 yrs in Kelowna to 53.8yrs in Peachland. The adult population is 47.7% male and 52.2% female. This ratio increases in the older cohorts with the 65+ population made up of 45.4% male and 54.5% female and increasing to 63.7% female in the 85+ population.

Kelowna is the hub of the Interior Health Region when it comes to specialized medical services so the impact of the aging population in the Okanagan Valley is significant.

Given the fact that many specialized health care services available to the entire Okanagan Valley are centered in Kelowna, it should be noted that the impact of the growing senior population on health care is not limited to the region. Approximately 37% of the population of the combined North, Central and South Okanagan regions is over the age of 55 years. This region could be considered the canary in the coalmine when it comes to supporting an aging population; all the more reason to ensure that preventative health care measures of all kinds are readily accessible and available.

The increasing senior population relative to working-age people has implications for the care of seniors. Moreover, substantial numbers of women, who historically have been the primary caregivers of children and seniors, have entered the labour force in recent decades. In addition, because many couples have children at older ages, a generation has emerged that is responsible for young children and elderly parents at the same time—the "sandwich generation" (<http://www.statcan.gc.ca/pub/82-229-x/2009001/demo/dep-eng.htm>)

**Observed and projected youth, senior, and total demographic dependency ratios, Canada, 1971 to 2056**

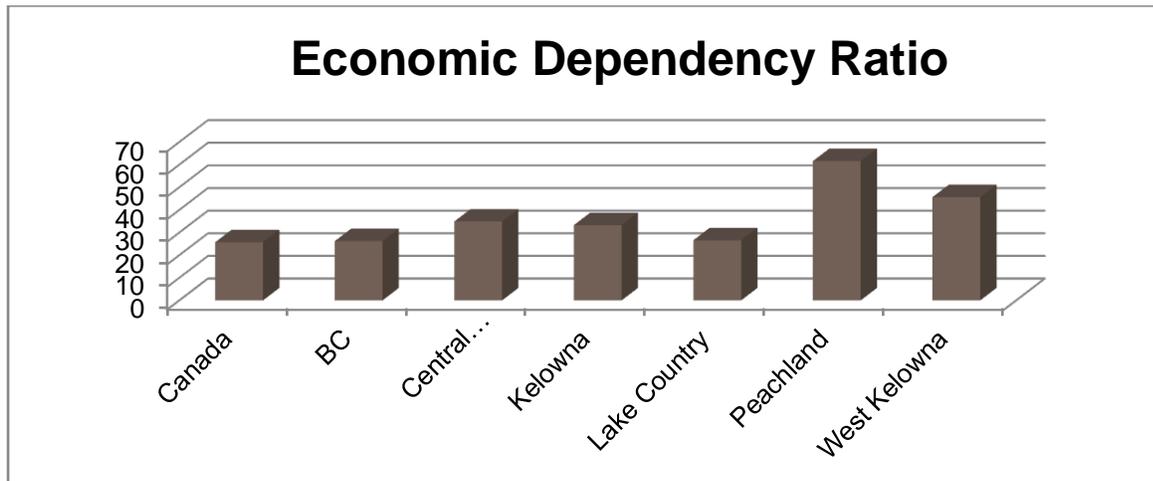


Source : CANSIM Tables 051-0001 (1971 to 2008) and 052-0004 (2009 to 2056).

**Figure 2 Youth, Senior and total Dependency Ratios**

**Economic Dependency Ratio**

A sizeable share of seniors aged 65 or older and children and youth younger than age 20 are likely to be socially and/or economically dependent on working-age Canadians, and they may put additional demands on health services. The demographic dependency ratio measures the size of the "dependent" population in relation to the "working age" population who theoretically provide social and economic support. The economic dependency ratio in the Central Okanagan is higher than average and varies across the region



**Figure 3 Economic Dependency Ratio 2011 Census**

## Income and Economic Hardship

The average annual income in the Central Okanagan according to the latest BC Taxation Statistics 2009 was \$40,611.00 as compared to the BC average of \$39,754.00. However, the gap between the rich and poor impacts the average. The largest segment of the population reported an annual income under \$25,000 and a significant segment under \$15,000.00. The median income for the region was \$30,510.00 with the following breakdown per community: Kelowna \$30,507.00, Lake Country \$30,664.00, Peachland \$31,023.00 and West Kelowna \$30,207.00.

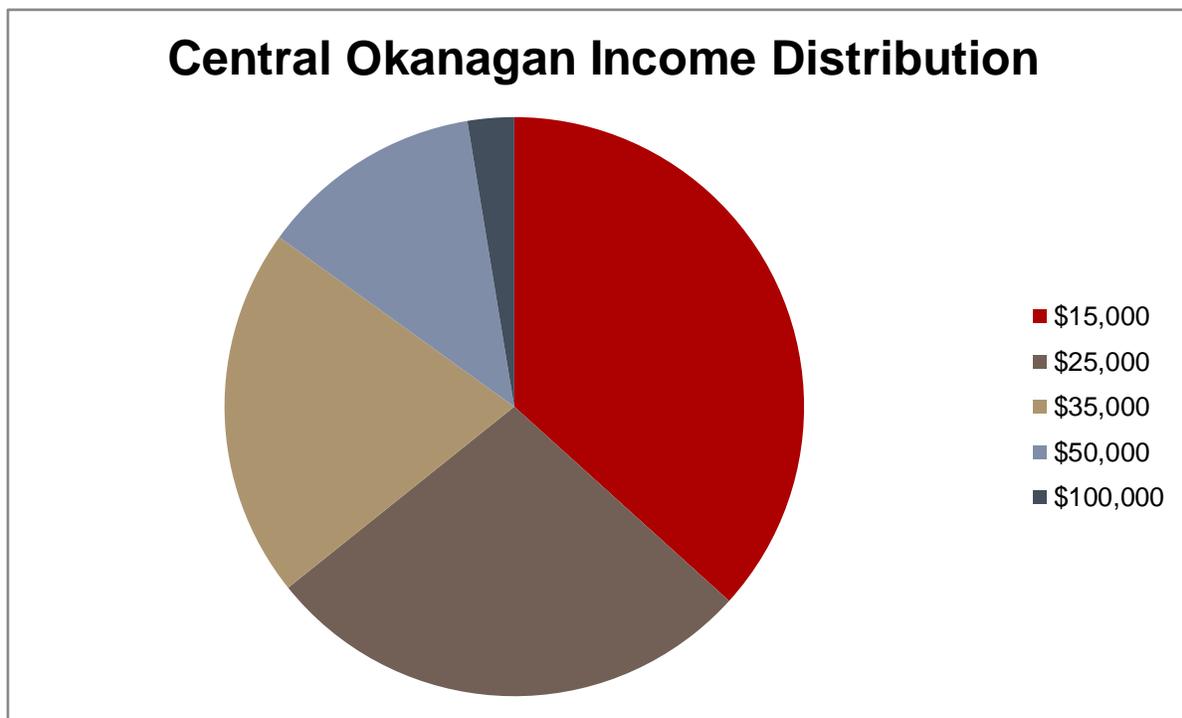


Figure 4 2009 Neighbourhood Income and Demographics, Annual Income Distribution

The gaps are significant when male and female income is examined. An interesting fact to note is the higher the median income is for males, the lower the median income for females. For example, the regional median annual income for males is \$37,109.00 while the median annual income for females is \$25,515.00.

Although it is often assumed that many seniors are financially secure, according to the Vanier Institute of the Family, the highest insolvency and bankruptcy rate increase is among Canadians 65+ - the insolvency rate for those 55-64 and 65+ has been on a consistent upward trend in the last two decades. The rate of insolvencies among 55-64 year olds jumped by over 600% over the period while the rate for those 65+ soared by 1747%. Seniors were 17 times more likely to become insolvent in 2010 than they were in 1990.

The percentage of seniors receiving maximum GIS in the Central Okanagan was 0.8% in 2012 according to BC Stats. The 2011 National Household Survey illustrates 3410 individuals over 65 were considered low income. Living on a fixed, low income is more challenging when residing in a region with a high cost of living and a higher than average median income

The Overall Regional Socio-Economic Index ranks this region as 20 out of 26 regions in terms of worst-off to best off regions. The breakdown includes Human Economic Hardship (19 out of 26), Crime (9 out of 26), Health (24 out of 26), Education (24 out of 26), Children (24 out of 26) and Youth (15 out of 26).

### **Health Issues**

The Statistics Canada Health Profile outlines several health issues that are more likely in the Okanagan Health Service Delivery area than other areas of the province. Although these statistics are not limited to the senior population, the following health conditions are more prevalent here than the provincial average: arthritis, high blood pressure, mood disorder, moderate or severe pain or discomfort, pain that prevents activities, injuries in the last 12 months, hospitalized stroke event, hospitalized acute myocardial infarction, injury hospitalization and cancer incidence, hospitalized hip fractures and hip and knee replacement surgeries. Smoking and heavy drinking rates are higher as well as lung cancer rates. Mental illness hospitalization and patient days is above average as well as suicide rates.

*Based on the results of the 2008-2009 survey, 34% of Canadians aged 65 and older were at nutritional risk. Women were more likely than men to be at risk. Among people with depression, 62% were at nutritional risk compared with 33% without depression. Level of disability, poor oral health and medication use were associated with nutritional risk, as were living alone, low social support, infrequent social participation, and not driving on a regular basis. Lower income and education were also associated with nutritional risk.*

*Stats Canada Health Report – Nutritional Risk Among Older Canadians*

## Housing

Kelowna has the fifth highest housing market in the country and is one of Canada's most unaffordable cities. According to the Canada Mortgage and Housing Corporation, in 2012 the average price of a new single-detached home was \$737,419 with a median price of \$589,450; the resale market average price was \$504,644. Rental prices are affected by the housing market and the average rent for a two bedroom apartment in Kelowna rose from \$586 in 1992 to \$927 in 2012. The 2011 National Household survey indicates the average monthly shelter costs for owned dwellings was \$1207 and \$1099 for rented dwellings. 50.4% of tenant households indicated spending more than 30% of their income on shelter.

The Directory of Affordable Housing for zone 11 produced by BC Housing, outlines the options for seniors and people with disabilities which include 232 bachelor units, 416 one-bedroom units and 222 two-bedroom units in Kelowna. In West Kelowna, 54 one-bedroom units and 20 two-bedroom units were indicated. Lake Country had 32 one-bedroom units and 18 two-bedroom units. Only one facility indicated in Peachland with 10 one-bedroom units.

According to the Interior Health Authority website, most of the assisted living and residential care facilities are located in Kelowna as well as several private retirement communities. There are limited assisted living facilities in West Kelowna and Lake Country with a total of 47 units. Outside of Kelowna, the only residential care facilities are in West Kelowna with a total of 420 beds and 2 community respite rooms.

Entire IHA region had 926 subsidized assisted living units in 2010/11. Average waiting time for a subsidized unit was 160 days; for subsidized residential care was 71 days. On March 31, 2011 there were 591 people waiting for placement in subsidized residential care. When a bed is available, the individual must be prepared to move within 48 hours. As of March 2011, 178 people were waiting for assessments. In 2010, the daily direct care hours provided to seniors in residential care was 2.85 hours (Best of Care: Getting it Right for Seniors Report (pt 2) - Ombudsman report)

Elderly poverty is both a social and a fiscal problem that will be exacerbated as higher percentages of populations in developed countries move into the over-65 demographic. Poverty rates among the elderly tend to be highest among women, particularly widows over the age of 75. This is largely due to pension allowances that have traditionally been linked to employment history. – Conference

Board of Canada ]

## Ethnic Diversity

The 2012 Socio-economic Indice from BC Statistics cites the most recent counts of 2006 with 3.8% Aboriginal and 5.2% Visible Minority in the Central Okanagan region as compared to BC average of 4.8% Aboriginal and 24.8% Visible Minority.

According to the 2011 Canadian Census 85% of the population cited English as their mother tongue with the second most common language being German.

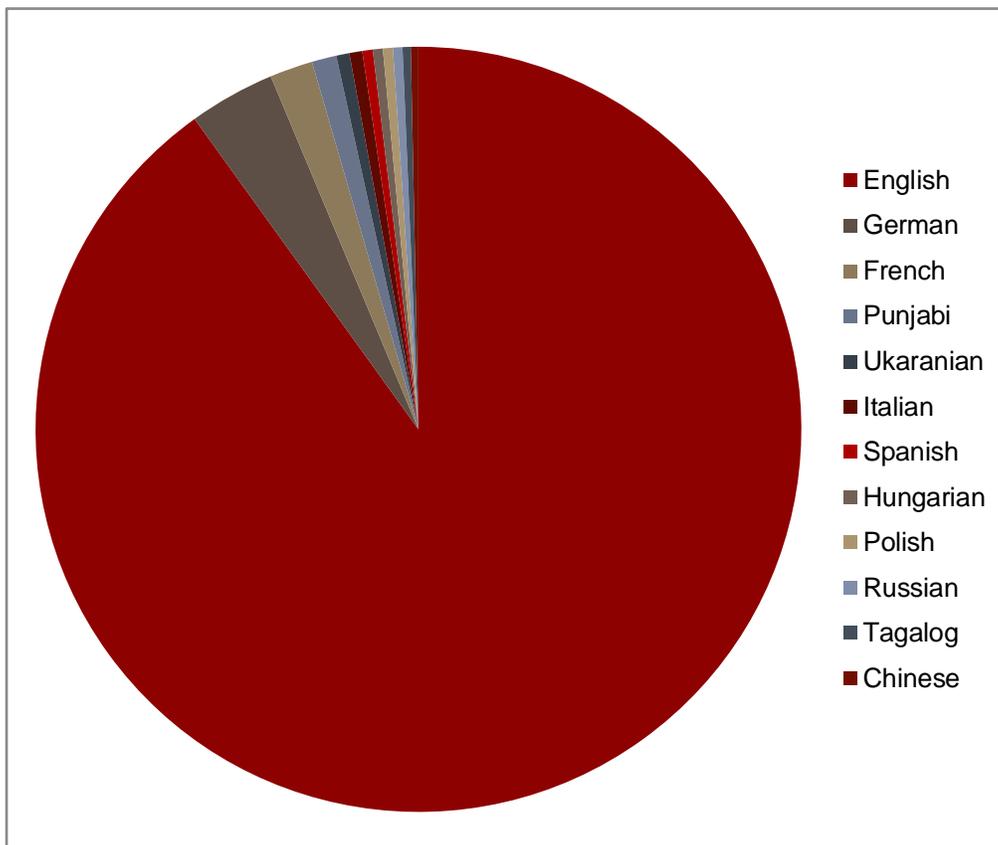


Figure 5 Mother Tongue - 2011 Census

BC Stats produces a quarterly population highlights report which shows how the ethnic diversity is changing due to migration in and out of BC and immigration to the province. In 2012, there was a net migration out of the province of 7539, and a net immigration of 32,052 which produced a net migration of 24,513 (the lowest since 2002). Although the majority of immigrants remain in the lower mainland, there is increasing number of immigrants making the Central Okanagan home. However, the latest statistics regarding ethnic origin are from the 2006 Census and show the major portion of the population originated from the British Isles and European origins which may well represent the senior population.

The following table from the National Household survey 2011 shows the vast majority of immigrants have been in Canada for 40 or more years but the trend is growing. It is interesting to note that there are more females than males living in the Central Okanagan who identify as immigrants.

<b>Immigrants</b> <a href="#">National Household Survey data footnote 5</a>	24,450	11,880	12,570
<b>Before 1971</b>	9,890	5,050	4,840
<b>1971 to 1980</b>	3,520	1,630	1,890
<b>1981 to 1990</b>	2,495	1,165	1,330
<b>1991 to 2000</b>	3,570	1,665	1,910
<b>2001 to 2011</b> <a href="#">National Household Survey data footnote 6</a>	4,975	2,375	2,605

This data indicates the most recent immigrant’s place of origin is varied with the majority coming from Europe. Out of 3150 recent immigrants, there were 490 from the Americas, 1365 from Europe, 190 from Africa, 1000 from Asia, 105 from Oceania and others. The majority of the visible minority population is of South Asian heritage with 3230 individuals, the other top three origins are Chinese (1735), Japanese (1180) and Phillipino (1050). Aboriginal identity was indicated as 8260 with the main breakdown of 3910 First Nations single identity, 4060 Metis single identity.

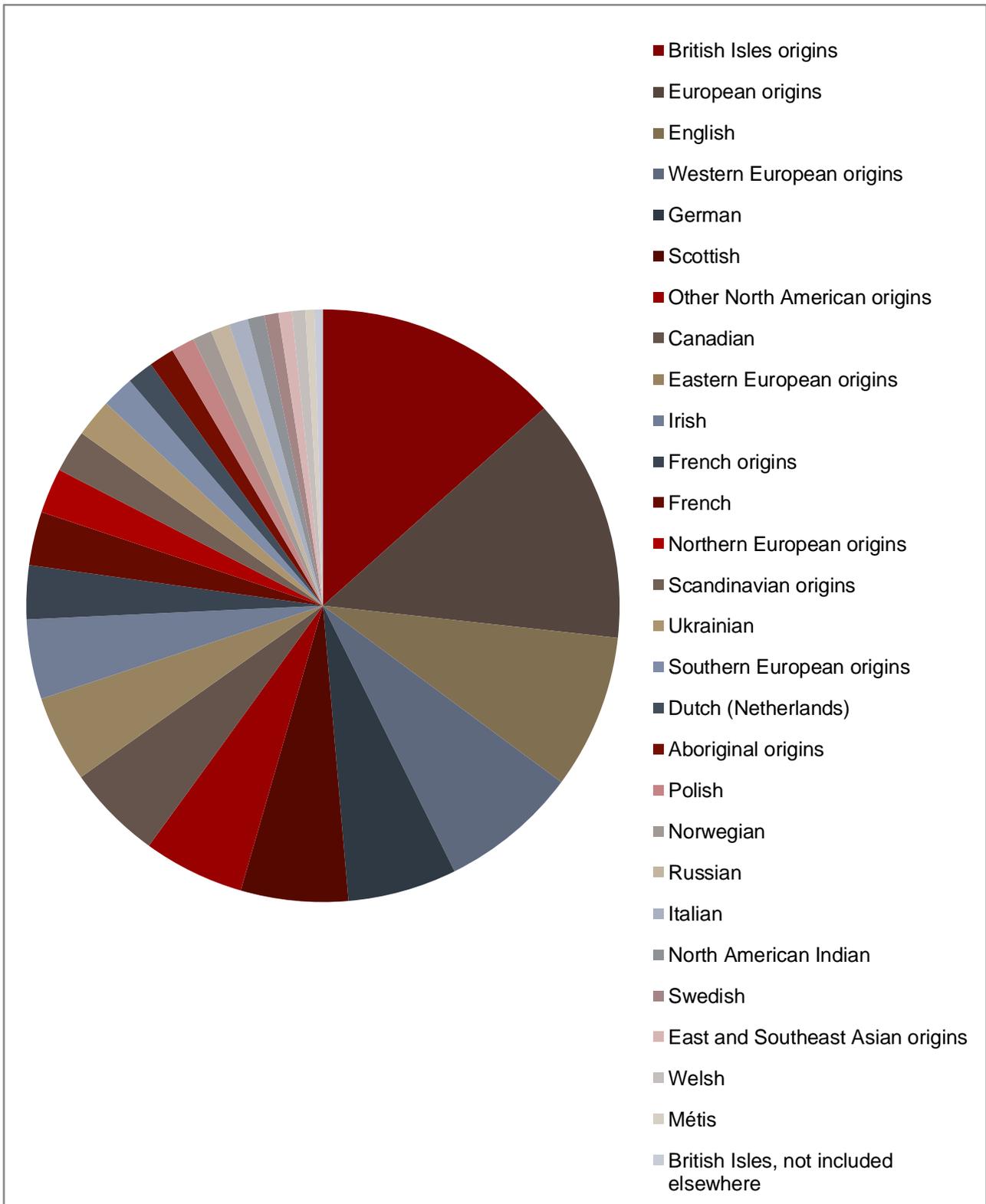


Figure 6 Ethnic Origin 2006 Census

## 2.1 Description of local seniors population

The Okanagan Valley is a prime retirement destination and migration from other provinces is significant. BC Stats 2011 indicates 19% of the total population in the Central Okanagan region is over 65 years compared to the average in Canada (14.8%) and BC (15.7%). The senior population of the Central Okanagan is 34450 comprised of 15655 male and 18800 female.

### Central Okanagan

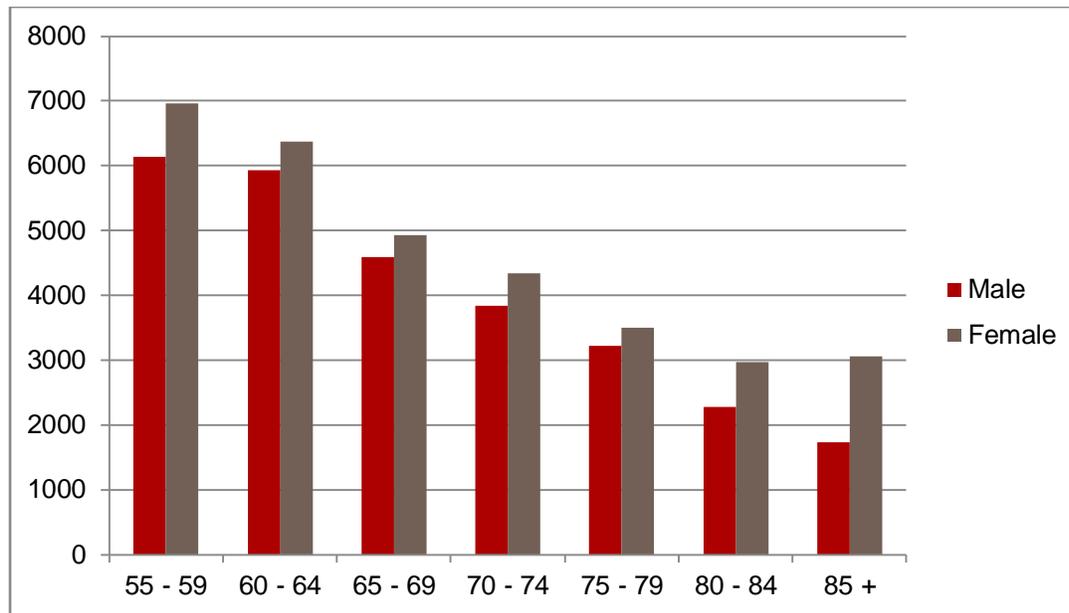


Figure 7 Central Okanagan Male to Female ratio 2011 Census

## Kelowna

The increase in the 85+ population may be indicative of the migration of the elderly female population into the central community of Kelowna where most of the health care services are located. Looking at the reduction of the population in the outlying communities and the increase in Kelowna there may be a correlation to the availability of assisted living and residential facilities.

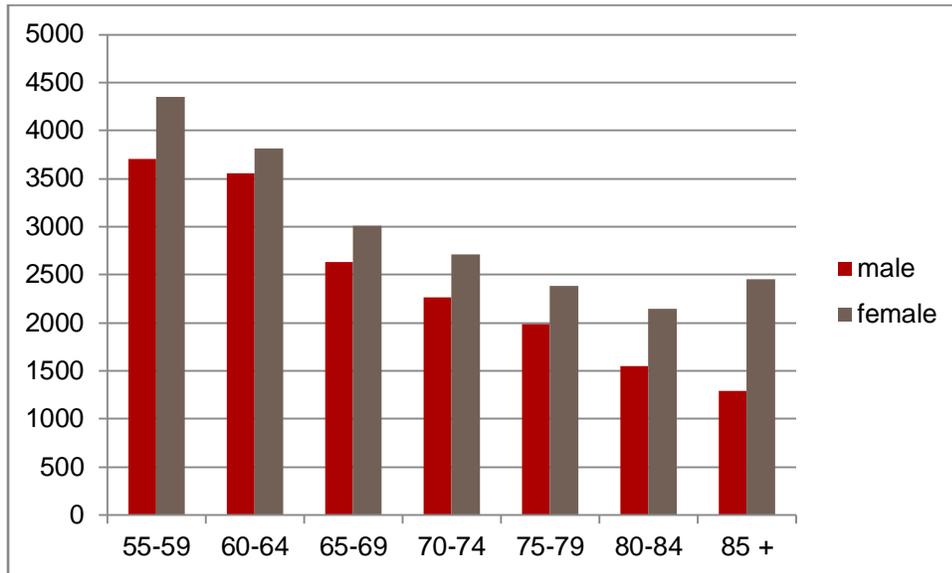


Figure 8 Kelowna - male to female ratio 2011 Census

## Peachland

With no assisted living or residential facilities in Peachland, senior women may be moving out of their community as they age in order to access services.

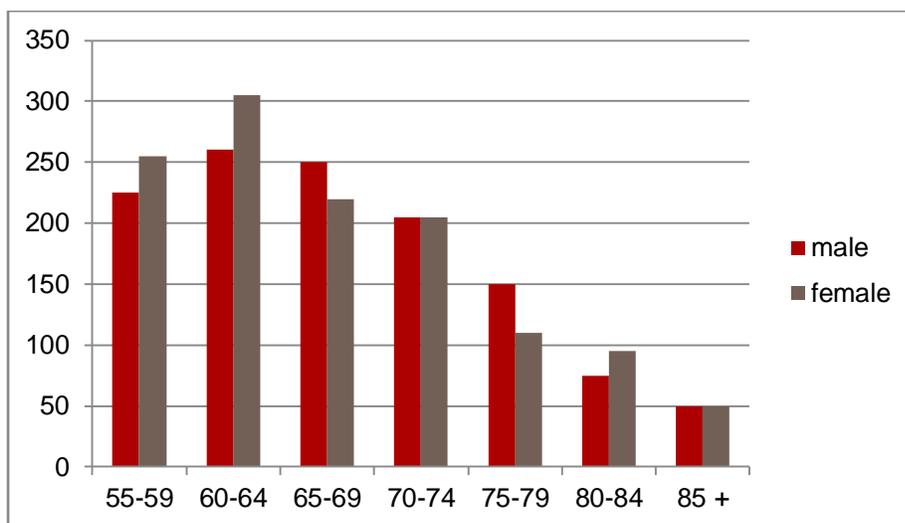


Figure 9 Peachland male to female ratio 2011 census

## West Kelowna

West Kelowna has one assisted living facility and three residential care facilities (including one operated by the Westbank First Nation) and there seems to be less reduction in the elderly population as they age and may require additional care.

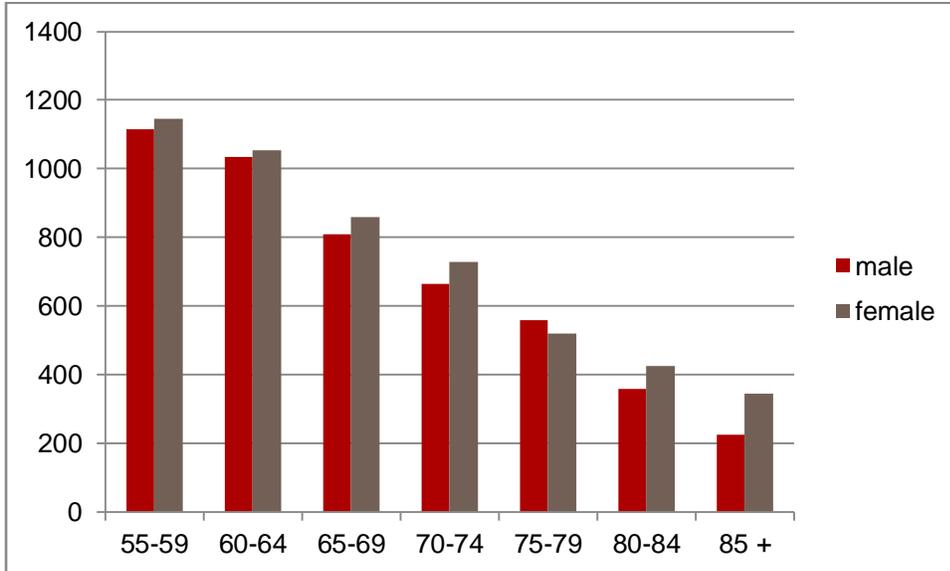


Figure 10 West Kelowna male to female ratio 2011 Census

## Lake Country

Lake Country has one assisted living facility allowing some elderly residents to remain in their community as they age and require more care.

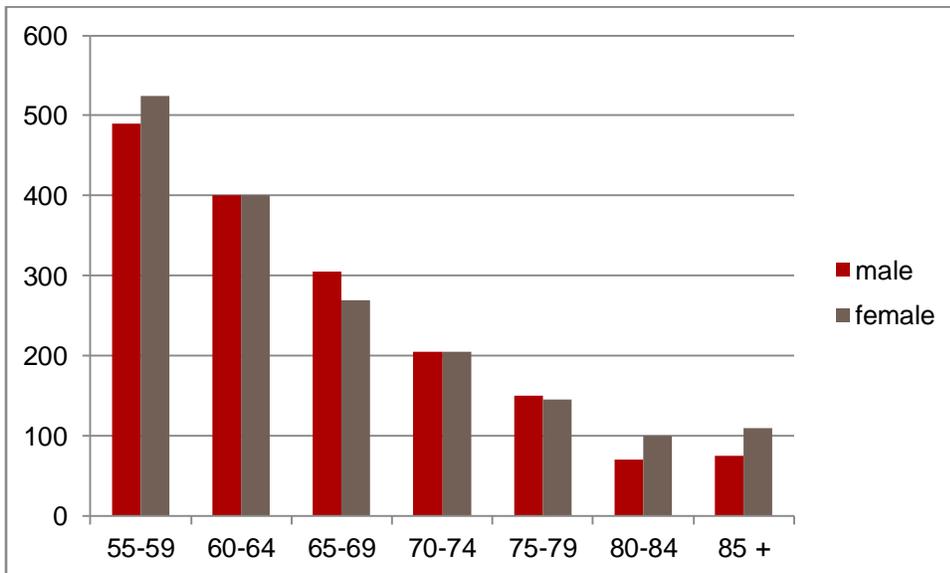


Figure 11 Lake Country male to female ratio 2011 Census

## Westbank First Nation – Duck Lake IRI 7, Tsinstikeptum IRI 9 & 10

Westbank First Nation operates a 63 bed intermediate care facility for community elders both native and non-native.

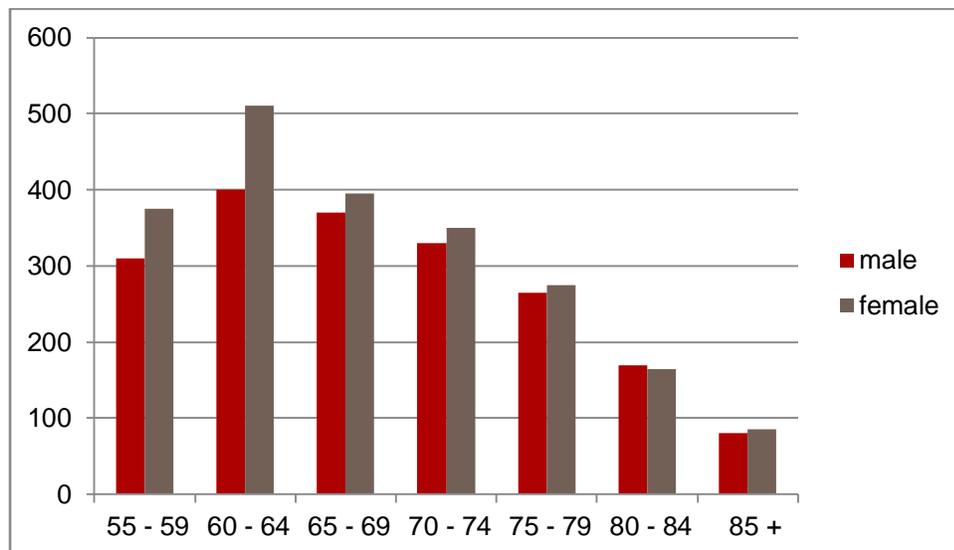
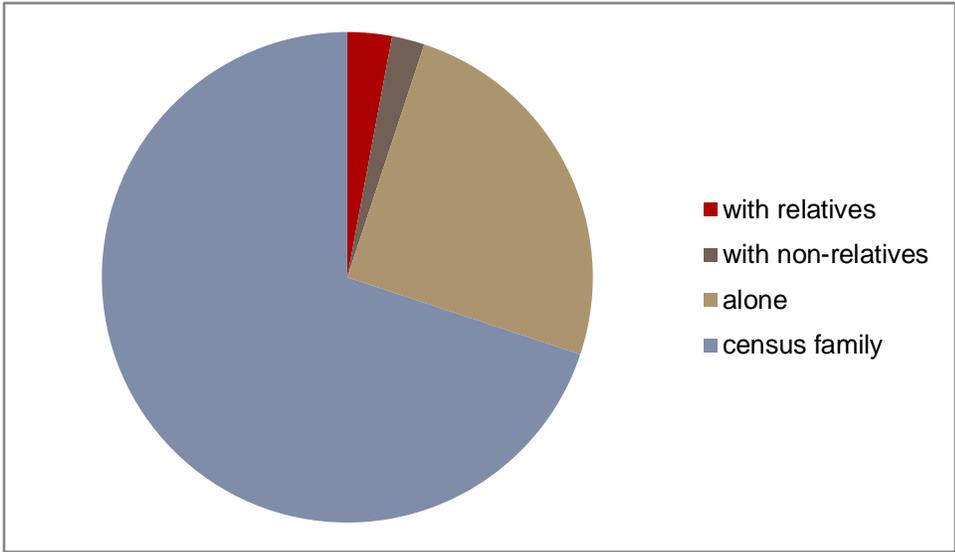


Figure 12 IRI 7, 9, 10 male to female ratio 2011 Census

Westbank First Nation provides health services including medical and non-medical supports for members living on and off WFN lands but not for non-members living in WFN lands.

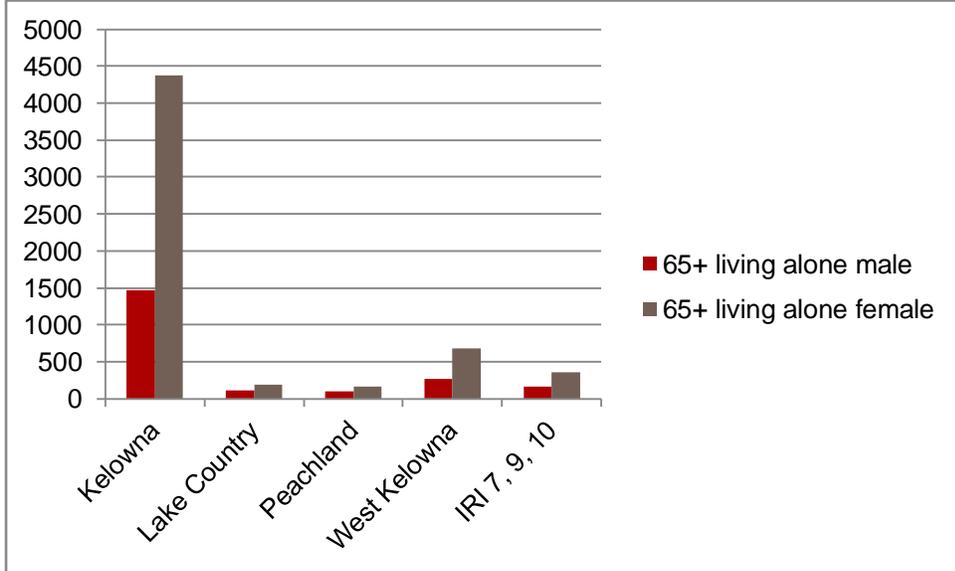
### Living Arrangements

The 2011 Census shows that the vast majority of Canadian people in the age cohort of 65 to 84 years old continued to live in private dwellings, such as their own homes, with their children, or with other relatives. Of these seniors, 16 per cent were living alone and 43 per cent were living as couples. Only about three per cent were living in collective dwellings, such as nursing homes, care facilities, and congregate housing for seniors. Among those aged 85 years or older, nearly one-third were living in collective dwellings. Twenty per cent of seniors in this age cohort were living in nursing homes and other health care and related facilities, such as chronic-care or long-term care hospitals. And ten per cent were living in seniors' housing residences, which provide services for independent living or assisted living. About 69 per cent of seniors in this age cohort remained in private dwellings. Most seniors prefer to live in private dwellings. However, as the likelihood of needing more care rises with age, they will increasingly adopting living arrangements in collective dwellings.



**Figure 13 Living arrangements 65+ years - 2011 Census**

93% of the seniors in the Central Okanagan were living in private households in 2011 with 24% of those living alone. Women make up 73% of the senior population living alone.



**Figure 14 Seniors 65+ living alone 2011 Census**

## 2.2 Summary of the Community Assets for Seniors

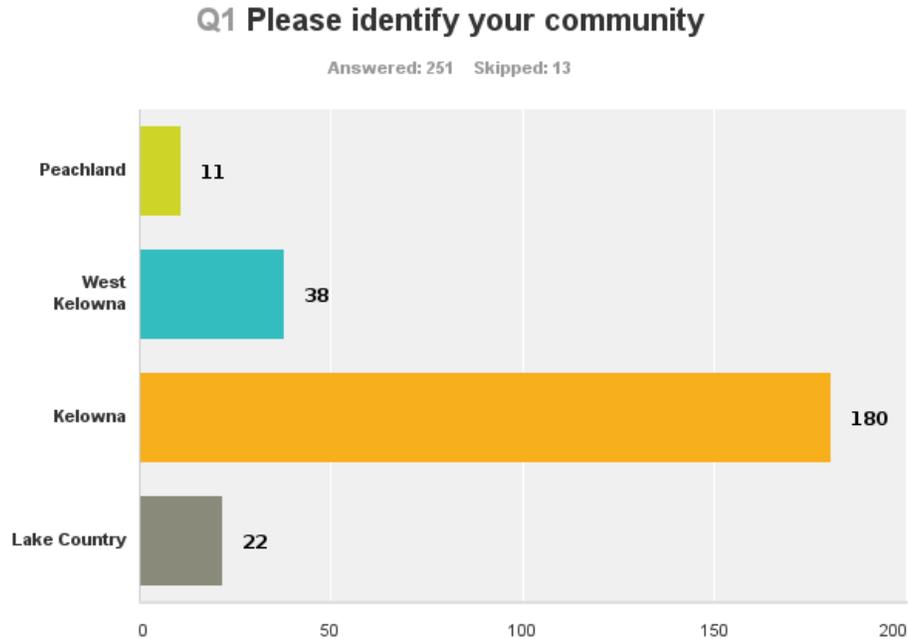
Non-profit Agencies & Organizations	Programs and Services
Seniors Outreach & Resource Centre	Information and Referral, ElderGuide Directory (online and printed), Regional Housing Program including outreach support, Eldernet Computer Mentoring, Friendly Visiting, Handyman Services, Socialization and Community events such as Seniors Safety Fair.
Westside Health Network	Information & Referral, Community Service Directory, MedWatch Program, Social and Fitness programs, Technology Support programs, Technology Recycle Program, Hands on Heroes (light housekeeping, yard work, simple home repair and projects, help moving etc) Friendly Visits, Transportation, Senior Peer Counselling and Volunteer Income Tax Program.
Peachland Wellness Centre	Various in-house social, wellness and support programs, Volunteer Income Tax preparation, Computer Literacy, Transportation, Outreach, Resources and Referral, Seniors Excursions and various community events.
Lake Country Health Planning Network	Currently restructuring to broaden mandate to all community members. Information was unclear as to the connection to Neighbourhood Care & Resource program which provides access to transportation, handyman services, light housekeeping, friendly visits, senior bus.
Kelowna Community Resources	Community Resource Directory, Volunteer Centre, Grey Power employment program, Seniors Immigrants Services Outreach
Interior Health Authority, Community Integrated Health Care Volunteer Services	** for seniors eligible for Home and Community Care services - Transportation, Friendly Visits, Grocery shopping, Peer Counselling, Adult Day Services
Kelowna Family Centre	Specialized services for older women
Salvation Army	Seniors Drop-in Lunch, Pro-Bono program providing free legal advice to eligible low income individuals
Hands in Service	** for 65 yrs and under - basic housekeeping, laundry, simple food preparation, delivery of food hampers.
Okanagan Men's Shed	Safe, friendly environment to reduce social isolation for men by working on meaningful projects with peers.

Activity Centres	Okanagan Mission Activity Centre, Parkinson Activity Centre, Water Street Seniors Centre, Rutland Seniors Centre, Senior Citizen's Association of BC, Branch 55 Rutland, Senior Citizen's Association of BC, Branch 17 Kelowna, Lake Country Senior Activity Society, Peachland Senior Centre, Society for Learning in Retirement
Adult Day Programs	Brookside Residence, Hawthorne Park, May Bennett Wellness Centre, Village at Smith Creek (West Kelowna), 10038 Bottom Lake Rd (Lake Country)
Community Policing Offices	Seniors Contact Program in Glenmore, Mission and Rutland communities
Health Support Agencies	Alzheimers Society, Canadian National Institute for the Blind, MS Society, Arthritis Society, BC Paraplegic Association, BC Schizophrenia Society, Canadian Diabetes Association, Canadian Mental Health Association, Central Okanagan Hospice Association, Central Okanagan Association for Cardiac Health, Community Recreational Initiatives Society, Heart & Stroke Foundation, Kelowna Respiratory Club, Okanagan Advocacy & Resource Centre, Okanagan Society for the Visually Impaired, Okanagan Suicide Awareness Society, Osteoporosis Canada, Red Cross Equipment Loan Service, Seniors Mental Health, Stroke Recovery Club, RCMP Victim Services, Western Institute for the Deaf and Hard of Hearing
Food support	Kelowna Community Food Bank, Lake Country Food Assistance Society, Meals Matter (CMHA), Meals on Wheels, Neighbourhood Meals for Seniors, Rutland Community Food Centre, Westside Community Food Bank
Miscellaneous	Freemason Volunteer driver program for cancer patients, HandiDart bus, Snow Buddies.

There are also many for-profit businesses offering non-medical home support services in the Central Okanagan. Approximately 20 businesses were contacted and surveyed for services provided and cost. The hourly rates ranged from \$25 per hour to \$50 per hour with the exception of one transportation service offering rides within Kelowna for \$5 one way, \$10 return. Some for-profit services would not provide quotes over the phone and required an assessment prior to providing fee rates.

### 2.3 Seniors needs related to non-medical home support services

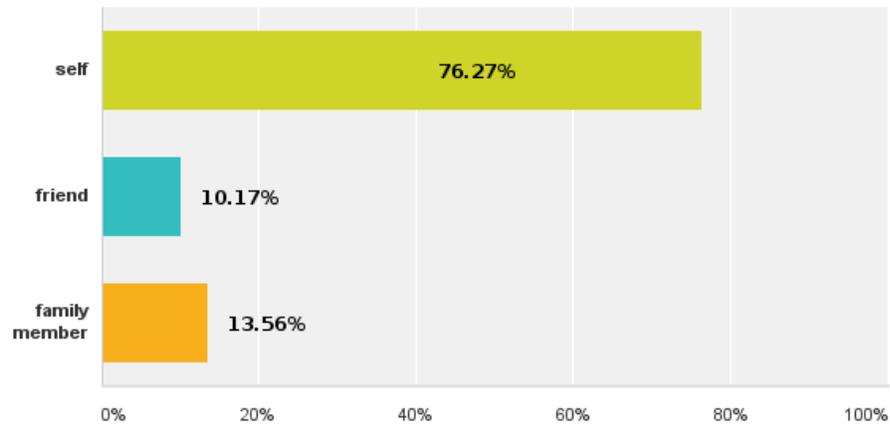
Seniors and other community members were surveyed regarding the needs in the Central Okanagan for non-medical support services. Results are based on 264 completed surveys, results are as follows starting with Question #1



Question #2 on the online version of the survey asked for age groups but paper survey and the one printed in the newspaper asked the simple question “Are you a senior (65+)?” The combined surveys indicate 61.84% of the respondents indicated they were seniors but the breakdown was not available due to the differences in the format of the surveys.

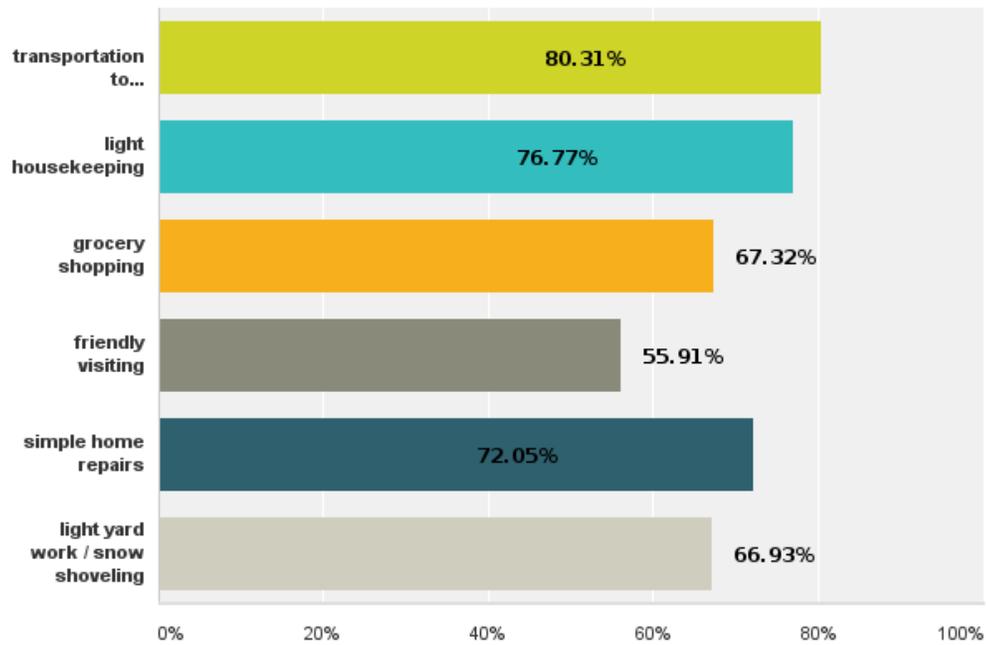
### Q3 Are you completing this survey on behalf of

Answered: 236 Skipped: 28



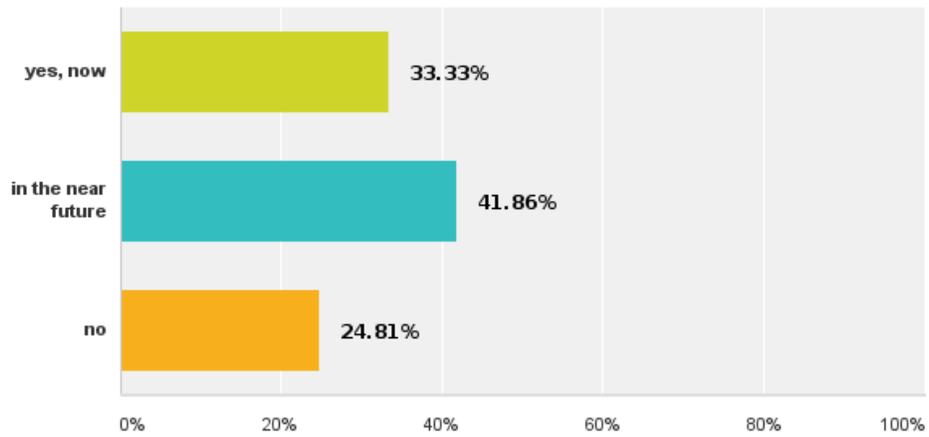
### Q4 Which of the following non-medical home support services are needed in your community?

Answered: 254 Skipped: 10



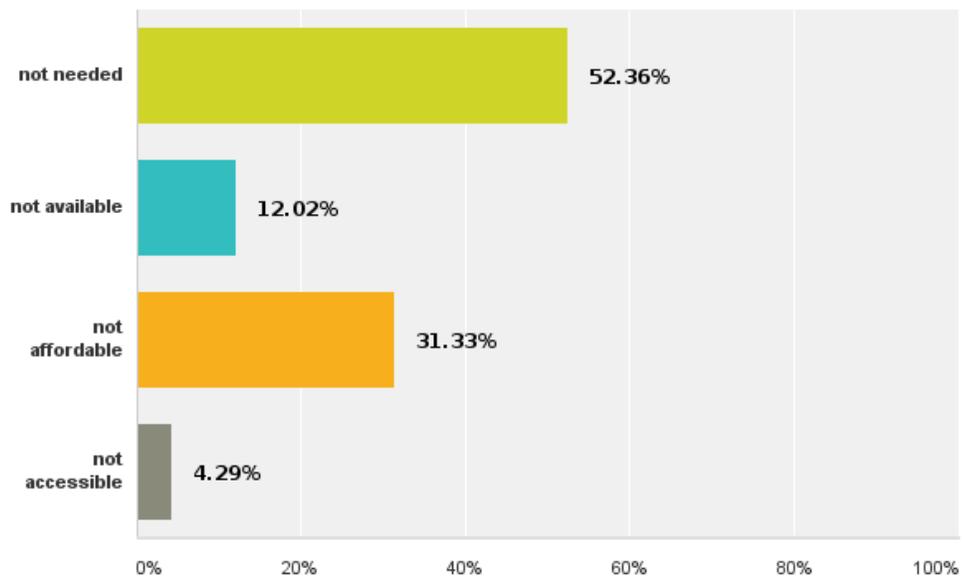
### Q5 Do you, or your friend/family member need any of these services to remain independent?

Answered: 258 Skipped: 6



### Q6 Reasons for not using existing services

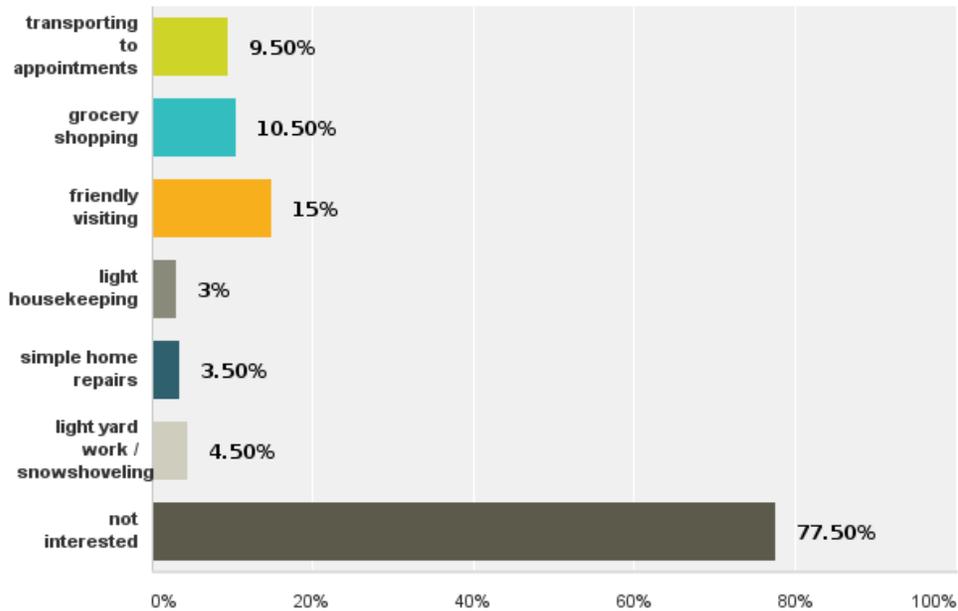
Answered: 233 Skipped: 31



Many respondents to question #7 indicated they would be interested in volunteering but did not indicate in what area they would volunteer. Since data from paper surveys was entered into the online source to quantify, a selection needed to be made. Friendly visiting was selected so, the data is inaccurate in terms of area of interest.

### Q7 Would you be interested in volunteering in your community for any of the Better at Home services?

Answered: 200 Skipped: 64



## 2.4 Service Priorities in Outlying Communities

Results from the surveys provide a snapshot of the priorities even though the number of responses was not great in the smaller communities.

Lake Country – (22 surveys completed) top three choices: simple home repairs, yard work, transportation

West Kelowna – (38 surveys completed) top three choices: transportation, housekeeping, simple home repair

Peachland – (11 surveys completed) top priority was yard work/snow shoveling but other services evenly ranked even though only 3 respondents chose all services.

## 2.5 Suggested Opportunities for Service Integration

Although there are clearly unmet needs, there are many non-medical services already being offered to seniors in the Central Okanagan. Non-profit agencies in each of the communities provide some of the options within the Better at Home basket of services. These services are currently delivered by the agency free of charge or a referral from the local agency to fee-for-service options. The first focus group meeting identified services in each community but the gap between free services and for profit fees of an average of \$25 an hour and up, presents an opportunity for the Better at Home model to offer services at an affordable rate to seniors, thus providing access to those who cannot afford the cost of the for-profit services but would not access free services.

Offering a fee for service model within a non-profit agency is a challenge that presents many complexities. Introducing a fee for a service that is already provided for free, requires careful planning and consideration of implications of community perception and expectations. The sliding scale fee structure presents a further challenge in projecting revenue without a clear margin to maintain service delivery. This model requires an agency with the financial infrastructure to support ongoing service delivery during times of uncertain revenue streams.

In order to identify other unmet needs and risk factors to protect vulnerable individuals, a comprehensive intake process with experienced and trained staff with expertise in the complexities of this population group is crucial. Since the Central Okanagan has senior serving agencies in each of the 4 communities, a coordinated service delivery model would eliminate the duplication of services and utilize the expertise of the current agencies involved. Finding a way to work together to create a model for the region would be the best option for long term success with the least amount of confusion for the public and the recipients of the Better at Home services.

### **3 Community Readiness**

#### **3.1 Explanation of Community Readiness that reflects community consultations and meetings**

Unfortunately, the community readiness for a collaborative service delivery model that was supported by the community did not occur within the community engagement process timeframe. It was hoped that the two agencies interested in the lead position would recognize the benefit of moving forward in a partnership as their combination of strengths provided the potential for a strong foundation to move the program forward in the Central Okanagan region.

It is expected that the two lead agency candidates will continue to look for ways to collaborate and be ready to submit an application early in 2014. Other potential candidates are encouraged to collaborate toward developing a regional model for service delivery.

#### **3.2 Potential risks going forward**

The greatest risk is the missed opportunity to establish the Better at Home program in the Central Okanagan.

### **4 Local Better at Home Program Details**

#### **4.1 List of preferred services from the Better at Home basket of services that reflect community consultations and meetings and how they link to the identified needs**

Transportation was the top priority as identified in the community consultations with housekeeping almost as important. However, it was clear that all services held some level of importance. The overall responses were as follows:

Transportation to appointments – 80%

Light Housekeeping – 77%

Simple Home Repairs – 72%

Grocery Shopping – 67%

Light Yard Work – 67%

Friendly Visiting – 56%

The smaller communities showed different priorities but some of the communities did not participate enough in the surveys to be truly reflective of the community needs. For example, Peachland identified the top priority as yard work which was probably more indicative of the time of year and limited to a small number of responses. The general sense was more likely to be transportation. Similarly, the top three priorities in Lake Country were simple home repairs, yardwork and transportation, in that order. West Kelowna identified transportation, housekeeping, simple home repairs.

#### **4.2 Key lead organization criteria identified by the community**

- Community recognition – accessible to all seniors, not just low income
- Understanding of seniors issues, challenges, various cohorts within the seniors population
- Ability to bridge between free services and for-profit businesses
- Volunteer recruitment / activity – ability to compete and/or collaborate with other volunteer based agencies and attract intergenerational volunteers
- Plan for rolling out region wide (volunteer, staff, contractors, combo – all services or partial?)
- Invoicing procedures / systems in place.
- Regional reach / plan to collaborate, lead other agencies within a regional vision
- Opportunity to be a model for larger regional approach instead of just another "program "

#### **4.3 Proposed lead organization**

A lead agency was not established during the community engagement process despite a follow-up meeting with a community council of approximately 20 people representing different community agencies and stakeholders all over the age of fifty. This council scored the respective proposed service delivery models of the two agencies interested in being the lead agency for the Better at Home program in the Central Okanagan. Scoring results were very close though distributed across different priorities which led to the determination that the best chance for success was a collaboration to establish a regional model to be rolled out with the capacity to broaden and maintain a strong program.

## **5 Recommendation and next steps**

- Recognize the challenges and potential misunderstandings by trying to deliver a fee for service model within an existing no-fee service structure
- Find a creative way to use Better at Home as a vehicle to coordinate existing services within the Central Okanagan region rather than introducing a new service that appears to compete with existing services. Agencies working together have more power than divided.
- Utilize the expertise of a collaborative team to minimize administrative costs and maximize the ability to ensure best practices and ability to respond to community need without unnecessary confusion.
- Do not underestimate the importance of a comprehensive intake process with experienced and trained staff who understands the complexities of this population group to identify other unmet needs and risk factors to protect vulnerable individuals.
- Address the need for recruiting and retaining younger volunteers. Ensure proper screening and training to create value and minimize risk.
- Let the agencies in the smaller communities be the experts on the specific needs for their local seniors.
- Do not assume the needs in Kelowna are the same for the outlying communities and taxation boundaries don't always translate into accessibility.
- Make it easy for seniors to know who to call with access to a person on the other end of the phone
- To assist with the awareness and access to non-medical home support services, take advantage of the Better at Home brand and growing recognition throughout the province to create a central conduit for services for seniors (referral to no-fee services, Better at Home sliding scale, and for-profit services).
- Recognition of Better at Home brand creates an opportunity to be the link to other services for seniors. The more recognition, the less likely the program will disappear.
- Be aware of the challenge of balancing community need and the ability to respond by building community capacity. Program can lose credibility if promoted but not able to deliver.

## 6 Appendices

### Appendix A – Summary notes from consultations

There were some general concerns that emerged during the community engagement process from stakeholders and the general public.

1. Seniors reluctance to admit they may need a bit of help when independence is their goal. However, the general consensus was the services were badly needed.
2. Concern that the Better at Home program might duplicate services already available and the financial support was far too low for the size of the region.
3. A general distrust of “programs” that are short lived and seen as a bandaid approach. Was there a guarantee that Better at Home would continue past 2015?
4. Need for addressing the prevalence of social isolation for seniors and the impact in terms of increased vulnerability of being taken advantage of or developing mental health issues.
5. Several seniors expressed concern over the administrative overhead costs of non-profit agencies.
6. Concern about finding enough volunteers. Many of the survey respondents were already volunteering in the community.
7. A need for similar services for those under 65 years of age who were disabled, low income and in need of similar supports

### Appendix B - Meetings:

**Initial Stakeholders Focus Group meeting** attended by representatives from Hands in Service, British Columbia Community Response Network, District of Lake Country, Red Cross, Multiple Sclerosis Society Okanagan Chapter, BC Government Employees Union, Westside Health Network, Peachland Wellness Centre, Inn from the Cold, St Vincent de Paul, Regional District of the Central Okanagan, Seniors Outreach and Resource Centre and Kelowna Community Resources Society.

Representatives from the following organizations were invited but could not attend: Arthritis Society, IHA Seniors Mental Health, Canadian National Institute for the Blind, Lake Country Health Planning, Patient Voices, Salvation Army, Central Okanagan Hospice Association, Kelowna and District SHARE Society, Kelowna & District Society for Community Living, Kelowna Family Centre, UBC Okanagan, Seniors Learning in Retirement, Salvation Army, Good Samaritan Society, Parkinson Seniors Society, Canadian Association of Retired Persons .

## Gaps in Service

Results of a group exercise to identify current services in the Central Okanagan from Stakeholders at first focus group meeting (for profit indicated in red)

Housekeeping	Service Options
Peachland	PWC provides resource and referral to private housekeeping services
West Kelowna	Hands in Service (free to low income, physically or medically challenged)
	Westside Health Network (in process for free – pending insurance)
	6 Home Support plus all the maid services for a fee
Kelowna	Home Instead - private
	Nurse Next Door - private
	Hands in Service (free)
	Seniors Outreach Referral Service (private home support agencies)
	Partners in Resources
Lake Country	Lots of private housekeepers \$25 hr+

<b>Transportation</b>	<b>Service Options</b>
Peachland	PWC Volunteer Driver program (suggested donation to driver)
West Kelowna	6 taxi services - fee
	Westside Health Network Volunteer Driver program Free (stipend for gas to driver)
	Inn from the Cold
Kelowna	Masonic for cancer patients
	Inn from the Cold Inn Home Support & Outreach (free)
	HandiDart
	Taxi Savers for HandiDart users
	Interior Health Volunteers (if on active caseload)
	Referrals from Seniors Outreach
	Friendly Bus
	Private Home Support Agencies
	St Vincent de Paul (free)
	Partners n Resources
	People in Motion (accessibility bus)
	Hands in Service
	Interior Health Volunteers (for medical appointments)
	United Way bus ticket program
Driving Miss Daisy (private)	
Lake Country	Lake Country Seniors Bus Society
	BC Transit (very poor service)
	Lake Country Health Planning Society
	Taxi

Grocery Shopping	Service Options
Peachland	PWC provides transportation by volunteer drivers
	IGA delivers groceries for a fee
West Kelowna	Inn from the Cold
	Westside Health Network (free)
	6 private Home Support agencies
Kelowna	Partners in Resources
	Interior Health Authority partnerships with grocery stores
	Individual stores that deliver for a fee (eg: IGA)
	Interior Health Authority volunteers (if on active caseload)
	Private home support agencies
	Food Bank Hamper delivery – monthly (Hands in Service)
	Inn from the Cold Inn Home Support (free)
	St Vincent de Paul (free)
	Home Instead (private)
	Nurse Next Door (private)
	Food Security & Churches with food banks
Lake Country	Lake Country Seniors Bus Society

Friendly Visiting	Service Options
Peachland	PWC connects people with volunteers for friendly visits
	PWC offers a large variety of social / connection programs that gives our residents the opportunity to remain connected to our community
	Volunteers also help with computer support, VCR, I-pads, cameras
West Kelowna	Westside Health Network (free)
	6 private home support agencies
	Inn from the Cold
Kelowna	Partners in Resources
	Seniors Outreach
	Interior Health Authority (if on active caseload)
	Coffee Breaks, social groups
	Private fee for service
	Churches
	Inn from the Cold Inn Home Support (free)
	Seniors Outreach Community Care (their patients only as part of service to Hand in Service)
	St Vincent de Paul (free)
Lake Country	MS Society to those with MS (free)
	No entry

<b>Yard Work / Snow Shoveling</b>	<b>Service Options</b>
Peachland	PWC provides referral to paid providers & in some cases PWC volunteers
West Kelowna	Westside Health Network in process (free) pending insurance
	6 private agencies and other businesses
Kelowna	Regional District of Central Okanagan – Snow Buddies
	Canadian Mental Health Association yard work (TWP)
	Senior to Senior
	Private fee for service
Lake Country	No entry
<b>Simple Home Repairs</b>	<b>Service Options</b>
Peachland	PWC provides resource and referral to paid providers
West Kelowna	Westside Health Network in process, waiting for insurance
	6 private Home Support agencies
	Habitat for Humanity (not sure what they provide)
Kelowna	Habitat for Humanity
	Hands in Service (limited and free)
	Teen Challenge
	Seniors Outreach volunteers
	Men's Shed (soon)
	Handyman Connection / Senior to Senior
	St Vincent de Paul (free)
	Inn from the Cold – Inn Home Support (free)
Lake Country	Lake Country Health Planning Society
	Private for fee

**Public Meetings** – The first community meeting was held in Peachland on July 24 with the help of Peachland Wellness Centre and attracted 10 participants. The second community meeting was held in West Kelowna with the help of Westside Health Network on July 31 and was attended by 10 participants. Lake Country Health Planning Society helped to organize a meeting with key representatives of the area on Aug 28 that was attended by 13 participants with representatives from Lake Country Health Planning Society, Holiday Park Neighbourhood Care and Resource Program, Winfield Hospital Auxillary, Bahai Faith Group, Prime Time, District of Lake Country and Hands in Service.. The second, public meeting was held on September 11 with approximately 12 attendees, some who arrived late due to an error in advertising.

**Other meetings attended and groups contacted:**

- Salvation Army
- Interior Health Community Care Managers
- Interior Health Case Managers, Occupational Therapists, Physiotherapists and Social Workers for Central Okanagan East – 18 participants
- Westbank First Nation Community Services
- Ki-low-na Friendship Centre – attempted contact several times
- Society for Learning in Retirement
- Parkinson Activity Centre
- Peachland Senior Centre
- Lake Country Senior Centre
- Glenmore, Mission and Rutland Community Policing Offices

**Survey Comments**

Please note: the online survey was designed after the hard copy and was slightly different due to the options available in the template. The online version allowed for a breakdown in age groups and also areas of interest in volunteering. Since the hard copies were manually entered into Survey Monkey to analyze the data, the questions regarding age groups and volunteer interest in the analysis detail is inaccurate. The hard copy asked simply if the respondent was a senior, over 65 years. Therefore, the results do reflect the number of senior respondents but the age group breakdown is skewed. In terms of the volunteer interest, the manual entry required a choice if interested in volunteering. If the area of interest was not selected, friendly visiting was chosen, so again, these results are skewed.

## **SURVEY COMMENTS – Central Okanagan 2013**

- Newspaper survey. Volunteer option not identified - "I am working finally, thankfully. However, I've had deaths, divorce and am left to go ahead. I work at being positive and helpful to others. Finances are a problem just for basic living. I see it in the lives of others also.
- Communicating these services is a challenge. Elder abuse advice
- Communication needs to be greater
- Handi Bus is a very terrible service for seniors. Very restrictive and difficult. Seniors need to be on the City of Kelowna Transportation Committee. They need the users voice present.
- possibly interested in volunteering. I have concerns about how a Kelowna based agency can provide a volunteer from Kelowna to come to LC! eg: for an appt at the hospital
- Not sure who you can trust - we live in an isolated area
- not interested in volunteering at this time but possibly later for transportation and visiting. We are 74 & 78 and are thinking of oncoming years
- not interested in volunteering because I am now 86 yrs old and volunteer at five other places
- I am in good health and strong. I am volunteering for the senior centre and Interior Health so not at this time. There are many seniors in Kelowna and I am sure that your services are needed
- Can't volunteer now as I don't know how long I'll be able to drive
- Many of our clients do not have local supports nor the financial means to access service. Organization of such tasks often done by case manager
- Volunteer wait list is too long
- Clients could benefit from affordable services
- Getting to appointments in Kelowna can be tricky
- Some clients have the financial resources but have no insight into the need for the services and thus refuse to use fee for service options
- I cannot volunteer any longer due to my osteoarthritis and chronic pain
- I could also use help putting a meal together once a day - just organizing it not necessarily cooking it
- I already volunteer at hospital cardiac
- Already a volunteer in 2 places
- We now have light housekeeping & yard maintenance
- I need help! If I didn't need help myself I would help someone. I love helping people. No, I wouldn't like to be locked up in a Home and nurse coming with 10 pills for you to take at once. You haven't life of your own. There was no reason to take my driver's license away. I never had an accident. They took me for my driver's test 5 days before Christmas. It was slippery and icy. Then they gave me

a test - spell this word backwards - I don't drive backwards why would I spell backwards? I drove in Kelowna, I drove in USA, I drove in Calgary, I drove in Vancouver, I drove in Edmonton, and no accidents. I drove from Kelowna to Fairview AB school reunion - no accident - 3 yrs ago. That was 700 miles to Fairview.

- Newspaper survey - We need paid people. There are plenty of good employed person. The Government needs to stop pocketing money on the MPs and Senate and get seniors looked after. People working with paid jobs
- I am already doing volunteer work with seniors
- We are 2 seniors who are managing because we have family who come from out of town when needed
- Already help friend, not available for more
- Volunteer programs at IHA already offer majority of these services.
- Presently a volunteer for interior health
- I volunteer for the CAT program & my church so I feel that is enough for now
- I already volunteer at many places so do not have the time
- I already volunteer - " I know some seniors in properties managed by Society of Hope - most are financially low income and would surely benefit from such a program
- Newspaper survey - My husband and I are in fair health at present but I can see that in a few years that can change. Transportation is the biggest worry when we can't drive and then is the bus service near at hand?
- Newspaper survey - Family able to help now
- Newspaper survey - "why are "Seniors" at the end when given help - as pension increase - that have built this country?" But Government (bumbs) First.
- Not aware if some of the services are available or not
- I do what I can to help my friend. Thank you for asking these important questions
- I work part time at Walmart and wouldn't mind picking up groceries, hardware items, pharmaceuticals, clothing or plants for anyone who lives in West Kelowna doesn't drive or can't get to the store. My phone # is 250-768-3000
- Thank you for the survey for the future
- I already volunteer these services
- Still working and volunteering but know these services are needed now and that I will need them in future.
- This would be so helpful!!
- Husband does a lot for me
- Best to be in your own home - good for morale
- Person responding to survey has MS & cares for his Mom who also has MS. He commented that there needs to also be services for those who are not seniors. There is very little available to those under 65 as well. MS Society group

- I am not driving anymore 87 yrs old
- Currently need help with garden pruning. Landscapers need a contract not when necessary and unaffordable.
- I would volunteer if I do not need a checkout or investigation from the police. I have been checked out many times
- I am 78, very independent, living in a small home with yard. Currently I pay for snow shoveling, some yard work and vacuuming. For those unable to afford the services, this help would definitely keep them in their homes. Handi-dart is a wonderful service that I used when my arm and leg were fractured
- Why are u asking for volunteers, we need to put people to work with pay. Unemployment is high. The government, our so called legislators, need to stop their greed and over the top wages and really start caring and looking after seniors and veterans. GET A GRIP, STOP ASKING FOR VOLUNTEERS AND UTILIZE CANADIANS, AND MAKE JOBS A REALITY. This, Better at Home, could employ so many people and DO Canadians proud. STOP ASKING FOR VOLUNTEERS AND GET THE WORKFORCE GOING FOR CANADIANS.
- Interested in volunteer - no specific choice. I do not drive so any volunteer work would have to be close to my apartment. Newspaper survey
- Need Assisted Living homes / facility in Peachland. Appreciate Peachland Wellness Centre
- Some type of information on reliable contractors would be helpful - newspaper survey
- Thank you for asking - newspaper survey
- Father had to be put in residential care because mother could not care for him and she is 81. She lives in our basement suite - newspaper survey
- A central info line or centre would help to access whatever services are available - newspaper survey
- Very interested in this service - newspaper survey
- I am volunteering all of the above for my elderly folks (95 & 97) - newspaper survey
- When I move in the near future I will need help with yard work
- Also need help with laundry and dog walking
- Interested in volunteering but did not identify which service. I am not a senior but I am disabled with Rheumatoid Arthritis
- I access volunteer driver program through Westside Health Network
- Planning for future since I am 88 years old
- Not able to volunteer at this time; working.
- Lake Country Health Planning Society would be the ideal leader in the community to support this initiative.

- Would like to see, as part of friendly visiting, activities such as painting - volunteers can be trained easily (see references such as Dr Dalia Gottlieb-Tanaka) <http://www.daliagottlieb-tanaka.ca/>
- A "Trading Post" would be good. Someone's Ironing could be traded for someone else's Baking. No cost. Just a case of bartering. Seniors would understand this concept more than most!
- I have help now but I got it through friends - how can services be found?
- I now live in Peachland and would like to volunteer in this community.
- Lack of disposable income and physical disability limit ability to participate
- Do not agree with encouraging seniors to stay alone in their own homes. Isolation is detrimental to emotional health which affects physical health.
- Very hard to figure out where to get these services--my mother has dementia ,right now i have to do it all
- Unable to volunteer at present due to work and home commitments but have in past and would certainly be willing in the future.
- Believe most needed services are those that prevent isolation, and allow seniors to live at home as long as possible.
- I already volunteer at Cottonwood home. I would not need these services for some time but hope they would be available when I do need them. With the shortage and high expense of senior facilities I think help to keep seniors in their homes is a wonderful idea. My parents stayed in their home until the end with some help. This was in the 90's before all the cut-backs. Hopefully we can concentrate more on the needs of seniors and less on everything for the kids. There always seems to be money for a new sports facility or contributions to things like ballet. Let's remember who built this country.
- I believe the government should be doing more as in rewarding our elders
- I am filling this out also to show that not just seniors need this assistance, but those of us who have become disabled, and do not own their own home. I am 45 and cannot get services for the same things seniors , but am physically and financially limited just as a some seniors are.
- May need services in the near future. I volunteer at Interior Health and 5 other community organizations
- May need services at some time. Not able to volunteer because of illness
- When I had a home, yard work and shoveling was difficult to find affordable help
- Need for assessment or early intervention
- Concerned about seniors isolation and lack of stimulation even with friendly visitors usually once a week
- After I retire, I would volunteer
- I would like to visit my family in Vancouver, however, I am afraid to leave my business partner home alone, as he has a tendency to get lost, and he forgets to eat, or can't be bothered to cook for himself

- More support for lower income seniors who cannot afford to hire privately, or live in a private supportive housing unit
- Not suitable vehicle for transportation; plus insurance issues / gas affordability
- Thanks for asking!
- Our Hospice group is becoming more active in our community and we would like to make home visits.
- I am working in Community Care and so would not volunteer at this time - possibility in the future. Many people are not able to afford services, or are just not capable of coordinating services. However, they may be able to remain at home if services such as these were put in place for them, similar to personal care. Thanks.
- All these services are being delivered by PWC

### Feedback from Final Public Meeting – small group exercise

• Experiences, Concerns, Feedback	Wish List for local Better at Home program
Process needed for contractors in this program – how to ensure they’re doing a good job?	Screening process needs to be thorough and must be evaluated. Person should be capable, clearly identifying what the tasks are (ie: home repairs)
Also need services for younger people with disabilities or chronic health conditions	More money! Evaluating age – many 55+ need services
How do you train volunteers to work with people with hearing impairments?	Awareness training, staff, volunteers or training deaf people to work with those with hearing impairments and visually impaired
Finding volunteers is a challenge – how is this going in other areas?	What if we can’t find enough volunteers to meet the need. If using Community Care, can you also use this service?
Many people are very isolated and transportation is a challenge	
Concerns about low level of participation in programs (activities, support groups) then they get cancelled	
Seniors being taken advantage of by family, renters etc.	Need awareness & support
Many with hearing loss can’t afford hearing aids which results in more isolation	

Isolation rates are high	More senior neighbourhood programs (more accessible and more options)
Not enough transportation for seniors	Socialization options for seniors
Lack of local family	More continuity of care in the home (one consistent caregiver)
What the senior needs vs wants	
Seniors have the right to self-determination	In-home assessments are essential
Not enough free Senior Centres and services	
Cost is high	
Lack of and continued decrease (regression) of public funding for seniors	
Okanagan is huge region with highest senior population	More than \$100,000.00/yr is essential in Kelowna based on senior population and need
Handi buses – Seniors Outreach Advocacy, coffee groups – 1 in Mission successful, 1 in Capri depends on weather – no Coordinator now. Concerns have nowhere to go. No follow up. Needs elderly person on advisory committee to give feedback	Transportation #1 – maybe needs to be targeted. Assistance in housekeeping, cooking for low income
HandiDart buses – seniors numbers are up and services are down. Rigid system, must book ahead, wait outside in cold waiting for Handi Dart. No communication between bus system and users	Increase transportation – HandiDart maintain taxi savers. If HandiDart does not pick up senior does not have cell phone or money to make call for pick up
Need for Advocate – Better at Home will allow for seniors to advocate for self – Marilyn on Advisory Committee?	Basic survival support on day-to-day basis – light housekeeping and yard work
Coffee groups could be more productive	
Men more isolated (suicide rates). Needs to be more of a focus on services for males	Kelowna needs social stuff as well – very important. Number of social groups for seniors – problems knowing where and how to access – fulfilled in volunteering. Daytime hours important
Men and Women in separate groups increases awareness	
Communication is a big piece	Mental health issues important to recognize and increase education
About to retire – stat re: suicide rate in men. Men and issues could be better engaged	Recruit male volunteers & give purpose. Men at 65 healthier, when lose interest & abilities = increase in depression.

Red Cross volunteers for equipment repair. Most volunteers were men & core have continued. Appropriate things that interest men	
Services talked about by Interior Health limited to very narrow group. Focussed on personal care. Concerned about how many seniors are going to be serviced by \$100,000.00	Med disabilities under 65 yrs, services offered are the same as Better at Home. Can organization move into seniors
People who move here don't know area and what is available	Club for people to learn – newcomers group need to graduate after 3 yrs
Being able to know about services how do you set something up to communicate to people when there is a huge range of technical knowledge	Education needs to go to medical personnel etc
Hard to reach families – group coming out to report. People working and people in isolation impacts health	CARP – focus group – need to speak about seniors as an asset not “tsunami”
	Social innovation – community based. What if \$100,000.00 used to increase communication ie: Shaw TV, Seniors Cafe
	Mental Health needs to be considered – all age groups need to be included – reach into younger age groups to help set up programs and services
People don't know what is available	
How to get people to ask for help?	Transportation – vans?
How do we communicate that people can access programs without losing their independence	Ensure low income and all seniors know this exists
Let seniors know that there will be free or low cost services	Fund volunteer coordination / management
Volunteer burnout	No more ageism please!
As an agency, often have to inform seniors that free or low cost services for non-medical home supports are not currently available	
Caregiver burnout evident with some seniors, due to unaffordability of services	
Identifying people who need services through Drs Physios, Chiro	Screening process for trades people so seniors don't get scammed ie: a clearing house for workers that go into homes
Social isolation – how to reach people	Men's activities
Those over 65 cannot get help if they don't have the money to pay	Disability activities that don't cost ex swimming, house and yard work

Being too proud to ask for help - feeling of stigma attached, fear of losing independence. Privacy concerns, confidentiality	Make Naturopaths recognized in the medical system
	No smart meters in homes and living areas as is unhealthy
Meal / nutrition support	Advocates
Awareness – need to know how to ask	Free to ask for help without fear of having to give up everything
Transport to social events – mental stimulation	Less emphasis on computer communication
Many seniors need resources but can't afford to access them	
Seniors often do not know where or how to access services	Better at Home brochures to be funded & distributed by Provincial government (not out of \$100,000.00)
Some seniors do not think they need the service, or are not willing to pay for it (even if they have the finances)	Networking and support from other B@H communities

**Results of Follow up meeting**

The scoring and feedback from the Review Council did not give a clear indication of which agency should take the lead – the results were “too close to call” in the end. They were only 4% apart and needed a minimum 10% overall difference between the 2 agencies, in order to be able to say that one candidate emerged as stronger. It was clear within the results that each agency had different strengths that combined would be extremely beneficial to moving forward in a partnership model.

## Review Council Scoring Criteria



Organization Name: \_\_\_\_\_

Better at Home is funded by the Government of British Columbia.

Prospective Lead Agency	Rating 1 - 5 (1 = weakest; 5 = strongest)
Reputation in community	
Accessible and sensitive to diversity and disability issues	
Knowledge of issues facing seniors and caregivers	
Capacity to recruit, screen, support, and manage volunteers effectively	
Ability to foster relationships with funders and donors	
Ability to adapt and find creative solutions to challenges	
Better at Home Criteria and Proposed Implementation Model	
Ability to work collaboratively with all Central Okanagan communities toward a regional vision, while recognizing the unique needs of each community	
Ability to strategically build program capacity in the long term	
Consistent, simple, and easy to understand approach to service delivery	
Ability to reach vulnerable and/or isolated seniors	
Ability to manage administrative aspects of program such as fee for service, billing, reporting	
Can successfully represent the Better at Home brand	

**TOTAL SCORE: /60**

Strengths

Please describe any other important strengths the organization would bring as lead agency to the Better at Home implementation process.

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Concerns

Please describe any concerns you have regarding this organization taking on the lead agency role.

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Thank you for participating in this Better at Home Stakeholder Review Process—your input will remain confidential.

We appreciate your time and input.

## Appendix C - Advertising and Media

### MEDIA RELEASE

Date

#### **Better at Home coming to Central Okanagan**

The Central Okanagan has been selected as a potential site for the new Better at Home program. Managed by the United Way of the Lower Mainland, with funds from the Government of British Columbia, the program assists seniors with simple day-to-day tasks to help them maintain their independence in their own homes. This new program has started to roll out in several communities across the province and is expected to be in up to 68 sites in BC. The initial development phase consists of research into the senior population and a community consultation process. This process allows the community to provide input into shaping a program that is unique to the needs of the Central Okanagan. Better at Home provides non-medical support services such as friendly visiting, transportation to appointments, grocery shopping, light housekeeping, simple home repairs, yard work and snow shoveling. All seniors are eligible for Better at Home services with fees based on a sliding scale according to income and ability to pay. Services are delivered by non-profit agencies by a combination of volunteers, paid staff and contractors. This model encourages community participation to allow the program a broader reach and services for a greater number of seniors. For more information or to provide input regarding services needed in Peachland, West Kelowna, Kelowna and Lake Country contact Myrna Tischer at [betterathome.cenok@gmail.com](mailto:betterathome.cenok@gmail.com) or call (250) 492-0065 to leave a message.

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Media Contact: xxx

[www.betterathome.ca](http://www.betterathome.ca)

## Seniors Health: Better at home

SUNDAY, 14 JULY 2013 02:00 NORM LETNICK

We all know the statistics: our community is aging.

Fortunately, along with aging comes wisdom for most and a call to service for others.

Happy seniors who are engaged in the community are more likely to remain healthy in mind and body as they age. While seniors have a role to play in their own health, there is plenty that individuals, societies and governments can do to help them along the way.

Volunteering is its own reward, and our community is blessed with many selfless individuals who give their time to help seniors in a variety of ways, from helping with daily chores and errands to simply being a friend and companion.

Recently, I had the privilege of attending appreciation dinners for two such groups: the Royal Canadian Legion's tribute to our veterans and Meals on Wheels.

With more than 330,000 members, many of whom are seniors, the Legion is the largest veteran organization in Canada. It is also one of Canada's largest community-based service organizations, contributing millions of dollars and volunteer hours to assist others. Their recent annual veterans dinner was attended by hundreds of people and was a great opportunity to thank these individuals for their dedication to our country and community.

Meals on Wheels is 44 years young in Kelowna, with meals available to seniors and/or homebound individuals with physical or mental disabilities. Their volunteers deliver reasonably-priced, hot, nutritious meals to clients' homes over lunch hour. Meals include soup, a hot entrée and dessert. For information on how to volunteer or become a client, call them at 250-763-2424.

For many years, a personal highlight for me has been volunteering as a bus driver for groups of local seniors. I began by driving them to meals at Kelowna's First United Church and Rutland's May Bennett facility, and today I take Lake Country seniors on all-day excursions to places like Mara Lake or Cherryville.

Here in the Central Okanagan, Lake Country Coun. Owen Dickie has been helping seniors for many years. He has proposed a new idea to help local seniors stay in their homes and provide affordable housing for younger people. Dickie believes many seniors would benefit from extra spending money to cover daily expenses, as well as a little help around the house in areas like yard work and home repairs. His idea is to make low-interest loans available to seniors, allowing them to add a suite to their existing home.

Dickie also proposes establishing a housing office that could screen potential tenants who could rent the suites, on the condition they contribute to the yard work and house maintenance, and act as the liaison between tenants and owners.

At the provincial level, there are many great initiatives to help seniors, such as the Better at Home program, a \$20-million investment by our government. Managed by the United Way of the Lower Mainland, Better at Home helps seniors continue to live independently in their own homes by providing simple non-medical support services. Examples of Better at Home services include friendly visits, light yard work, minor home repair, transportation to appointments, snow shovelling, housekeeping and grocery shopping.

The program is an important part of B.C.'s Seniors Action Plan, which aims to improve access to non-medical services that help seniors remain in their own homes as long as possible; it is building an approach to seniors' care that is more accessible, transparent and accountable.

Better at Home will be rolled out in up to 68 communities across British Columbia. Thirty sites, including the Central Okanagan, are currently in the development process. This process consists of research into the seniors demographic; identifying the needs for services within the program that are unique to the communities involved; and identifying which services are currently working well and where the gaps are. This community engagement process allows seniors to help shape the program and identify the non-profit agency best suited to deliver the services.

Once the program is established in our community, all seniors will be eligible to access services regardless of income and/or living situation, as the majority of services are provided on a fee-for-service basis based on the seniors' income and ability to pay.

Funding is in place through the end of 2015, and although this model will require ongoing support through government funds, enhanced reach and impact can be built in from a combination of funding, service fees, volunteer engagement and community support. This model helps to build community capacity,

which gives the program a broader reach and access to services for a greater number of seniors. It also encourages community participation, giving the added benefit of maintaining health and allowing seniors to be a part of the solution. Aging in the home and remaining independent includes access to a bit of help where and when it is needed.

Over the next couple of months, there will be an opportunity for community input. To add your voice to this project, complete a community survey available at several community service agencies, the United Way office in Kelowna or online at [surveymonkey.com/s/betterathomecenok](https://surveymonkey.com/s/betterathomecenok).

To learn more about this program, contact the community developer Myrna Tischer at 250-492-0065 or [betterathome.cenok@gmail.com](mailto:betterathome.cenok@gmail.com)

By working together, individuals, groups, communities, and governments can improve the lives and health of seniors, one act at a time.

Norm Letnick is the MLA for Kelowna-Lake Country and a PhD candidate with UBC in health economics.

### Example of Advertising for public meetings:

**Better at Home**  
United Way helping seniors remain independent.

## Speak up for Peachland Seniors

Central Okanagan has been selected as a potential site for the new Better at Home program providing non-medical home support services for seniors; to help them to remain living independently in their own homes. Ensure the needs of Peachland seniors are heard by providing input into the type of supports needed that are unique to your community.

**Plan to attend the Community Meeting**  
**July 24<sup>th</sup> 1:00pm - 3:00pm**  
**Peachland Wellness Centre**                      **Refreshments**

For more information contact: Myrna Tischer  
250-492-0065 or [betterathomecenok@gmail.com](mailto:betterathomecenok@gmail.com)

**United Way**  
[www.betterathome.ca](http://www.betterathome.ca)

Better at Home is funded by the Government of British Columbia

## Appendix D - Surveys

### Better at Home Community Survey

please submit prior to September 15, 2013



United Way helping seniors  
remain independent.

Thank you for providing input into this important community survey. This information will help to identify and prioritize the types of non-medical home support services needed in the

Central Okanagan to help seniors to maintain independence in their homes and determine a community need for the Better at Home program

1. Please identify your community \_\_\_\_\_
2. Are you a senior (65 years +)?       yes       no
3. Are you completing this survey on behalf of:     self     friend       family member
4. Which of the following non-medical home support services do you feel are needed for seniors in your community?  
 Transportation to appointments                       Friendly visiting  
 Light housekeeping     Simple home repairs  
 Grocery shopping     Light yard work / snow shoveling
5. Do you, or a friend/family member need any of these services to remain independent?  
 Yes, now                       In the near future                       No
6. Reasons for not currently using existing services:  
 not needed       not available       not affordable       not accessible  
other \_\_\_\_\_
7. Would you be interested in volunteering for any of the above services?  
 Yes       No
8. Additional comments  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Email: [betterathome.cenok@gmail.com](mailto:betterathome.cenok@gmail.com); Phone (250) 492-0065

or

Return by mail to United Way,  
202-1456 St. Paul Street, Kelowna, BC V1Y 2E6

Online survey: [www.surveymonkey.com/s/betterathomecenok](http://www.surveymonkey.com/s/betterathomecenok)

Better at Home is funded by the Government of British Columbia

## Better at Home Central Okanagan Community Survey

### 5. Do you, or your friend/family member need any of these services to remain independent?

- yes, now
- in the near future
- no

### 6. Reasons for not using existing services

- not needed
- not available
- not affordable
- not accessible

Other (please specify)

### 7. Would you be interested in volunteering in your community for any of the Better at Home services?

- transporting to appointments
- grocery shopping
- friendly visiting
- light housekeeping
- simple home repairs
- light yard work / snowshoveling
- not interested

### 8. additional comments?

## Better at Home Central Okanagan Community Survey

**5. Do you, or your friend/family member need any of these services to remain independent?**

- yes, now
- in the near future
- no

**6. Reasons for not using existing services**

- not needed
- not available
- not affordable
- not accessible

Other (please specify)

**7. Would you be interested in volunteering in your community for any of the Better at Home services?**

- transporting to appointments
- grocery shopping
- friendly visiting
- light housekeeping
- simple home repairs
- light yard work / snowshoveling
- not interested

**8. additional comments?**

# Better at Home Community Survey

please submit prior to August 15, 2013



United Way helping seniors  
remain independent.

Thank you for providing input into this important community survey. This information will help to identify and prioritize the types of non-medical home support services needed in the Central Okanagan to help seniors to maintain independence in their homes and determine a community need for the Better at Home program.

More information on Better at Home is available at [www.betterathome.ca](http://www.betterathome.ca)

1. Please identify your community \_\_\_\_\_

2. Are you a senior (65 years +)?  yes  no

3. Are you completing this survey on behalf of:  self  friend  family member

4. Which of the following non-medical home support services do you feel are needed for seniors in your community?

- |   |   |
|---|---|
| <input type="checkbox"/> Transportation to appointments | <input type="checkbox"/> Friendly visiting                |
| <input type="checkbox"/> Light housekeeping             | <input type="checkbox"/> Simple home repairs              |
| <input type="checkbox"/> Grocery shopping               | <input type="checkbox"/> Light yard work / snow shoveling |

5. Do you, or a friend/family member need any of these services to remain independent?

Yes, now  In the near future  No

6. Reasons for not currently using existing services:

not needed  not available  not affordable  not accessible  
other \_\_\_\_\_

7. Would you be interested in volunteering for any of the above services?

Yes  No

8. Additional comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



United Way

Email: [betterathome.cenok@gmail.com](mailto:betterathome.cenok@gmail.com)

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Kelowna, BC

Online survey: [www.surveymonkey.com/s/betterathomecenok](http://www.surveymonkey.com/s/betterathomecenok)

## References

2011 Census Profile BC Census Divisions and subdivisions

<http://www.bcstats.gov.bc.ca/StatisticsBySubject/Census/OpenData.aspx>

Statistics Canada, catalogue no.82-003-X Health Reports, Vol 24, no. 3 pp 3-13, March 2013, Nutritional Risk among Older Canadians

BC Taxation

<http://www.bcstats.gov.bc.ca/statisticsbysubject/LabourIncome/OtherData/IncomeTaxation.aspx>

Conference Board of Canada

<http://www.conferenceboard.ca/hcp/details/society/elderly-poverty.aspx>

Canada Mortgage and Housing Corporation [http://www.cmhc-schl.gc.ca/odpub/esub/64359/64359\\_2013\\_B02.pdf](http://www.cmhc-schl.gc.ca/odpub/esub/64359/64359_2013_B02.pdf)

BC Housing Directory – Affordable Housing

[http://www.bchousing.org/resources/Housing\\_Listings/zone11\\_senior.pdf](http://www.bchousing.org/resources/Housing_Listings/zone11_senior.pdf)

Interior Health Authority <http://www.interiorhealth.ca/Pages/default.aspx>

Best of Care, Getting it Right for Seniors in BC part 2

<http://www.ombudsman.bc.ca/investigations/systemic-investigations/systemic-investigations-completed-in-2011-12/137-public-report-no47-the-best-of-care-getting-it-right-for-seniors-in-british-columbia-part-2>

ElderGuide <http://www.eldernet.ca/>

BC Stats quarterly population highlights report

<http://www.bcstats.gov.bc.ca/StatisticsBySubject/Demography.aspx>

Kelowna Economic Development <http://www.investkelowna.com/>

Socio Economic Indices

<http://www.bcstats.gov.bc.ca/StatisticsBySubject/SocialStatistics/SocioEconomicProfiles/Indices/SocioEconomicIndices/RDRreports.aspx>

Statistics Canada Health Profile <http://www12.statcan.gc.ca/health-sante/82-228/details/page.cfm?Lang=E&Tab=1&Geo1=HR&Code1=5913&Geo2=PR&Code2=59&Data=Rate&SearchText=Okanagan%20Health%20Service%20Delivery%20Area&SearchType=Contains&SearchPR=01&B1=All&Custom=>

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Westbank First Nation <http://www.wfn.ca/>



## Acknowledgements

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Many thanks to Irene Woods for her genuine passion for seniors and healthy communities; for all her efforts to engage the senior population in dialogue, distributing and promoting participation in the survey and various levels of support along the way.

Thanks to Capital News for donating space in the newspaper for the community survey.

Last, but not least, thanks to Avril Paice of the local United Way of the Central and South Okanagan and Debbie Sharp, Better at Home Field Coordinator, United Way of the Lower Mainland. Your commitment to the Better at Home program and unwavering support was much appreciated.

Myrna Tischer,  
Community Developer