

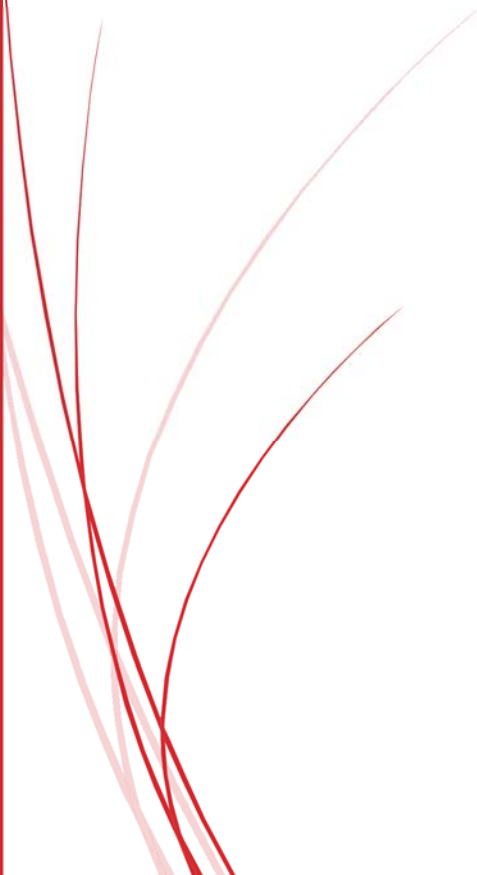


7/16/2013

# Better at Home

## Chilliwack, Agassiz and Harrison

### Community Developer Public Report



Submitted by:  
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## Acknowledgments

While the famous quote states “it takes a village to raise a child,” the experience of this engagement process echoes that it takes a village to support a senior. Many people were involved in the completion of this engagement process and deserve special mention.

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- United Way staff, notably Debbie Sharpe and Wayne Green, for their support and encouragement throughout this engagement process and their willingness to brainstorm ideas to ensure the voice of seniors was heard.

And last...but certainly not least...

I would like to thank the amazing seniors I had the privilege of meeting through this process. If I am half as active and engaged as they when I’m their age, I will be happy. Their commitment to each other, concern for the community and frank honesty are admirable qualities for us to aspire to.

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## Executive Summary

This summary provides an overview of the community engagement and consultation process undertaken in the City of Chilliwack, District of Kent and Village of Harrison regarding the implementation of the Better at Home Program, United Way of the Lower Mainland. Primary and secondary research was conducted to create an overview of seniors in the region, determine the current suite of community assets and identify barriers to accessing services.

The Better at Home Program is a program funded by the BC Government through the United Way of the Lower Mainland to provide non-medical supports to seniors to help them remain independent for longer periods of time in order to enhance their quality of life.

The number of seniors in the region has increased from 2006 to 2011 in all regions, 91% of seniors reside in the Chilliwack area. Ethnically the region contains only 4.8% visible minority and 7% Aboriginal population. A large proportion of seniors continue to live with partners/spouses while 30% of seniors in the region live alone. Information was not available to discover any regional differences in these numbers. Fixed and low income is characteristic of seniors in the region with an increasing number of seniors remaining in the workforce for several reasons. Poverty was also identified as an issue for seniors however there was no research found to quantify this perception.

Community assets are significant in the region with a continuum of services offered throughout ranging from social clubs, housing, recreation, transportation, emotional support/counselling and both medical and non-medical supports. Some regional variations were present in the services available as were service limitations based on geography, severity of need or income level.

The consultation process engaged four focus groups and outreach to seniors and service providers. Each participant was asked to prioritize the service needs of seniors which was analyzed. Stakeholders consistently reported that transportation was the key issue that needed to be addressed in the region, particularly given vulnerability of isolated seniors in remote areas, the inconsistency of current services and the limited access to public transit. Next was friendly visitation and housekeeping, followed by grocery shopping, home repair, yard work and finally snow removal.

Barriers that were identified by stakeholders in service delivery are a lack of appropriate transportation to access services, cost limitations, lack of awareness about what services are available, concerns regarding trust issues with workers providing services and both generational and racial cultural barriers.

Chilliwack Community Services was chosen by the community to be the lead agency for this project given their current networks with other service providers and their ability to leverage and expand these networks to enhance service delivery.

Risks for this project were identified through the engagement process. Notably, the identification and serving of isolated and/or remote seniors will be challenging as well as a fear of services being provided primarily in one area over another given the large geographical region. Funding limitations are a risk for this project given the funding is committed until December 2015 and managing stakeholder and seniors expectations will be a challenge particularly because the need is anticipated to be greater than the supply of services available. Finally, poor or ineffective communication will limit this projects effectiveness as will the inability to create a strong working partnership with invested parties.

Recommendations from this engagement process include the selection of Chilliwack Community Services to be the lead agency for implementation purposes and for them to develop and nurture strong working partnerships to ensure services are delivered equally throughout the region including Agassiz and Harrison. It is recommended that Chilliwack Community Services consider sub-contracting with other service providers in order to capitalize on the expertise and services currently offered and that they explore the option of partnering with Stó:lō First Nation once their engagement process has concluded.

## 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

Chilliwack/Kent has been identified as a potential Better at Home site. Tony Lapointe 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. Community Development Approach

The community development approach utilized in this process focused on obtaining both qualitative and quantitative information to create an accurate picture of seniors in the Chilliwack, Agassiz and Harrison areas, their needs, barriers to accessing service and to identify a lead agency to implement the program once the consultation process concluded.

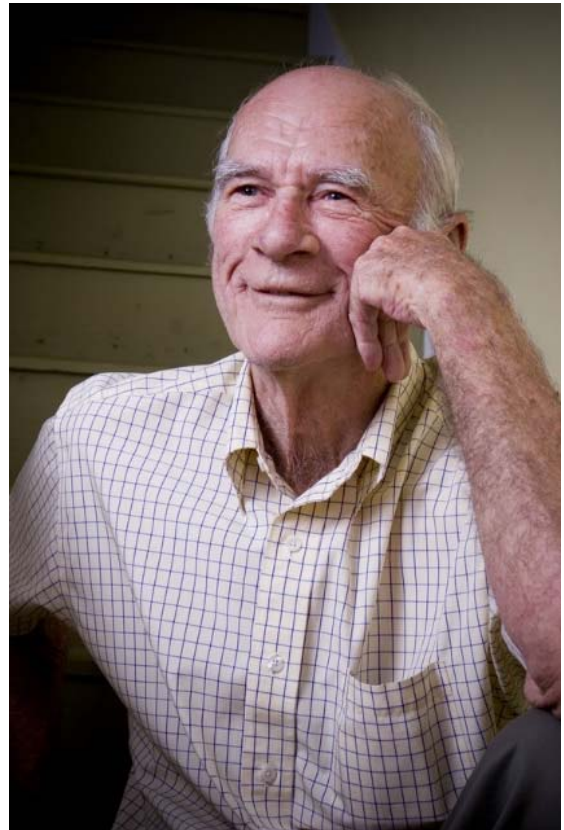
Activities undertaken to accomplish the desired result were:

1. Secondary research – information was gathered from a spectrum of sources to understand the population and what issues they may be facing.

2. Focus groups – four community forums were used to invite the general public to hear about the process and provide feedback. The forums were small so conversation and feedback was targeted to issues raised.
3. Interviews – interviews were conducted with service providers from a range of disciplines including health, social service and social clubs. Feedback was based on the population of seniors’ they serve.
4. Survey - outreach was conducted to several seniors clubs and activities to introduce the program and solicit completion of the paper version of the survey.

The focus in each activity was to determine what services are currently provided and by whom, what barriers are present to access, suggestions of a lead agency, desired qualities of a lead agency and identifying any other information that may be relevant to the implementation of the program.

It was assumed in this consultation process that the Better at Home Program will be implemented in the community if community needs and service gaps were determined to justify the program locally and that the consultation process was engaged to determine the most effective approach to accomplish this.



### **Limitations of the consultation process**

The geographical size of the region made direct outreach to seniors challenging, particularly in rural locations. Outreach to organizations in those areas was sought in order to ensure this perspective was included in the engagement process.

While the communities were receptive of the program, no champions from within the communities arose making outreach challenging.

Opportunity to connect by phone to isolated or home bound seniors was offered however the response rate for this group was limited. To minimize this, feedback

from seniors serving organizations was given additional weight in the analysis process.

## 2. Community Profile

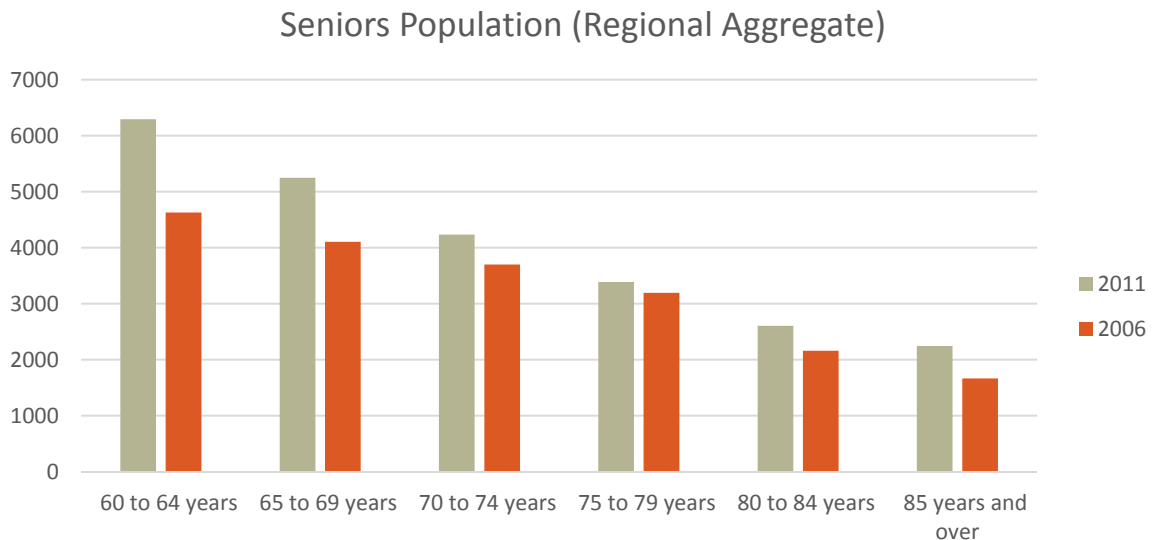
### 2.1. Description of Local Seniors

#### 2.1.1. Age

Based on Statistics Canada 2011 Census Community Profile, there are 16,140 seniors age 65 and over in Chilliwack, 445 in Harrison and 1,140 in the District of Kent for a total regional senior population of 17,725 (Statistics Canada, 2012). This represents 17.8% of the total population in the region, up 5.8% from 2006.

Regionally, Chilliwack is the largest of the three centres with 16,140 seniors age 65 and over (or 91% of the total regional senior population). The senior population in Chilliwack grew by 19% between 2006 and 2011 with significant gains in the 85 year old and over category (24.9%) followed closely by the 65-69 year olds (22.1%) and 80-84 year olds (12.9%). The trend of growth is anticipated to continue in the region with Fraser Health forecasting the senior population in Chilliwack will increase 29.1% by 2020 (Fraser Health Authority, 2010).

Agassiz has the second largest number of seniors at 1,140 or 6.4% of the total regional senior's population. The senior population in Agassiz grew by 20.6% between 2006 and 2011 with increases in the 85 and over (39.4%), 80-84 year old (34.3%) and 65-69 year olds (18.2%) and is anticipated to continue this



growth over the next several years. Fraser Health forecasts that the senior population will increase by 31.4% in Agassiz by 2020.

Harrison is the smallest of the three communities with 445 total seniors or 2.5% of the regional senior population. They have also experienced growth in their senior's populations however, particularly in the 80-84 year old (37.5) and 75-79 year old (31.3). Interestingly the number of seniors 85 and over did not change between 2006 and 2011.

Mean age of survey respondents is 83.4 while the median age of respondents is between the age categories of 75-79 and 80-84. The age distribution of respondents reflects that people who have a demonstrated need at the present time were more likely to complete the survey while those who do not have a current need seemed less likely to complete the survey. In fact, this author spoke to a number of individuals under the age of 70 and encouraged those to complete the survey based on what they know of friends or to anticipate their needs in the future however many declined.

### **2.1.2. Ethnicity**

According to Statistics Canada (2012), visible minorities make up 4.8% of the population of the area while Aboriginal status makes up 7% with the region. Out of the 4.8% visible minorities, the top three are reported to be Chinese (21%) South Asian (16%) and Latin American (14%) which is consistent with the ethnicity of respondents.

Of those who completed surveys, 79% self-identified as non-visible minority while 2.8% identified as First Nation. Interestingly, 18% of respondents chose not to answer the question of their ethnicity.



### **2.1.3. Household Characteristics**

Based on BC Stats (December 2008), 5,320 seniors age 65 and over live alone, 827 seniors are single but live with a relative or non-relative while the remaining 11,578 continue to live with intimate partners. Based on these statistics, 30% of seniors live alone in the region which is higher than Fraser Health's reported average of 26% (Fraser Health, 2010). Respondents on the other hand indicate

59.4% live alone, 4.2% live with another person (family or friend), and 25% currently live with a spouse while 13.9% did not answer the question.

#### **2.1.4. Income and Social Characteristics**

Seniors are described by service agency participants as being active with middle to low income levels which restricts the senior's ability to access services and activities that promote self-sufficiency. There was indication that addictions and mental health issues are present although hidden in the senior population due to stigma and lack of awareness regarding the combined effects of medications with alcohol and the use of multiple medications.

According to the Seniors' Health Profile 2010 published by Fraser Health Authority in November 2010, seniors living alone, women over the age 80, visible minorities and immigrants are at greater risk of poverty. Service providers concurred with the Fraser Health report on this matter.

Unfortunately it was not possible to determine if or to what degree targeted seniors are living in poverty for three reasons. First, no research was found that examines seniors' disposable income relative to income sources and/or net assets. Some have argued that seniors are generally wealthy as they have significant assets however this thinking does not take into consideration the inability of the senior to liquidate their assets or the long term cost of disposing of those assets (Randy Hawes, personal communication, 2011).

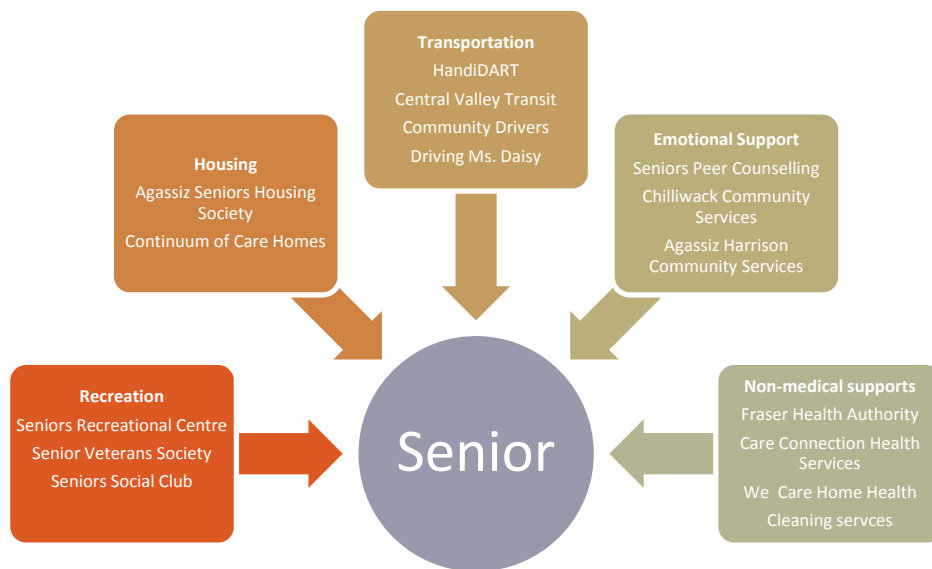
Second, there appears to be some stigma attached to the disclosure of one's income. Despite the confidential nature of this consultation process, seniors completing survey responses in this study were not prepared to disclose personal annual income amounts making statements like "none of your business" and "confidential." There was suggestion that this unwillingness is the result of senior's wanting to protect themselves from abuse and theft.

Third, seniors in the region seem reluctant to ask for help due to the stigma that may be attached. For example, one stakeholder commented that senior's will not access the local food bank when needed. While not calculated quantitatively in this study, a majority of seniors and service providers indicated many seniors require working part time in order to maintain their standard of living (personal communication, 2013). This is consistent with the BC labour Force Participation Rates Projections Analysis conducted in August 2010 that found the number of seniors over 65 staying in the workforce has increased and will continue to increase

in the foreseeable future and that men are more likely than women to remain in the workforce (BC Stats, 2010).

## 2.2. Summary of Assets

The communities of Chilliwack, Agassiz and Harrison have a large and broad scope of assets available to seniors that address physical, social, emotional, and recreational needs provided by government, for profit and not for profit agencies (see appendix 2).



Further, the region benefits from an almost “small town” mentality where community participation and engagement is sought out by seniors and where concern for fellow seniors is common place. Indeed, on several occasions throughout this consultation process, seniors expressed how this program could assist others they know as well as themselves and inquired about service access for those individuals.

When asked about what organizations or assets exist in the region, 74% of respondents could not identify any agency or individual who offers support to seniors. The balance of respondents consistently reported Chilliwack Community Services, Chilliwack and District Seniors Resource Society, Veteran’s Affairs, and Lions as available to offer assistance or referral when necessary.

### 2.3. Seniors needs related to nonmedical home support

Determining seniors' non-medical needs was determined by interviewing organizational stakeholders, conducting three public forums and the completion of surveys by seniors, caregivers and helping professionals. Information from the stakeholder meetings and community forums were analyzed for themes while the surveys were evaluated quantitatively.

#### 2.3.1. Surveys

Seniors and caregivers were asked to complete a survey (online or on paper) and identify their needs in priority as well as what barriers they experience to receive services. Each item was given a weight of 1. Based on the surveys, seniors identified their priority non-medical supports are housekeeping and transportation (tied for first) followed closely by shopping, home repair and yard maintenance.

In relation to cost, 15% of respondents indicated they could afford to pay a "reasonable" amount with the vast majority stating they could cover minimum wage costs for services but being on a fixed income restricts their ability to pay any more than this. While there was some opportunism present with participants (a small number of seniors indicated they could pay but feel the services should be free), the vast majority of survey participants identified they could not afford services even if subsidized.

Participants also identified several factors they believe create barriers to accessing services.

1. **Lack of Appropriate Transportation** – participants spoke of the difficulty to access transportation and other services because of where they live. Rural Agassiz for instance, Harrison, Rosedale, Greendale, Cultus Lake, and Yarrow are generally not served well or consistently at the present time. Bus service is available to some locations however on a limited basis. For example, there are two busses per day from Agassiz to Chilliwack. If a senior has an appointment in Chilliwack, travelling from Agassiz is a full day affair and if that senior misses the return bus they are now extremely vulnerable as they do not have safe transportation home. It was noted as well that HandyDART operates but is also quite limited in their service area.

2. **Cost** – Connected to the lack of transportation, stakeholders identified cost as a barrier that limits their ability to access services. While some respondents indicated they could likely pay minimum wage for services, the majority made it clear that they often cannot afford the services they need.

3. **Poor communication** – consistently respondents identified a lack of available information provided as a barrier to knowing where to access services and how. Other communication barriers such as the size of print and translation services was also included in this discussion.

4. **Accurate Database of Services** – it was noted that while the region has several different services available for seniors, maintaining a database of these services is time consuming and often neglected. Consequently, the information and referrals made to seniors is at times outdated which can be frustrating. BC211 maintains and manages a province wide social service referral database however is not generally known about in the region.

5. **Lack of trust** – seniors and caregivers identified a fear of accessing services because they did/do not have a relationship with the service provider or, in most examples, the worker coming into the senior's home was not the same person which led to a fear on the senior's part of being taken advantage of. For example, one senior when discussing this question expressed concern that while they receive services from FHA, the worker that attended to their needs was not always the same person. This inconsistency generated some fear on the part of the senior although they reported being apprehensive to discuss their concerns with the provider for fear of losing services. Another component to this as well was the idea that seniors become attached to their workers and so when receiving services they also tend to visit which, for the senior, may be the only visit they get in that week.

6. **Cultural barriers** – for the purpose of this discussion, the term "cultural" is being defined broadly and includes generational differences as well as



racial difference. Seniors identified that they do not like being addressed by their first name and were less likely to engage a service because of this factor. During the final consultation session, participants discussed how addressing elders by “Mister” or “Misses” is commonplace in European countries.

Others identified racial concerns about accessing service, not only in the sense that some immigrants are reluctant to engage any institutional system for support but that some are often left without service access because of their ancestry. For example, one participant identified her off reserve status from another province has led her to being refused services from both First Nation and non-First Nations organizations.

### 2.3.2. Stakeholder Interviews

Formal interviews with ten (10) community service providers as well as informal interviews with seniors were conducted over the course of this consultation where they were asked to identify current needs and prioritize services based on the basket of services. Consensus was clear that transportation is a key issue for seniors, particularly in remote locations such as rural Agassiz, Rosedale, Greendale, Yarrow and Cultus Lake. Visitation was identified as the next most needed service followed by cleaning services.

### 2.3.3. Stakeholder Meetings

Open house forums were held May 24<sup>th</sup>, May 27<sup>th</sup> and July 16<sup>th</sup>, 2013 and a community stakeholder meeting June 3, 2013. Consensus from these consultations indicate transportation, shopping (particularly carrying grocery bags) and home repair are the three greatest priorities for seniors. The fourth was visitation/respice services for people who don't quite qualify for FHA services but are still in need of assistance (whether the senior themselves or the caregiver).

Participants also identified needs outside of the basket of services offered by the Better at Home Program. Specifically the need for help with packing household belongings and moving as well as installation of handrails and nonslip surfaces for outside stairs and walkways in order to prevent injury and enabling seniors to remain in their homes for longer although these last two items could be included under the “minor home repair” category depending on the lead agency's capacity.

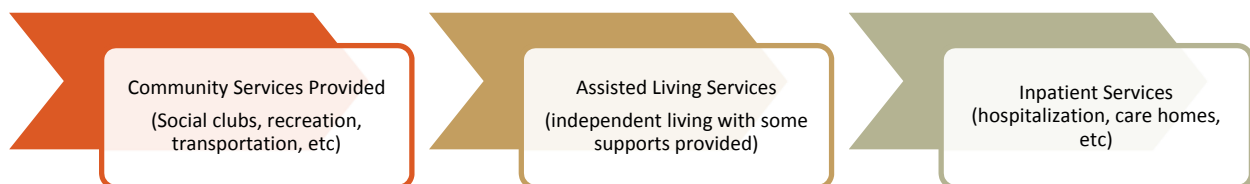
Consequently, service priorities from stakeholder groups can be summarized as follows (in order of importance):

Service Providers/Organizations	Public Forums	Seniors/Caregivers
Transportation	Transportation	Transportation
Friendly visiting	Shopping (particularly carrying groceries)	Housekeeping
Housekeeping	Home Repair	Grocery shopping
Grocery shopping	Friendly visitation/respice	Home repair
Home repair		Yard work
Yard work		Friendly visiting
Snow removal		Snow removal

Examining the priorities by the different groups, the findings are consistent with one exception; friendly visitation. Service providers and public forum participants identified friendly visitation as a priority while senior survey respondents did not. The likely explanation for this is that the seniors completing surveys were doing so in the community and who tend to be involved in social clubs and activities, resulting in a lower need for these services. Care was taken in the consultation process to solicit feedback from seniors who are more isolated however a senior's mobility status was not asked for in the survey process. Transportation and housekeeping are consistently seen as priorities for all stakeholder groups.

#### 2.4. Suggested opportunities for service integration

It was clear from the beginning of this consultation that Chilliwack, Agassiz and Harrison have significant assets that address seniors' needs. From a meta-perspective, it is easy to see the continuum of care that is provided to seniors ranging from light, non-medical services to more intensive medical services.



Saying that however, there are challenges when providing services to seniors as above. Working with significant resource limitations results in the seniors with the greatest need being served first and those with the less severe or pressing need being served later both in the medical and non-medical domains. Fee for service agencies can fill the gap in this to some degree however only for those who can afford the services. Also, while the region has significant resources, these services are not consistently offered throughout the region.

One advantage available to this region however is the current partnerships that take place among service providers, both in regards to seniors' services as well as other services offered by their agencies. For example, Chilliwack Community Services and Agassiz Harrison Community Services, along with other partners, operate the WorkBC program while the Chilliwack Seniors and District Resources Society works in partnership with the City of Chilliwack to provide the Snow Angel Program while the Chilliwack Seniors Peer Support Society works with their sister agency Agassiz Seniors Peer Support Society to provides services as efficiently and effectively as possible.

In regards to Better at Home, there are several local agencies who provide different services that, if coordinated, would benefit the seniors accessing them:

1. Transportation – Chilliwack Community Services and Community Drivers in Agassiz Harrison both provide volunteer led transportation services for seniors.
2. Housekeeping – We Care and Care Connections Health Services Cooperative currently provide housekeeping services to clients.
3. Home maintenance – Chilliwack and District Seniors Resource Society provides minor home repair services for seniors.
4. Snow removal – Chilliwack and District Seniors Resource Society provides this service in partnership with the City of Chilliwack.
5. Grocery shopping – currently provided in Chilliwack by IGA Marketplace, Safeway and Price Smart.
6. Friendly visitor – Both Chilliwack and Agassiz Harrison's Seniors Peer Support Societies provide phone and in person visitation to seniors.
7. Yard work – this service is available in town however at market prices.

Because the majority of services are currently available and provided by not for profit organizations in town, an opportunity exists for the lead agency to coordinate

community efforts that maximize the benefits seniors would receive and given the current infrastructure, the ability to create a systemic service model appears achievable.

There are also opportunities to expand this network beyond the current providers to enhance service delivery:

1. University of the Fraser Valley – this university operates a campus in Chilliwack and provide several different professional degree and trades programs. An opportunity exists to partner with UFV trades students to provide needed repair work for seniors while receiving practical experience under supervision.
2. Stó:lō First Nation is presently completing their own Better at Home Consultation Process. Depending on how they decide to implement their programming, if the Chilliwack, Agassiz and Harrison communities are determined to be a service site for them, there may be an opportunity for the Stó:lō based program to partner with the community based program in order to find economies of scale and therefore serve more seniors or for a longer period of time as well as other advantages that may result from the synergy of this partnership.

Care must be taken however to ensure services are delivered consistently throughout the region. While some areas have certain services, the scope of service availability is not consistent throughout. Chilliwack does, by way of population and a philanthropic atmosphere, tend to have a high degree of services available while Agassiz and Harrison have only some of the proposed basket of services currently provided.

### **3. Community Readiness**

#### **3.1. Explanation of Community Readiness**

Community readiness is a model that analyzes a community's ability to implement programs and whether that implementation will be successful and utilized for positive change (Edwards, Jumper-Thurman, Plested, Oetting, Swanson, 2000). Stemming from studying implementation of preventative programs, and paralleling the Stages of Change model by Prochaska and DiClemente, the Community Readiness Model expands and articulates the different stages communities experience and what initiatives can be used to move the community through the continuum in order for successful program implementation (Edwards, Jumper-Thurman, Plested, Oetting,

Swanson, 2000). According to Edwards, Jumper-Thurman, Plested, Oetting, and Swanson (2000), there are nine stages of community readiness which they describe as follows:

1. No awareness – there is no recognition that a problem exists
2. Denial – some recognition that a problem exists although often seen as “someone else’s problem.”
3. Vague awareness – recognition of a problem and that something should be done to address although no motivation or energy behind the solution yet.
4. Preplanning – Leaders begin to emerge to address the problem
5. Preparation – planning begins but typically based on anecdotal information; nothing quantifiable. Leaders and others begin discussions to find ways to resolve problem.
6. Initiation – Generally no active resistance to initiatives; leadership and stakeholders enthusiastic about solution; energy builds.
7. Stabilization – programs get up and running, even in smaller versions. Community support develops and people begin experiencing change as a result of the new program.
8. Confirmation/expansion – program is mature and formalized; program evaluations begin and modifications are made based on results.
9. Professionalization - highly trained staff are running programs; initiatives are targeted both generally and to specific populations

Assessing readiness however is not limited to attitude or awareness but also based on the capacity of the region to implement the program.

Stakeholders in the area are fully cognizant of the need to provide services to seniors. While at times respondents confused “medical” with “non-medical” services, there was consensus that seniors require additional support to remain independent. Indeed, this writer received over 20 calls asking for service now or inquiring how to access service.

As discussed in the community asset sections, the region possesses significant resources related to service provision on a continuum from non-intrusive items like social clubs to more directive services such as counselling to agencies providing a blending of medical and non-medical supports. Of course, the more specialized a

service, the more likely that service requires paid, professional staff however there are significant volunteer resources that provide services throughout the community.

Regionally, the programming available is standardized and formalized with set criteria for inclusion/exclusion, costs, training and policies that guide how the programs operate. Additionally, the City of Chilliwack and Chilliwack Community Services and likely others have undertaken a review process to determine what has been done to date and what still needs to be done to serve seniors responsibility.

Consequently, based on the above model, it is clear that the region is in the expansion stage of community readiness. This willingness to implement the Better at Home program will provide the region an opportunity to further align resources among partners in order to enhance service delivery.

### 3.2. Potential Risks

Several risks were identified that may impact the implementation and operation of the Better at Home Program.

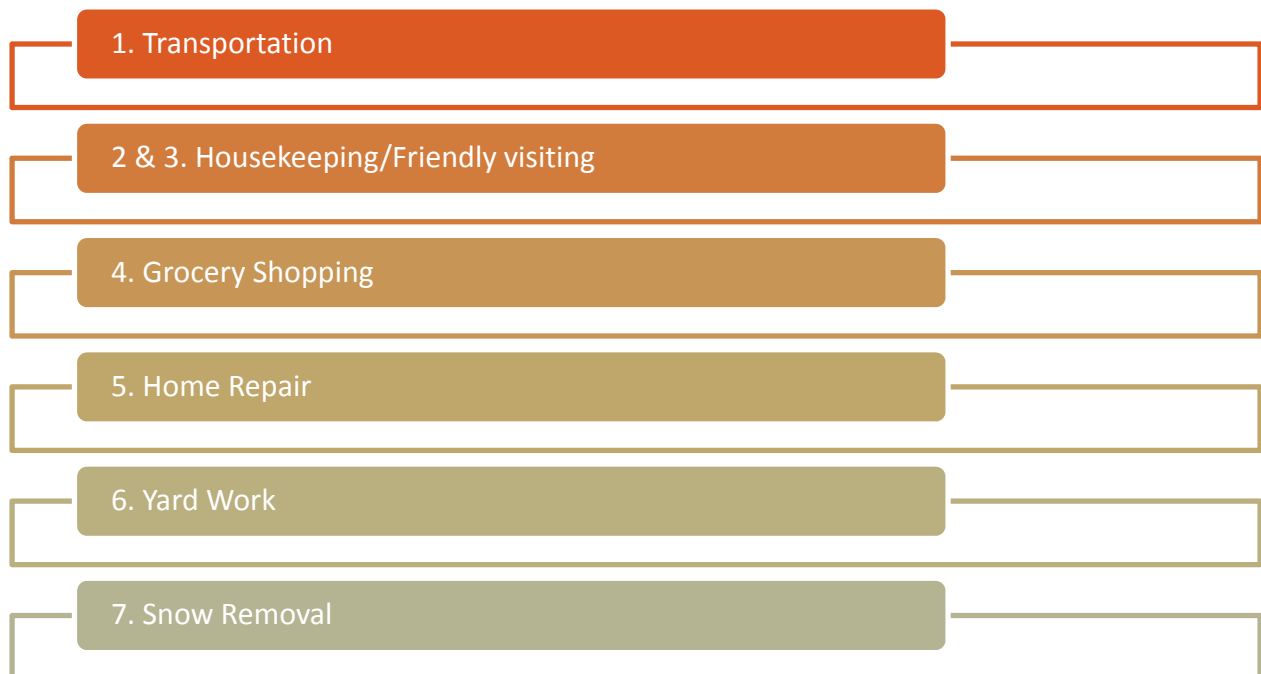
1. **Inability to service remote and/or isolated seniors** – while the majority of seniors reside in the Chilliwack area, it is important to recognize that 30% of Harrison’s total population is 65 and over while Agassiz’s 65 and over population is 20% of the total, both higher than Chilliwack. Also, Agassiz particularly tends to be more economically depressed while seniors continue to live in more rural settings compared to its neighbouring communities. Also, the region is quite large geographically which may present challenges in providing services.
2. **Unequal service offerings** – concern was expressed about Chilliwack receiving the majority of services based on population distribution for the region. Care must be taken to ensure Agassiz and Harrison seniors are serviced on a relatively equal basis to ensure the program develops and maintains a regional focus.
3. **Inability to develop a partnership network** – while there is energy in the region to develop a strong working relationship among partner agencies, development of these partnerships can be labour intensive and difficult to maintain. A concerted effort on the part of all stakeholders will be necessary to ensure the viability of the program. Complicating this partnership is the tendency of seniors groups (particularly social groups) to operate in isolation or competition with other seniors groups which has eroded a sense of trust over the years.

4. **Funding limitations** – while Chilliwack is already a philanthropic community, it is important to recognize that funding for this program is only committed to December 2015. While research is being conducted to make a case for the programs continuation, other funding models should be explored. Consequently, without a diversified funding model, the program will be in jeopardy of closure.
5. **Poor and/or inconsistent communication** – seniors and other stakeholders consistently remarked that having outdated information and not knowing what was available were the biggest barriers to accessing service. Consistent and targeted communication will be essential if this program is to thrive.
6. **Managing stakeholder expectations** – with the limited funding and service opportunities, seniors will need to have a clear understanding that this program may not be able to meet all of their non-medical needs. Additionally, organizations serving vulnerable seniors will also need to be aware that Better at Home may not be able to serve some of their clientele depending on the severity of the need and resources available.

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

##### 4.1. List of preferred services

While there is some variation to the placement of friendly visiting in the suite of services, it is clear that the following services are a priority to the seniors in the region.



Without exception, transportation is the number one priority for seniors in the area, whether for shopping, medical appointments or visiting loved ones in care, the need for accessible and affordable transportation is key.

The next priority identified is housekeeping paralleled with friendly visiting. While respondents to surveys scored friendly visiting lower, this author believes it belongs at the number two position for several reasons. First, it was apparent that while feedback from isolated seniors was encouraged, the response rates from this group were low. Service providers consistently reported that isolated or limited mobility seniors are in desperate need of visitation and so their input is weighed heavily in this discussion. Second, visitation was often overlapped with shopping, transportation and grocery shopping by respondents. Several respondents indicated they wanted someone to go shopping with them or to help them with housework, both activities having visitation as a natural consequence of those activities. Interestingly, service providers scored friendly visiting higher than seniors themselves. Finally, several respondents included the concept of “respite” service in the context of friendly visiting as well. There was a sense among respondents that having someone come and spend time with a spouse for example would give a visit for the spouse and some free time for the caregiver.

Grocery shopping was identified as the next most important need by respondents. Again, this service was overlapped with friendly visiting by respondents, believing that someone would come and take them shopping and then return them home as

more of a social exercise although there was also a sense that the someone from the Better at Home program would conduct the shopping and then deliver the items.

Home repair, yard work and snow removal are lower on the list naturally because not all respondents own their own home or live in condominiums where those services are covered by strata fees.

#### 4.2. Key lead organization criteria defined by community consultation

As a part of this community consultation process, participants were asked to identify potential lead agencies to deliver this program and/or what qualities the respondent believes the lead agency should possess to be successful with this program.

Respondents identified the following criteria/characteristics they believe are essential in the lead agency:

- Dependable
- Reliable
- Supportive
- Understanding
- Flexible
- Good listeners
- Competent
- Good manners
- Organized
- Honest
- Friendly
- Trustworthy
- Patient
- Cheery
- Pleasant
- Experienced
- Sensitive
- Empathetic
- Qualified
- Supportive
- Compassionate
- Courteous
- Knowledgeable
- Responsive
- Doing, not talking
- Able

Respondents were also asked to identify by name agencies they thought would be a good lead agency for the Better at Home Program. Interestingly a majority of respondents either did not have an opinion or did not know who to pick. Of those who did however, the following organizations were suggested to operate/coordinate the Better at Home Program:

- Chilliwack and District Seniors Resources Society
- Chilliwack Veterans Society
- Agassiz-Harrison Community Services
- Chilliwack Community Services
- FHA
- Service Canada
- Lions Club
- YMCA

One main objective of this consultation is to facilitate community conversations to identify agencies supported and able to implement the Better at Home Program in the region. Questions throughout the consultation centered on “capacity” and which organization possesses the necessary capacity to implement the program.

During a stakeholder meeting June 4<sup>th</sup>, participants took part in a brainstorming session to identify characteristics that would be important or necessary in a lead agency and to define "capacity."

Capacity was defined by this group as having the following characteristics:

1. Administrative capacity – this was defined as having the support staff that can administer the program, schedule services in a timely fashion and provide reception support at least during normal office hours.
2. HR – ensuring that human resources have appropriate training, certifications and that the organization is ethical in their HR activities
3. Financially stable/sustainable – this criteria was specific to having capacity to contract with others and manage those contracts, have capacity to seek additional funding for the program and that is accountable financially.
4. Programming – participants identified it is essential that the lead agency be currently providing services to seniors.
5. Accessibility – this criteria includes the ability to promote the program effectively and secretarial support (as mentioned above) to provide easy access to seniors.
6. Risk management – participants believe it is essential that the lead agency have policies and procedures that minimize risk to the senior, staff or volunteer.
7. List of services required – participants also identified that there may be some advantage if the lead agency has other programs that can be used parallel to Better at Home with seniors in order to achieve a higher return on social investment.

#### **4.3. Proposed lead agency and rationale**

Participants at the June 4<sup>th</sup> stakeholder meeting were asked to assess community organizations based on the criteria above and determine who they believed would be candidates to be the lead agency.

The discussion allowed participants to recommend and discuss the expectations of the lead agency and who in their community would be best suited. Based on the discussion, consensus was reached by participants that Chilliwack Community Services was the best choice of a lead agency with the clear expectation that no duplication of services will result from this process.

Chilliwack Community Services was selected by the group for the following reasons:

1. They meet all the minimum requirements of the United Way of the Lower Mainland.
2. They have the capacity with 125 staff and 259 volunteers to administer the Better at Home Program.
3. They have reception service available Monday to Friday from 8:30AM to 4:30PM.
4. They provide a variety of services to seniors including Meals on Wheels, legal advocacy and information and referral.
5. They have working relationships and networks with other nonprofits and service agencies in the region, particularly Agassiz-Harrison Community Services.
6. They have grown financially and receive annual audits of their financial position.
7. They have the capacity to enter contracts with service providers and to oversee those contracts to ensure services are provided according to the specifications of the Better at Home Program.
8. They maintain CARF accreditation requiring HR and risk management plans and policies be reviewed and updated routinely. Also, because of other programs they offer, they have the necessary protocols for volunteers and others to ensure appropriate screening and training of volunteers is completed.
9. In kind contributions by Chilliwack Community Services, particularly in public relations and marketing, will help the Better at Home Program become recognized in the community.
10. They meet all of the lead agency criteria identified by the community and stakeholders and are widely supported by the community to implement Better at Home.

## **5. Recommendations and next steps**

The following recommendations grow out of the consultation process in regards to the implementation of the Better at Home Program:

1. It is recommended that Chilliwack Community Services apply to the United Way of the Lower Mainland for Better at Home Program funding.

2. It is recommended that the lead agency subcontract services to current providers, particularly in Agassiz and Harrison to ensure program develops and maintains a regional presence.
3. It is recommended that the lead agency explore funding options to extend the program beyond 2015.
4. It is recommended that the lead agency enter discussions with the Stó:lō First Nation program to explore partnership opportunities that are mutually beneficial.

## Sources Cited

- BC Stats. (August 2010). British Columbia labour force participation rate projections: a cohort analysis model. Accessed July 10, 2013 from [www.bcstats.gov.bc.ca/Files/ff02b01d-32c0-48a9-96cf-0fdd19837c2e/BritishColumbiaLabourForceParticipationRateProjectionsACohortAnalysisModel.pdf](http://www.bcstats.gov.bc.ca/Files/ff02b01d-32c0-48a9-96cf-0fdd19837c2e/BritishColumbiaLabourForceParticipationRateProjectionsACohortAnalysisModel.pdf)
- BC Stats. (December 2008). Census 2006 – Provincial Electoral district profiles – Chilliwack. Accessed July 10, 2013 from <http://www.bcstats.gov.bc.ca/StatisticsBySubject/Census/2006Census/ProvincialElectoralDistricts.aspx>
- Edwards, R.W., Jumper-Thurman, P., Plested, B.A., Oetting, E.R., & Swanson, L. (2000) Community readiness: research to practice. *Journal of Community Psychology*, 28(3), 291-307.
- Fraser Health Authority. (November 2010). Seniors health profile 2010: a look at the health of older adults in Fraser Health. Accessed July 10, 2013 from [http://fraserhealth.ca/media/Seniors\\_Health\\_Profile\\_2010.pdf](http://fraserhealth.ca/media/Seniors_Health_Profile_2010.pdf)
- Statistics Canada. 2012. Census Profile. 2011 Census. Statistics Canada Catalogue no. 98-316-XWE. Ottawa. Released June 27 2012. Accessed July 10, 2013 from <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/prof/index.cfm?Lang=E>
- Statistics Canada. 2007. 2006 Community Profiles. 2006 Census. Statistics Canada Catalogue no. 92-591-XWE. Ottawa. Released March 13 2007. Accessed April 9, 2013 from <http://www12.statcan.ca/census-recensement/2006/dp-pd/prof/92-591/index.cfm?Lang=E>

## **Appendices**

### **Appendix 1 – List of Community Assets**

#### **Chilliwack and District Seniors' Resources Society (CDSRS)**

CDSRS provide a range of services to seniors in the regional district of Chilliwack. Their services include:

1. Information and referral services – CDSRS maintains an information and referral database for seniors looking for part time work, housing available that is senior's friendly, resources for caregivers, local support groups and assistance with government forms. They also assist with income tax forms in March and April every year.
2. Grocery Shopping – (in partnership with Marketplace IGA). Seniors can phone in their grocery list and a volunteer will complete the shopping and IGA will deliver the groceries and accept payment. A fee of \$10 delivery charge applies.
3. Equipment Registry – mobility and other items needed by seniors are kept in a database and published monthly. Items such as wheelchairs, walkers, bathroom lifts and other items
4. Recreational and social activities such as bocce ball, floor curling, tai chi, pickle ball, chair yoga, badminton, table tennis, water classes, carpet bowling, and dances.
5. Bus tours – a very popular activity for this organization, they organize and take people over age 40 on bus tours to different sites within the lower mainland. Shopping, live theatre, horseracing, Minter gardens to name just a few. Costs range but are based on a cost recovery model.
6. Seniors Repair Service – the society dispatches local tradespeople to complete carpentry, electrical, gardening, painting, plumbing and odd jobs for seniors. Cost of the service is \$17.00 per hour with \$3.00/hour being donated back to the society as a referral fee.
7. Snow Angels Program – offers snow shoveling services to seniors in Chilliwack (in partnership with the City of Chilliwack)

#### **Agassiz-Harrison Community Services**

Agassiz-Harrison Community Services is a multi-service, social service agency serving the communities of Agassiz and Harrison. They provide the following services targeted to seniors:

1. Friendly Phone Program – this is a volunteer based program that telephones senior shut-ins three times per week to check in with the senior, ensure they

have what they need and to activate the health care system if necessary for this individual.

2. Food Bank – offers food for free to seniors and other community members living at or under the poverty line. They also provide a Christmas Hamper program that makes food and Christmas hampers for those in need in the community at no cost to the individual.
3. Family Support Programs – in partnership with the Ministry of Children and Family Development, the program offers services primarily to parents and families to strengthen parenting abilities and foster healthy child development however the number of seniors in the position to parent their grandchildren is increasing. Consequently the senior can access service from this program when in this situation.
4. Addiction counselling – this program is designed to help people overcome the negative effects of drug and/or alcohol addiction. Support is offered to the individual and their family as well. Seniors reportedly access this service to get information and support when dealing with a drug addicted family member and on a limited basis seeking individual service to overcome addiction to medications.
5. WorkBC – the organization, in partnership with Chilliwack Community Services and other co-operative members, provides the employment services program for the Agassiz and Harrison area. This program is open to all ages although the number of seniors accessing the program has been increasing over time.

### **Chilliwack Community Services**

Chilliwack Community Services is a multi-service social service agency that offers programs to community members. Specific to seniors include:

1. Community Drivers – This is a volunteer led program that transports seniors to medical appointments, shopping trips and other transportation needs. A fee is charged to cover cost of transportation.
2. Meals on Wheels – this volunteer based program provides hot and frozen meals to seniors each weekday. Meals cost \$6.50 each.
3. Seniors Advocate – this service provides assistance with government and other forms and answers any questions a senior may have about the different funding and other services that may be available. This program also provides free income tax returns for seniors during March and April of each year.

## **Driving Miss Daisy**

Operated by Kim and Gary, they offer specialized transportation services to seniors, veterans and those with disabilities serving Chilliwack, Kent, Harrison Hot Springs, Bridal Falls and Rosedale areas. A fee is charged for this service based on the level of service required.

## **We Care Home Health Services**

This organization is a for-profit agency with locations throughout Canada, particularly serving the Fraser Valley, and offer a range of nursing and support services including personal care, homemaking, visitation (in and out of the home), nursing, foot care, caregiver relieve and respite and remote health monitoring with other programs designed to promote health in the workplace and in the community at large.

## **Care Connection Health Services Co-operative**

This organization is a co-operative started by a number of nurses and other helping professionals to address seniors' practical needs that were not being met by the medical profession. They provide personal care services, companionship and respite services, homemaking services, nursing foot care, palliative care and dementia care services. Costs are based on the level and intensity of services required.

## **Fraser Health Home Health Services**

These services including caregiver support and respite, adult day programs, home care nursing, home health clinics, personal care services, nutrition, medical equipment and others. In addition, they provide social worker support to address adult abuse and neglect and other support services as available to the senior based on a physician's referral and needs assessments.

## **Chilliwack Seniors Peer Counselling Society**

This is a volunteer driven organization in operations since 2000. They provide comprehensive training, coordination and supervision for volunteer peer counsellors involved in providing volunteer services to clients in several program areas including in home visitation with seniors, volunteer respite services for people with Alzheimer's Disease and dementia and telephone support to seniors and shut ins.

### **Agassiz/Harrison Seniors Peer Counselling Society**

This is a volunteer driven organization that provides the same services as their sister organization in Chilliwack. They have highly trained volunteers that complete enhanced security clearances and once trained, go into the homes of clients to visit and provide emotional support and assistance as necessary.

### **Community Drivers Society (Agassiz-Harrison)**

Serving the Agassiz-Harrison area, this service is a volunteer based program that operates as a separate society and in partnership with Agassiz-Harrison Community Services to provide pre-arranged rides for seniors to shopping, medical appointments and other transportation needs seniors may have.

### **Mission Community Services**

Childcare Resource and Referral Program – this program offers support and guidance to seniors in the position of parenting their grandchildren.

### **Seniors Housing Society**

Provides and oversees 47 independent living rental units in two facilities for low income seniors in the Agassiz-Harrison Area.

### **Chilliwack Senior Veterans Society**

This organization provides meals daily at low cost and weekly recreational activities such as bingo and card games.

### **Chilliwack Seniors Recreational Centre**

This organization provides low cost meals daily, acts as a drop in for seniors to socialize and schedules weekly recreational and social activities such as bingo, card games and other activities.

### **Chilliwack Seniors Social Society**

This group organizes recreational and social activities for seniors to promote health and wellbeing and social connection. Dancing, cards, social outings and others are just some of the activities they schedule based on the interest of members.

### Other community assets:

- Old age pensioners
- University of the Fraser Valley
- Fraser Valley Regional Library
- Kent-Harrison Senior Social Society
- Yarrow Senior Citizens Society
- Chilliwack Elks Lodge 48
- Chilliwack Rotary Club
- HandyDART
- Fraser Health Authority
  - Chilliwack General Hospital
  - Mental Health Services
- Physicians
- Fitness/Activity Centre
- Grocery delivery by IGA Marketplace
- Alzheimer's Society of Canada, Fraser Valley Chapter
- Salvation Army Family and Community Services
- City of Chilliwack (Snow Angel Program)
- Chilliwack Dogwood Monarch Lions Club
- Religious institutions
- United Way
- Info 211
- Mt. Cheam Lions
- Chilliwack Lions Club
- Village of Harrison
- Royal Canadian Legion
- District of Kent
- Agassiz Public Library
- Ferny Coombe Pool
- YMCA
- Seniors Unlimited

### Appendix 2 - Documentation of media coverage

- Press release issued April 20, 2013 to Chilliwack Progress, Chilliwack Times and Agassiz-Harrison Observer. Only the Progress ran the story.
- Advertisement Chilliwack Progress – May 21, 2013
- Advertisement Chilliwack Times – May 21, 2013
- Advertisement Chilliwack Progress – July 4 and 11, 2013
- Advertisement Agassiz-Harrison Observer – July 5 and 12, 2013
- Consultation dates were advertised through social media

## Seniors do better at home

By [Jennifer Feinberg - Chilliwack Progress](#)

Published: April 24, 2013 2:00 PM

Updated: April 24, 2013 2:41 PM

It's an ambitious goal is to keep Chilliwack seniors living independently in their homes as long as possible.

Better at Home is a program from the United Way of the Fraser Valley, funded by the province, says Tony Lapointe, a consultant who will be conducting community consultations soon.

The Better at Home Program helps seniors by providing non-medical support services such as transportation, light house work, lawns, minor home repair, and more.

"The intent is to capitalize on existing services in the community by utilizing volunteers and non-profit activities in order to make the program as affordable and accessible as possible," said Lapointe in a release.

Better at Home is coming to 60 B.C. communities, with each community getting the ability to determine what services are needed and which non-profit organization will provide those services through a community consultation process. The program will run until December 2015.

Lapointe was hired by the United Way to conduct community consultations in the Chilliwack area.

To find out more email [tony@tonylapointe.com](mailto:tony@tonylapointe.com) or call him at 604-864-9294, 604-864-9294 or toll free at 855-864-9294.

[jfeinberg@theprogress.com](mailto:jfeinberg@theprogress.com)

# New app could make boating safer

A new mobile phone application designed by British Columbia search and rescue crews will help boaters stay safe on the water this summer.

Developed by Royal Canadian Marine Search and Rescue (RCM-SAR), the free Safe Boating App has a range of resources to help boaters with voyage planning, weather, communication, and emergencies.

"This is a really handy app for the thousands of recreational boaters in B.C., and its safety information could potentially save lives," said RCM-SAR president Jim Lee. "It consolidates a lot of information that all boaters should have into a simple one-stop phone application."

The RCM-SAR Safe Boating App includes voyage planning resources; tide, current, wind and weather information; emergency procedures and distress

signal information; emergency radio communication procedures including sample recordings; VHF marine radio channel listings for Canada - Pacific; contact information for non-emergency vessel assistance; safety equipment and navigation light requirements; equipment checklists; basic maritime collision regulations; hazard to shipping and tsunami debris reporting using the phone's GPS and camera, and a conversion calculator for fueling.

"This app was developed by Adam Hyde, a crew member at our West Vancouver Station who has a passion for boating safety," said Lee. "We're excited to share it with the boating community, and we look forward to people using it on board and ashore."

The RCM-SAR Safe Boating App is available on iPhones through the iTunes store.

## Fire call



Fire crews from Agassiz, along with rail workers, worked together to extinguish flames from a grass fire at the side of the rail line in Agassiz on Wednesday at about 4:30 p.m. at the Cameron Road train crossing.

JESSICA PETERS / OBSERVER

# New highway camera at Highlands Boulevard

There's a new web cam on the DriveBC website located in the District of Kent.

The camera is located on Hwy. 7 at Highlands Boulevard, about three km east of Harrison Mills, looking east. There are now more than 300 B.C. highway webcam images on the Drive BC network.

In a statement about the new camera, the province said the location was chosen because it

is subject to high traffic volumes and rapidly changing weather conditions.

As with all of the live web cams, they hope that drivers will check the route being heading out.

"The new web camera will provide travelers with real-time road conditions in an area where traffic and weather conditions can and do change very quickly. This is a great tool for ensuring

a safe drive home," said Chilliwack-Hope MLA Laurie Thross.

The B.C. government launched the DriveBC website in 2005. It receives more than 2.9 million visits per month.

View current webcam images on DriveBC at: [www.drivebc.ca](http://www.drivebc.ca).

Get DriveBC updates on Twitter at: [www.twitter.com/drivebc](http://www.twitter.com/drivebc).

# Public hearing on Monday for marina development

A comprehensive redevelopment plan for the Harrison Marina will go through another step of public process on Monday, July 8.

A public hearing will be held in council chambers in Harrison

Hot Springs at 7 p.m., before the regular council meeting.

Anyone who feels that their interest in property is affected by the changes required to the Official Community Plan and the Zoning

Amendment Bylaws will be allowed to speak at the public hearing.

Comments and questions can also be sent by mail or email, but must be received by the end of the public hearing to be

considered.

To read the bylaws, visit [www.harrisonhotsprings.ca](http://www.harrisonhotsprings.ca).

To read previous stories about the development plan, visit [www.ahobserver.com](http://www.ahobserver.com).

[news@ahobserver.com](mailto:news@ahobserver.com)

**Together, we can give seniors a hand.**

**Better at Home**

United Way helping seniors remain independent.

**PUBLIC INPUT OPEN HOUSE**

We'd like input from seniors, family members and community agencies on how we can best support seniors who face challenges coping with chores, getting to appointments, or who would benefit from a friendly visit. This program is not designed to provide medical services — just helping hands. Come share your ideas.

For Agassiz, Harrison and Chilliwack  
**Date: July 16, 2013 Time: 10AM – 12PM**  
**Location: Chilliwack Alliance Church**  
 8700 Young Road, Chilliwack

For more information, call Tony at 604.864.9294 | 855.864.9294  
[www.betterathome.ca](http://www.betterathome.ca)  
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