

BETTER AT HOME

Quesnel Community Development *Final Report*



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Better at Home - Quesnel
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BETTER AT HOME FINAL REPORT

1. INTRODUCTION

1.1 Better at Home program introduction

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

- friendly visiting
- transportation to appointments
- snow shoveling
- light yard work
- simple home repairs
- grocery shopping
- light housekeeping

Quesnel has been identified as a potential Better at Home site. Karen Borsato was contracted as community developer to assess community readiness, identify seniors' assets, needs and priorities in regards to the basket of services, and help identify a potential lead organization best suited in the community to deliver the Better at Home program.

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

1.2 Description of the local community development approach

Through a response to a Request for Proposals from United Way, the Adult Services Team of the Quesnel Child, Youth and Family discussed the Better at Home program and elected to submit a proposal through the North Cariboo Aboriginal Family Program Society. The Community/Capacity Development personnel of this Society provide administrative and facilitation support to the Team. The Adult Services Team, through NCAFPS (a non-profit society), was successful in acquiring the contract.

a. Initial community input

The community was invited, through several marketing initiatives, to provide initial input into the process. Advertisements were placed in the local paper and a "poster" was e-mailed to over 50 service providers in the community to display and distribute to their clients. Brochures on the program were distributed widely, particularly to senior-serving organizations. A tremendous amount of interest was generated through these media.

At the same time, staff did basic research on community demographics to gain a sense of the number, age and residence of seniors in the area. As well, we searched for any existing community-specific research relevant to seniors, but were unable to find any local work. However, we reviewed a number of reports related to seniors and seniors' health.

Staff also prepared a comprehensive list of community assets relevant to seniors, focusing on but not specific to non- medical services for seniors in addition to other groups and organizations that served seniors. At the community/stakeholder meeting several additions to this list were suggested. (See appendix (b) for a complete list of community assets.)

A nine-question interview sheet for gathering input on seniors needs was developed. This questionnaire was based on a draft distributed by the funder. Additional relevant questions were added to elicit information of interest to the Adult Services Team. The interview sheet also requested basic and anonymous demographic information: age, income, neighborhood, and household size. Demographics were collected largely to ensure we were interviewing a range of respondents.

Questions asked in the individual and focus group interviews were:

1. What is the situation for seniors in our community – what do you see as the burning issues to address to help let seniors live for a longer period of time in their own homes?
2. What services and programs are you aware of in our community that can help seniors live longer in their homes? Are they accessible? Are they useful?
3. Which services work well, and why do they work well? What barriers are there to accessing these services?
4. What non-medical home support services from the Better at Home basket of services are needed in our community? (friendly visiting, grocery shopping, housekeeping, home repair, snow shoveling, transportation to appointments, yard work)
5. Who would be a strong lead agency in our community to deliver these services? Why would this/these agency be appropriate?
6. What activities and services are effective in helping you to feel included in the community?
7. What would help keep you better aware of services? (ie posters, information fairs, ads, etc.)
8. What activities would you like to be a part of but currently find difficult to access (ie volunteering, cultural activities, etc.)
9. What changes or services would make participating in these activities more attractive or easier?

The Better at Home community development process attempted to include input from seniors outside the city limits but did not visit the four local reserves specifically. However, some Aboriginal elders were interviewed individually by an Aboriginal Family Support Worker.

Interviewees came from a variety of neighbourhoods: West Quesnel (4), West Fraser (2), Uplands (1), North Quesnel (4), Johnson Subdivision (3), Barkerville Highway (3), Old Prince George Highway (2), 2 Mile Flat (1), Carson Subdivision (2), South Quesnel (1), Red Bluff (1), Bouchie Lake (1). Income levels of those interviewed were also varied.

Incomes of those interviewed were equally varied. Of the single person households, one had an annual income of below \$15,000, four had an annual income of from \$15,500 to \$23,100, three had an annual income of \$23,101 to \$30,600 and four had an income of over \$30,600. Of the household incomes, five were from \$24,900 to \$35,000, six had incomes of \$35,001 to \$67,000 and one household had an annual income over \$67,000. Of those interviewed, eight were between the ages of 50 and 64 and sixteen were aged 65 and older, where age was indicated. (Note: not all respondents provided demographic information)

Approximately half those interviewed lived alone and half with others.

In addition to individual interviews, three groups of seniors were interviewed: the Voices for Northern Seniors (approximately 50 attendees), the Adult Services Team at a regular meeting and Goldpan Grannies at a specially convened gathering of that group. Other seniors groups (ie the OAPO, the Seniors Centre, and the Retired Teachers Association) were approached for input but declined for one reason or another (generally because their agendas were considered too full). A total of 18 seniors were interviewed individually. Five interview respondents were service providers, most of whom are seniors themselves.

Responses to interviews were compiled into a summary sheet and formed part of the “community profile” report at the community/stakeholder meeting.

b. Community/stakeholder meeting

Following individual consultations, a community meeting was held 2013 January 30. Several days prior to the community meeting, a half-page article on the program and the upcoming community input meeting was published in the local newspaper. (See the appendices for copies of the advertisements, posters and article.) The meeting was advertised as well in the local newspaper and through posters distributed to service agencies. Word-of-mouth was also effective in generating interest and participation. Transportation support was advertised, although only one person took advantage of this offer. Service providers were asked to provide display materials at the meeting and many did.

Meeting participants were asked to pre-register, and registrations rapidly grew to 105. On the meeting date, 95 people attended, almost all of the attendees being local seniors. The meeting was facilitated by an “outside” facilitator who had no connection to any local agency.

The community input and stakeholders’ meetings were held on the same day, one meeting following the other. This strategy caused some confusion but was necessary for logistical reasons. See appendix (d) for the meeting agendas.

(Note: the agendas were changed slightly at the meeting to accommodate the ongoing process.)

At the community meeting, presentations were made by:

- Jody Olsson, Better at Home
- Lori Cruddas, United Way
- Trevor Williams, United Way
- Sheila Brasnett, New Horizons for Seniors
- David Sutton, Adult Services Team

Following these presentations, Karen Borsato (Community Developer) made a presentation on community profile findings to date.



*Quesnel Community Meeting
January 30, 2013*

The meeting facilitator then asked attendees to meet as small groups and respond to the following questions:

- Quesnel community profile report – What is your feedback?
- Basket of Services – What are Quesnel’s priorities?
- Lead Agency – What are the qualities and characteristics required of the delivery lead agency?

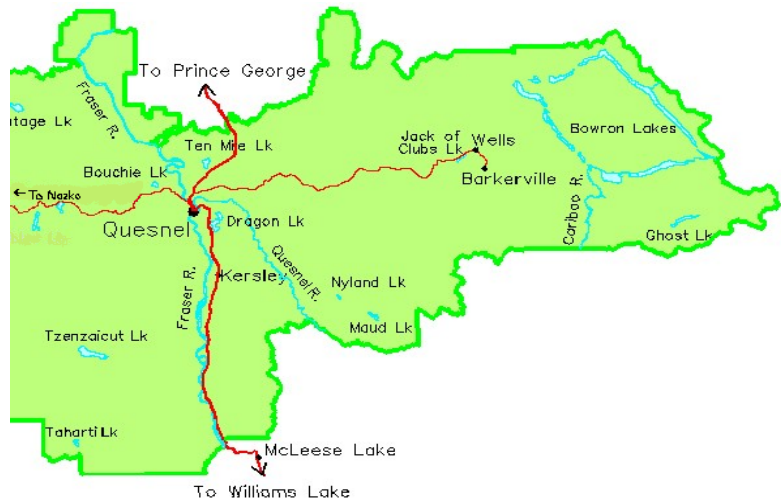
The small groups reported back to the larger group with extensive information and feedback that was recorded to be included in this report.



*Small groups report back
Quesnel Community Meeting
Wednesday, January 30, 2013*

2. COMMUNITY PROFILE

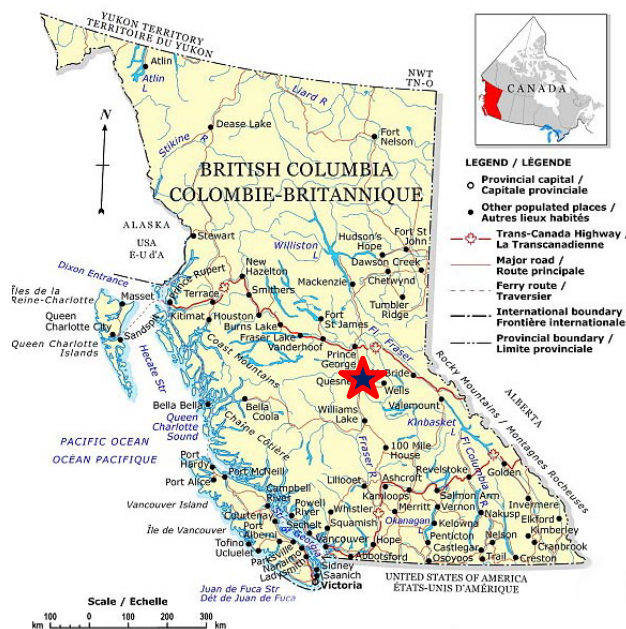
The Quesnel community is often referred to as the “North Cariboo” to include the rural area and smaller communities that Quesnel serves. The community of the North Cariboo is generally considered to be the service area around the City of Quesnel. This area encompasses that of School District #28 and the Quesnel Local Health Area. The major communities in the North Cariboo are:



- City of Quesnel
- District (Town) of Wells

The North Cariboo region lies within the traditional territory of four First Nations:

- Nazko First Nation
- Kluskus (Lhoosk’uz) Band
- Red Bluff (Lhtako) Band
- Alexandria (?Esdilagh) Band



The region lies in central British Columbia approximately 664 km from Vancouver, and 103 km south of Prince George, BC.

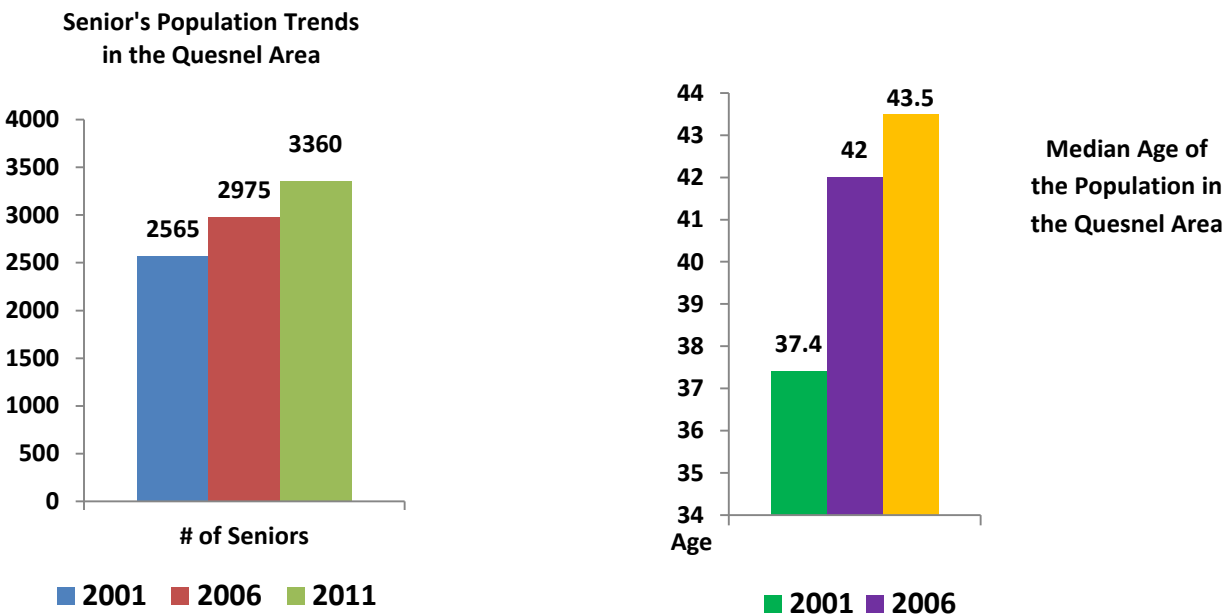
The total area of the region is 14,207 square kilometers with a population density of 1.6 per sq/km (compared to the provincial average of 3.7/sq km). Approximately half the population of the region lives outside the City limits, and the outlying “communities” are as far away as 63 km to Wells, and 60 km to Alexandria.

The population of the region has remained relatively stable since 1996 with slight drops in subsequent census years and a slighter increase by 2011. (1996: 25,074; 2001: 24,426; 2006: 21,049; 2011: 22,096. (*Statistics Canada 2012, Quesnel, BC, Census Profile, 2011, 2006, 2001 Census*).

The region is considered to be heavily forestry-dependent with over 20% of jobs related to this industry.

2.1 Description of the local senior’s population

Not unexpectedly, Quesnel’s population is aging. According to Stats Canada, in 2001 there were 2565 seniors living in the North Cariboo; by 2006 the number had risen to 2975, and by 2011 it was 3360. The median age is rising as well, from 37.4 years old to 42 years old, to 43.5 years old.

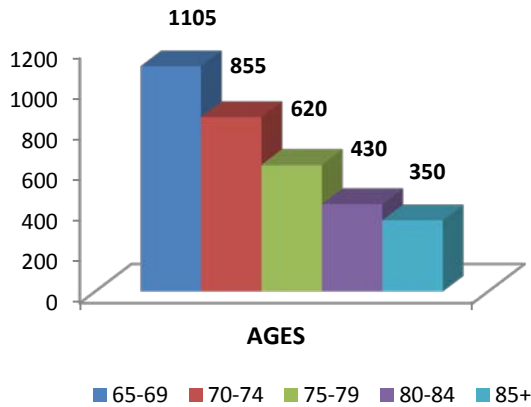


*Statistics Canada 2012, Quesnel, BC
Census Profile, 2011, 2006, 2001 Census*

Seniors (aged 65 and over) represent 15.2% of the local population (compared to the national percentage of 14.8%). However, the population growth of seniors (age 65 and over) is significantly greater than that of the other broad age groups at 18.7% growth from 2006 to 2011 compared to an overall regional population increase of 5.0% (Statistics Canada).

Seniors in the region are also relatively “spread out” from the service centre. Per the 2011 census, 51% of local seniors live outside the city limits. This percentage decreases with age from 59% of seniors 65-69 living outside city limits to 30% of seniors 85 years and older (*Statistics Canada 2012, Quesnel, BC*). These figures have major implications for service provision and service access for seniors.

TOTAL SENIOR POPULATION IN QUESNEL BY AGE

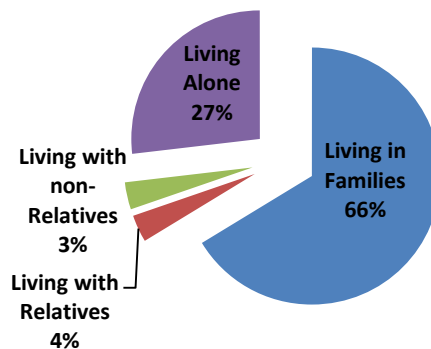


The majority of seniors in the area reside in private households and 26% (865) live alone.

There is not great language diversity in the region. In Quesnel, 91.0% of the population reported (2011 Census) English only as the mother tongue and 6.9% reported only a non-official language, significantly lower compared to provincial/territorial averages of 26.5%. 96.2% of the population spoke only English most often at home compared to 80.5% provincially. There is, therefore and by extrapolation, a relatively small number of non-English speaking seniors in the community.

However, about 12% (compared to 4% overall in the province) of the regional population identifies as Aboriginal (approximately 3000 persons); of these, about 300 live on the four local Reserves.

SENIORS' HOUSEHOLDS



NOTE: “Living in Families” includes living with spouse, living with married children, etc.
 “Living with Relatives” includes living with non-married children, siblings, etc.

During the interview phase of the community consultation, seniors identified four major non-medical issues that negatively impacted their lives:

- the lack of affordable and accessible housing,
- issues related to isolation and access to services, including transportation,
- other service accessibility issues including awareness and navigation of services, and
- the lack of opportunity to be engaged in the community (often related to accessibility issues and an increasing sense of isolation).

Seniors consulted were aware of some services available to them in the community but generally had a low level of awareness of what services they could access and/or how to access those services. They sought services that were straightforward to arrange, relatively flexible and had a “personal” touch.

Seniors reported that family support is not as strong as it could or should be because families are either distant or pre-occupied with work and raising their own children. At the community meeting, concerns were raised about how to involve families more in the support of seniors. Seniors did not want the program to displace or discourage family involvement in their support. Seniors report they find it difficult to seek assistance from relative strangers and to trust hired help because of isolation and/or vulnerability.

2.2 Summary of the community assets

A comprehensive list of assets was prepared during the Community Development process, with some assets added at the community meeting (most notably, faith groups). The following summarizes these assets.

The greatest number of seniors’ “services” is housing related and includes the Fraser Village Home Society, Wildwood Assisted Living, Dunrovin Park Lodge, and Maeford Place Assisted Living. However, the community capacity for assisted or independent living is considered inadequate. As well, there is no seniors’ specific temporary/crisis housing. Both Seasons House (homeless shelter) and the Amata Transition House (women’s shelter) are used in emergencies, but neither is appropriate (by mandate or circumstances) for seniors.

Assistance for seniors with living independently in their own homes is limited to stretched health-related services (for example, Home and Community Care, Meals on Wheels) and fee-for-service (for example, WeCare Home Services, Wanda’s Home Care, Chow Now meal delivery).

There are some senior-focused organizations in the community, including the Old Age Pensioners Organization/Golden Centre (drop-in recreational activities and a low cost lunch), the Quesnel & District Seniors’ Society (recreational activities and information), Royal Canadian Legion (veteran services, seniors’ support and advocacy) that offer services to members. A number of clubs and groups cater primarily to seniors and include the Gold Pan Grannies, Seniors’ Games and others. Meals on Wheels and the Safeway Shopping program offer food-related programs.

However, the community does not have a broad-based seniors' agency that provides a comprehensive complement of seniors' services. The Seniors' Advocacy program is staffed by volunteers and open only two mornings a week. A number of social services agencies provide assistance to seniors along with the rest of their client base. See appendix (b) for a full listing of services.

The Adult Services Team of the Quesnel Child, Youth and Family Network is an under-recognized community asset and has offered a number of projects to assist seniors. This group currently offers the only coordination and planning role for seniors' services.

2.3 Seniors needs related to non-medical home support services

The greatest overall issue seniors identified was transportation. This need was closely linked to many seniors' sense of isolation or "impending" isolation. Transportation is, in fact, a major overall community concern because of its geographical spread and isolation from major centres, winter and night driving conditions, and a relatively limited transportation system (including public transit and airline and bus service).



Isolation and loneliness is another major concern. Over half the community's seniors live outside the city limits and the range of the public transit system. As well, many seniors reported decreasing confidence and/or physical conditions that limit their participation in community activities (and sometimes their access to health care). Approximately 27% of local seniors live alone, and others are caring for spouses with serious medical problems, further limiting their access to social and other connections.

Service availability and access is a third concern among the region's seniors. It was evident from the consultation process that there are few community services that specifically address seniors' needs. As well, seniors' awareness of those services that do exist, and their confidence in accessing these services is relatively low. Almost every reporting group at the community meeting asked for stronger service coordination with simple and straightforward process for accessing these services.

Finally, seniors reported difficulty in finding affordable, trustworthy and reliable help for such tasks as home maintenance, yard work, snow shovelling and housekeeping. They would like one number to phone to have this arranged (and screened) for them.

2.4 Suggested opportunities for service integration/coordination

There are significant partnership opportunities that could be developed through the Better at Home program in Quesnel. Many were suggested at the community meeting by the seniors themselves. The service community in the region has a strong and successful track record of collaborations and partnerships. This culture could and should be expanded to relevant services and agencies not currently involved.

- Initially, the Seniors' Advocacy service was considered as a logical lead agency for this program (probably because it is the most recognized senior-specific agency in the community). However, Seniors Advocacy does not have the capacity nor meet other criteria to manage the program. This service is struggling and there is the opportunity to strengthen and support it through a partnership, also bringing a level of trust to the Better at Home program. One suggestion has been to share office space with Seniors' Advocacy, thus providing increased hours for that service.
- The Quesnel Lions Club is well-known for its volunteer service to seniors, and this resource should be involved in the program. Not only might the club (as well as other service clubs) be able to recruit volunteers to the program, but the program could offer organizational structure and a focus to their projects.
- Faith groups were mentioned at the community meeting as many of them address seniors' needs within their congregation. There is the opportunity to expand their role in this regard.
- New Horizons for Seniors offers funding for seniors' related programs and coordinated proposals to this funder could supplement Better at Home initiatives or address needs and issues not covered by the Better at Home program.
- The Adult Services Team is currently implementing a two-year age-friendly community project that should be coordinated, at the least, with the Better at Home program. The age-friendly community project has the potential to supplement Better at Home services as well as address identified needs that are not within the Better at Home mandate. As well, because the Adult Services Team's mandate is to promote collaboration and identify and address service gaps, there is a natural partnership between this team and the Better at Home program.
- The Better at Home program offers an ideal opportunity to involve to a greater extent, beyond their current activities, seniors organizations (such as the OAPO and the Senior's Centre) in addressing seniors' needs.
- The City of Quesnel Measure Up initiative seeks to address physical accessibility issues in the community. Recent discussions with the mayor and a council member indicate there may be partnership potential with this initiative.

3. COMMUNITY READINESS

3.1 Community readiness as indicated by community consultations and meetings

willingness: Through the community consultation and other more casual input it became apparent that the community is extremely excited about the prospect of Better at Home services being offered in Quesnel and that there is high need. However, it also became apparent that general community knowledge about existing services for seniors is both incomplete and inaccurate in general.

volunteers: Most informants in the community development process expressed concern about finding sufficient volunteers for the Better at Home program. There were some reports of organizations that had already folded or diminished service due to volunteer shortage. There were also comments that the majority of community volunteers are already seniors themselves and that there was a strong need to recruit younger people into the volunteer sector.



Several suggestions were made for recruiting potential volunteers, including from faith groups, service clubs, school and sports programs. Facilitating the establishment of a common purpose as well as recruiting, training and screening tools could lead to the development of a much-needed volunteer bureau in the community.

infrastructure: Quesnel's infrastructure as it relates to non-medical services for seniors is limited. The majority of existing seniors' services (see appendix (b) – *List of Community Assets*) centre around three major areas:

- a. health care related (ie Home and Community Care, Elderly Program, Safeway Shopping program, Meals on Wheels, etc.)
- b. housing (Maeford Place, Dunrovin Park Lodge, etc.)
- c. social/recreational, requiring membership (clubs and organizations such as Gold Pan Grannies, Quesnel and District Seniors' Society, Retired Teachers' Association, etc.)

There are few organizations offering non-medical and senior-specific services. Three private organizations (We Care, Wanda's Home Care, Can I Help You?) offer some non-medical services for a fee. Seniors' Advocacy has limited capacity (two to three volunteers) and hours (one to two mornings a week). The Quesnel Lion's Club and others offer ad hoc services to seniors through their volunteer membership.

Although the local transit system is improving, it doesn't currently meet the needs of the seniors' population.

The Adult Services Team is one of several teams of the Quesnel Child, Youth and Family Network. Participation on the team is open to and consists of providers of services to adults and other interested community members. The Team also serves as the Community Response Network body in Quesnel. The purpose of the Adult Services Team is to:

- provide representation, communication and liaison between the Network and Team members and information-sharing among members
- promote coordination and collaboration in the development and implementation of services to vulnerable adults
- assess and address adult service needs, including identification, planning and prioritization of related programs and activities
- work toward ongoing improvement of service delivery to adults

3.2 Potential risks going forward

A significant challenge for the delivery agency will be recruiting, screening and retaining appropriate volunteers to deliver those services in the basket to be performed by volunteers. Several interviewees mentioned a general volunteer "shortage" in the community or organizations that had "folded" for lack of volunteers.

Another challenge might be developing some collaboration or coordination among existing seniors organizations where appropriate. Several seniors groups and organizations exist but appear to have little or nothing to do with each other (although there is some cross-membership). As well, these organizations had a low participation level in the community consultation process. The lead agency will need to work to bring these organizations on board.

Many seniors and service providers questioned the sustainability of the program. There is a high risk of raising expectations over the period of delivery and then ending the program and services with nothing to replace them.

4. LOCAL BETTER AT HOME PROGRAM DETAILS

4.1 Preferred services and how they link to the identified needs

During the interview portion of the project, seniors categorically stated that all the services in the Better at Home basket of services were needed in the community. However, at the community meeting shopping was not mentioned at all and housekeeping was mentioned by only one or two groups. It should be noted that because of the nature of this meeting, attendees were probably among the more active, mobile and independent seniors in the community. The following themes were most prevalent throughout the community development process.

Transportation

Throughout the community development process, the most frequently mentioned non-medical need was transportation – to social and cultural events, appointments, etc. A number of conditions affect this need. The Quesnel service area is geographically spread out with more than half the seniors population living outside city limits and therefore at a distance from both public transportation and services. There is a noticeable lack of senior-specific and health specialty services in the Quesnel area, necessitating travel outside the region. Winter driving (and walking, especially when using assistive devices or wheelchairs) conditions limit seniors' ability and confidence in accessing services seasonally. Transportation services available do not necessarily meet seniors' needs: for example, public transit is not available evenings and weekends, there is no wheelchair accessible taxi, and the Handi-Dart requires booking well in advance. A challenge for the lead agency will be working with transportation providers to address some of these needs while providing either service or access to services to seniors living outside the city.



It can be anticipated that the highest demand (in both cost and volunteers) from seniors for the Better at Home program will be transportation. The majority of seniors would prefer accompaniment as well as transport, and they would like this service to be offered beyond medical appointments only. This priority, however, also offers opportunities for partnerships, and there were several creative ideas offered at the community meeting. These included youth groups (including schools, sports teams, and faith-based youth groups) providing rides and accompaniment for seniors to events, perhaps utilizing the Care-a-van. Another suggestion was to solicit van usage/transportation from service groups for specific events.

“One-stop” shopping/service coordination

A second theme in identifying preferred services concerned service coordination, “navigation,” and awareness. It was apparent throughout the process that there is a relatively low awareness of what services are available and how to successfully access those services. The current “Making Quesnel an Age-Friendly Community” project has included both service awareness and service navigation initiatives as part of that project, and a partnership of the two programs would be useful.

In terms of the likely agency partnership that will be developed to offer the Better at Home program in Quesnel, it's critical that the agencies involved keep in mind seniors' need to have one-location and one phone number for services to be offered and that coordination be a key factor.

Home maintenance

A third theme in identified priorities related to seasonal maintenance issues. Primary among these was the need for snow shoveling services in winter – of sidewalks and driveways as well as of the “dumps” of snow left by road plowing – as well as ice removal. More than one group mentioned other seasonal maintenance tasks such as lawn raking and cleaning gutters in the fall, lawn mowing and assistance with gardening in the summer. Assistance with garbage (taking to the curb) and recycling (dropping off) was also requested as were all types of home repairs.

Friendly visits/isolation

Although participants in the community meeting were not particularly isolated themselves, they were concerned about isolated friends and an isolated future. They were particularly concerned about how



seniors who live out of town might access Better at Home and other community services. One idea raised was to organize volunteers by neighborhood and work to rebuild neighborhood intra-responsibility.

Daily “hello” phone calls and friendly visits were high on the seniors’ priority list.

Volunteers who provide transportation to and accompaniment for appointments and social events would help meet this need. Many seniors expressed a desire to participate in events and activities but were reluctant or unable to do so alone.

Services not relevant to the program – the “Parking Lot”

A number of seniors’ needs identified were not related to the Better at Home mandate and were recorded as “parking lot” items. At the request of Mayor Mary Sjostrom, who was only able to attend part of the community meeting, those related to City services were collated and communicated to her after the meeting.

Other “parking lot” items were relevant to the current two-year “Making Quesnel an Age Friendly Community” project overseen by the Adult Services Team and have been referred to that group. These include service awareness and service navigation needs.

Some services requested but not included in the Better at Home program are possibly appropriate for existing agencies/organizations (ie pet care and assistance with “paperwork” such as taxes and applications). It is recommended that the lead agency follow up on the referral of these parking lot items.

4.2 Proposed lead agency

In both the survey process and at the community meeting, participants were asked to identify the characteristics of a strong lead agency. Many characteristics were identified, with the following themes being most often or most strongly mentioned:

- The capacity and “track record” to manage the project (many people commented that the project might be too large for one agency).
- Willingness to, history of and ability to form partnerships and work collaboratively
- Provides a “one-stop” service that can provide, coordinate and/or refer to all relevant services
- Provides strong volunteer management, including recruitment, training, screening and monitoring
- Seniors’ focused and senior- friendly: personal, flexible, inclusive, easy to access, etc.

In addition, there were many concerns that the lead agency provide sufficient oversight to ensure seniors’ safety and confidentiality were maintained.

Many local agencies were suggested by interviewees to be the lead agency, and three of these expressed interest and made presentations at the community meeting. These were the North Cariboo Aboriginal Family Program Society, the North Cariboo Metis Association, and the Quesnel Lions Club. All were enthusiastic about taking on the task, and each organization had specific strengths. Each expressed a willingness to partner and agreed to meet in the following days to discuss how this might work. The stakeholders meeting did not provide the opportunity to make a final selection on the lead agency.

5. RECOMMENDATIONS AND NEXT STEPS

5.1 Local program recommendations and next steps

- **Determine the lead agency**

The two remaining proposed lead agencies (the Quesnel Lions Club withdrew their application after the community meeting) will be meeting to determine how they will approach the management of the Better at Home program.
- **Services offered**

Because it is likely that Better at Home will be a partnership in this community, it is recommended that the program begin with one or two services and build over the first several months of implementation.
- **Establish key partnerships**
 - Several key partnerships were identified at the community meeting and elsewhere and need to be explored. These include approaching faith groups and service groups (particularly including the Quesnel Lions Club, which has offered support) to explore their role in service delivery.

- Programs that already deliver seniors' services should be approached to gain their support and understanding of the program and to explore how they can enhance, or be enhanced by, the Better at Home program. There is an opportunity, for example, to build the capacity of Seniors Advocacy service. Another example would be a partnership with the Seniors' Centre, which offers many recreational and social activities for seniors. Offering access support such as membership fees or transportation through Better at Home would assist more seniors to participate.
- **Establish Advisory Committee**
 - Because the Adult Services Team is already established in the community to address the needs of vulnerable adults, and because this team is already working on a significant seniors' project (Making Quesnel an Age Friendly Community) as well as other relevant projects (ie Gatekeeper training) it is recommended that this team form the basis of an advisory body to the Better at Home program. However, we also recommend that the team be expanded by adding several non-service provider seniors, including some of the attendees from the community meeting.
- **Determine staffing needs**
 - There is not a clear understanding of the role and complexity of coordinating this program. It is recommended that the lead agency, advisory committee, and significant partners have a full discussion of this role and its expectations before beginning the hiring process.

5.2 Program-wide recommendations

- There is tremendous community concern that expectations will be raised by the implementation of this program, and then the funding will cease. In the long run, this scenario will cause more problems than program delivery addressed. Expecting the lead agency to seek funding for sustainability while managing a program that already relies heavily on volunteers is probably unrealistic.
- Although the community development process in Quesnel was both useful and productive, generating excitement, meaningful input, and the possibility of new partnerships and collaborations, there was significant uncertainty, during and post-process, about the process for the selection of the lead agency.

6. CONCLUSION AND ACKNOWLEDGMENTS

The Better at Home community development process in Quesnel was both interesting and productive. Although it raised many more issues than can be addressed by the program, it also gave seniors the opportunity to be heard and other entities the opportunity to use this information to enhance or improve their own services based on this input.



Those who assisted the Community Developer during this phase of Better at Home, modelled the cooperative spirit and inclusive approach embodied by the program. Both Better at Home program staff (Jody Olsson) and United Way (Lori Cruddas, Trevor Williams, Lesley Anderson) were supportive, helpful and flexible during the process, and their assistance, particularly at the community meeting, was appreciated. Marti Hamlen, community meeting facilitator, was very effective in keeping the community meeting on-track and respectful, and generous in her contribution. Deb Pedersen and Dina Unrau volunteered their time to interview hard-to-reach seniors. Donna Steeves, as ever, helped pull all the pieces together.

Appendix (a) – Summary Notes from Consultations

BETTER AT HOME RESULTS FOR REPORT

Two groups (total of 65 people) interviewed and 18 individuals

age: 50-55 56-60 61-65 66-70 71-75 76-80 81-85 86-90 90-95 96+

gender: M F

neighborhood: _____

living with other people? Yes No

annual income: (circle one)

<i>Single</i>	<i>household</i>
Below \$15,000	Below \$24,900
\$15,500 - \$23,100	\$24,900 - \$35,000
\$23,101 - \$30,600	\$35,001 - \$67,700
Over \$30,600	Over \$67,000

<i>Question</i>	<i>response</i>
1. What is the situation for seniors in our community – what do you see as the burning issues to address to help let seniors live for a longer period of time in their own homes?	<p>The most frequently identified issues for seniors were:</p> <ul style="list-style-type: none"> -affordable/accessible housing -issues related to transportation/access/isolation -services accessibility/awareness/coordination -opportunities to be engaged <p>Perception that the family support once perceived to be available to seniors is no longer there (working adult children, distance, etc.). It is difficult to ask for help from “strangers” and difficult to feel safe or feel trust with provided or hired help. Many seniors also feel that getting services is, for a number of reasons, challenging. (see barriers)</p>
2. What services and programs are you aware of in our community that can help seniors live longer in their homes? Are they accessible? Are they useful?	<p>Most often mentioned services were:</p> <ul style="list-style-type: none"> -Home Support; home nurse care -Handi Dart -Meals on Wheels -Safeway shopping service -Golden Centre lunches -chronic disease management -Dunrovin Lodge activities <p>Few others were mentioned more than once. There was a</p>

	<p>general low awareness. Accessible/useful: Those mentioned were considered so, for the most part. Timing/scheduling were issues with some services</p>
<p>3. Which services work well, and why do they work well? What barriers are there to accessing these services?</p>	<p>Generally speaking, seniors felt the services that worked well were those that were straightforward to arrange, that were flexible (ie times of service), and those that included a more personal approach (ie Meals on Wheels delivery person visiting for a few minutes).</p> <p>Barriers to accessing services most often mentioned were:</p> <ul style="list-style-type: none"> -lack of awareness of the service or how the service worked -having to/reluctance to ask for help -timing of the service didn't meet the seniors' needs – ie no evening bus service, lack of weekend services, booking Handi-Dart too far in advance -arranging transportation to the service/activity -cost of service -not wanting to go to the service or activity alone -not enough follow-up/coordination
<p>4. What non-medical home support services from the Better at Home basket of services are needed in our community? (friendly visiting, grocery shopping, housekeeping, home repair, snow shoveling, transportation to appointments, yard work)</p>	<p>All services in the Better at Home basket of services were identified as needed. An additional need identified was meal preparation or help with meal preparation. Computer training was also suggested as was basic pet care and free assistance with taxes. Personal care (ie footcare and haircuts) and errands (picking up non-grocery items) were also mentioned.</p>
<p>5. Who would be a strong lead agency in our community to deliver these services? <u>Why</u> would this/these agency be appropriate?</p>	<p>Several agencies were suggested, but there was little response to the question of what characteristics would an appropriate agency would have. Some mention of – familiar name, staff and other capacity, understands seniors and/or already provides seniors' services.</p> <p>Agencies mentioned:</p> <ul style="list-style-type: none"> • Seniors Advocacy • Seniors Centre • Lions Club • Metis Association • Quesnel Community Foundation • NC Aboriginal Family Program Society • New Focus Society • Women's Resource Centre
<p>6. What activities and services are effective in helping you to feel included in the</p>	<p>Listed:</p> <ul style="list-style-type: none"> -being able to participate in community-wide events and organizations when have a way to get there

community?	<p>-media -seniors-specific activities -media and other information formats (ie flyers)</p>
7. What would help keep you better aware of services? (ie posters, information fairs, ads, etc.)	<p>-large-print section in the newspaper ; community signboards ; flyers to each senior household ; Shaw tv and other media -services promoting each other</p>
8. What activities would you like to be a part of but currently find difficult to access (ie volunteering, cultural activities, etc.)	<p>Volunteering and attending events were most often mentioned, with transportation usually being the barrier to participation</p>
9. What changes or services would make participating in these activities more attractive or easier?	<ul style="list-style-type: none"> • more awareness • support in attending/participating • more affordable, accessible opportunities to socialize • ability to feel are giving back/contributing

Other comments or suggestions:

- **One-stop “shopping” for seniors to access services**
- **regular, accessible seniors’ drop-in health check clinic**
- **Coordination (case management) of services for individual seniors**
- **Post discharge support (setting up appropriate supports)**
- **Better at Home services should ensure they promote independence not increase dependence**
- **Where will the volunteers come? Everyone is short of volunteers.**
- **Organizations donate a seniors’ shuttle when they hold an event (particularly in evening)**
- **coordinate services with when buses come in from Wells and Nazko**
- **developing neighbourhood associations to help each other out**
- **resource/helper central contact**
- **issues for several with accessing foot care**
- **need more mobility assistance in town (ie public washroom, handrails)**

Appendix (b) – List of Community Assets

Quesnel Seniors' Community Profile

Updated January, 2013

Seniors' Services & Organizations

Seniors' Services and Groups		
Name of Organization	Service	Contact
Seniors' Advocacy Services	Process handicap parking permits, referrals, assistance with forms and information	250-992-9330
OAPO/Golden Centre	Drop-in recreational activities and a low-cost lunch for members	250-991-0090
Quesnel & District Seniors' Society	Recreational activities, information	250-992-3991
Fraser Village Home Society	Housing for independent seniors	250-992-8850
Wildwood Assisted Living	24hr assisted housing	250-747-1626
Dunrovin Park Lodge	Residential care including 3 complex care units, a special care unit for clients with dementia and a hospice unit	250-985-5800
Maeford Place Assisted Living	Subsidized & private 24hr assisted housing	250-992-8342
Elderly Program, Quesnel Mental Health Centre	Assessment, ongoing treatment and evaluation, education, community liaison, resource development and family support	250-983-6828
Home & Community Care	Home support, residential care services, support services	250-983-6850
WeCare Home Services	Companion Services, Home Making, Personal Care, Nursing, Foot Care, Accompanied Visits, Caregiver Relief	250-992-2273

Wanda's Home Care	Respite, Personal Care, Meal Preparation, Light Housekeeping, Transportation to Appointments	250-992-9633
Can I Help You?	Personal Care, Homemaking, Companion Services, Accompanied Visits, Caregiver Relief, Home Cleaning services	250-255-3717 250-747-8691
Royal Canadian Legion	Veteran services, seniors' support & advocacy, community service & volunteering	250-992-9020
Meals on Wheels	Provides warm & nutritious meals to seniors & disabled people	250-992-8342 Maeford Place
Chow Now Foods	Delivers fresh-frozen meals - cost is based on price of meals - free delivery of orders over \$20	250-992-5206
Safeway Shopping	Grocery shopping & delivery for seniors & shut-ins within 20km of Quesnel, Thursdays 9:30-noon - service is free, but minimum \$25 grocery order - no maximum order or maximum # of items - must pay by Visa or Safeway cheque cashing card (application available at till) – no cash	250-992-6477 line 2
Lifeline	Installs personal help button & communicator for fast emergency assistance - \$50 to install, and \$40 per month	250-992-1002 Gold Pan Home Emergency Response Society

Other Services		
Name of Organization	Service	Contact
Quesnel Womens' Resource Centre	Counselling, advocacy, education, groups	250-992-8472
Community Living BC	Support for adults with developmental disabilities including residential programs, day programs, self-help skills, homemaker support, proprietary care	250-992-4122
Seasons House Shelter	Emergency shelter, support and referrals	250-991-0222
RCMP Victim Services	Crisis intervention, emotional support, referrals, court support, information	250-992-3380 Cindy Osip
E Fry Society Victim Services	Family & sexual violence support, including court support, emotional support, information, practical assistance, referrals	250-992-0992 Karima Beaucage
Amata Transition House	Emergency shelter for women & their children	250-992-7321
Hospital Social Worker	Client education, locate and arrange resources, consultation and collaboration with other disciplines, short-term counselling, referrals	250-985-5696 Lee Anne Deegan leeann.deegan@northernhealth.ca
Red Cross Loan Cupboard	Short-term loans of medical equipment, such as wheelchairs	250-991-7565
Nazko First Nation	Health, education, employment, housing, etc. assistance for Band members	250-992-9085
Lhtako (Red Bluff) First Nation	Health, education, employment, housing, etc. assistance for Band members	250-747-2900
Lhoosk'uz (Kluskus) First Nation	Health, education, employment, housing, etc. assistance for Band members	250-992-3290

Quesnel Tillicum Society Friendship Centre	Family, legal, education, etc. support for local urban and non-status Aboriginal people	250-992-8347
North Cariboo Métis Association	Family, health & education support for local Metis people, free store	250-992-9722
City of Quesnel		250-992-2111
Quesnel & District Hospice Palliative Care Association	Helps relieve suffering and improve quality of life for people with a life-limiting illness	250-985-5816 250-985-5815 – Coordinator of Volunteers & Grief Counsellor
Seniors' Groups and Clubs		
Name of Group		Contact
Gold Pan Grannies	Raise money to support the Grandmothers to Grandmothers Campaign (supports Grandmothers in sub-Saharan Africa raising orphans whose parents died from HIV/AIDS) of the Stephen Lewis Foundation	olivewalsh@shaw.ca Olive Walsh
BC Seniors' Games Association	The BC Seniors Games is an annual, multi-sport event hosted by a different BC Community each year. They are one the largest Games organized within BC with approximately 3,500 participants, aged 55 plus from all over the province.	250-992-9535
Senior Curlers' Association	Seniors (50 and over) <ul style="list-style-type: none"> - Open to all curlers 50 years and over - Cost \$225.61 non-member, and \$203.20 member – Tax, Affiliation and Social Fees Included - Discount of \$30.00 Non Member and \$40.00 Member if curling in more than one league - Register as individuals 	250-747-2343

Quesnel Retired Teachers' Association	Offering support and information to retired teachers in the Quesnel area	gbrink@goldcity.net Greg Brink, president
Red Hat Society	A global society of women that supports and encourages women in their pursuit of fun, friendship, freedom, fulfillment, and fitness.	250-747-1793 Claudia Thompson 250-747-1746 Marion Gordon
Other Clubs & Organizations		
Bridge Club		250-249-5883
Elks Lodge #298	A national, fraternal, and charitable organization promoting and serving community needs through local lodge volunteers.	250-992-6886
Knights of Columbus	A fraternal service organization dedicated to providing charitable services, promoting Catholic education	250-992-6392
Legion Ladies' Auxiliary	Mothers, wives, daughters, granddaughters, etc. of Legion members and/or open to women in the community - Auxiliaries support the aims and objects of the Legion and provide financial and volunteer support to the branch and programs	250-747-3289
Lions Club	Mandate: To enrich the lives of children in British Columbia and the Yukon by "giving children abilities"	250-747-3758
Masonic Lodge Society	Fraternal organization	250-992-2808
Order of the Eastern Star	Fraternal organization	250-249-5840
Rotary Club	An international service club: the main objective of Rotary International is service – in the community, in the workplace and around the world	250-255-0867
Sunrise Rotary		250-992-7795
Scandinavian Society		250-747-2540

Toastmasters Club	An international communication and leadership development club	250-747-1180
G.R. Baker Ladies' Auxiliary		250-985-5660
Quesnel & District Arts Council		250-747-1727 Bernice Heinzelman
Religious Groups and Organizations		
St. John the Divine Anglican Church		250-992-6152
Baha'I Faith		250-992-9834
Berean Baptist Church		250-983-9700
Bethel Church		250-747-3116
Church of Jesus Christ of Latter-day Saints		250-747-2266 Bishop's Office 250-747-2422 Meeting House
Guru Darbar Society		250-992-3035
Jehovah's Witnesses		250-992-8066
Lakeview Church		250-747-3423
Lighthouse Pentecostal Church		250-992-1001
Maple Park Alliance Church		250-747-3248
Northstar Fellowship Baptist Church		250-992-8830
Salvation Army		250-992-8784
Seventh-day Adventist Church		250-747-1357
Sikh Temple		250-992-5312
St. Ann's Catholic Church		250-992-2422
Trinity Lutheran Church		250-992-6112
St. Andrews United Church		250-992-2313
Victory Way Community Church		250-991-8574

Appendix (c) – Documentation of Media Coverage

BETTER AT HOME

“Better at Home” is a program to help seniors live in their own homes longer by providing simple non-medical support services like help with housekeeping and transportation to appointments. The United Way will be setting up this program in approximately 60 new communities in BC, and the North Cariboo Aboriginal Family Program Society (NCAFPS) has been contracted to research the readiness of Quesnel for this program, and to obtain information from seniors and services for seniors about the needs in the Quesnel area. Staff of the NCAFPS would like to conduct short interviews with seniors and agencies that work with seniors to determine local needs and priorities, and to determine which services from the “Better at Home” basket of services would work for seniors in Quesnel.

If you are a senior or know of a senior who would like to provide input, or if you know of a community agency that could provide input, please contact Donna Steeves (dsteeves@longname.ca) or Karen Borsato (kborsato@longname.ca), or 250-992-9160, to arrange a brief interview.



COMING TO QUESNEL!!



Better at Home is a United Way program that helps seniors continue living independently in their own homes by providing simple non-medical services like help with housekeeping and transportation to appointments.

We are currently gathering information from groups and individuals about which services are most needed in Quesnel and how they can best be delivered.

If you are a senior or live or work with seniors, we would like to hear from you!

There will be a **Community Meeting on Wednesday, January 30 at the Royal Canadian Legion in Quesnel** where we will present our findings and allow participants a final chance to provide input.

If you or someone you know would like to provide input, please contact:
Karen (Karen@quesnelbc.com)
250-747-1760



Better at Home is a United Way program that helps seniors continue living independently in their own homes by providing simple non-medical services like help with housekeeping and transportation to appointments.

You are invited to a public meeting to provide input on how this program will be offered in Quesnel and which services are most important.

If you are a senior, or you live or work with seniors, please come to this important meeting!!!

Wednesday, January 30

Royal Canadian Legion in Quesnel

9:00 am to 4:00 pm

Lunch and refreshments provided

Transportation support is available on a limited basis.

Please pre-register by phoning

250-992-9160

(kborsato@longname.ca, or dsteeves@longname.ca)

Appendix (d) – Community Meeting Agenda

**Better at Home
Quesnel Community Meeting and Key Stakeholder Meeting
January 30, 2013 9:00 am – 4:00 pm
Legion Hall
Draft Detailed Agenda**

Community Meeting Agenda

9:00 Registration, Coffee

9:15 Welcome and introductions - Marti

(depending on number of participants, everyone will introduce themselves, or they will introduce themselves at their tables) *note: we're allowing extra time here in case we need to start a bit later*

9:45 *Better at Home* project description – Jody

10:00 Community Development Findings: assets and needs – Karen

10:30 Participant reflections - Marti

Topics (to be pre-easeled or have as handout – Basket of Services to be pre-easeled)

1. **Feedback on Karen's report** (what resonates and what's missing - did she get it right)
2. **Basket of services – what are Quesnel priorities?** (any local specific needs - non-medical support – use Parking Lot)
3. **Qualities/characteristics for lead agency** (eg. local, strong volunteer base)

Note: methodology will be dependent on number of participants

11:00 Break

11:15 Summary of participant reflections - Marti

11:45 Lead agency presentations – Marti

5 minutes per agency – also Adult Services Team – what's available in community – Dave?

12:00 Next steps, wrap-up (including Parking Lot) - Lori

Note: if time allows, Lori will ask Sheila from New Horizons for Seniors and Becky from Red Cross to speak briefly about what's available to seniors from their organizations – if not, she'll introduce them and explain that they'll be available during lunch to speak with participants

12:15 Lunch

During lunch, participants can speak with different key stakeholders, e.g. Sheila with New Horizons for Seniors, Becky with Red Cross, and Bob Simpson, MLA.

Key Stakeholders Meeting Agenda

1:00 Introductions, review of the morning, and overview of afternoon objectives - Marti, Lori, Jody

1:15 Qualities and characteristics of lead agency (from morning) - Marti

1:20 Q&A from morning and about the program, including Governance Model and Implementation Process - Jody and Lori

1:45 Lead agency presentations including comments regarding information from morning session - Marti

10 minutes per agency

2:30 Break

2:45 Lead agency selection - General discussion– Marti

If appropriate, Marti will comment on connections, themes, general observations – bring it back to need in the community - seniors valued as bottom line, recap community assets from morning and call on others (e.g. Lori and Jody to review what’s worked elsewhere)

Note: if not a strong consensus, Lori will talk about next steps, e.g. references from funding sources

3:30 Advisory committee membership recruitment – Marti & Lori

Lead agency will determine, but we will ask for suggestions for members

3:45 Next steps– revisit parking lot – Lori

4:00 Meeting ends