

**METCHOSIN HEALTHY COMMUNITY  
ADVISORY SELECT COMMITTEE**

**AGE-FRIENDLY COMMUNITY  
REPORT TO COUNCIL**

**DECEMBER 2011**

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## INTRODUCTION

This report presents the findings from a series of active aging workshops organized and hosted by the Healthy Community Advisory Select Committee (HCASC) in March and April of 2011.

It provides some background on the concept of active aging and age-friendly communities and describes the consultation process undertaken by HCASC.

The report lists the main barriers identified in the workshops and a range of options for consideration in the next phase. It is presented to Council for its information and with the request that Council give the committee the go-ahead to develop a plan of action.

## DEFINITIONS OF KEY TERMS

**Accessibility:** Refers to homes, buildings, public spaces, technology, programs, support services and so on, being free of barriers, enabling all people to use them independently.

**Active Aging:** Means a way of aging that recognizes the rights of people to equality of opportunity and treatment in all aspects of life, as they grow older. It embodies the principles of independence, participation, dignity, care and self-fulfillment.

**Age-Friendly Community:** According to the World Health Organization's definition an age-friendly community encourages active aging by optimizing opportunities for health, participation and security in order to enhance quality of life as people age. An important factor in active aging is 'aging-in-place' or in one's own home as long as possible.

**Aging in Place:** The ability to live all or most of one's life independently in one's own home and community.

**Disability:** A term referring to a range of activity limitations and participation restrictions experienced by individuals. They can be visible or invisible, short-term or long-term.

**Healthy Communities:** Communities and neighborhoods that are designed in a way, that encourages residents to make healthy life choices.

**Inclusion:** Welcoming and enabling participation from everyone so that all members of a community feel they are included and belong.

**Plain Language:** An approach to writing and developing communication materials so that they are understandable by as many people as possible.

**Seniors:** Although not all participants in the public consultation process were seniors, in general people 55 years and older were encouraged to participate.

**Virtual Seniors Village:** A membership based organization set up to assist its members to remain safely and independently in their own homes as long as possible.

In the winter of 2010, a group of Metchosin citizens met informally to discuss the community's growing senior population. The aim of the discussion was to identify things that might be done in the community to make it easier for seniors to live out their lives in Metchosin and in their own homes.

In the summer of 2010, Metchosin Council reconstituted the (HCASC) to advise Council on general health issues, with an emphasis on the need to develop a plan to serve seniors in the community over the next twenty years.

To look into this specific issue, the HCASC set up an Active-Aging Subcommittee and invited people with a background or interest in the topic to take part.

### Active aging and age friendly communities

Worldwide, the proportion of people over the age of 60 is growing faster than any other age group. With the growth of the senior population has come greater awareness of the contributions seniors can make to the community, as well as the range of services that can assist aging individuals to remain healthy, active, and independent.

Active aging, as described by the World Health Organization, encompasses the principles of independence, participation, dignity, care and self-fulfillment. It recognizes the rights of people to equality of opportunity and treatment in all aspects of life, as they grow older.

Canada's federal, provincial and territorial ministers responsible for seniors have jointly agreed to make efforts to raise awareness of what seniors need in their communities to maintain active, healthy and productive lives. These governments have published a guide<sup>1</sup> to help communities develop policies, programs, services, and structures to make it easier for people to age actively.

The guide describes age-friendly for seniors as:

- recognizing the capacities and resources of older people;
- anticipating and having flexibility to respond to age-related needs and preferences;
- respecting lifestyle choices;
- protecting the vulnerable; and
- promoting the inclusion and contribution of older adults in community life.

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<sup>1</sup> Age-Friendly Rural and Remote Communities: A Guide. Canadian Federal/Provincial/Territorial Ministers Responsible for Seniors. Available from: [http://www.health.gov.bc.ca/library/publications/year/2007/AFRRRC\\_en.pdf](http://www.health.gov.bc.ca/library/publications/year/2007/AFRRRC_en.pdf).

## Common themes in rural communities

Research and initiatives in other rural communities have shown that the most common themes arising in discussions of active aging are:

- *Respect and social inclusion*: respect given to seniors - the way they are treated, consulted, and included in community life;
- *Civic participation*: opportunities for seniors to contribute to the community in a range of areas including civic endeavours, volunteering, and paid employment;
- *Social participation*: social networks and access to social activities, events, outings, hobbies and recreational opportunities;
- *Outdoor spaces and buildings*: aspects of the physical environment that foster independence, social interaction, physical activity, and enable people to conduct their daily activities;
- *Communication and information*: methods of keeping seniors informed of events, activities, opportunities and services;
- *Transportation*: access to transportation that enables seniors to participate in social, cultural, employment, volunteer and recreational activities as well as enabling them to carry out daily tasks such as shopping or going to appointments;
- *Health and personal care services, community and home support*: availability of and access to health care professionals and the diversity of health services, home health care support, personal care, pharmacies, meals, grocery deliveries;
- *Housing and home services*: factors that enable people to continue to live in their own homes or in the community, including, financial factors, availability of support services (other than health related), housing design, accommodation options.

## PART 2

## COMMUNITY PROFILE

The 2006 census reported a population in Metchosin of 4,795 of which 580 (12%) were individuals 65 years and older. There were 355 residents between the ages of 60 and 64; and 500 between 55 and 59. Therefore, the number of Metchosin residents in or approaching their senior years totaled 1,435 or 30% of the population.

Between the 2001 and 2006 census, the overall population in Metchosin decreased 1.3 percent while the number of those over 65 increased by 18 percent. The latest census is expected to be released in February and it is safe to assume that the trend has continued since 2006. In fact, BC Stats predicts that the growth rate for the number of

seniors in British Columbia will be significantly greater than that of the overall population.

Metchosin is a desirable place to live and has been able to retain its rural character with a predominance of single-family dwellings and acreage properties and with an emphasis on agriculture and food sustainability.

Seniors who participated in the active-aging workshops expressed positive opinions about living in Metchosin and most hoped and expected to live out their lives here.

Seniors are principal participants in Metchosin's excellent Community House, its thriving Arts and Cultural Centre and its Emergency Operations Centre.

Metchosin has a small village centre, with a small number of retail, service and trades-people. Residents can access a wide range of retail products, services, and resources in the bordering communities of Colwood and Langford and in Victoria.

As well, various governmental, private and non-profit agencies serve Metchosin residents with social, recreational, health and home support services.

A summary of services and programs for seniors available in Metchosin is attached in Appendix I, along with references to resources in the Capital Regional District and provincial and federal services.

In 1996, the Metchosin Community Association commissioned a study of seniors focusing on transportation, personal services and housing. Interviews were conducted with 166 Metchosin seniors, representing 34 percent of the senior population. Among the outcomes of the study were: Community House developed activities for seniors such as adult day care and pot luck lunches; the MUSE community paper made a particular effort to focus on seniors in the community; and a volunteer driver program was created.

Metchosin, like most rural communities, has limited amenities for the elderly. Some hold the opinion that, at a certain point in life, often when one can no longer drive a car, older people will have to leave the community to live elsewhere for the remaining years of their life. Many Metchosin seniors do not share this view.

Seniors' organizations point out that when older people leave the community, they take with them, their purchasing power, their volunteering and their history, leaving the community poorer in the process.

Being forced to leave one's community can also have a significant impact on one's sense of belonging and, consequently, on one's health and life expectancy.

Following the Rural Communities Guide, the HCASC planned the Age-Friendly Community initiative in five stages.

**Committee phase:** An ad hoc citizens' group led to the reconstitution of the HCASC by Metchosin Council. A subcommittee was set up to organize consultations on the topic of active aging and analyze the results. The subcommittee produced a framework for discussion following the guidelines.

**Assessment phase:** Four facilitated workshops were scheduled and publicized in the Muse. The workshop planners drew up an inventory of current programs and services and compiled information on each of the themes as background for the consultation sessions.

Each workshop lasted two hours and focused on barriers in two of the eight principal themes. Participants sat at round tables in groups ranging in size from 6 to 12 people. A facilitator and recorder were assigned to each table.

Every barrier identified by participants was recorded. Then, each table reported its top priorities to the plenary group (Please see Appendix II).

Following the workshops, the planning group clustered issues that were similar in nature and assigned work teams to further analyze and consult with respect to the priorities and options to address them.

The assessment phase concludes with the submission of this report to Council.

**Planning Phase:** Following submission of this report, the HCASC if so directed by Council, will consult and work with community groups, service providers and Metchosin seniors to set priorities and develop a plan of action. Leaders and support agencies within the community will be identified to ensure the initiative continues to move forward. Funding sources will be identified and volunteer resources recruited to carry out the plan.

**Implementing Phase:** The plan will be implemented in manageable steps according to the priorities set, the financial and volunteer resources available and the collaborative efforts of the community.

**Monitoring Phase:** The plan will include clear and measurable objectives and performance measures to allow for on-going monitoring and evaluation. From time to time, the HCASC will report progress to Council.

## PART 4

## WORKSHOP SUMMARY & OPTIONS

Seventy-nine people participated in the workshops, many of whom attended more than one session, for a total attendance of 171. This is a small percentage of Metchosin's seniors, but a sufficient number to demonstrate an interest in the topic and provide a wide range of views.

Table 1: Workshop participants

Total attendance	171
Total number of participants	79
Total female participants	47
Total male participants	32
Number participating in all workshops	15
Total number of gaps and barriers identified	286
Total number of priority issues	74

Together, workshop participants identified 286 barriers to active aging and ranked 74 of them as priorities. (Please see Appendix II). The priorities grouped together naturally into seven general categories, with information and transportation cutting across all other areas.

To the seven priority areas of information, transportation, housing, health and personal services, social inclusion, outdoor spaces and recreation and costs, HCASC has added community planning and long-term sustainability.

## COMMUNICATION & INFORMATION

- There is insufficient information and knowledge of how to access information about programs; services; health care professionals and services; reliable and trustworthy contractors; transportation options; social and civic opportunities.
- Although most seniors are connected to the Internet, the information they need is often difficult to find.
- Information for seniors is often not written, packaged and distributed in ways that make it interesting to them.

- There is not enough knowledge about Metchosin’s senior population: who they are, what they need and want, nor do we know much about their range of abilities and expertise.
- There is a need for more educational information on health, financial and estate planning and other topics of interest to seniors.
- Most seniors do not plan ahead for the loss of mobility or independence. They are not good at communicating their needs or sharing their knowledge with others.

## **OPTIONS**

- Pull information together from a variety of sources and make it available from one source. One option is to partner with Community House to establish, advertise and promote a one-stop seniors’ information telephone service.
- Pull together a list of reliable service providers, handymen, contractors and see if they would be interested in providing a discount for Metchosin seniors.
- If a seniors’ telephone service is created, log all calls and questions to provide an information base to shape future service.
- Research grants and other funding sources to support a seniors’ information service.
- Establish a regular feature for seniors in the Muse.
- Develop a computer database using plain language and a ‘key word’ index to make it easier to locate information and make referrals.
- Consider a pilot project involving CanAssist (UVic) and the Tyze Personal Networks to test the viability of Skype-based networks for vulnerable seniors.
- Develop a training/education seminar plan, based on the most frequently asked questions.

## **TRANSPORTATION**

- The potential loss of one’s driver’s license or the inability to drive after dark and the consequent loss of independence is a significant barrier to aging in place.
- Metchosin’s many large properties, long hilly driveways and difficult terrain can be challenging for older people and for emergency responders.
- Transportation to medical and other appointments is vital, but so is getting to social, cultural, civic and community events.

- Public transportation within Metchosin and between Metchosin and other communities is limited, inconvenient, perceived to be unsafe and, for some, expensive.
- Bus stops are dark and secluded.
- Many older people are averse to using taxis and, for some, the cost is prohibitive. Taxis are not seen as a good option for short trips within Metchosin.
- Many older people are reluctant to call on others in the community for assistance and opt to stay at home rather than be a burden.
- Some participants said they did not feel safe walking in the village core, especially at the corner of Happy Valley Rd. and William Head Rd.

## **OPTIONS**

- Maintain a dialogue between Municipal Council and BC transit.
- Review the idea of CRD control of regional transportation from a seniors' perspective.
- Analyze the LRT proposal from a seniors' perspective.
- Organize talks/seminars to help seniors plan for loss of driver's licence.
- Publicize all transportation alternatives in place, including HandyDart, taxi saver and Driving Miss Daisy. Address misconceptions about transportation alternatives.
- Expand and enhance the volunteer driver program through Metchosin Community Association. Make the municipal van available to registered volunteer drivers for this purpose. Schedule trips to events.
- Consider the feasibility of purchasing of a community bus for special events/local service.
- Investigate the feasibility of the Car Stop Program (Please see Appendix IV).
- Investigate taxi licenses for Metchosin and/or a Co-op Taxi service.
- Use the proposed seniors information line and/or web site to provide better transit information.
- For safety in the village core, monitor the effectiveness of reduced speed limits now in place. Consider placing a temporary speed indicator device.
- Request enforcement if needed and/or consider alternate traffic calming measures.
- Establish a complaints and suggestions program with BC Transit.

## HOUSING

- Most Metchosin seniors live in detached, single-family homes and pride themselves on their independence.
- Escalating costs of maintaining large properties may become prohibitive and there are few options for seniors, who wish to downsize within the community.
- There are few options for those who need assisted living.
- Some residences and properties are challenging and even inaccessible to people with physical limitations.
- It is not easy for older property owners to accommodate live-in caregivers and helpers or to share accommodation.
- The commonly held idea that elderly people will inevitably have to leave the community is itself a barrier.
- Options within the current bylaws for small-scale care facilities are not well known. (Please see Appendix V)

## OPTIONS

- Encourage the Province to amend the BC Building Code to require all buildings to incorporate 'universal design' principles to improve accessibility in new construction.
- In the meantime, provide homeowners information on how to build in accessibility features into new homes and in their renovations.
- The recent secondary suites referendum may allow for more seniors' housing options in future.
- Develop and publicize a list of reliable handy persons, grant information for home renovations, repairs, and so on.
- Continue to support and enhance networking systems to allow seniors the choice of remaining in their own home.
- Encourage further options for in-home caregivers.
- Recognizing that any seniors' housing solution must in scale, location and design blend with the rural character of Metchosin, encourage further community dialogue on affordable housing options. These could include publicly funded housing (BC Housing), non-profit housing (Abbeyfield Seniors Supportive Housing), co-op housing and private.

## HEALTH & PERSONAL CARE SERVICE

- There is a shortage of locally provided health services and personal support for seniors.
- There is no community-based service for more timely and consistent response to health care concerns.
- There is no local health clinic or a public health nurse.
- There is a need for a mobile dental clinic.
- Assistance with personal hygiene for those with disabilities or mobility problems, who do not have adequate facilities at home, would help keep the elderly in their own homes longer.
- Other than the RCMP's Keep In Touch program, there is no systematic means of monitoring the elderly, especially those who have difficulty getting around, have health problems or may be prone to isolation.
- No one advocates for seniors in the community.
- There is a need for better access to delivered groceries and meals.
- Metchosin cemetery spaces are limited.

### OPTIONS

- Begin discussions with key stakeholders in the following priority areas:
- Public Health - discuss the need for consistent public health response for residents of Metchosin.
- Home support - discuss the timeliness and consistency of these services.
- Publicize the RCMP Keep In Touch Program.
- Increase awareness of VIHA's Seniors At Risk Integrated Network (SARIN)
- Meals on Wheels
- Discuss a local medical clinic with the doctor taking over Dr. O'Connell's practice. Research the feasibility of a mobile dental clinic – discuss with local dentists.

## SOCIAL INCLUSION

- Isolation and loneliness are potential threats to wellbeing and independence, especially in a community with large and remote properties.

- Many seniors lack the initiative to get involved in civic, cultural and recreation activities.
- We do not know our elderly neighbours well enough or communicate with them often enough to be of assistance when they need it.
- There is a need for more one-on-one contact with seniors and more inter-generational activities for seniors to share knowledge and experiences with the rest of the community.

## **OPTIONS**

- Centralize information to make it more convenient for seniors to access and understand the opportunities that exist in our community.
- Support health and wellness initiatives involving governmental, private and non-profit agencies and organizations.
- Work with the Metchosin Community Association to implement potential solutions to barriers and gaps for seniors who want to age in place.
- Partner with MCA to apply for funding to support active aging initiatives.
- Work to improve and enhance the POD system.

## **OUTDOOR SPACES & RECREATION**

- There are not enough outdoor spaces and recreation areas suitable for seniors, who have difficulty walking.
- Access to existing areas is limited and there are not enough benches and washrooms to make our outdoor spaces inviting to older people.
- Metchosin's beaches are virtually inaccessible to people who have difficulty walking on uneven ground.
- The Community House is popular with seniors, but there is little accessible space around the Community House where older people can congregate safely for entertainment, social engagement and outdoor activities.
- Older people, who have difficulty getting around, have few options for walking outdoors in Metchosin.

## **OPTIONS**

- Acknowledge and promote the new access path at Witty's Lagoon.

- The Parks and Trails Committee continue to pursue partnerships with other agencies to make parks, trails, and viewpoints accessible to seniors and to consider the provision of sitting areas and washroom facilities.
- As part of the Parks Donation Program, obtain input from seniors as to locations for benches that would facilitate use of specific outdoor areas.
- Outdoor activity areas particularly suitable for seniors be considered for the Municipal grounds adjacent to the Community House.
- Provide information on age-friendly parks and trails in the adjacent communities of Sooke, East Sooke, Langford, and Colwood to be compiled for a central information resource in Metchosin.
- Explore partnerships with regional recreation associations (e.g. the West Shore Parks and Recreation Society and the Juan De Fuca Seniors Association) to offer activities in Metchosin or to assist Metchosin residents in going to activities outside of Metchosin.

## COSTS

- When a spouse dies, the cost of maintaining a property can be a barrier to aging in place.
- Some services, such as house or pet sitting, cost more because of Metchosin's location.

## OPTIONS

- Create a program to negotiate on behalf of Metchosin seniors discounted rates for services (Please see Appendix VI).

## COMMUNITY PLANNING

- The goals and policies contained in the Official Community Plan (OCP) shape the way our community evolves. Metchosin's OCP states, *"Generally, an Official Community Plan consists of written goals and objectives describing the desired vision or future..."*
- The OCP guides governance decisions on planning, land-use, housing and other development, social policies and programs, the environment, and the character of our community.
- Metchosin's OCP contains no references to accessibility and inclusion for older people. To include such statements in the OCP, therefore, is a powerful method that other communities have used to show commitment to age-friendliness.

## OPTIONS

In the next review of the OCP, consider:

- Stating a commitment to accessibility and inclusion in the overall vision or mission section of the OCP.
- Actively inviting and facilitating the participation of older people in the review of the OCP.
- Adding principles and/or goals to the OCP on key issues raised in this report that can have an impact on the quality of life of older people.
- Establishing an on-going seniors' advisory or advocacy committee to monitor and assess progress toward age-friendliness and provide advice to Council or advocate on behalf of seniors.

## LONG TERM SUSTAINABILITY

- For Metchosin to support the age-friendly community initiative on an ongoing basis, an agency or organization within the community will need to be identified to assume overall responsibility. The organization could be an existing entity such as the Metchosin Community Association or an organization established specifically for this purpose.
- To sustain an effort over the long term, sources of revenue need to be secured.
- In rural communities like Metchosin, assisted living facilities are rare. The result is that seniors requiring assisted living are more likely than their urban and suburban counterparts to have to leave their communities.

## OPTIONS

- In some communities, assisted living services can be replicated on a sustainable basis through initiatives known as 'virtual villages.' (Please see Appendix VI)
- Seniors virtual villages are membership organizations serving a defined community or catchment area, to provide seniors with an alternative to moving from their houses to retirement or assisted living communities.
- By delivering programs and facilitating services at reduced costs, the virtual village allows senior and elderly residents to lead safe, healthy, affordable and productive lives in their own homes as they age.
- Consider directing the Healthy Community Advisory Select Committee to continue discussions with The Metchosin Community Association, with a view to establishing a structure to test the feasibility of establishing a virtual village program in Metchosin.

## SPECIFIC REQUESTS OF COUNCIL

1. Make the community van available to Community House outside of office hours to provide transportation for seniors to special events.
2. Provide direction to the Healthy Community Advisory Select Committee to work with other community organizations and in particular the Metchosin Community Association to develop a plan based on some of the options identified in this report.
3. No additional funding is being requested of the municipality, but assistance, where appropriate, in helping to secure grant funding from outside sources would be valuable.

**APPENDIX I**

**Existing Services in Metchosin for Seniors**

<b>SERVICE</b>	<b>COMMENTS</b>	<b>OPPORTUNITIES</b>
Volunteer drivers through the Metchosin Community Association.	Not widely advertised in order to keep it manageable.	Could use more volunteer drivers. Should they accept reimbursement to cover mileage?
Monthly Seniors' lunch at St. Mary's.	1 <sup>st</sup> Wed of each month. Metchosin Adult Day Program takes their clients over.	
Monthly Pot Luck lunch at Metchosin Community House.	Mainly attended by very elderly seniors.	Get younger seniors or others to attend.
Pearson College Outreach to Seniors coordinated by the Metchosin Community Association.	Monday afternoons. Not widely advertised.	
Weekly Student/Seniors Tea time at Metchosin Community House.	Thurs. afternoons. Not widely advertised.	
VIHA Adult Day Program twice weekly.	This is an opportunity for respite for caregivers, as well as to monitor the health of the senior clients. Need more local promotion.	Could always use more local senior residents to attend. Get the word out to our Seniors and their families.
MUSE feature articles on valued seniors.	Depends upon input from families and /or caregivers.	Assign a roving reporter to make this more regular feature.
Community celebrations of "milestone events".	Milestone birthdays, celebrations of life, wedding anniversaries.	Publish in the Muse.
Volunteer opportunities through the Metchosin Community House, the local Churches and other community clubs and groups.	A good example of seniors taking responsibility for staying active in their own community. Includes Municipal affairs as well as social activities.	
Metchosin Community Association volunteers as advocates for seniors in need.	Not widely advertised but has proven invaluable when called upon. Works well with the Adult Day Program (VIHA).	
In-home Secondary Suite option.	Our District's option to offer seniors' housing alternatives.	Are individuals in a safe, supportive environment? Isolation can be a problem.
HandyDart	Travels only limited distance.	This service needs to be monitored and encouraged to accommodate the changing geographic needs as clients come and go.
Grocery Delivery	Grocery delivery from Thrifty's - Sendial.  Milk delivery from Island Farms.	

	SPUD delivery of organic produce.	
HOSPICE & Respite Care	Parts of Metchosin and East Sooke fall off the map for the Palliative Response Team, which serves the Victoria & Sooke areas but only goes as far as Kangaroo Road.	Need to fill in this geographic gap.
TOPS	Take Off Pounds Sensibly. Within a group setting, monitoring weight control through a Healthy Diet.	
Foot care Services	South Island Footcare Mobile Unit.	Encourage service providers to set up a routine with the Adult Day Program at the Metchosin Community House.
Walking groups	Self directed groups.	
Neighbourhood Response Program	Neighbourhood PODS. Part of the Emergency Preparedness Program.	This program holds a lot of potential. Neighbours helping neighbours. Great focus for the NRP Director.
Respite Caregiver Support	Through the Adult Day Program.	Vital to the health of family looking after senior members in-need.
Metchosin Foundation	Founded in 2009. Will address some social issues – MUSE articles describing the philosophies and lifestyle of some of our valued elders. Establish “Talking Tables” at local coffee shop.	Wide open for opportunities to encourage social and cultural expression.
Memory Enhancement Clinics.(Refer to Alberta health care model).	Not yet operating.	
VIHA Case Management	Vancouver Island Health Authority assessment of individual cases as deemed necessary.	

## ACTIVE AGING WORKSHOPS

### Feedback to Participants

We want to thank you once again for your generous contribution to our series of workshops on active aging in Metchosin. We are now in the process of reviewing, synthesizing and researching the issues you have identified.

You may be interested to know that total attendance at the four workshops was 171. There were 79 different participants, 47 women and 32 men. In total, more than 285 issues were recorded and 74 priority issues identified.

Following is a list of those priority issues. The numbers in brackets after some of the issues indicates the relative priority indicated by you the participants.

#### **A. Priority Issues from Workshop # 1 - Health Services, Community and Home Personal Services**

Most of the health issues overlap with transportation and information issues. Participants felt that convenient, affordable transportation to medical appointments, clinics and pharmacies and access to information about health services were the greatest health care concerns for Metchosin seniors.

##### ***Health Issues***

- 1 Transportation to get to health services, pharmacies, etc. (9)
- 2 Insufficient distribution of information about available services (5)
- 3 Lack of seniors housing options (including long term care) (4)
- 4 Need for a local clinic when resident physician retires (2)
- 5 Need for a public health nurse (1)
- 6 Need for a seniors' advocate
- 7 Need for timeliness and consistency in response by health care professionals
- 8 Need to monitor isolated seniors
- 9 Need for mobile dental clinic
- 10 Need better access to groceries and meals
- 11 Need for assistance in finding health care professionals and services
- 12 Identification of seniors with medical issues for emergency services
- 13 Education on health issues
- 14 Need for cemetery in Metchosin

##### ***Community and Personal Care Service Issues***

- 1 Need for centralized resource/coordination of information (6)
- 2 Communication to individuals who need services (4)

- 3 Need for advocate to help get services (2)
- 4 Need to improve POD system (2)
- 5 Need for clearing house for service providers/suppliers (2)
- 6 Need to consider age-friendly house design (2)
- 7 Need to consider additional costs for paid services for Metchosin residents due to time and distance
- 8 Need for health information sessions
- 9 Need for VIHA to bring back community based service
- 10 Need for assistance in personal hygiene
- 11 Need for health professionals to know where to get health equipment
- 12 Need for more political awareness of seniors community and personal care issues

## **B. Priority Issues from Workshop # 2 - Housing and Home Services**

Participants felt that there are almost no housing options for seniors who wish to downsize, or who require live-in help, assisted living or long-term care.

1. There is a need for a greater variety of housing options (4)
2. The loss of a spouse who did maintenance and the subsequent increase in costs associated with maintaining homes and properties can be barriers (4)
3. There is limited capacity to provide housing for caregivers or helpers (3)
4. The POD system is not serving the community as effectively as it could due to inconsistency zone by zone (3)
5. There is insufficient of forward planning by individuals and the community as the population ages (3)
6. There is a need for organized and readily available information on reliable handymen, renovation and retro-fitting expertise (3)
7. There is a need for assistance with food/meals (2)
8. There is a need for better transit and information about transit to get seniors to activities, services and shopping (2)
9. The loss of driver's license and or mobility is a barrier especially on large properties (2)
10. Adapting homes and dealing with large, hilly properties with long driveways is a challenge (1)
11. Not knowing neighbours; not communicating with and helping each other is a barrier (1)
12. There is a need for community care facilities (1)
13. There is a need for financial information for seniors
14. The potential for isolation and loneliness is a barrier to aging in place and a threat to wellbeing
15. There is a need for more seminars on topics of interest to seniors
16. There is a need for better distribution of information on seniors' programs and resources
17. There is a need for more options for shared accommodation

### **C. Priority Issues from Workshop # 3 - Respect, Social and Civic Participation, Communication & Information**

Not having sufficient information or knowing how to access information about programs, services, reliable and trustworthy contractors or suitable activities is a major barrier for Metchosin seniors. Many use email and have access to the Internet, but the information they need is difficult for them to find.

1. There is a need to market programs and opportunities to Metchosin seniors' population based on a more detailed knowledge of who they are, what they need and want, their range of abilities and expertise. The marketing must be multi-media, bright, interesting and targeted. (5)
2. Many seniors do not take advantage of opportunities; how can we create an interest on their part? (2)
3. There is a need to share knowledge of seniors with others (2)
4. There is a need to match the interests of seniors with opportunities – personal approach (1)
5. There is a need for a central location to obtain information on resources (1)
6. There is a need to have multi-generational activities (1)
7. There is a need to make better use of PODS to keep in touch with people
8. There is a need to explore ways to encourage seniors to be more involved in civic affairs
9. There is a need to explore what is the role of youth in the community
10. There is a need to make better use of the MUSE to advertise activities for seniors
11. There is a need for more one-on-one contact with seniors
12. There is a need to explore what is the role of seniors in Metchosin
13. There is a need for a special section on seniors in the MUSE
14. There is a need for better information about and transportation to activities
15. There is a need for seniors to better communicate their needs and interests
16. There is a need to find ways for seniors to share knowledge and experiences

### **D. Priority Issues from Workshop # 4 - Transportation, Buildings & Outdoor Spaces**

One of the most significant barriers to aging in place in Metchosin is the potential loss of one's driver's license and consequent loss of independence. Public transportation within Metchosin and between Metchosin and other communities is limited, inconvenient and perceived to be unsafe or prohibitively expensive. Older people, who no longer drive are reliant on family and friends, but are reluctant to call on others for assistance.

1. There is a need for central information on transportation needs and options (perhaps a Metchosin radio station) (8)
2. There is a need for better access to outdoor parks and the Galloping Goose (3)

3. There is a need for a community vehicle regularly scheduled and organized through the Community House (2)
4. The fact that most seniors do not plan for their old age and the inevitable time when they will not have a license is a barrier (2)
5. There is a lack of reliable transportation within Metchosin for social engagements as well as appointments (2)
6. There is a need for more washrooms in parks and trails (1)
7. There is a need to encourage older people to use alternative means of transportation and to make access to bus information and other alternatives easier (1)
8. The cost of using alternative transportation means is a barrier for some (1)
9. Bus routes and schedules are limited in Metchosin (1)
10. Safety, especially at the corner of Happy Valley and William Head Rds. is a barrier
11. Concern for safety on public transit is a barrier
12. There is a need for a hub in the village core where older people can congregate safely for entertainment and social engagement
13. The layout of many Metchosin homes and properties can be a barrier
14. There is a need for beach access for older people
15. There is a need to ensure safety and personal comfort in getting around

Residents of Pender Island established the Car Stops program to compensate for a lack of public transit. Car-stops are pullouts with signs, similar to bus stops, strategically located throughout the community to facilitate safe stopping for drivers willing to share rides.

Permanent “Car stop “ signs include a legal disclaimer and an explanation that travelers are free to choose their ride and that conversely drivers can give lifts to whomever they please, even if this person is not first in the line up. The stops are situated in safe areas where vehicles can pull off the road.

There is a double-sided sign, which proclaims CAR STOP, and below is another sign, which reads as follows:

***Drivers don't have to take the first in line;***

***You're not obliged to accept a ride, that's fine.***

***You accept a ride at your own risk,***

***But the ride is free, so consider it a gift.***

The concept of Car Stops is to promote community transportation that is simple, free and safe. The project provides an alternative to single occupancy cars and results in less traffic congestion, a reduction in the overall carbon footprint and a chance for people in the community to get to know each other. Car Stops are entirely voluntary. People take rides and give lifts as they see fit.

Pender Island obtained grants from the CRD and the Lions Club of British Columbia, to buy the signs. Volunteers installed them. There are 29 Car Stops installed on North and South Pender Islands. Other gulf islands, including Mayne, Hornby and Gabriola, have shown an interest in the program.

Route 54 - METCHOSIN

29/11/11 9:10 AM

<b>Route 54 - METCHOSIN</b> (Effective <b>Mon Sep 5, 2011</b> through <b>Sun Jan 1, 2012</b> inclusive)											
Trip Notes (see below)	Bus Type	Langford Exchange	Glen Lake School	Latoria at Happy Valley	Latoria at Veterans Memorial Pkwy	Western Exchange	Metchosin at Wishart	William Head at Lombard	Latoria at Happy Valley	Glen Lake School	Langford Exchange
<b>Monday through Friday - Morning</b>											
@	Access	6:05	6:11	6:17	6:20	-	-	6:32	6:49	6:55	7:02
@	Access	7:30	7:36	7:42	7:45	-	-	7:57	8:14	8:20	8:27
@	Access	8:35	8:41	8:47	8:50	-	-	9:02	9:19	9:25	9:32
@	Access	10:35	10:41	10:47	10:50	-	-	11:02	11:19	11:25	11:32
<b>Monday through Friday - Afternoon</b>											
@	Access	12:35	12:41	12:47	12:50	-	-	1:02	1:19	1:25	1:32
@	Access	2:30	2:36	2:42	2:45	-	-	2:57	3:14	3:20	3:27
@	Access	4:20	4:26	4:32	4:35	-	-	4:47	5:04	5:10	5:17
@	Access	-	-	-	-	5:10	5:20	5:36	5:53	5:59	6:06
@	Access	-	-	-	-	5:25	5:35	5:51	6:08	6:14	6:21
<b>Monday through Friday - Evening</b>											
@	Access	6:18	6:24	6:30	6:33	-	-	6:45	7:02	7:08	7:14
<b>Trip Notes</b> @ <b>Community Bus:</b> Bike rack use limited to daylight hours only.  Copyright © 1998–2011 BC Transit — All information is subject to change without notice. For more information regarding BC Transit's privacy policy, please refer to our <a href="#">Privacy Statement</a> .											

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## Housing provisions as stated in Metchosin's Official Community Plan

### *Residential Policies:*

Metchosin is resoundingly a rural community. As such, it provides a choice of rural lifestyles (large lots, hobby farming and full-time farming on large holdings) and it is the intent of OCP to maintain these opportunities as desirable alternatives to urban living. In general, the OCP allows for one residence per lot.

A key objective identified in the OCP is to provide opportunity for a range of housing types, size, prices and tenure consistent with maintaining a rural community (6.2.8).

Affordable housing is specifically encouraged throughout all residential zones, by the following policies provided under 6.3.6. :

- (1) One secondary suite per dwelling unit shall be permitted in all residential designations subject to the Land Use Bylaw.
- (2) Manufactured homes shall be permitted as the principal dwelling unit in all residential designations subject to the Land Use Bylaw and the Building Bylaw.
- (3) Home businesses shall be a permitted use in all residential designations in order to assist homeowners to supplement household income through home businesses as defined by the Land Use Bylaw.
- (4) Community care facilities tending to 6 or fewer adults are permitted in the principal dwelling in all residential designations.

In most zones, boarding of not more than 4 persons in a dwelling unit is a permitted use.

Regarding subdivision for a family member, Metchosin adopted a bylaw in 1989 that establishes the minimum size of a parcel that may be subdivided to provide residence for a relative at 40.47 ha, which is just over 100 acres. This restriction does not apply to land in the ALR.

### ***Regional Context Statement: 14.3.2 Improve Housing Affordability***

In April 2004, Council passed a resolution to support, in principle, the recommendations with respect to the Regional Housing and Affordability Strategy.

The purpose of the Regional Housing Affordability Strategy is to ensure that all residents of the Capital Region – especially low and moderate income households, the elderly, youth, those with special needs, and the homeless – have reasonable choice of housing by type, tenure price and location.

## Current Supportive Programs

Some fiscal programs exist that assist seniors to stay in their own homes, by providing support for those who may be isolated and/or living on challenging properties and adapting to a lifestyle within a fixed income. Examples of affordability options include:

- 1.) Government Grants
  - Home Adaptations for Seniors' Independence Program (HASI)  
[cmhc-schl.gc.ca/en/ab/noho/noho-006.cfm](http://cmhc-schl.gc.ca/en/ab/noho/noho-006.cfm)
  - Residential Rehabilitation Assistance Program (RRAP)  
[Cmhc-schl.gc.ca/en/co/prfinas/prfinas\\_009.cfm](http://Cmhc-schl.gc.ca/en/co/prfinas/prfinas_009.cfm)
  - BC Home Owners Grant.
- 2.) Reverse Mortgage.
- 3.) Property tax deferment.

Within Metchosin there are a variety of community networking programs, that support people living independently in their own homes and are run mainly by volunteers. The importance of these locally created supportive programs is covered elsewhere in this report.

*Helping Seniors live healthy at home***Objectives:**

1. To make it possible for people to stay in their communities and “age in place.”
2. To help coordinate and deliver services and supports within their communities.
3. To help delay or even prevent the need for institutional care.
4. Enable seniors to take care of each other.

**What’s in it for seniors?**

- The Village helps to coordinate and deliver medical, functional, emotional, social, and spiritual services and supports to seniors within their homes or communities.
- The Village offers an alternative to institutional care.
- It is a consumer-driven, person- centered approach to aging in place.
- Villages reflect their communities through variations in design, capacity, and operation.
- Helps older adults remain in their homes and not be dependent on family members and friends.
- Maintains and strengthens members’ connection to their community.
- Builds friendships & fellowship.

**Background**

The Beacon Hill Village, established in Boston in 2001, is the first and one of the most recognized models of the Village concept. Beacon Hill now has 430 members; average age 75; and provides more than 400 discounted, vetted services through vetted providers.

It charges annual fees. There are low-income members who pay less. It has both paid staff and many volunteers. There are 2000 other seniors in the catchment area of central Boston area who are not members. It has 4 fulltime staff and 6 part-time.

Currently, there are 50 operating Village organizations across the United States.

Capital Hill Village in Washington DC is also a good example of this model. It is a nonprofit organization of neighbours working together to provide the services and expertise Hill residents need to live safely and comfortably in their own homes throughout their lives. With one phone call or e-mail message, Village members gain access to professional and volunteer services and a variety of educational and social programs.

Volunteers and staff provide free transportation to events and appointments; medical and legal advocacy; advice on senior-friendly home renovation updates; vendor recommendations for repair and maintenance projects; and a monthly list of programs and activities.

**Other models - *Community Without Walls in Princeton, NJ:***

- 450 members who belong to one of six "houses."
- Annual dues are \$30 for a couple.
- Much of what it does is social: There is a bird-watching club and a theater group.
- Volunteers provide nearly all of its services, such as rides to the doctor or the store.
- For those who need more assistance, the group has arranged for a local nonprofit organization to coordinate care and provide access to a 24-hour emergency hotline.
- For this higher level of assistance, singles pay \$300 annually and couples pay \$350, plus fees for any services they require, such as a home health assistant.

***Partners in Care:***

- Based on time-banking, or service exchange.
- The idea: You agree to pick up groceries for a neighbor and, in return, another volunteer fixes your leaky faucet.
- Begun in 1993 and based in Anne Arundel County, Partners in Care has 2,600 volunteers in the Annapolis and Frederick areas, as well as in Easton, Md., and Baltimore.
- Volunteers are key.

**“Neighbours helping neighbours to stay at home as they age.”**

**Typical services provided by Villages**

- Information referrals, vetted guaranteed providers.
- Discounted services.
- Home safety and health care.
- Community building.
- Access to transportation services.
- Assistance with household tasks.
- Access to social and educational activities.
- Transportation.
- Assistance with moving furniture.
- Handiwork.
- In the Beacon Hill model, membership dues cover weekly trips to the supermarket, rides from volunteers, group exercise classes and lectures on topics related to aging.
- Paid services — including home repair or home health aides — are generally discounted anywhere from 10 to 50 percent from the going rate.

- Dog walking, cat feeding, mail brought in when you are away.
- Dinner delivered, groceries in your kitchen, a caterer or a dietician.
- Computer geek, a personal trainer, a massage therapist.
- Garden weeded, furniture rearranged, pictures hung, light bulb changed.
- Financial advice.
- Doctor, a plumber, a tax expert, someone to paint your apartment.

### **Structure**

- Nonprofit organizations governed by a board of directors.
- Operated either by a mix of paid staff and volunteers or solely by volunteers.
- Members pay annual dues. Beacon Hill fees are \$600; \$890 per family.
- Staff provide administrative oversight, coordination and delivery of services or other assistance that a member may need.
- Volunteers, including student volunteers are a critical component of the Village concept—many assist with daily operations or deliver services (e.g. taking a member to the doctor’s office or helping with groceries).
- Villages also work with prescreened providers to deliver services to members at pre-negotiated rates.
- Many offer quality assurance benefits by following up with members regarding the services of a particular vendor or volunteer.
- Funding comes from annual membership fees, which may range from \$150 to more than \$600 per person.
- The membership fee is based on the menu of services provided to members; and administrative and other operational costs.
- Some Villages receive grants and nonmember donations to help subsidize the cost for low-income individuals.
- The extent to which Villages can offer this benefit generally depends on the level of support they receive from foundations and other grant-providing entities.
- There is also a national network in USA called Village-to-Village network.

### **Benefits of Organizing a Village**

- It allows older adults to remain in their communities, delaying or even preventing the need for institutional care.
- It gives members a voice in the types of services provided and when and how they are provided.
- It encourages volunteerism, reduces isolation, and creates a sense of community among members.

### **Challenges Facing the Village Movement**

- Recruiting members to join may be a barrier since the concept may be unfamiliar or undesirable to some.
- Ensuring an adequate revenue flow, particular in the early stages, can be a major barrier to the sustainability of Village organizations.