



Provincial Summit on Aging

Report on Key Learnings
& Next Steps



Provincial Summit on Aging – Report on Key Learnings & Next Steps

This report was prepared by the primary organizers of the Summit: the Raising the Profile Project (RPP), United Way of the Lower Mainland, Active Aging Research Team (AART) at the Centre for Hip Health and Mobility (CHHM), City of Surrey, and the British Columbia Recreation and Parks Association (BCRPA).

AIM OF REPORT

The aim of this report is to share the important issues, learnings, and next steps identified at the inaugural **Provincial Summit on Aging** (the “Summit”). This report will be usable by those who attended the Summit, those working in community-based seniors’ services (CBSS) in British Columbia, and other stakeholder groups that support older adults or those interested in community driven development. The intention is that the information in the report can be used by communities and stakeholder groups with the goal of building capacity for CBSS. This report also covers updates from the Summit organizers.

SUMMARY: OUR PLAN FOR MOVING FORWARD

WHAT WE HEARD

- ☐ Participants were excited for the opportunity to convene and to connect with others from across the province.
- ☐ There was strong acknowledgement of the timeliness of the Summit.
- ☐ A range of concerns were expressed about program resources, organizational capacity and sustainability, and the challenges of a growing population of seniors with more complex needs, and many with barriers to accessing support.
- ☐ There is strong interest in greater communication, coordination, and collaboration, and in the development of a more cohesive sector with sustainable funding.
- ☐ There is significant interest and anticipation in the development and launch of the *Knowledge Hub* in 2018 as a central point of connection and content.

WHAT WE ARE DOING – SHORT TERM:

- ☐ We have secured funding for the *Knowledge Hub* and hired a coordinator to manage the hub and other capacity building initiatives, such as Volunteer Engagement, Training and Mentoring, and investing in developmental evaluation, leadership development and policy dialogue.
- ☐ We are in the process of transitioning the Raising the Profile Project into the Healthy Aging Department of the United Way of the Lower Mainland, and maintaining community input

into decision-making through the Leadership Council, which is made up primarily of representatives from the RFP Advisory Committee and Seniors' Reference Group.

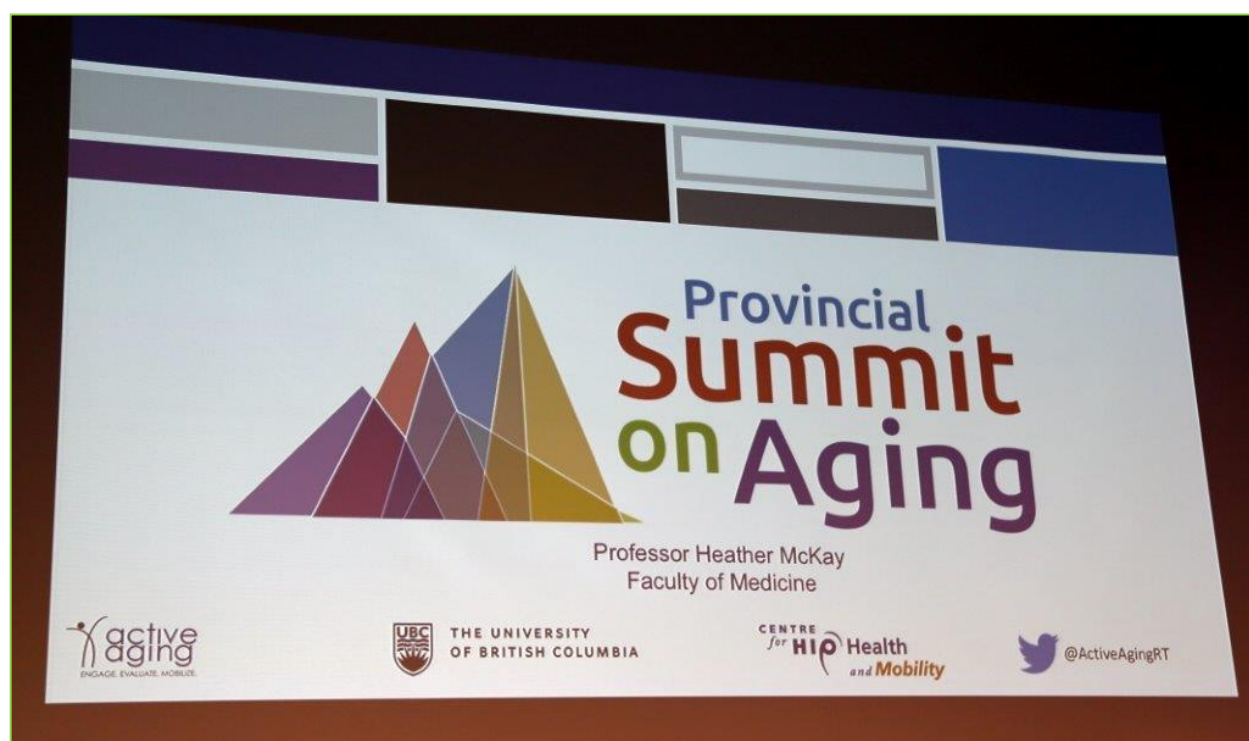
- ❑ We have initiated the CBSS Leadership Council to ensure the voices of community and seniors are involved in: guiding the development of the *Knowledge Hub*; helping to identify systemic and emerging policy issues; and supporting ongoing outreach to CBSS across BC, including the already existing and newly emerging Local Seniors Planning & Action Tables.
- ❑ We continue to publish the e-newsletter started by the Raising the Profile Project (RPP) and are working with the Leadership Council on a transition plan for the RPP website and other communication tools related to the *Knowledge Hub*.
- ❑ We have convened a Funders Table that, to date, includes 30 regional, provincial, and national organizations providing funding to CBSS in BC. The Table has developed an inventory of the different organizations that fund CBSS, and is in the process of collecting and reviewing their funding guidelines.
- ❑ We are seeking input and ideas for *Knowledge Hub* development, and will be encouraging contributions of resource materials, stories, directories, and other relevant content.
- ❑ We are encouraging widespread support of the Declaration, and identifying examples and approaches for using it as an engagement tool in communities.
- ❑ We are developing and implementing training opportunities for organizational capacity building and sector strengthening.
- ❑ We have organized meetings with the provincial government and with other community funders in efforts to secure increased funding for locally-based CBSS.
- ❑ We are developing a municipal caucus to encourage the Union of BC Municipalities (UBCM) to develop policies on the municipal role in supporting healthy aging and ensure a higher profile for the sector at the next UBCM meeting in September 2018.

WHAT WE ARE DOING – LONGER TERM:

- ❑ We have committed: to organizing bi-annual regional consultations and “Summits” as important forums to build on the Declaration from the inaugural Summit; to continue to highlight effective programming and collaborative initiatives; to strengthen and evaluate collaborative initiatives already underway; and to strategize how to address systemic challenges.
- ❑ The Funders Table will work to identify disparities in funding across the province; compare the actual investments with the priorities identified by the sector; balance innovation with on-going support for proven programs; and support collaborative initiatives.
- ❑ We will be advocating for and supporting the development of new Local Seniors' Planning & Action Tables that include older adults from community, leaders from CBSS organizations, municipal government representatives, health system representatives, and those from the broader seniors' community. The aim of these Tables will be to identify and prioritize concerns, and develop coordinated and effective strategies for addressing these concerns.
- ❑ The United Way's Healthy Aging Department will continue to publish the e-newsletter started by the RPP, and is working with the Leadership Council on a transition plan for the RPP website and other communication tools related to the *Knowledge Hub*.

WHAT YOU CAN DO:

- ☐ With this report in-hand, organize a special meeting with your board of directors, or a community meeting to share highlights from the Summit. In this meeting, you can provide information on the initiatives being developed provincially to support on-going learning and capacity building locally – and you can explore what you as a community might want to do next. A PowerPoint presentation based on this report will be available to help guide these discussions.
- ☐ Reach out to organizations and individuals in your community that have an interest in supporting seniors' independence, resilience, and social connectedness, and ask them to sign on to the Declaration (see Appendix 1).
- ☐ Organize a delegation to your municipal council or regional district to let them know about the support for the Declaration locally, provincially, and nationally (see Appendix 2), and ask them to sign on to the Declaration.
- ☐ Participate in a Local Seniors' Action & Planning Table, and if there isn't one yet in your area, start one!





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INTRODUCTION

On November 2nd and 3rd, 2017, the [City of Surrey](#), in partnership with the [Raising the Profile Project](#), [BC Ministry of Health](#), the [Active Aging Research Team](#) at [UBC](#)'s [Centre for Hip Health and Mobility](#), [United Way of the Lower Mainland](#), [United Way's Better at Home Program](#), and the [BC Recreation and Parks Association](#), hosted the inaugural **Provincial Summit on Aging** (the "Summit").

Research and community consultations (see the [Raising the Profile Project Community Consultation Report](#)) across BC have revealed that there is a lack of recognition of the vital role Community Based Seniors' Services (CBSS) play in supporting seniors' overall wellness. CBSS, which includes non-profit and municipal seniors' service providers, are increasingly looked to for delivering health promotion and prevention programming that supports seniors' independence, resilience, and social connectedness. Currently in government, and in the public spheres more broadly, there is a lack of understanding and recognition of the important role CBSS play in supporting seniors' well-being and ability to age in place.

Raising the profile of the ever-expanding scope and expectations of CBSS in supporting the health of aging British Columbians is vital in garnering the commitment of the federal, provincial, and municipal governments, community funders and others to provide adequate resources and sustainable funding for community-based seniors' services. The burgeoning aging population and expanding scope of needs within this population underscores the importance of uniting the CBSS sector and building strong, collaborative relationships with a broad range of funders and community partners locally, regionally, provincially, and nationally. For a framing of the issues and literature review, please see the [Raising the Profile Project Literature Review](#).

The **objective** of the Summit was to raise the profile of the CBSS sector and to increase its capacity to meet growing demands, while exploring opportunities for knowledge sharing and networking.

SUMMIT GOALS

The Summit proceedings were positioned around a number of important goals:

- Showcasing the key role of the not-for-profit sector in providing health promotion and prevention programming for seniors and identifying how to work collaboratively within and across the sector.
- Sharing stories and providing research evidence on the impact of community-based health promotion and prevention programming on seniors.
- Showcasing collaborative work within and across the sector.
- Facilitating networking among leaders from across the province.
- Highlighting the Declaration, which recognizes the importance of CBSS in supporting seniors' independence, resilience, and social connectedness.
- Engaging in issue dialogues to identify challenges and explore opportunities for building capacity and collaborative solutions.

For details on the Summit proceedings click on the [link](#) to the Summit program.

A UNIFYING DECLARATION

One of the mechanisms employed for increasing the capacity of CBSS is to unite under a shared Declaration that recognizes the importance of CBSS health promotion and prevention work and the need for capacity building. The Declaration also acknowledges the importance of closer collaboration between non-profits, municipalities, and the provincial health system to maximize the potential for older adults to “age in place” and remain in their own homes and communities for as long as possible. The Declaration was signed by 140 key stakeholders and decision makers at the Provincial Summit on Aging and can now be used as an organizing tool in local communities.

The Declaration is a powerful tool for organizations and governments to commit to the importance and value of the CBSS sector and for unifying CBSS across the province. It remains essential for as many individuals and entities as possible to sign it. See Next Steps section for further information on how to encourage this, and on how to use the Declaration in local organizing.

PROVINCIAL PARTICIPATION

The Summit engaged 216 delegates from across the province with representation from various organizations invested in CBSS.

To the largest degree, the Summit was powered by participation of executive directors and managers from not-for-profit seniors’ serving organizations (45%) and older adult leaders working in the sector (25%), in either paid or volunteer roles. Also present were representatives from local governments (14%), the health system (8%), academia (4%), and government and community funders (4%).

Delegates from CBSS were invited to participate in the Summit, with representation proportional to the population distribution across the Province of British Columbia. Categorized by health authority, 32% of delegates came from within the Vancouver Coastal Health region, 30% from the Fraser Health region, 19% within the Island Health region, 14% within the Interior Health region, and 6% within the Northern Health region.



“Like many non-profits we are heads down and working individually to support seniors. The time is right for us to look up and out of our organizations and figure out how best to serve in the future.”



DRIVEN BY DELEGATE INTERESTS

The Summit proceedings were designed based on the interests and needs of those working in CBSS that emerged from the [community consultations](#) organized by the RPP, as well as from other stakeholder meetings.

In addition, prior to the Summit, an online survey was sent to delegates to gain insight on their interests and their reasons for participating in the Summit. Seventy-nine (37%) delegates completed the survey. Of those who responded, 52% indicated they wanted to meet others who are able to help them move forward with a specific project or concrete objective related to senior services provision. Another 36% stated they sought new knowledge – the opportunity to learn from the experience of other organizations and take that information back to their work. The remaining 8% of respondents stated that they craved new or deepened connections – they were most interested in uniting with new or longtime colleagues and wanted to stay connected on areas of mutual interest.

Through the comments shared in this online survey, delegates underscored that they were excited for the opportunity to convene. From the interactions observed and the survey data, there was strong acknowledgement of how timely the Summit was – and how meaningful the opportunity to connect with others from across the province is.



“I believe conferences serve a valuable purpose in that they provide a platform for the exchange of knowledge and experiences between people who would have very little opportunity to do so because of location and time constraints.”



ENCOURAGING DIALOGUE

The Summit opened with an insightful presentation by Dr. Joanie Sims-Gould and Kahir Lalji. They spoke about how the proportion of seniors in Canada is increasing – based on projections, there may be 40,000 centenarians by 2050. To illustrate the range of experiences among a number of older adults in BC, and to demonstrate the importance of *destinations* and *purpose* in the lives of older adults, three short documentary vignettes produced by the Active Aging Research Team (AART) were shown (for access to all vignettes, [click here](#) to visit the AART website). This message of the varied experiences with aging, and the importance of *destinations* and *purpose* was not new to those working with older adults, but the vignettes eloquently captured the lived experienced of seniors and the imperative for a united CBSS sector in BC.

The presentation concluded with two questions: “What do older people need to remain in their homes, neighbourhoods, and communities?” and “What do community-based organizations need to do to make this happen?”

EXPLORING THE CORE SERVICES

Delegates participated in two breakout sessions focused on one of the core services. Through a mix of presentations and small group dialogue, these sessions highlighted grassroots examples of CBSS programs and provided a learning space to collectively identify opportunities and generate actions for each core service area. Below are the key learnings from each session.

There are six core services that define the CBSS sector. They aim to maintain and improve seniors' health, resilience, and social connectedness:

- Transportation
- Physical Activity and Recreation
- Information, Referral, and Advocacy
- Nutritional Supports
- Wellness, Education, and Creative Arts Programming
- Affordable Housing

A review of each core services area is provided on the Raising the Profile Project website; follow the [link](#) for a summary. The breakout session summaries below capture the key learnings from the delegates' exploration of each core services area. (Note: these are not comprehensive summaries, but reflect the dominant themes from the sessions).

TRANSPORTATION

Context

Age-related and health-related conditions can significantly reduce seniors' mobility. One third of Canadian seniors aged 65-74 and one half of seniors 75 plus have reduced mobility. Reduced mobility is generally correlated with poorer health and greater dependence on acute services. To increase individual physical mobility, transportation options are critical for seniors to retain their quality of life, ability to live independently, and stay socially connected. See the Raising the Profile Project website for a summary of issues related to [Transportation](#). Also, the recent BC Seniors' Advocate Report, [Monitoring Seniors' Services](#), Dec 2017 provides a comprehensive review of current transportation options for seniors.

Key Learnings

- In discussions, delegates agreed that it is vital to build cross-sectoral partnerships and relationships among community not-for-profit organizations, who are connected to and understand seniors' transportation needs, and larger institutional partners who have the resources to help address gaps in service provision (e.g. municipal governments, transit authorities, health system). Resources to implement collaboratively identified solutions are vital if these groups are to actually explore options together. A collective impact project could provide the opportunity to share visions, goals, progress, and evaluation findings in a structured way. Transportation initiatives can further benefit from alignment with current policy opportunities, such as Age-Friendly Cities.

- Delegates acknowledged the high reliance on volunteers to provide transportation services within the CBSS. Delegates felt that it is unrealistic to assume volunteers can continue to provide this level of transportation services, particularly with the growing number of older seniors with significant mobility challenges.
- One of the ways to address the growing number of older seniors without driver's licenses is to host advanced personal planning workshops and educate seniors on options for "life after licenses."
- For those who require on-going transportation support, person-centered services need to be funded by all levels of government and designed to ensure that seniors at risk of being socially isolated (i.e. those on limited incomes, from marginalized communities, and/or with limited mobility/chronic health challenges) have easy access to these services. One very specific suggestion was that Handy Dart services be significantly expanded.
- To support the development of transportation services, it is important that insurance toolkits are offered to service providers to help them understand and address insurance requirements. Furthermore, regulations require modification so that shuttle services offered by programs are not seen as competition to taxis.

PHYSICAL ACTIVITY AND RECREATION

Context

Recreational programming is provided by the vast majority of CBSS agencies and this programming makes an important contribution to seniors' health and well-being. The [Framework for Recreation in Canada](#) defines recreation as "the experience that results from freely chosen participation in physical, social, intellectual, creative, and spiritual pursuits that enhance individual and community wellbeing."

A big draw for seniors' participation in recreational activities, be it an art class or a dance class, is the opportunity to connect socially with others. And for seniors, despite how much they might love art or dance, they often report that they continue to attend programming because of the social relationships they have made and the prospect of creating new connections. Consequently, seniors who regularly participate in recreational activities tend to be less lonely, isolated, and at risk of mobility and health decline.

Physical activity is an important component of recreation and is about more than exercise and sport; it is also about maintaining functional mobility (i.e. the ability to move in one's environment with ease and without restriction) and supporting cognition.

Recent Canadian research shows that inactive seniors use significantly more health services and incur over 2.5 times the health care costs in comparison with physically active seniors (an additional \$5.6 billion/year). (See [link](#)) Clearly, regular participation in physical activity - whether in a recreational or utilitarian setting (i.e. opting to take the stairs, or mowing the lawn - is an imperative for older adults wishing to maximize their physical, social, and cognitive well-being. CBSS agencies have an important role to play in meeting the physical activity and recreational needs of seniors – and hence preventing health decline.

See the Raising the Profile Project website for a summary of issues related to [Physical Activity and Recreation](#).

Key Learnings

- Delegates discussed their observations that primary care physicians recognize the value of physical activity for the health and well-being of older adults – and that they have observed doctors “prescribing” physical activity for their patients and advising them of physical activity programs in their community.
- Aside from promoting the physical health benefits, another way to encourage older adults’ participation in physical activity and recreation programming is to highlight the social features of the programming. This can be done by offering refreshments and time to socialize, opportunities to bring a friend, or transportation support (i.e. carpooling), for example.
- Concerns were raised about physical activity programming that is progressive; that is, where participants move from one level to another based on mastery of the program components. This programming model ignores the importance of peer connections, and the fact seniors are often reluctant to move on to the next level without their friends.
- Ideally, older adult programming would have low or no fees, as cost can be a significant barrier to participation; however, this requires sustained funding sources.
- Transportation to and from activities is often a barrier to participation.
- It is challenging to get the participation of men in programs, so programming must reflect the needs and interests of men.
- It is difficult but important to reach isolated and frail seniors. One way to do this may be to “take programming to them” or to minimize the role of transportation and accessibility as a barrier and to maximize the assistance available to them.

INFORMATION, REFERRAL, AND ADVOCACY

Context

Information, referral, and advocacy services can support seniors’ individual resilience by connecting them to the resources necessary to increasing their ability to bounce back in the face of adversity, and maintaining their ability to live well because they are socially connected, able to find meaning and purpose, and problem solve. See the Raising the Profile Project website for a summary of issues related to [Information, Referral & Advocacy](#).

Key Learnings

- The complexity of seniors’ needs is increasing, and the acuity of seniors’ issues can be too much for volunteers to manage. Therefore, in the realm of information, referral, and advocacy, a standardized and accessible province-wide training program needs to be developed and offered to staff and volunteers. In addition, advocating for adequate staff to support volunteers is essential to ensuring that the resources and connections (e.g. to health and housing services) are in place to support higher needs seniors and prevent burnout among volunteers.

- In conjunction with a training program, a network where all centres can access resources would be beneficial, such as a centralized portal that allows different organizations to update their own information and access information from other organizations. When all of the information is in one place, finding and referring individuals to the appropriate services will become more streamlined.
- The wide range of languages and cultures in the province creates a challenge for this service area – both in communicating service opportunities, as well as in identifying services available in different languages and that are culturally appropriate. It is ideal to have translated materials or staff and volunteers who speak multiple languages, but this is not always feasible.

NUTRITIONAL SUPPORTS

Context

The risk of malnutrition is very real for seniors and high for vulnerable seniors in particular. 34% of community living seniors in Canada are at nutritional risk, with risk factors including: being female; having low income; living with complex conditions and/or disability; living alone; having low social support; and having depression. Higher nutritional risk is associated with a 51% increase in the likelihood that an older adult living in the community will be hospitalized. Also, eating alone is associated with poor nutritional health in seniors. See the Raising the Profile Project website for a summary of issues related to [Nutritional Supports](#).

Key Learnings

- When it comes to nutrition, most people can identify what constitutes healthy eating – it is just difficult, in practice, to actually eat healthfully. An opportunity to encourage good nutrition starts with offering workshops with basic education, such as meal planning, how to prepare and cook food, or time management (i.e. cook in big batches and freeze portions).
- In workshops or programs including food, it is important to remember to include culturally appropriate foods.
- To recruit attendees for meal programs, engaging non-traditional referral sources could be beneficial. This includes word of mouth via community members, businesses, and health organizations. On the other hand, a meal component can be added to existing programs that seniors attend to promote socialization and to ensure they are receiving a nutritious meal.
- In areas where meal programs do not exist, it is vital that isolated seniors have a form of transportation to grocery stores.
- If programs such as Meals on Wheels are expanded, consideration should be made to offer ethnic foods, depending on the area serviced.

WELLNESS, EDUCATION, AND CREATIVE ARTS

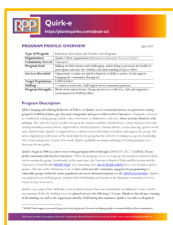
Context

Growing social support and building resilience underpins Wellness, Education, and Creative Arts Programming. Social support is a key determinant of seniors' health and slows cognitive decline, delays the progression of physical disability, has a positive impact on mental well-being, and increases longevity. Conversely, social isolation is associated with increased risk of depression, negative health behaviors, falls, and chronic illness, plus higher utilization of physician services,

increased likelihood of hospitalization, re-hospitalization, and longer stays. Increased resilience allows individual seniors to better bounce back in the face of adversity and to maintain quality of life. See the Raising the Profile Project website for a summary of issues related to [Health and Wellness](#), and [Education, Recreation, and Creative Arts Programming](#).

Key Learnings

- Surrounding wellness, education, and creative arts programming is a desire for a provincial forum to develop standardized programs within certain categories, with best practices, measurement tools, and online sharing.
- An Indigenous lens for programs should be kept in mind, in addition to supporting caregivers through education.
- Delegates highlight that the current heavy reliance on volunteers is not sustainable. They talked about the need to develop standardized training and support to prevent volunteer burnout.
- To support the development of this area, delegates suggested that health authorities need to be involved in a more collaborative way, and partnerships need to be forged among local not-for-profit organization and with municipalities.



The Quirk-e is a creative writing group for elders in East Vancouver that presented at the Summit on the afternoon of the 2nd day. More information on Quirk-e and on the Arts and Health program that was the original sponsor of the program is available [here](#).

AFFORDABLE HOUSING

Context

Housing is a key determinant of health, but traditionally CBSS's involvement has focused solely on information and referral around housing. In BC, 42% of senior renters are in core housing need, compared to 29% of non-seniors (for single senior renters, 54% of single senior women and 45% of single senior men are in core housing need). Core housing need is defined as spending more than 30% or more of before-tax household income on housing, which often means that seniors do not have enough disposable income to cover other living costs). Living in affordable appropriate housing with suitable supports, as needed, is key to seniors' well-being. See the Raising the Profile Project website for a summary of issues related to [Affordable Housing](#). Also, the recent [BC Seniors' Advocate Report, Monitoring Seniors' Services](#), Dec 2017 provides a comprehensive review of current housing options for seniors.

Key Learnings

- Affordable housing is a hot topic throughout the province, and delegates came up with several suggestions to assist the development of housing options for seniors.
- In the presentations, delegates heard about a partnership in Kamloops between a not-for-profit agency and a progressive developer, and agreed that this is a valuable model that needs

to be looked at in more depth. Delegates also heard about a model that supports intergenerational Indigenous housing in Nanaimo.

- While many older adults prefer to live in detached, single-family units, some delegates felt it would be beneficial to support transitioning away from this mindset and towards the idea of living in more connected housing options. At present, however, there is a lack of knowledge of, and not enough profile for, alternative types of housing.
- Delegates suggested that municipalities should open their zoning by-laws to a broader range of housing alternatives and a speedier approval process. This includes modifying bylaws to support solutions such as suites and laneway homes. It also means streamlining and simplifying licensing fees and regulations.
- Seniors who are renting need protection from rent eviction (“renoviction”), and current buildings need to be maintained even while tenants are waiting for new places to be built.
- Successful affordable housing models implemented in other countries should be studied to determine what may make sense here. This would include looking at how other jurisdictions have used municipal regulations and zoning by-laws to encourage or mandate developers to include affordable housing units in all new developments.
- Affordable housing is an issue all over the province, not only in the larger cities. A provincial affordable housing plan is needed, and the provincial government should act as an intermediary between municipal and federal governments. These plans need to be long-term and include a continuum of housing options for seniors that reduce the barriers to access for appropriate housing when a person’s health deteriorates.



“The small group discussions and panel presentations were a great format to demonstrate concrete examples of what could be done in other communities.”



SHARING RECOMMENDATIONS & BUILDING COLLABORATION

The second day of the Summit opened with a presentation by Marcy Cohen, one of the founders of the RPP. Marcy's presentation focused on the role CBSS plays in creating "caring communities" to support older adults to make new social connections and build resilience in the face of the inevitable losses that come with aging. She noted that in the past, older adults relied primarily on family members to provide this support, whereas today most seniors live on their own, with few family members nearby, and many live on very limited incomes. For these individuals, CBSS are particularly important.

The goal of RPP was to first, raise the profile of the contribution CBSS make to supporting seniors' health and independence, and then to advocate for increased funding and infrastructure to support the sector. At the seven community consultations in the Raising the Profile Projects ([see link](#)) across the province held in the spring of 2017, four strategies emerged as critical to building capacity and sustainable funding for the sector, including:

1. **A Provincial Knowledge Hub** – The *Knowledge Hub* will be a provincially-coordinated on-line and in-person learning network to build capacity through information sharing, training, mentorships, communities of practice, and policy development.
2. **A Funders Table** – The United Way is taking the lead in establishing a collaborative table for funders of CBSS programs to consider how to develop more collaborative and coordinated approaches to funding CBSS.
3. **Local Seniors' Planning & Action Tables (LSPAT)** – Building on the work already underway in many communities, the goal is to establish Local Seniors' Planning & Action Tables, with representation from CBSS, seniors, municipalities, and the health system, in every community over the next three to four years.
4. **Regional Consultations and Biannual Summit on Aging** – These events will support the on-going capacity development of the sector by strengthening the network of CCBS, building stronger ties with municipalities and health authorities, and providing a forum to decide on priority programs/collaborative strategies that should be scaled up, and priority policy questions that require provincial attention.

Marcy also noted that the funding for the RPP has now ended, but the initiatives began by the RPP will be continued by the United Way's Healthy Aging Department working in collaboration with the community through the creation of the CBSS Leadership Council.

See the *Next Steps* section of the report for more detail.



LEARNING ABOUT DIFFERENT APPROACHES TO COLLABORATION

This session, facilitated by Christine Spinder, was a facilitated dialogue highlighting some different approaches to collaboration in communities across the province. The goal was to give participants a flavor of why collaboration was effective from a number of different perspectives. The panelists came from the not-for-profit, municipal and health sectors, and each shared their experiences of working collaboratively with diverse partners, and the benefits of these collaborations for the older adults in their community.

Grace Parks, Regional Medical Director, Home Health for the Fraser Health Authority, talked about the CARES program, where primary care practitioners (family physicians and nurses) identify the older adults on their caseload who are at risk of frailty (or are mildly frail) and work with them to develop a wellness plan to reduce that risk. The older adults are then matched with a coach, who helps them to implement this plan by linking them to community resources, helping them to stay motivated, etc. An evaluation at the end of six months showed that the participants had a more positive outlook about their health, exercised more, were more mobile and socially connected, and more likely to be able to walk independently.

Heather Treleaven, Coordinator Maple Ridge/Pitt Meadows and Katzie Seniors Network, helped to create this very broad and well-functioning network that includes seniors, not-for-profit

seniors' services, the municipal recreation department, and health services. Because of the network and the support it provides, they have been very successful at outreaching to seniors in their community, asking them to identify their priority concerns, and then finding the resources to develop the initiatives needed to address these concerns.

Debbie Hertha, Seniors Coordinator for the City of Richmond, talked about the considerable resources the City contributes to seniors' services, and multiple partnerships they have with not-for-profit seniors' organizations that deliver these programs in all eight of their community centres in Richmond. Debbie focused specifically on the success of a program they initiated for seniors with higher needs, who had difficulty accessing their regular programming, that had, for a period of time, been funded by the health authority.

Jodie McDonald, Executive Director, Cowichan Family Caregiver Support Society is part of a larger health network in the Cowichan Valley that includes the health authority and local government. She talked about how challenging it was to come to meetings as a representative from a small community agency, and not feel defensive and unrecognized, and yet, how empowering it felt when she did find her voice and was able to communicate the value of the services her agency offers to support the family caregivers of vulnerable seniors who are patients of the health system.

Patricia Cecchini, the Mayor of the Village of Fruitvale, decided about two and half years ago to invite seniors in her community to come for lunch and asked how the municipality could better support them. The older students in the elementary school served the lunch, and over time more and more seniors from the community came to these lunches and developed relationships with the students. New initiatives, such as a seniors-only space to exercise, were identified as priorities and when established, the seniors took responsibility for managing the space. Together, these and many other initiatives have brought the entire community closer together. Patricia describes working with and listening to seniors, "as the best thing she ever did."



STRATEGIES FOR BUILDING CAPACITY FOR COLLABORATION

The second day's interactive breakout sessions challenged delegates to strategize on how to build the capacity and collaborative potential of BC communities to support older adults. Delegates had the opportunity to discuss the strength and resiliency of communities and their potential to collectively create sustainable, positive change. By building on existing points of connection and effective programming strategies, delegates explored how they could build the capacity of CBSS by linking and leveraging community assets within and across sectors.

The breakout session summaries below capture key learnings from participants' exploration of each major point of intersection in the CBSS in need of capacity development and increasing collaboration. (Note: that these are not comprehensive summaries, and reflect the dominant themes from the sessions).

BUILDING LINKAGES WITH THE HEALTH SYSTEM TO SUPPORT SENIORS AND CAREGIVERS

Context

CBSS are often seen as nice “add-ons” but not part of the “core” mandate of the health system, which is increasingly focused on supporting older adults who are frail and/or are living with moderate to complex chronic health conditions. There is, however, increasing evidence (including some of the research that was presented in the small group session on the first day of the Summit) to show that the health prevention and promotion programming provided by CBSS can reduce health costs and improve the health trajectories for people living with chronic conditions and at risk of frailty. In other words, CBSS services are more than just “add-ons;” they are essential to the health system's core mandate of maximizing health outcomes and controlling costs for BC's aging population. (See “[*Building links between community-based seniors' services and the health system*](#)”.)

Key Learnings

- Delegates identified many areas where communication and collaboration between the CBSS sector and health authorities could be improved, and the importance of doing this to better support older adults who need both medical and social support services to effectively manage their health challenges, retain their social connections, and live independently. Because of long waitlists and limited access to home-based health services, community-based service providers report that increasing numbers of older adults with higher needs are requesting support from their local seniors' serving agencies and community centres. In many cases these agencies don't have the programming or staff to support these individuals – nor do they have the skill set, knowledge, or contacts within the health system that they need to help them to navigate the health services for older adults.
- Concerns were also raised about the lack of awareness within the health authorities of the value of community-based programming and the fact that community organizations can offer programming (e.g. nutritious meals, modified exercise programming, and peer

counseling) that will help to take pressure off the home health system, but that they need support from the health authorities to do this work.

- Opportunities for alignment between the two groups can happen if there is a commitment to work together on a consistent basis. The importance of having the same person from the health authority to liaise with CBSS on an on-going basis was emphasized by many delegates.
- Community workshops could be co-hosted by the local CBSS sector and the health authority to identify where the seniors are located and who would benefit from a more collaborative working relationship between the health and social support sectors, and discuss how to co-create effective programming models to support these individuals. A related recommendation from the session is to mandate accountability and collaboration, with a voice for older adults present and active at all levels of communication.

CREATING UNITY BETWEEN CBSS ORGANIZATIONS AND LOCAL GOVERNMENTS

Context

A strength of non-profit organizations is that they have direct and established relationships with seniors; thus, these agencies have good reach with community seniors and strong participation in events, which serve as great opportunities to disseminate information. A strength of local governments is their ability to conduct research, advocate for assistance from other levels of government, and provide resources such as space, staff, material resources (eg. access to technology), and funding.

Municipal services are a major funder of CBSS. Some municipalities provide services directly to seniors through municipal community centre programming, while others provide long-term grants to not-for-profit senior serving agencies. Both the municipal and not-for-profit seniors' services are experiencing growing demand for services from seniors with increasing complex needs. This is a result of both the aging of the population and the shift in health policy to support seniors to live in their own homes and communities for as long as possible.

Key Learnings

- Although there are exceptions, overall, delegates felt that municipal governments do not appear to prioritize older adults, and that they are cautious about advocating for initiatives that they may have to support and invest in over the long-term. The [City of Surrey](#) is a positive example of how a local government is working with CBSS organizations to share resources and increase access for diverse communities to municipal services. Another example is the City of White Rock, which has a dedicated older adult coordinator in their recreation department, and municipal staff meets monthly with a seniors' planning table.
- Some opportunities to create alignment include using planning tables more effectively to determine common aims, sort out which grants go to which organizations, and having point people both in local governments and CBSS organizations to facilitate collaboration across agencies.

BUILDING CAPACITY AND SUSTAINABILITY IN RURAL AND REMOTE COMMUNITIES

Context

Seniors living in rural communities often experience additional challenges due to such factors as isolation, lack of transportation options, and more limited programs and resources. On the other hand, rural communities are often more cohesive and resourceful, and have been very effective at finding ways to support each other and share resources. Linking rural communities across the province will create more opportunities for learning from each other, and for creating efficient and effective approaches to capacity building.

Key Learnings

- Many rural communities have good local networks, but these networks may need to be revitalized and re-engaged. Furthermore, delegates acknowledged that while there are funding opportunities available to start projects, it is much more difficult to get the sustainable funding needed to maintain these projects on an on-going basis.
- Delegates suggested that community organizations need to expand their networks to include businesses, investors, and grassroots organizations. They also talked about the benefits of having funding to hire a coordinator who could attend meetings and ensure that there was follow-up and actions taken on ideas generated at meetings. A standardized system including who to invite to meetings should also be developed, as organizations do not know who to speak to in the health authorities.

USING THE *KNOWLEDGE HUB* TO SCALE UP PROGRAMS FOR CBSS

Context

A key recommendation resulting from the RTP regional consultation process was to respond to the demonstrated need for a provincially coordinated distributed learning system with the development of a *Knowledge Hub* (KH). The purpose of the *Knowledge Hub* will be to: build capacity of CBSS, foster cohesion, and increase collaboration with larger institutional partners to support older adults with increasingly complex needs who want to live in their own homes and communities for as long as possible.

Key Learnings

- Delegates agreed that there is a need to determine who has access to the *Knowledge Hub* and what type of information is included in it. There needs to be an easy way to navigate the system so that it is beneficial to many different groups and individuals. There was a consensus that there needs to be a unified approach for interacting with the health authorities, even though there are differences across health authorities and issues unique to each community.
- Delegates made some concrete recommendations on components for the *Knowledge Hub*:
 - More development on legal support and justice system information
 - Research should also be incorporated as an area
 - Standardized volunteer and staff training curricula that is available to everyone

- Build a catalogue of case studies and success stories for use in negotiation with government, and include a directory of people and their positions
 - Standardized language that everyone can understand
 - Ensure inclusion and accessibility of those groups who often face barriers to participation, ie. LGBTQ, those with sensory disabilities, residents in remote and rural communities, non-English speakers, Indigenous persons, and other cultures
- It was also suggested that it would be important to hire a coordinator to oversee the development of the hub who is independent of a particular organization. In the development of the hub, a voice for seniors should also be involved – this is especially important if the hub is public-facing.



“I’m most interested in strategies and innovations that will improve collaboration, coordination and lead to the development of much needed services (nutrition, social, home support and care, etc.) and infrastructure (housing, transportation, accessible communities and buildings, etc.).”



CLOSING THE SUMMIT -- LOOKING AHEAD

The Summit was closed by Dr. Heather McKay and Isobel Mackenzie. Together, Heather and Isobel’s inspiring, forward looking presentations galvanized thinking around the possibilities and opportunities for CBSS providers moving forward.

BC Seniors Advocate Isobel Mackenzie

Isobel noted that “Initiatives like the Raising the Profile Summit are very important in heightening awareness and furthering the dialogue of the importance of having a strong, well-supported network of seniors’ centres across the province. I am hopeful that moving forward, both municipal and provincial governments will continue to recognize the vitally important services and supports that these centres provide.” She also pointed out the importance of this work for rural and remote communities. “I am keen to bring a voice on aging in rural, remote, and northern communities. I believe in the power of this event to raise awareness of issues surrounding older adults and their challenges in accessing community based services.”

“For seniors, having a community gathering place, whether a well-organized seniors’ centre, or a more informal hub in a smaller community, can make a huge difference to individual lives. This is not just a place to play cards, it’s a place to form strong social connections, to laugh and share stories of both success and struggles, to maintain physical fitness and to learn about how to access community supports. Seniors tell me very often, that if they did not have their community centre to go to, they would feel truly lost.”

Dr. Heather McKay

When contemplating the beneficial impact of the Summit on the CBSS, Heather highlighted that many of the toughest social and health challenges have deep roots, are complex, and deeply entrenched in not so effective systems. “I heard clearly at the Summit that we must align our efforts if we are to provide and sustain meaningful, positive support for older adults. I believe the future is ours to write. We took some first steps at the Summit — but there are many steps to go,” she stated. Heather is confident that we can and will get there – together. She reflected on a quote from Veronika Tugalev: “There are few things more powerful than people united.”



“We plan to have everyone from [our community] who attended the Summit to meet to plan next steps in bringing together a seniors planning table.”



IMMEDIATE IMPACT

The post-Summit survey included responses from 81 delegates (38%) and revealed some of the immediate impacts of the Summit for those who attended. Overwhelmingly, delegates saw the Summit as a success (89% of respondents).

CONNECTIONS

Given their opportunity to connect with others and glean new insights and knowledge from the sharing of experiences that will inform their work, delegates reported the Summit was a positive and highly valuable experience. The new connections will contribute to an expanded network to resolve issues and share ideas and strategies.

The Summit itself served as an important “hub” for the sector. Over 80% of delegates indicated they made significant new connections and that they will follow-up with those new contacts. Many delegates also said they will share the information they learned with colleagues within their organization and with their community networks.

Delegates believe that the new connections they made at the Summit will support their work by increasing their ability to resolve issues, aid in expanding or modifying their programs based on shared learnings, and provide ideas for new strategies.



“It was valuable to see the sector engaging in a collaborative way. I also see there being more opportunity to continue to broaden the conversation beyond the sector, in order to truly make change.”



POINTS OF INTERSECTION – FUNDING, TABLES, HUB

Refining a funding model, developing local planning tables, and identifying collaboration mechanisms were the key issues and opportunities delegates highlighted following the Summit.

Delegates believe that funding, and competition between and among organizations for funding, territory, and resources is the greatest challenge CBSS providers face when attempting to work more collaboratively. The short-term nature of most funding programs, and not enough funding available, makes it difficult to plan for program sustainability. Further, the unpredictability or lack of clarity about government and health authority support, and a lack of time experienced by all parties were also major concerns.

Moving forward, delegates highlighted the main point of tension within the sector is around funding schemes, as well as how to go about organizing local planning tables or other collaboration mechanisms.



“I met potential partners for collaborative solutions to our own community issues including joint funding initiatives and shared knowledge and experience. Also [met] potential funders or program developers that could bring new opportunities to our organization and our community.”



“Much human potential is lost by people who could be delivering valuable services chasing after funding and drafting proposals.”



LEARNING AS WE GO – TOGETHER

As with any collaborative planning process, there were reported tensions and criticisms; however, this was noted by a very small proportion of survey respondents – less than 6%. These delegates expressed their frustration with the structure of the Summit and process. They felt that too much was programmed in too short a timeframe and did not allow adequate time for the delegates to provide meaningful input. Summit organizers have reflected on and valued these constructive offerings, and in future regional consultations and subsequent Summits will aim to focus on a limited number of topics that have been prioritized through outreach to the CBSS sector.

Overall, the Summit was, in our assessment, very successful. It underscored the value and importance of the work of CBSS and their contribution in supporting seniors' independence, resilience, and social connectedness both within the sector and with funders and community partners. Future activities are detailed in the Next Steps section of this report.

NEXT STEPS

There are many ways for Summit delegates and interested stakeholders to stay engaged and contribute to building the CBSS profile and capacity in BC. These include:

COMMUNITY MEETINGS

Now that you have this report in-hand, our hope is that all of you who attended the inaugural Summit on Aging and/or are interested in raising the profile of CBSS locally, will organize a presentation at a local community meeting or plan a special meeting to discuss the Summit and next steps. This would be an opportunity to share highlights from the Summit, provide information on the initiatives being developed provincially to support on-going learning and capacity building locally, and to talk about what you as a community might want to do next. We have developed a Power Point presentation based on this report to help guide these discussions. We are particularly excited about the possibilities of raising the profile of the sector locally by organizing around the Declaration, and hearing your ideas on the content and priorities for the *Knowledge Hub* (see next two points).

DECLARATION

More than 140 organizations have now signed the Declaration (see Appendix 1). But the numbers could be significantly higher. Please outreach to organizations and individuals in your community that have an interest in supporting seniors' independence, resilience, and social connectedness, and ask them to sign on to the Declaration. We would also encourage you to organize a delegation to your municipal council or regional district letting them know about the support for the Declaration locally, provincially, and nationally, and asking them to sign on to the Declaration. This would be a great opportunity to talk to your elected officials about both the contribution CBSS make in supporting seniors and their families in your local community, and the importance of more

resources and supports to meet the growing and increasingly complex needs of your communities' aging population.

KNOWLEDGE HUB

We have secured funding for the *Knowledge Hub* and hired a coordinator to manage the hub and other capacity building initiatives for the sector, including a call for proposals to pilot a Project Impact evaluation process for seniors serving agencies across the province.

The *Knowledge Hub* will be a provincially-coordinated on-line and in-person learning network to build capacity through information sharing, training, one-to-one mentorships, communities of practice, volunteer engagement, and policy dialogue and development. For example, it will be a place where:

- Service providers can learn about program models that have been particularly successful in such areas as supporting family caregivers, isolated and immigrant seniors, and/or those with mental health or mobility challenges, and then work with the *Knowledge Hub* to develop training and advocate for scaling-up of these programs to other regions or province-wide.
- Volunteers and frontline staff can talk about practical strategies and policy changes needed to support older adults who are homeless or at risk of homelessness, and garner support for these policy changes across the sector.
- Leaders from rural and remote communities that have been particularly successful at enhancing the social connectedness of seniors in their community can share their approach and mentor local leaders from other rural and remote communities.
- Organizations can access training, tools, and resources on organizational development topics such as grantseeking, volunteer management, and leadership.
- Journal articles, abstracts, academic studies, literature reviews, conference proceedings, presentations, videos, and other research relevant to CBSS will be available in a central place.

These are just a few of the many functions and activities that could be supported by the *Knowledge Hub*. To develop a workplan and decide on the priority areas and content for the *Knowledge Hub* over the next 15 to 18 months, we need your input. There are two ways that you can participate in this process: the first is through the discussions you have at the community meetings, and the second is through an on-line survey. The Summit PowerPoint provides a summary of what we heard, what we are doing, and what you can do, and includes questions for discussion and input into development of the *Knowledge Hub*. A template is included to record feedback for submission to the Provincial Coordinator. The on-line survey, which will be made available late February/early March, offers another opportunity to provide your ideas and input for *Knowledge Hub* development.

While these immediate opportunities for input will help to identify priorities and guide the initial development of the *Knowledge Hub*, they will not be the only opportunities. The *Knowledge Hub* will be a dynamic interactive platform that grows and evolves as new programs and resources are developed, and new opportunities for collaboration arise. The network of CBSS will play an important role in shaping this growth, through active participation and contributions both now, in its start-up phase, and in the future, as the *Knowledge Hub* grows and responds to emerging issues and opportunities in the CBSS sector.



“We have been [working collaboratively] for years. The challenge is always a shortage of resources: time and funding.”



REGIONAL CONSULTATION AND BIENNIAL SUMMIT

The United Way will be funding the regional consultations and Biennial Summit moving forward. These gatherings will provide an important forum to further develop our shared vision, build on the Declaration from the inaugural Summit, continue to highlight effective programming, strengthen and evaluate collaborative initiatives already underway, and strategize how to address systemic challenges and needed policy changes.



“Need to keep the momentum going from such a great Summit. People are solution oriented, and I think ready to take action. I also think that community planning tables and knowledge hub will be [enable engagement of] even more CBSS providers.”



FUNDERS TABLE

The Funders Table has already met and includes 30 regional, provincial, and national organizations providing funding to BC's CBSS providers. The Table has developed an inventory of how much different organizations contribute to the sector and is in the process of collecting and reviewing their funding guidelines. The goal is to identify disparities in funding across the province, compare the actual investments with the priorities identified by the sector, balance innovation with on-going support for proven programs, and support collaborative initiatives.

LOCAL SENIORS' PLANNING & ACTION TABLES

We heard clearly from the delegates at regional consultations and the Summit that Local Seniors' Planning & Action Tables are essential to improving service delivery, co-ordination, and referrals within the CBSS sector, and to developing more collaborative relationships with municipal government and the health authorities. Communities that have been successful in establishing these types of collaborative processes have been more successful in securing larger grants and longer-term funding. Among CBSS leaders, there is a consensus that for these tables to be effective, they must

have a part-time paid coordinator who can make sure the ideas generated by the community are translated into concrete actions and improved strategies. Based on the discussions we have had thus far, it seems clear that support for Local Seniors' Planning & Action Tables will most likely come from multiple sources and differ across the province and it will therefore take some time before these tables are in place in every community in BC. The *Knowledge Hub* can be used to build support for this idea, and as a way for gathering information and sharing the experience and lessons from those communities that have been successful in establishing Local Seniors' Action Tables.

ROLE OF THE UNITED WAY AND THE CBSS LEADERSHIP COUNCIL

The United Way's Healthy Aging Department has taken the lead to ensure that the work generated by the Raising the Profile Project (RPP) can continue and grow. To ensure that the community voice will not be lost in this transition, a CBSS Leadership Council has been established, drawing primarily on the membership of the RPP Advisory Committee and Seniors' Reference Group. The co-chairs of the Leadership Council are Marcy Cohen, the lead on the RPP, and Annwen Loverin, the Executive Director of Silver Harbour Seniors Centre in North Vancouver. The Leadership Council will work with the United Way's Healthy Aging Department to:

- advocate for increasing the capacity of Community-Based Seniors' Services to meet the growing needs of BC's aging population, including the identification of systemic and emerging policy issues;
- support ongoing outreach to CBSS service providers across BC;
- provide oversight of the *Knowledge Hub*, including having responsibility for approving priority topics and activities;
- share information and provide advice to UW in relation to the development of Local Seniors' Planning & Action Tables; and
- collaborate in determining the content for the Regional Consultations and the bi-annual Summit on Aging.

In addition, the United Way's Healthy Aging Department will continue to publish the e-newsletter started by the RPP, and is working with the Leadership Council on a transition plan for the RPP website and other communication tools related to the *Knowledge Hub*.

Meetings have also been organized with the provincial government and with other community funders to secure increased funding for locally-based CBSS and to develop a municipal caucus to encourage the Union of BC Municipalities (UBCM) to develop policies on the municipal role in supporting healthy aging and ensure a higher profile for the sector at the next UBCM meeting in Sept 2018.

“Having a collaborative, multi-sectoral provincial voice is very empowering. I believe we have the opportunity to effect real change in how CBSS are valued and supported.”

SHARING SUMMIT EXPERIENCES

Reminder!

Organizers and participants want to understand the role the Summit played in extending delegate networks and in providing content knowledge useful in their day-to-day work. In early May of 2018, the Active Aging Research Team at UBC will conduct interviews with a subset of randomly selected delegates to explore their experiences at the Summit and the impact it has had on their work. These learnings will inform the on-going work development of the *Knowledge Hub*, the 2018-19 regional consultations, and the 2019 Summit on Aging.

Please contact Sarah for more information or to add your name to the list for the interviews.

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KEY CONTRIBUTORS

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