

Granisle Better at Home Rural and Remote Pilot Project



Stakeholder Meeting Report March 2015



United Way



United Way helping seniors
remain independent.

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

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1 Introduction

1.1. Better at Home

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 provincially by the United Way of the Lower Mainland. The Better at Home program is designed to address the specific needs of local seniors, allowing communities to assess their local strengths, identify gaps in services for seniors, and design Better at Home to enhance local capacities to bridge these non-medical seniors support service gaps.

The range of Better at Home services available varies from community to community, depending on the specific needs of local seniors. Services are delivered by a mix of volunteers, contractors, and paid staff, which depends on the capacity and human resource availability in local communities. Examples of Better at Home services include:

- Friendly visiting
- Transportation
- Light yard work
- Minor home repairs
- Light housekeeping
- Grocery shopping
- Snow shoveling

There are currently Better at Home programs in over 60 programs across British Columbia. In the north, there are Better at Home programs already providing services in Prince George, Quesnel, Terrace, Kitimat, Prince Rupert, Gitksan First Nation, Dawson Creek and Fort St. John. A full list of current Better at Home programs can be found online at <http://betterathome.ca/map>. Those with limited access to the Internet are welcome to call the Better at Home Provincial Office on 604-268-1312 to enquire about program availability around the province.

1.2. Better at Home Rural and Remote Pilot Project

In April 2014, United Way of the Lower Mainland received additional funding, some of which was used to undertake the Rural and Remote Pilot Project. The pilot project will test new approaches for delivering Better at Home services in hard-to-serve rural and remote BC communities and inform Better at Home's efforts to effectively serve seniors in these areas.

The project will run in six rural and remote communities, which may devise six different ways to deliver Better at Home services. As part of the pilot project, United Way will support the development of locally appropriate approaches that may differ from the

current approach in various ways—financial, governance, services, delivery, management, and staffing— but will remain in line with Better at Home core principles.

The selection process for the rural and remote pilot programs was evidence-informed, consultative, and responsive, in line with the guiding principles of Better at Home. Following extensive consultation with regional experts and stakeholders, site selection criteria were developed, which included but were not limited to the following:

- Numbers of seniors in community
- Non-medical home support needs
- Number of challenges to overcome (remoteness, small size, winter travel)
- Isolation factors
- Lack of other services/transportation infrastructure
- Outlying areas to work with
- Community readiness
- Community capacity

The criteria provided a guideline to the kinds of communities which regional experts considered ideal for participation in the Better at Home Rural and Remote Pilot Project. Communities selected met a number of the criteria to varying degrees while also presenting variation between the pilot communities in an attempt to maximize learning potential for Better at Home.

The Villages of Nakusp, Fraser Lake, and Valemount, as well as Invermere and Pender Island were the five communities initially identified to help Better at Home understand how best to deliver services to seniors living in rural and remote communities in B.C. Following successful stakeholder engagement processes in each of the initial five communities, exploratory preliminary conversations were conducted with key stakeholders in the Village of Granisle. Preliminary engagement indicated that while demographically smaller than other identified pilot communities, Granisle demonstrated an interest in and capacity for participation and potential success within the pilot project context. Granisle met a number of the site selection criteria and was identified as a potential pilot site by various regional experts. The community was therefore added to the pilot project community list and a short engagement process undertaken.

Following a local stakeholder engagement processes in each of the six identified pilot project communities, locally appropriate Better at Home programs will be funded from April 2015. The details of each planned program will be finalized during the application process but this report gives an overview of the March engagement process in Granisle.

1.3. Granisle Better at Home Pilot Project

The Village of Granisle was identified as a potential Better at Home Rural and Remote Pilot Project community as described in the previous section.

Rural and remote pilot programs may face very different challenges and local contexts than communities with more urban-based Better at Home programs. For this reason, the pilot Better at Home programs may come up with very different services and service delivery approaches than Better at Home programs to date. The focus for rural programs, as for all Better at Home programs, is supporting seniors to remain at home and connected to communities. How this will look in Granisle is as yet undecided. The approach will be locally appropriate, community-based, grounded in local capacities to safely provide services, and focused on the non-medical needs of Granisle seniors. The Better at Home Provincial Office will provide resources, connections, and support to the pilot programs as they design and implement their local approach.

1.4. Description of the Local Engagement Approach

A stakeholder meeting was held in the Village of Granisle on Wednesday 4th March. The meeting was intended to inform key stakeholders about the Better at Home pilot program, gauge interest in program participation and discuss capacity and potential program approaches. Key representatives from the Village Council, village office, Granisle Seniors Association, Lions, and library participated actively in the meeting.

The agenda, as seen in the flipchart image at right, was as follows:

1. Introductions
2. Better at Home program overview
3. Local seniors supports
4. Non-medical support needs
5. Local approach
6. Next steps

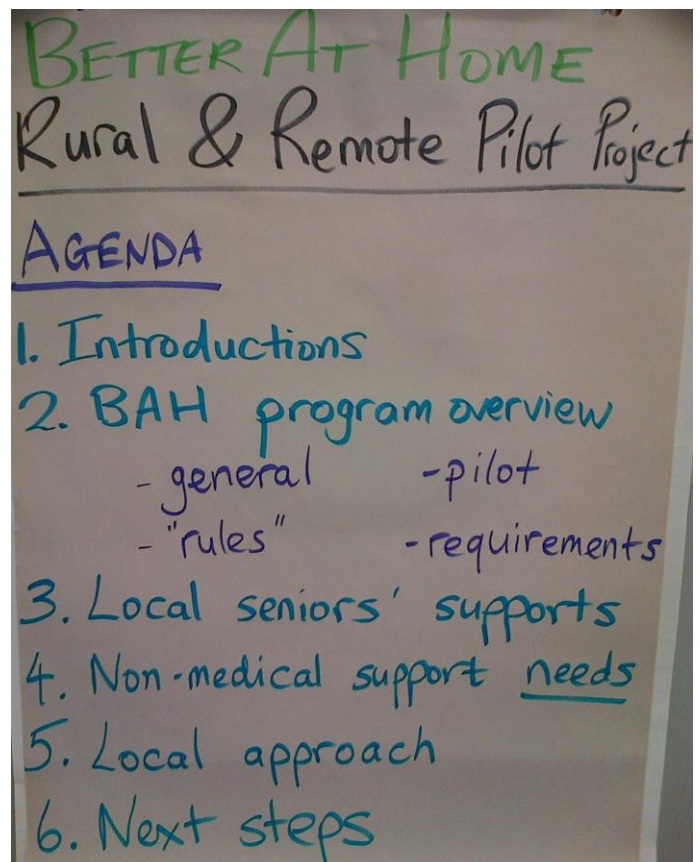
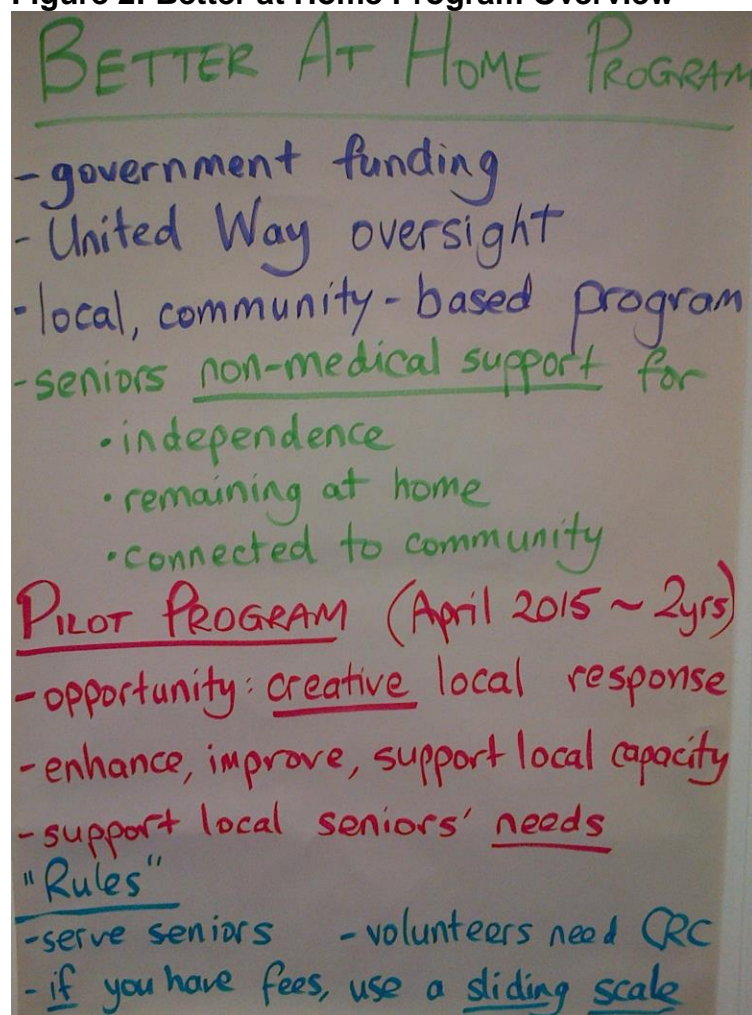


Figure 1: Granisle Village Office (meeting venue)



Figure 2: Better at Home Program Overview



As shown in Figure 2, the Better at Home program was discussed in general as well as with particular reference to the Rural and Remote Pilot Project. The Better at Home program is funded by the Government of BC. The United Way of the Lower Mainland manages the program throughout BC, and works with the local United Way of Northern BC (based in Prince George) to understand and work with local communities in their area, including the Village of Granisle. Better at Home is designed as a local, community-led, community-based program that aims to support seniors' independence and ability to remain at home and connected to community as long as possible. The program is usually run locally through a local non-profit organization, but can also be operated through a local village office or First Nations band.

As Granisle is part of a pilot program, the community is encouraged to be creative in terms of the approach to filling local seniors' support needs. In addition, it is important to consider the opportunities and limits of local capacity when designing attempts to create, enhance and expand support. Better at Home should be used to enhance

existing capacities, strengthen partnerships within the community, and fill current gaps in services. It is important that Better at Home does not duplicate services or threaten any existing service providers (public, not-for-profit, or private). For example, if Better at Home provides housekeeping services, these should be charged out to seniors in accordance with local market rates so as not to undermine existing businesses.

Some key points noted were:

- the Better at Home program must serve seniors
- if fees are charged for Better at Home services, they should be on a sliding scale to ensure low-income seniors are not facing financial barriers to service access¹
- if the program uses volunteers, they must have Criminal Record Checks

In order to ensure that the Village of Granisle is aware of the responsibilities associated with participation in the Better at Home Rural and Remote Pilot Project, these were discussed during the March 4th meeting.

Better at Home programs are required to:

- apply for funding for the one-year renewable grant annually
- submit client and service data quarterly
- complete quarterly telephone check-ins
- complete a nine-month budget and narrative report
- complete a 12-month actual budget

Pilot programs will participate in focus group evaluation sessions to monitor progress and success, and will receive provincial office support. Programs also participate in a community of learning with other Better at Home programs (exchanging knowledge and support) and engage in ongoing training. Funding for Better at Home Rural and Remote Pilot Programs is anticipated to begin in April 2015, with funds being disbursed quarterly throughout the year.

As Granisle Better at Home will be part of the Rural and Remote Pilot Project, there will be extra monitoring, evaluation, and learning opportunities to examine levels of success for the program in a rural context. This will likely involve focus group reflection meetings at annual intervals. The Michael Smith Foundation for Health Research is also engaging in a study of Better at Home's cost effectiveness and impact on quality of life for seniors in the province. Better at Home programs and their clients will have the opportunity to participate in this research.

¹ The Better at Home Provincial Office does not require proof that programs are verifying clients' income levels. This process is up to programs to decide.

In addition to a range of responsibilities, pilot programs—including Granisle Better at Home—are connected to a wide network of support, guidance, and knowledge exchange. This involves other Better at Home programs, including other pilot programs that will receive funding from April 2015. There is also training offered through the Better at Home Provincial Office, and support offered online, by phone, during teleconferences, and in person. Better at Home programs are supported with information and guidance to maximise chances of successfully supporting seniors' independence, improving their opportunities for remaining safely at home, and enhancing seniors' connection to communities.

2. Community Overview

As can be seen in Figure 3, Granisle is a remote community that is

- around 80km from Houston (about an hour's drive)
- almost 100km or 1hr20minutes' drive from Burns Lake
- over 150km from Smithers on Highway 16 (or 80 km and two hours on unpaved logging roads)
- 50km from Highway 16, which can be a 45-minute drive even in good conditions

Figure 3: Map of the Granisle Area



2.1 Local Seniors Population

According to Statistics Canada's most recent census, there were 303 people living in Granisle in 2011. At that time, there were 125 people aged 65 and over (41% of the population).

The Better at Home Provincial Office does not define 'senior'. Local programs define the criteria for senior in their local context (in some communities it is 65+, in others it is lower). Discussions with the stakeholder group in Granisle revealed that the community generally considers people 50 years and above to be seniors. Using this metric, census data counted 235 seniors in Granisle in 2011, which was 78% of the population.

From experience in urban Better at Home programs, not all seniors will ask for or need Better at Home services. Similarly not all clients will need services all the time—for many this will be a temporary measure or an occasional supplement to existing supports. Similarly, only a portion of those needing services will require subsidies. It is important to build these assumptions into the program and budget planning.

As reported in the [Better at Home annual report](#) (March 2014), a large proportion of Better at Home service users tend to be:

- seniors living alone
- senior women
- between 75 and 84 years of age

3. Summary of Community Assets for Seniors

The stakeholder group in Granisle spent some time discussing seniors supports in Granisle, but did focus more on non-medical support needs. A brief overview of seniors supports is listed here, but it should be noted this was not an extensive exercise.² Also, many of the services are not specifically for seniors but are community assets available to seniors as well as the rest of the community.

Better at Home should not duplicate existing services. Instead, Better at Home should be used to bring partners together within the seniors sector, enhance existing supports, and fill in necessary gaps in non-medical services for seniors.

² Any inaccuracies are entirely the responsibility of the author. The details are subject to revision, clarification, addition, and improvement by the Working Group.

Supports for seniors in Granisle include:

- support from friends and family
- support from neighbours
- private contractors offering to remove snow from driveways and roofs
- Good Food Box (produce delivered to homes in the second week of the month)
- Lions Club
- Granisle Seniors Association
- Granisle Library
- Curling Centre
- Grocery store in town
- Library
- Monthly community meal program (coming to the end of the grant)
 - o Fed 50-75 people each month
 - o Opportunity for people to get out and socialize over a (free) meal that brought inter-generational groups together
- Granisle Community Health Centre (limited hours and services)
 - o Open Monday-Thursday, 8:30-12; 12:30-4pm
 - o Open Friday 8:30-12
 - o Nurse practitioner and/or physician available once or twice a week
- Home Care Nurse
 - o Only one in community providing home support
 - o Would like another home care person but need to talk to Northern Health
- Lifeline
 - o Subsidized by the Lions Club
- Paramedics in town
 - o Both are getting on in age and one will be leaving soon

4. Summary of Seniors' Non-Medical Support Needs (gaps/areas to enhance)

The stakeholder group also discussed existing gaps or needs for seniors non-medical support. The discussion focused on the issues that make seniors start to think about leaving the community. In particular, the group thought that the lack of health care support was the key reason people are forced to leave. While Better at Home cannot address health care supports, this is an important part of the spectrum of seniors supports, and more discussions with Northern Health are encouraged.³

³ Representatives from Northern Health were invited to the stakeholder meeting and while the response was good, scheduling conflicts unfortunately prevented their attendance.

Some stakeholders expressed the desire to survey seniors themselves to learn more about what seniors think would help them remain at home and connected to community. While surveys such as these run the risk of raising service expectations unrealistically, if conducted while managing expectations, such an activity could provide important knowledge resources to the community and Better at Home program in the long run.

The top three service needs identified were:

1. Deliveries (of goods from outlying towns/villages)
 - a. groceries
 - b. prescriptions
 - c. other items
2. Socialization
 - a. group social activities, in particular
 - b. friendly connections/visits/linking
3. Help around the home
 - a. yard work in summer
 - b. snow clearing in winter

Other service needs mentioned included firewood supply and community gardens. There was also a suggestion to use the existing paramedics while off-duty to conduct home visits and check-ins with seniors. While other Better at Home programs sometimes form partnerships with local groups (e.g. fire department to check smoke alarms), Better at Home cannot support the provision of health-related services.

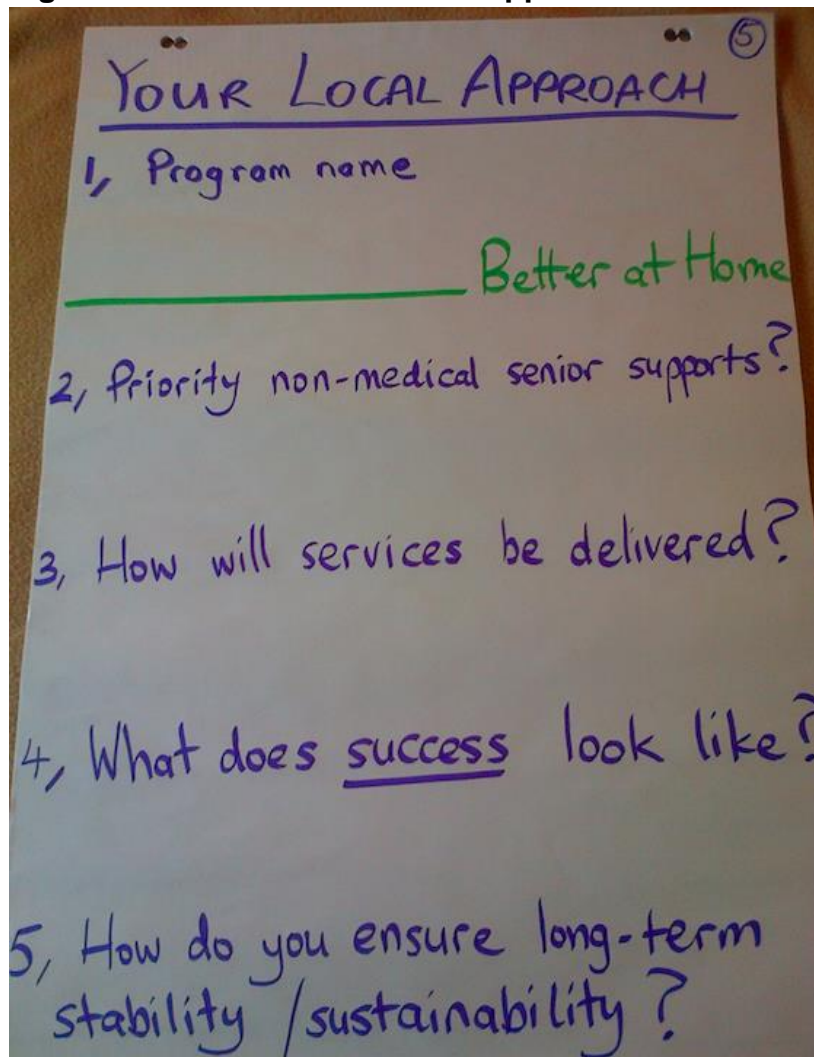
It was also considered important to have someone to coordinate services and act as a contact point for seniors. Currently there is an information gap in Granisle because people do not know who to contact and how to coordinate the services. Similarly, there are affordability gaps: even if seniors know who to contact and how to coordinate services, many of them cannot afford the current rates so are forced to forego services.

5. Local Better at Home Pilot Program Approach and Details

A Working Group will be formed out of the initial stakeholder group, and may evolve to include a broader section of the Granisle community. Based on local community strengths and identified service priorities, a Better at Home approach will be designed to enhance local capacities and collaboration in order to provide seniors non-medical supports in a locally appropriate way, with an eye towards long-term sustainability.

The stakeholder group discussed a number of program approach options at the March 4th meeting. Key points and questions that guided the discussion are shown in Figure 4.

Figure 4: Local Better at Home Approach



5.1 Program name

The stakeholder group decided that the program name would be **Granisle Better at Home**. This is in keeping with general Better at Home program naming conventions (e.g. Prince George Better at Home, Kitimat Better at Home, etc.)

5.2 Non-medical services to be provided

As discussed above, the key seniors non-medical support services planned for Granisle Better at Home will be

1. Deliveries (of goods from outlying towns/villages)
2. Socialization
3. Help around the home (yard work/snow clearing)

Whilst the above services are expected to be key, Granisle Better at Home plans to be flexible and responsive to the evolving needs of local seniors. The program will focus on providing the services that will help to keep seniors independent, at home, and connected to community.

5.3 How will services be provided?

Service provision will depend on the availability of volunteers, staff, and/or contractors in Granisle.

Deliveries:

- It was suggested that a pool of drivers be recruited so that one driver could go to neighbouring towns/villages each week. Drivers would be reimbursed for their mileage and in return, would pick up goods and bring them back to Granisle. The Better at Home coordinator is expected to gather requests from Granisle seniors regarding goods to be picked up.
- In the case of groceries, suggestions were made for connections to be formed with Overwaitea, Canadian Superstore, Good Acres, SuperValu, etc. so that seniors could shop-by-phone and pay using pre-determined accounts. This means drivers for Better at Home could simply pick up the goods while in town and deliver them upon returning to Granisle.
- This service is expected to be particularly in demand during the October-March season when the roads are difficult to traverse.

Socialisation:

- A variety of options was discussed, including group social activities where meals are shared and a range of interesting activities pursued (e.g. card games, bingo, board games, movie night, etc.)
- Evening events are particularly lacking
- These socialization activities were deemed important for members of the community that are isolated and do not connect well with other community members on a regular basis.

Help around the home:

- In winter, many seniors need help clearing snow from driveways, walkways, and roofs
- In spring and summer, help around the yard and home is more needed
 - o yard work
 - o painting touchup jobs
 - o spring cleaning

While Better at Home is not generally used to support the purchase of supplies and cleaning materials, suggestions were made for applications to be made to the local Credit Union and/or Vancouver Foundation for funding to purchase supplies, wheelbarrows, rakes, shovels, etc. to support these activities under Better at Home.

The Working Group reiterated the need to be flexible with program design and delivery because it is unclear how many services will be needed, where the exact needs will lie, and the best way to deliver them.

Age criteria: discussions decided that seniors 50 and above would be eligible to apply for Granisle Better at Home services.

The importance of forming a Working Group and/or eventually an Advisory Committee was discussed. Initially, the Working Group could support and guide the set-up, planning, and implementation of the Granisle Better at Home services. As there is quarterly reporting, the group could meet around the quarterly reporting time to discuss the data, challenges, successes and other program issues, and make recommendations on program improvement and support. This group would also support the hiring and guidance of a paid coordinator position.

Lead Organization: the grant will be administered by the Village of Granisle and supported by a Working Group/Advisory Committee.

Staffing: a part-time program coordinator position was recommended. This position would be an informational contact point, service coordinator, and may also deliver services if necessary. The job description is under discussion.

Flexibility: Granisle Better at Home is committed to finding creative and innovative ways to support seniors to remain at home and connected to community. As such, particularly in the first year, the program will be particularly flexible and responsive to seniors' service needs and their suggestions for how these services could be delivered. This may result in service delivery approach changes as successes are monitored—flexibility will be key to program delivery success.

5.4 What does success look like?

The March 4th 2015 stakeholder meeting discussed what success would look like for the Granisle Better at Home program. Participants described success as:

- having the choice about remaining in community (because Better at Home services are a helpful option)
- seniors knowing they can hire someone for snow clearing and yard work without trouble

- having some of the everyday services that other communities have be available in Granisle
- seeing a general betterment in the community because of stress reduction
- making seniors' lives 'better at home'
- linking people more to existing supports (e.g. information about home support)
- talking to people in community for the first time (more connectedness)
- the Granisle population is maintained or grows (people have the choice and are able to stay so the community does not lose people)

5.5 How will you ensure long-term stability and sustainability?

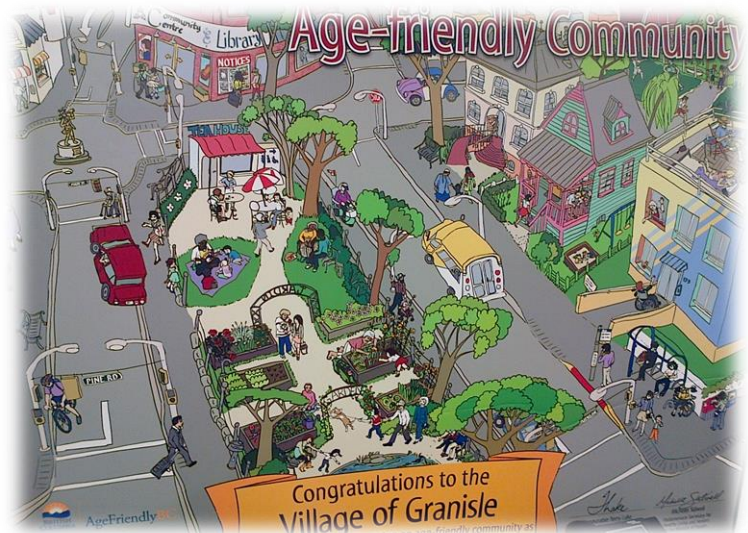
Finally, the stakeholder group discussed how Granisle Better at Home program could create an approach that would be stable and sustainable in the long term. In addition to not damaging existing supports, and instead enhancing them, the group noted that stability and sustainability would be achieved by:

- Finding out what people need and keeping that top of mind (being flexible and able to respond to changing needs)
- Getting Northern Health involved in and connected to the program
- Connecting closely with Home Support to support seniors broadly
- The community choosing to participate in Better at Home
- There being high levels of interest and involvement
- The creation of a strong and supportive Working Group
- The issue and program being supported and spearheaded by the Council (this makes it part of the regular Village program)

6. Granisle's Readiness

Interactions with Granisle representatives, both in-person and long-distance, showed intense commitment to seniors' issues and interest in participation in Better at Home. As an Age-Friendly Community, Granisle has already acknowledged the importance of committing energy and resources to supporting seniors.

Granisle clearly has the interest and capacity to pursue the next stage of pilot program engagement. The next stage will involve setting up a Working Group, creating appropriate partnerships, and formulating the details of a pilot Better at Home program to support Granisle seniors.



7. Potential Risks

As with many small communities, the volunteer base is small and tends to be the same people repeatedly donating time and energy to community initiatives. Any Better at Home approach designed by Granisle should keep volunteer capacity in mind. The stakeholder group has already discussed the importance of staffing and finding solutions for paid service options. These may be found in and around Granisle (including potentially workers from the Lake Babine Nation).

8. Next Steps

Following the March 4th 2015 stakeholder group meeting, and based on the discussions that took place, the Village of Granisle will prepare an application for Better at Home funding. This will include an overall application, budget, and work plan. The application gives an overview of the planned seniors' non-medical support services to be provided, where, when, how, and by who, within Better at Home. This funding application is due to the United Way of the Lower Mainland in early March.

In order to receive funding by April 1st, the application, work plan, and budget need to be finalized in early March. United Way's Better at Home Provincial Office (represented by Debbie Sharp) will be corresponding with and supporting the Village of Granisle during this process.

Acknowledgements

I would like to acknowledge the tremendous response from stakeholders in the Village of Granisle, particularly considering the short timeframe the community was presented with. Thanks go to the Village office for the use of their space, and to the council for the overwhelming turnout.

These are initial steps towards creating and sustaining locally appropriate, long-term supports for seniors in Granilse. The Better at Home Provincial Office looks forward to supporting the process as we move towards funding this exciting process from April 2015, and learning innovative rural and remote strategies for supporting seniors in the months to come.

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