Meeting with MP Joanne Thompson October 10, 2023 @ 2:00 PM NT

Note: this meeting was originally scheduled for August 24, 2023, but had to be rescheduled due to time constraints.

Topics for Discussion:

Introductions.

We would like to address with you, the following:

- Minister of Seniors: Congratulations have been extended to Minister Seamus O'Regan on his appointment to the portfolio of Minister of Seniors. However, the media keeps reporting the portfolio as Minister of Labour and Seniors. Could you clarify that the Ministry of Seniors remains an independent Department and has not been combined into a joint department with Labour?
- National Seniors Strategy: This Coalition is still calling for the establishment of a National Seniors Strategy. We have been raising this matter for several years now and we continue to be disappointed that there is no commitment to such a Strategy. While no revised Mandate Letter has yet been issued for Minister O'Regan, we are assuming that the Mandate Letter to former Minister Khera remains current. As referenced before, the directions for Minister Khera were not founded in any overall Government strategy that is guided by Principles and Values that guarantee aging persons a decent, respectful, and acceptable living as they journey through their senior years. This portfolio places a lot of emphasis on the New Horizons for Seniors Program and working in collaboration with the Ministers of Health, Justice, and Families, Children and Social Development to deliver on programs/strategies that are sourced in these other portfolios. Given what has been well documented and what we all know about our aging demographic and the vulnerabilities of aging persons, it is time that the Government of Canada directed the development and

implementation of a National Seniors Strategy. This Coalition remains a strong advocate for a National Seniors Strategy.

- There was some suggestion a couple of years ago that the National Seniors Council would be conducting consultations across the country that could possibly inform a National Seniors Strategy. However, a recent website check shows that the Minister with the Minister of Health has directed the NSC to be the expert panel to examine measures to support Canadians in aging at home. Again, all these actions, while important in their own singular right, need to be founded in a National Seniors Strategy.
- O Health Care (General Statement). There is an acute need for all governments to address the deterioration of the delivery of health care and services at all levels and the increasing shortages of health care workers and facilities including family doctor shortages and facility closures with more announcements on restricted delivery times on a daily and weekly basis. Health Care is operating at its lowest point and it seems that very little is being done to make the services available to the people who need it most our vulnerable seniors.

As the NL Health Accord has so clearly stated, this Province needs an immediate health care transformation. Family doctors are not available to over 125,000 Newfoundlanders and Labradorians, people are going without care due to long wait times in emergency as they have no other recourse, community clinics have a backlog and the wait times and competition for appointments is alarming, staffing is at an all time low in all health care and affiliated professions, and yet Governments still talk about protecting our public health care system. Those who can afford and those who cannot without cost to themselves are being forced to private clinics for simple preventative health measures to try and stave off a more demanding illness requiring serious medical intervention. This is a wakeup call to everyone. Stop the rhetoric and begin actions.

- Most of the following points should serve as impetus actions to improve the lives of all Canadians.
- National Universal Pharmacare: Canadians have been waiting for a National Pharmacare Program for 55 years. The Supply and Confidence Agreement between the Liberals and the NDP gave some hope that the pharmacare plan would roll out a lot quicker but there remains doubt and skepticism that a Canada Pharmacare Act will happen before the end of 2023.
- Multiple reports have detailed how including medicine in our publicly funded system would improve access, improve health, reduce the need for hospitalizations, emergency room visits, as well as save billions of dollars through direct savings by lowering prices. In 2019, the report of the Federal Advisory Council (Dr. Eric Hoskins) stressed how people's lives can suffer if they skip needed prescription drugs, and noted a Canada-wide program could eventually lead to system-wide savings of nearly \$5 billion annually. Other research tags the suggested savings to a higher amount.
- While we understand industry resistance to a universal, national pharmacare program could be part of the reason stalling keeps happening, we were at least hopeful that the test program with PEI would have led to some decision-making by now.
- o In the Mandate Letter of the Minister of Health (2021) it was directed to "continue engaging with willing provinces and territories towards national universal pharmacare, while proceeding with a national strategy on high-cost drugs for rare diseases and advancing the establishment of the Canada Drug Agency". While this newer direction in 2021 had some hope that "willing jurisdictions" would see the benefit of a dedicated pharmacare program, we remain fearful that all the advocacy for a *universal pharmacare program* will have been for naught if it is not universal for all Canadians.

- As has been stated many times, there is no need for more research and more delays. And there definitely needs to be action to ensure "universality" is inclusive of all, anywhere in Canada, without provincial/territorial conditions and with built in accountability measures to ensure a full universal program.
- We welcome your comments.
- Safe Long Term Care Act & National Long Term Care Standards. On January 31, 2023, the Government of Canada was pleased to release two independent LTC standards from the CSA Group and the Health Standards Organization (HSO), which are intended to provide guidance for delivering services that are safe, reliable, and centred on residents' needs. This Coalition thoroughly reviewed the Standards when they were in draft format and presented feedback during the consultation process. To say we were disappointed when they were released would be an understatement. In the opinion of this Coalition, these Standards are more akin to "Guiding Principles" and do not have the teeth needed to improve the residential care needs of persons requiring such accommodations.
- Towards the end of July, former Minister of Health Duclos and former Minister of Seniors Khera announced a 60-day public online consultation process to support the development of a Safe Long Term Care Act. First, this timeline is too short. Second, will there be any in-person stakeholder engagement sessions to inform the Act?
- The invitation to participate in the online consultation process quotes principles such as choice, person-centred care, and respect for LTC residents, and enabling a healthy and competent LTC workforce. Particularly, the consultation is to seek input on:
 - 1. the quality and safety of LTC;
 - 2. our ability to meet the national LTC standards;
 - 3. opportunities to address health human resource challenges in LTC; and

4. public reporting on LTC.

This Coalition is very concerned if the Act is to be driven by these LTC Standards. We are concerned that the Government's approach to the *Safe Long-Term Care Act* might be too weak to bring about the changes required to fix the troubled health care sector, such as enforcing national standards, phasing out for-profit investors, and ensuring accountability for funding.

Already, Health Canada has signalled a more timid response than the federal government previously committed to taking. Health Canada officials have declared the new legislation will not mandate standards and will leave regulating long-term care to the provinces.

"Legislation will be respectful of provincial-territorial jurisdiction.

That is, it won't mandate standards or regulate long-term care delivery."

While we remain hopeful that the Act, when developed and approved, would have accountability applied to the provincial/territorial jurisdictions to force compliance with the law, we are dubious given the statements that are emanating from Health Canada. Historically, there has been a reluctance to apply accountability measures against the provinces and territories for their implementation and management of health care. This position is reinforced by an earlier statement from Minister Khera that the enforcement of the National Standards would not be as easy as it might appear. Her comments indicated that some jurisdictions had indicated they already had higher standards in place and would be opposed to having "lesser level" standards imposed on them. This Coalition offers that if a P/T jurisdiction has higher standards then there should be nothing preventing them to deliver on higher quality care and that the Act could, in fact, enshrine these higher-level provincial benchmarks.

 Aging At Home. The memberships of this Coalition and the research that was done to support the NL Health Accord clearly and strongly state that persons wish to age well at home or in their communities, but to achieve this, there must be a significant shift in how health care services are managed. Transforming health care from an acute care model (where some 80%-90% of all health care dollars are spent) to a community-based model that strives to improve on the social determinants of health will not be an easy task. It requires a commitment from all levels of Government and community partners to a transformative strategy.

In June of 2022, Minister Khera announced the launch of a new initiative called Age Well at Home, which was intended to help seniors stay in their homes for as long as possible by providing them with practical assistance for everyday tasks. The federal budget of 2021 provided \$90 million dollars of funding over four years, starting in 2022-2023 for organizations to apply for funding for projects under two streams: In-Home Support Pilot Projects and Scaling Up for Seniors. While project funding is helpful, this Coalition remains concerned that the greater percentage of the funds will go towards the infrastructure costs of the agencies, thus having little impact on improving the accessibility to the resources that older persons need to age well at home. This Coalition has called for and is still calling for a full-on discussion and direction amongst all Governments working together cooperatively to transform health care delivery in Canada from an acute care model to a community care model. Such a transformation will not only reduce the stress on acute care resources but will have a direct impact on resolving Canada's longterm care crisis.

On October 6, 2022, the Minister of Seniors and the Minister of Health directed the National Seniors Council to serve as an expert panel to examine measures to further support Canadians who wish to age within the comfort of their own homes. The Objectives established for this direction include:

- Identifying existing measures in Canada as well as international best practices that help seniors age at home;
- Identifying the reasons that prevent seniors from aging at home and assess the areas of greatest needs to help identify domains of actions;
- Identifying and assessing current and potential new measures that could address the areas of greatest need to support aging in place, taking into account the government fiscal constraints.

To respond to the direction from the Ministers, the National Seniors Council intends to lead activities such as:

- Research
- Convening experts, and
- Consulting with seniors, their caregivers, and representatives of organizations serving or advocating for seniors.

Are you able to provide a status report on this work? Have the consultations begun? Will there be or has there been consultation within this Province?

• Preventative Health Services. This Coalition is of the strong opinion that actions that prevent folks from becoming sick are paramount to a speedy recovery from any illness and create a society where illness cannot gain a foothold. As many times before, this Coalition is asking that the Government act to enable the provision of vaccinations for all illnesses that would be beneficial to healthy living, not just aging. Vaccines such as the high dose flu shot, shingles vaccine, etc. must be a top priority. This comes full circle to a national universal pharmacare program. While we compliment the Government on its actions around dental care, attention must also be given to adult eye care, foot care and other allied health services such as chiropractic, massage, and physiotherapy which are far less costly than acute care admission and enable persons to age at home or in their community for as long as possible, if also supported by personal care and home maintenance services.

o Family Caregiver Support. Because of the high cost of private alternatives and the limited resources for service access, most home care needs in Canada could not be met without the fundamental support of unpaid family/friend caregivers. Because of this lack of resources, more folks are ending up in institutional residential care facilities or acute care, when funding, day programming, respite care and other in-home supports for families could help alleviate the burden on the health care system and provide some relief, enjoyment of life, and personal time for family caregivers.

Although caregiving can and most likely will be the first choice of families and be very rewarding, it has negative effects. Family caregivers often experience considerable stress and subsequent health problems, isolation, fatigue, and frustration, sometimes leading to a sense of helplessness and exhaustion. Also, the effect on the caregiver is likely to be greater when the family member has a serious disorder and/or a severe disability and more care is required. Caregiving can also become a financial burden, especially if the family resources are not sufficient or when a working caregiver needs to leave full-time employment or reduce work hours to accommodate caregiving. In these situations when they become unbearable for the caregiver, the older person is often abandoned to the acute care system or long-term care. This must be unacceptable, yet it is happening every day. If there is true commitment to caring for elderly persons at home or in the community, then the resources need to be available to deliver on this direction.

- Elder Abuse. We could find no update on the direction in the Mandate Letter for the former Minister of Justice that directed the Minister to work with the Minister of Seniors to strengthen Canada's approach to elder abuse by:
 - a. Creating a national definition of elder abuse;
 - b. Investing in better data collection and law enforcement related to elder abuse; and
 - c. Establishing new offences and penalties in the *Criminal Code* related to elder abuse.

In 2021, our Province enacted Bill 40, Adult Protection Act, 2021 and Regulations to support this act were approved in December 2022. If our provincial legislation and regulations are to be fully effective, the amendments to the Criminal Code are needed to ensure the elimination of elder abuse and that the penalties for such criminal behavior will be dealt with severely.

Can you provide an update on this direction to the Minister of Justice?

 Ageism. The F/P/T Ministers Responsible for Seniors Forum launched a consultation on ageism, which opened on August 15, 2022, and closed on October 31, 2022. The Ministers looked to better understand and address the negative impacts of ageism towards older adults in Canada. The consultation was intended to focus on ageism towards older adults in Canada, how they experience it, and potential solutions to address it. A What We Heard Report was to be produced following the consultations, with a final report to follow to enable FPT governments to consider how they may address this important issue. One report, An Examination of the Social and **Economic Impacts of Ageism**, covering source documents from 2014 to 2019, was released in February 2022 and contains reference to some 122 actions that are happening within Canada and on the international scene. Programs, such as intergenerational activities, age-friendly community initiatives, growing older at home, incentives to work longer, etc. are all laudable and more are needed. But, what really is needed is a total shift of thinking and cultural approach so that older adults are not seen as a burden but as productive, dependable, experienced, and valued members of the community.

This brings us to another issue that is intrinsically tied to ageism and that is older workers in the work force. Across Canada, there is a crisis of unavailable employees, for multiple reasons. It is not the reasons that we wish to address but more importantly how we can

support older persons who wish to return to work or continue to work beyond retirement while at the same time, supporting employers to be successful in their lines of business. Minor changes to tax rules, businesses offering more workplace flexibility, and some accommodations for mobility challenges could have a huge positive impact on re-sourcing the employee crisis that would be both productive for employers and older persons alike. Older workers have proven attitudes and attributes of loyalty and reliability but unfortunately these do not outweigh the negative ageist stereotypical attitudes of resistance to change, decreased capacity to learn and decreased productivity which employers have unfortunately assigned to be higher in younger workers. A cultural shift in thinking and positive promotion could go a long way to shifting these ageist opinions for more positive social and economic outcomes.

- o Cost of Living & Financial Security. This Coalition acknowledges all past and new initiatives to put more money into the hands of Canadians, especially older persons. Notwithstanding these undertakings, however, the continuing increases to ordinary everyday living, such as the cost of groceries, medications, home heating costs, fuel, and some social activities are an everyday worry and concern for most Newfoundlanders and Labradorians. There is nothing more disheartening than being in the aisle of a supermarket and seeing folks, of all ages, putting products back on the shelves because the costs are beyond their means. Any hope of relief is fast diminishing for most folks, as the rhetoric about increasing production costs, climate changes, carbon tax, delivery delays, and so on are getting stale and unlikely to offer relief.
- This Coalition will continue to press for action that will reduce (if not eliminate) the rate of poverty amongst older persons. Although this Coalition has had multiple consultations and meetings during the consultation phases of the development of the NL Social and Economic Well-Being Plan (Poverty Reduction Plan), we have yet to

see the draft of the Plan or when the promised Community Summit will be held. We will, of course, be following up on this with Minister Paul Pike of CSSD.

New Horizons for Seniors Program. While the member associations of this Coalition are grateful for the funding that they have received from the New Horizons for Seniors Program, there are some issues with the application process that we wish to address with you. These issues have proven to be frustrating at times and could certainly have led to some organizations not applying for the funding that was available. Such issues include: the application forms are not easily accessible; they cannot be downloaded; too complex to manage (if you run into a section that you may need to seek information to answer, you cannot continue on to get as much done as possible in the time window; every year, there are internal section issue: if you seek help, it may take up yo 2 days to get an answer and in some cases the trouble could not even be fixed by the technicians; the application fill-in is times, 24 hours to complete, and the clock does not stop if you run into a problem nor can you go forward.

Surely, it cannot be too difficult to fix these problems, so that agencies who have eligibility to apply can have easier and simpler access in the application process?

Thank you for your time today. Best wishes with the business of the people in the House of Commons over the next Sitting. We welcome more such opportunities as this into the future.