

Peace River Regional District
Attention: Director Rose and Director Hiebert

RE: Rural Seniors Initiative (RSI) Trial Program Final Report

In June of 2019 Dawson Creek Society for Community Living (DCSCL) received a grant from the above directors for a trial program focusing on keeping rural seniors in their own homes longer.

The primary objectives of the program were:

- to a select number of rural seniors in electoral areas D and E (appendix 1) that could lead to seniors in the rural areas staying in their own homes longer.
- to determine viability and costs associated with the selected initiatives.
- to attempt to determine the total numbers of seniors in the two areas that could benefit from receiving services.

To determine the above, a committee of local active volunteers were selected to formulate details and assist in operating a trial program.

The trial operated from January 1, 2020 until February 29, 2020. Ten locations within area D and ten locations within area E were selected by a committee. Locations were selected by need, location and willingness to participate.

The primary initiatives chosen were:

- Supply one meal per day for each of the persons residing at the chosen locations
- Supply home cleaning services to each of the locations two hours every two weeks
- Supply snow removal as needed during the trial period

For the trial there was no cost to the seniors receiving the services.

From the beginning residents involved, recognized the chosen initiatives were not the only ones that may be needed but we felt those were key and could benefit the rural seniors the most.

We needed to see if services could actually be delivered during the winter months, hence the trial months of January and February.

When dealing with rural seniors we knew we needed to be flexible and some of the questions we explored were:

- Could local community kitchens using local expertise supply the meals?
- Could small businesses be established to supply home cleaning to the locations in both areas?
- What types of snow removal equipment would be most efficient when dealing with the distances involved?
- Could the trial deal with seniors moving in and out of the trial?

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The idea of using rural contractors to supply the services during the trial was deemed critical for success. They not only knew most participants; they also knew where the locations were and what was the most efficient way of delivering the services.

Meals in Area D

A qualified food contractor supplied those living in the ten locations with one meal a day for the duration of the trial. The meals were prepared using the Tate Creek community kitchen every Monday. The meals were placed in disposal containers and delivered using local people every Tuesday and Wednesday. Approximately 980 meals were prepared and delivered during the trial.

Meals in Areas E

Meals were supplied by a local catering company to the ten locations using the community kitchen at McLeod School. Meals were prepared for delivery every Wednesday and each participant received one hot meal, one cool meal and five frozen meals. The meals were delivered using local residents in area E. There were approximately 980 meals made and delivered during the trial.

All involved with meal preparation had to have appropriate background checks and food safe training. The cost paid to the meal contractors included container cost and delivery. All meals had heating instructions on the individual containers, special diets were considered and those delivering the meals checked to make sure the service was going well and people were eating the meals.

Home Cleaning

As mentioned, a total of 20 locations were used in the trial. A local contractor from Area D provided service to the ten locations and another local contractor supplied service to the ten locations in Area E. For WorkSafeBC reasons two people attended all locations to house clean.

During the trial each location received two hours of service every two weeks. There was no limits on what the contractors were allowed to do as long as the task would allow a senior to stay in their own home longer. A total of 76 home visits were provided.

The contractor was responsible for all travel, insurance, cleaning supplies and tools. All cleaning staff were required to take an enhanced criminal record check. The contractors were also required to have an approved substitute worker if needed.

Snow Removal

This initiative was the hardest to plan. We knew going into the trial snow removal would be essential; not only for the seniors receiving the service but also to provide safe access to the contractors delivering food and home cleaning services.

In the end a maximum figure to supply snow removal to all locations was established. The rate paid to the contractors was based on BC Ministry of Transportation guidelines. Some issues like insurance needed more study but because the trial was so short we ran out of time trying to figure out the many issues around insurance as it relates to snow removal.

Technology

We also had a technology initiative. The idea was to see how technology could be used to assist seniors staying in their homes longer. There were a number of ways technology can help but the trial was too short to implement any ideas. However, a number of strategies did come forward to consider for future use.

Need for Service for Seniors Living in the Rural Area

Significant documentation exists showing the percentage of residents over the age of 65 years living in the Peace River Regional District and how that relates to the province as a whole. As is with most statistics sources some are better than others for the purpose of this report we will use verifiable information.

Statistics Canada

The total population of electoral D in the Peace River Regional District is 5,920 (Census Profile, 2016 Census, Electoral D appendix 2)

There are a total of 2,450 private dwellings

Total population over 65 years of age is 835

Percentage in the area of those over 65 years is 14.1%

Provincial over 65 years is 18.3%

Total population of electoral E in the Peace River Regional District is 2,949 (Census Profile, 2016 Census, Electoral E appendix 3)

There are a total of 1,430 private dwellings

Total population over 65 years of age is 395

Percentage in the area of those over 65 years is 13.4%

Provincial over 65 years is 18.3%

The above numbers are for 2016. BC Senior advocate Isobel Mackenzie in January 2020 stated the percentage of Seniors over 65 living in the province has increased from 14% to 18% (Baby Boomer Bulge appendix 4).

One of the objectives of the Rural Seniors Initiative was to determine need for services for seniors in the rural areas. At the moment; there are no dedicated services generally available to rural seniors.

So, is there a need? There are numerous ways of determining need. Statistics show 13 – 14% of the local rural population is over 65 but that does not mean they need services that would allow them to stay in their own homes longer. It is an indicator that services may be needed in the future and that is all it says.

Members of the RSI organizing committee were asked to list all seniors that might be able to use the suggested trial services in the McLeod – Groundbirch area. The number arrived at was 60+. There again is that number relevant and can it relate to those who actually need services that would allow them to stay in their homes longer? All that number does is provide a little focus to those seniors who might need services either sooner or later.

A needs committee was established to gain additional focus on who may need services and developed a list of potential trial participants. The committee was made up of folks well

connected to the local population. The general committee then had input into the suggested list of participants and the final choice was made on who would participate. Need was obviously key but also location. To determine true costs we needed the trial participants to be spread out from the two hubs. There was no issues filling the allotted spaces in the trial which is another indication of needs for service. While the trial was proceeding numerous people asked about participating showing another level of need. Without going into major detail there appears to be a need for services that would allow seniors living in areas D and E to stay in their own homes longer.

Service Cost Delivery Analysis

Another goal of the trial was to determine cost of delivering the suggested initiatives.

One major decision from the very start was to use local contractors to supply services. The rate paid for services was all inclusive. We wanted contractors to be paid a fair rate for services provided. We also realized the community kitchens needed to be rented during the trial period and in the case of McLeod we had to work around a school that was in session, material needed to be purchased locally and any staff needed had to be from the rural areas.

Meals

Prior to the trial, the food contractor had to visit each location and determine cooking ability, dietary needs, freezer space and a host of other variables.

The contractor was, then required to supply one meal per day for each senior living in the locations chosen in each area. The contractor was responsible to place the meals in appropriate containers. The containers had to be labeled with cooking instructions. Dietary concerns, portion size, Canada Food Guide recommendations, insurance and menu issues were all factors that needed to be considered. All taxes were included in the meal price when first determining a budget amount for the meal initiative. The committee reviewed costs from others supplying similar services. The one closest to our model was the food preparation at DCSCL's Northview senior's facility in Dawson Creek. We determined our cost per meal at Northview is in the range of \$15.00 per meal. That cost did not include delivery or containers. It is difficult to compare the service models, but we took that amount into consideration. In the end an all-inclusive figure of \$23.00 per meal was arrived at and that became the budget figure.

One of the requirements contractors had during the trial was to give actual cost breakdowns for the services they provided after the trial was complete.

This report will not contain all details, but the high lights are:

Food Cost \$ 5.71
Labour Cost \$7.84
Delivery Cost \$ 1.60
Container Cost \$1.00
Total \$ 16.15

The above were taken from both cost detail sheets and are averages more than actual costs. Area D placed their average cost at \$19.10 per meal and area E placed their average at \$15.89.

Average cost went down over the trail as efficiencies were realized.

Both contractors offered very good ideas on problems faced during the trial and how things could be done more efficiently and how to reduce costs if the initiative moves forward. The above will greatly assist in determining what an actual meal budget cost should be.

Home Cleaning

Prior to the trial the home cleaning contractors had to visit each location and talk to the residents. They kept a log of those conversations and all subsequent visits.

The contractor was responsible for all travel, insurance, tools and cleaning supplies. The contractor had to supply two cleaning staff for each visit and had to have a standby preapproved individual in case one cleaner was unavailable.

There were no limits on what the home cleaners could do as long as the task would keep the senior in their own home longer.

Ten locations were chosen in each area and all contractors had to complete enhanced criminal record checks.

Each location received a home cleaning visit for two hours every two weeks.

Two cleaners were sent together for WorkSafeBC reasons but more important seniors love to talk. Two cleaners ensured that the required cleaning got done while meeting the social aspect of the senior. Seniors are often isolated and need to talk to someone.

A total of 76 visits were completed during the trial.

The cost for each visit was set by the organizing committee and like the meal initiative, people were paid a fair wage.

Each visit cost the trial \$175.00.

The following data is for the area D contractor, but the area E data is similar.

Total expenses for area D home cleaning was \$6,300.00

Total wages was \$5,300.00

Total benefits was \$526.36

Total insurance was \$375.00

Each home cleaner was paid \$30.00 per hour plus benefits as per labour standards. They were responsible for all cleaning material, tools, insurance, employee benefits and travel. If the project proceeds the above will be used in determining budget costs for home cleaning.

Snow Removal

Snow removal was the most challenging for the organizing committee. At what point do you provide the service, what type of machinery, what about the required insurance? In the end we placed a maximum figure of \$6,000 per area per month for the initiative. If we had small amounts of snow during the trial, we were fine. If we had lots of snow, we would suspend service when we got to the allocated budget amount. Because the trial was for two months, we

did plow enough snow to get actual costs; however we were lucky as it did not snow too much. Area E received less snow than area D which was interesting.

The contractor was responsible for snow removal and shovel work at the front steps. Non slip grit was also the contractor's responsibility. The machinery used was paid according to Ministry of Transportation rent guidelines. We were not able to resolve the insurance issue as the trial was completed before we got any answers. We arrived at a figure of \$100.00 per visit including all travel. We learned the most efficient equipment for normal snow amounts was a 4x4 plow truck with a blade or large skid steer on a trailer. The service was coordinated with the home cleaning and meal delivery people.

Technology

The technology initiative did not develop fully but we realize rural seniors and their families can use technology to allow them to stay in their own homes longer. Numerous technological devices are now available and others are being released. The technology group established a website and continue to keep that site up to date.

Conclusions

Is there a need for services that would allow seniors in the rural area to stay in their home longer?

- Yes. The trial has indicated the need and it is substantial.

Can initiatives be supplied during all months of the year?

- Yes. We know the offered initiatives are possible. Participants have given very good ideas on what other initiatives should be considered.

Does the model of using existing facilities and local expertise work?

- Yes. We have the infrastructure in the rural area. We have local expertise and knowledge. Local people are willing to engage with the idea.

Do we have data relating to cost to providing service?

- Yes. We have good data on the initiatives offered and know how to determine costs of other initiatives that might be offered.

Other services needed such as the social aspect and medical needs became evident during the trial (How one Hospital Tackles Hallway Medicine appendix 5). These need further exploration. That was not the mandate of the project but suggestions on how to meet the needs were given as feedback from all involved in the project.

May 2020

The final report for the Rural Seniors Initiative was started in early March of 2020. In mid March the Covid-19 pandemic came into focus. Because the RSI had just finished, and we still had our infrastructure in place we asked and received permission from the two rural directors to use the remaining funds from the original grant to continue offering services to seniors. Significant services were offered to all seniors in the Peace River South area until late May.

The pandemic reinforced several outcomes from the original RSI trial.

The most obvious was the need for any senior, rural or urban, to receive services that allow them to stay in their own homes as long as possible.

We gained experience in home delivery of groceries to both urban and rural seniors. How to meet regulations governing delivery of dairy products.

How to deliver meals in a timely fashion to groups very far removed from our established hubs.

How to reach out to seniors who have limited internet access when social gatherings are not possible.

How to interact with other social agencies to provide the best service possible to those needing assistance.

Involve local resources to assist. A prime example of that was getting the McLeod Country Quilters to manufacture face masks. Those masks were available at local business locations free of charge to seniors wishing them.

The Covid-19 pandemic has brought to light significant cracks in how our society deals with seniors. The RSI trial was an attempt to provide services that would allow rural seniors to stay in their own homes longer. This strategy needs to be pursued.

The largest take away we have observed through both the RSI trial and pandemic is to use the local resources you have. Do not assume someone else will come to your aid.

Respectfully submitted

Sam Barbar
Board Chairperson



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Census Profile, 2016 Census

Peace River D, Regional district electoral area [Census subdivision], British Columbia and British Columbia [Province]

Topic: **All data**

Counts Rates Submit



Related data ▼

Characteristic	Peace River D, RDA (Regional district electoral area)			British Columbia		
	British Columbia					
	[Census subdivision]			[Province]		
	Total	Male	Female	Total	Male	Female
Counts (unless otherwise specified)						
Population and dwellings						
Population, 2016 ¹	5,920	... (not applicable)	... (not applicable)	4,648,055	... (not applicable)	... (not applicable)
Population, 2011 ¹	5,479	... (not applicable)	... (not applicable)	4,400,057	... (not applicable)	... (not applicable)
Population percentage change, 2011 to 2016	8.0	... (not applicable)	... (not applicable)	5.6	... (not applicable)	... (not applicable)
Total private dwellings ²	2,450	... (not applicable)	... (not applicable)	2,063,417	... (not applicable)	... (not applicable)
Private dwellings occupied by usual residents ³	2,241	... (not applicable)	... (not applicable)	1,881,969	... (not applicable)	... (not applicable)
Population density per square kilometre	0.5	... (not applicable)	... (not applicable)	5.0	... (not applicable)	... (not applicable)
Land area in square kilometres	11,706.80	... (not applicable)	... (not applicable)	922,503.01	... (not applicable)	... (not applicable)
Age characteristics						
Total - Age groups and average age of the population - 100% data ⁴	5,920	3,095	2,825	4,648,055	2,278,245	2,369,815
0 to 14 years	1,080	565	515	691,390	355,400	335,985
0 to 4 years	335	180	155	220,625	113,355	107,275
5 to 9 years	370	195	180	236,900	122,070	114,830
10 to 14 years	375	185	185	233,860	119,975	113,885
15 to 64 years	4,005	2,080	1,925	3,107,680	1,527,280	1,580,400
15 to 19 years	375	190	185	258,980	133,000	125,985
20 to 24 years	300	155	145	287,560	147,615	139,945
25 to 29 years	295	145	150	303,000	151,585	151,415
30 to 34 years	350	190	160	313,750	155,035	158,715

35 to 39 years	335	165	170	293,590	143,070	150,520
40 to 44 years	390	205	185	295,045	141,930	153,115
45 to 49 years	400	195	205	322,365	155,325	167,040
50 to 54 years	540	290	245	354,375	172,065	182,310
55 to 59 years	565	295	265	354,925	171,210	183,715
60 to 64 years	450	240	205	324,095	156,450	167,645
65 years and over	835	450	385	848,985	395,560	453,425
65 to 69 years	325	165	160	287,520	139,490	148,035
70 to 74 years	215	120	90	201,785	97,675	104,110
75 to 79 years	170	90	80	145,225	68,715	76,510
80 to 84 years	95	55	45	105,255	48,645	56,610
85 years and over	30	20	10	109,190	41,035	68,155
85 to 89 years	25	20	5	67,510	27,930	39,575
90 to 94 years	5	0	0	31,815	10,615	21,205
95 to 99 years	0	0	0	8,545	2,215	6,330
100 years and over	0	0	0	1,325	275	1,050
Total - Distribution (%) of the population by broad age groups - 100% data	100.0	100.0	100.0	100.0	100.0	100.0
0 to 14 years	18.2	18.3	18.2	14.9	15.6	14.2
15 to 64 years	67.7	67.2	68.1	66.9	67.0	66.7
65 years and over	14.1	14.5	13.6	18.3	17.4	19.1
85 years and over	0.5	0.6	0.4	2.3	1.8	2.9
Average age of the population	40.4	40.7	40.1	42.3	41.5	43.1
Median age of the population	42.9	43.2	42.5	43.0	41.9	44.0

Household and dwelling characteristics

Total - Occupied private dwellings by structural type of dwelling - 100% data ^a	2,240	... (not applicable)	... (not applicable)	1,881,970	... (not applicable)	... (not applicable)
Single-detached house	1,915	... (not applicable)	... (not applicable)	830,660	... (not applicable)	... (not applicable)
Apartment in a building that has five or more storeys	0	... (not applicable)	... (not applicable)	177,830	... (not applicable)	... (not applicable)
Other attached dwelling ^a	20	... (not applicable)	... (not applicable)	824,190	... (not applicable)	... (not applicable)
Semi-detached house	5	... (not applicable)	... (not applicable)	57,395	... (not applicable)	... (not applicable)
Row house	0	... (not applicable)	... (not applicable)	147,830	... (not applicable)	... (not applicable)
Apartment or flat in a duplex	5	... (not applicable)	... (not applicable)	230,075	... (not applicable)	... (not applicable)
Apartment in a building that has fewer than five storeys	0	... (not applicable)	... (not applicable)	385,140	... (not applicable)	... (not applicable)

Other single-attached house	5	... (not applicable)	... (not applicable)	3,755	... (not applicable)	... (not applicable)
Movable dwelling ²	305	... (not applicable)	... (not applicable)	49,290	... (not applicable)	... (not applicable)
Total - Private households by household size - 100% data ⁸	2,240	... (not applicable)	... (not applicable)	1,881,970	... (not applicable)	... (not applicable)
1 person	440	... (not applicable)	... (not applicable)	541,910	... (not applicable)	... (not applicable)
2 persons	940	... (not applicable)	... (not applicable)	663,770	... (not applicable)	... (not applicable)
3 persons	345	... (not applicable)	... (not applicable)	277,690	... (not applicable)	... (not applicable)
4 persons	330	... (not applicable)	... (not applicable)	243,125	... (not applicable)	... (not applicable)
5 or more persons	185	... (not applicable)	... (not applicable)	155,470	... (not applicable)	... (not applicable)
Number of persons in private households	5,720	... (not applicable)	... (not applicable)	4,560,240	... (not applicable)	... (not applicable)
Average household size	2.6	... (not applicable)	... (not applicable)	2.4	... (not applicable)	... (not applicable)
Marital status						
Total - Marital status for the population aged 15 years and over - 100% data ⁹	4,835	2,525	2,310	3,956,665	1,922,840	2,033,825
Married or living common law	3,400	1,705	1,690	2,297,325	1,146,175	1,151,150
Married	2,800	1,410	1,395	1,925,345	959,690	965,645
Living common law	595	295	295	371,985	186,485	185,505
Not married and not living common law	1,440	820	620	1,659,335	776,660	882,675
Never married	950	575	380	1,076,085	582,975	493,110
Separated	105	70	40	105,700	45,225	60,475
Divorced	200	135	70	263,870	103,475	160,395
Widowed	180	50	130	213,685	44,990	168,700
Family characteristics						
Total - Census families in private households by family size - 100% data ¹⁰	1,800	... (not applicable)	... (not applicable)	1,311,340	... (not applicable)	... (not applicable)
2 persons	1,000	... (not applicable)	... (not applicable)	703,685	... (not applicable)	... (not applicable)
3 persons	350	... (not applicable)	... (not applicable)	275,965	... (not applicable)	... (not applicable)
4 persons	305	... (not applicable)	... (not applicable)	243,960	... (not applicable)	... (not applicable)
5 or more persons	150	... (not applicable)	... (not applicable)	87,730	... (not applicable)	... (not applicable)

Average size of census families	2.8	... (not applicable)	... (not applicable)	2.8	... (not applicable)	... (not applicable)
Total number of census families in private households - 100% data ¹¹	1,800	... (not applicable)	... (not applicable)	1,311,345	... (not applicable)	... (not applicable)
Total couple families	1,640	... (not applicable)	... (not applicable)	1,113,405	... (not applicable)	... (not applicable)
Married couples	1,340	... (not applicable)	... (not applicable)	927,440	... (not applicable)	... (not applicable)
Common-law couples	300	... (not applicable)	... (not applicable)	185,960	... (not applicable)	... (not applicable)
Total lone-parent families by sex of parent	155	... (not applicable)	... (not applicable)	197,940	... (not applicable)	... (not applicable)
Female parent	90	... (not applicable)	... (not applicable)	155,670	... (not applicable)	... (not applicable)
Male parent	65	... (not applicable)	... (not applicable)	42,265	... (not applicable)	... (not applicable)
Total - Couple census families in private households - 100% data	1,640	... (not applicable)	... (not applicable)	1,113,400	... (not applicable)	... (not applicable)
Couples without children	900	... (not applicable)	... (not applicable)	577,790	... (not applicable)	... (not applicable)
Couples with children	745	... (not applicable)	... (not applicable)	535,610	... (not applicable)	... (not applicable)
1 child	310	... (not applicable)	... (not applicable)	221,065	... (not applicable)	... (not applicable)
2 children	290	... (not applicable)	... (not applicable)	230,705	... (not applicable)	... (not applicable)
3 or more children	140	... (not applicable)	... (not applicable)	83,840	... (not applicable)	... (not applicable)
Total - Lone-parent census families in private households - 100% data	155	... (not applicable)	... (not applicable)	197,940	... (not applicable)	... (not applicable)
1 child	100	... (not applicable)	... (not applicable)	125,890	... (not applicable)	... (not applicable)
2 children	40	... (not applicable)	... (not applicable)	54,900	... (not applicable)	... (not applicable)
3 or more children	20	... (not applicable)	... (not applicable)	17,145	... (not applicable)	... (not applicable)
Total - Persons not in census families in private households - 100% data	650	400	245	882,895	418,495	464,405
Household type						
Total - Private households by household type - 100% data ¹²	2,240	... (not applicable)	... (not applicable)	1,881,970	... (not applicable)	... (not applicable)
One-census-family households	1,735	... (not applicable)	... (not applicable)	1,195,735	... (not applicable)	... (not applicable)



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Census Profile, 2016 Census

Peace River E, Regional district electoral area [Census subdivision], British Columbia and British Columbia [Province]

Topic: **All data**

Counts Rates Submit

Related data ▼

Characteristic	Peace River E, RDA (Regional district electoral area)			British Columbia		
	British Columbia			[Province]		
	[Census subdivision]					
	Total	Male	Female	Total	Male	Female
Counts (unless otherwise specified)						
Population and dwellings						
Population, 2016 ¹	2,949	... (not applicable)	... (not applicable)	4,648,055	... (not applicable)	... (not applicable)
Population, 2011 ¹	2,764	... (not applicable)	... (not applicable)	4,400,057	... (not applicable)	... (not applicable)
Population percentage change, 2011 to 2016	6.7	... (not applicable)	... (not applicable)	5.6	... (not applicable)	... (not applicable)
Total private dwellings ²	1,430	... (not applicable)	... (not applicable)	2,063,417	... (not applicable)	... (not applicable)
Private dwellings occupied by usual residents ³	1,199	... (not applicable)	... (not applicable)	1,881,969	... (not applicable)	... (not applicable)
Population density per square kilometre	0.2	... (not applicable)	... (not applicable)	5.0	... (not applicable)	... (not applicable)
Land area in square kilometres	16,355.14	... (not applicable)	... (not applicable)	922,503.01	... (not applicable)	... (not applicable)
Age characteristics						
Total - Age groups and average age of the population - 100% data ⁴	2,950	1,560	1,385	4,648,055	2,278,245	2,369,815
0 to 14 years	550	290	260	691,390	355,400	335,985
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5 to 9 years	195	105	90	236,900	122,070	114,830
10 to 14 years	170	90	80	233,860	119,975	113,885
15 to 64 years	2,000	1,035	965	3,107,680	1,527,280	1,580,400
15 to 19 years	170	90	80	258,980	133,000	125,985
20 to 24 years	135	65	70	287,560	147,615	139,945
25 to 29 years	175	90	90	303,000	151,585	151,415
30 to 34 years	165	80	85	313,750	155,035	158,715

35 to 39 years	150	80	70	293,590	143,070	150,520
40 to 44 years	155	85	70	295,045	141,930	153,115
45 to 49 years	220	115	100	322,365	155,325	167,040
50 to 54 years	300	145	155	354,375	172,065	182,310
55 to 59 years	310	170	135	354,925	171,210	183,715
60 to 64 years	225	120	105	324,095	156,450	167,645
65 years and over	395	235	160	848,985	395,560	453,425
65 to 69 years	175	105	70	287,520	139,490	148,035
70 to 74 years	100	65	35	201,785	97,675	104,110
75 to 79 years	60	30	25	145,225	68,715	76,510
80 to 84 years	50	30	20	105,255	48,645	56,610
85 years and over	20	10	5	109,190	41,035	68,155
85 to 89 years	15	5	5	67,510	27,930	39,575
90 to 94 years	5	0	5	31,815	10,615	21,205
95 to 99 years	5	5	0	8,545	2,215	6,330
100 years and over	0	0	0	1,325	275	1,050
Total - Distribution (%) of the population by broad age groups - 100% data	100.0	100.0	100.0	100.0	100.0	100.0
0 to 14 years	18.6	18.6	18.8	14.9	15.6	14.2
15 to 64 years	67.8	66.3	69.7	66.9	67.0	66.7
65 years and over	13.4	15.1	11.6	18.3	17.4	19.1
85 years and over	0.7	0.6	0.4	2.3	1.8	2.9
Average age of the population	40.5	41.3	39.5	42.3	41.5	43.1
Median age of the population	44.2	45.5	42.2	43.0	41.9	44.0

Household and dwelling characteristics

Total - Occupied private dwellings by structural type of dwelling - 100% data ⁵	1,200	... (not applicable)	... (not applicable)	1,881,970	... (not applicable)	... (not applicable)
Single-detached house	880	... (not applicable)	... (not applicable)	830,660	... (not applicable)	... (not applicable)
Apartment in a building that has five or more storeys	0	... (not applicable)	... (not applicable)	177,830	... (not applicable)	... (not applicable)
Other attached dwelling ⁶	0	... (not applicable)	... (not applicable)	824,190	... (not applicable)	... (not applicable)
Semi-detached house	0	... (not applicable)	... (not applicable)	57,395	... (not applicable)	... (not applicable)
Row house	0	... (not applicable)	... (not applicable)	147,830	... (not applicable)	... (not applicable)
Apartment or flat in a duplex	0	... (not applicable)	... (not applicable)	230,075	... (not applicable)	... (not applicable)
Apartment in a building that has fewer than five storeys	0	... (not applicable)	... (not applicable)	385,140	... (not applicable)	... (not applicable)

Other single-attached house	0	... (not applicable)	... (not applicable)	3,755	... (not applicable)	... (not applicable)
Movable dwelling ^Z	320	... (not applicable)	... (not applicable)	49,290	... (not applicable)	... (not applicable)
Total - Private households by household size - 100% data ^B	1,200	... (not applicable)	... (not applicable)	1,881,970	... (not applicable)	... (not applicable)
1 person	275	... (not applicable)	... (not applicable)	541,910	... (not applicable)	... (not applicable)
2 persons	515	... (not applicable)	... (not applicable)	663,770	... (not applicable)	... (not applicable)
3 persons	165	... (not applicable)	... (not applicable)	277,690	... (not applicable)	... (not applicable)
4 persons	145	... (not applicable)	... (not applicable)	243,125	... (not applicable)	... (not applicable)
5 or more persons	95	... (not applicable)	... (not applicable)	155,470	... (not applicable)	... (not applicable)
Number of persons in private households	2,945	... (not applicable)	... (not applicable)	4,560,240	... (not applicable)	... (not applicable)
Average household size	2.4	... (not applicable)	... (not applicable)	2.4	... (not applicable)	... (not applicable)
Marital status						
Total - Marital status for the population aged 15 years and over - 100% data ^A	2,400	1,270	1,125	3,956,665	1,922,840	2,033,825
Married or living common law	1,635	815	815	2,297,325	1,146,175	1,151,150
Married	1,305	655	650	1,925,345	959,690	965,645
Living common law	330	165	165	371,985	186,485	185,505
Not married and not living common law	765	455	310	1,659,335	776,660	882,675
Never married	475	280	195	1,076,085	582,975	493,110
Separated	55	40	20	105,700	45,225	60,475
Divorced	140	95	45	263,870	103,475	160,395
Widowed	95	40	60	213,685	44,990	168,700
Family characteristics						
Total - Census families in private households by family size - 100% data ¹⁰	915	... (not applicable)	... (not applicable)	1,311,340	... (not applicable)	... (not applicable)
2 persons	540	... (not applicable)	... (not applicable)	703,685	... (not applicable)	... (not applicable)
3 persons	150	... (not applicable)	... (not applicable)	275,965	... (not applicable)	... (not applicable)
4 persons	140	... (not applicable)	... (not applicable)	243,960	... (not applicable)	... (not applicable)
5 or more persons	85	... (not applicable)	... (not applicable)	87,730	... (not applicable)	... (not applicable)

Average size of census families	2.8	... (not applicable)	... (not applicable)	2.8	... (not applicable)	... (not applicable)
Total number of census families in private households - 100% data ¹¹	915	... (not applicable)	... (not applicable)	1,311,345	... (not applicable)	... (not applicable)
Total couple families	810	... (not applicable)	... (not applicable)	1,113,405	... (not applicable)	... (not applicable)
Married couples	645	... (not applicable)	... (not applicable)	927,440	... (not applicable)	... (not applicable)
Common-law couples	165	... (not applicable)	... (not applicable)	185,960	... (not applicable)	... (not applicable)
Total lone-parent families by sex of parent	105	... (not applicable)	... (not applicable)	197,940	... (not applicable)	... (not applicable)
Female parent	60	... (not applicable)	... (not applicable)	155,670	... (not applicable)	... (not applicable)
Male parent	40	... (not applicable)	... (not applicable)	42,265	... (not applicable)	... (not applicable)
Total - Couple census families in private households - 100% data	810	... (not applicable)	... (not applicable)	1,113,400	... (not applicable)	... (not applicable)
Couples without children	475	... (not applicable)	... (not applicable)	577,790	... (not applicable)	... (not applicable)
Couples with children	335	... (not applicable)	... (not applicable)	535,610	... (not applicable)	... (not applicable)
1 child	125	... (not applicable)	... (not applicable)	221,065	... (not applicable)	... (not applicable)
2 children	130	... (not applicable)	... (not applicable)	230,705	... (not applicable)	... (not applicable)
3 or more children	80	... (not applicable)	... (not applicable)	83,840	... (not applicable)	... (not applicable)
Total - Lone-parent census families in private households - 100% data	105	... (not applicable)	... (not applicable)	197,940	... (not applicable)	... (not applicable)
1 child	65	... (not applicable)	... (not applicable)	125,890	... (not applicable)	... (not applicable)
2 children	20	... (not applicable)	... (not applicable)	54,900	... (not applicable)	... (not applicable)
3 or more children	15	... (not applicable)	... (not applicable)	17,145	... (not applicable)	... (not applicable)
Total - Persons not in census families in private households - 100% data	390	255	140	882,895	418,495	464,405
Household type						
Total - Private households by household type - 100% data ¹²	1,195	... (not applicable)	... (not applicable)	1,881,970	... (not applicable)	... (not applicable)
One-census-family households	885	... (not applicable)	... (not applicable)	1,195,735	... (not applicable)	... (not applicable)

British Columbia

Baby boomer bulge pushes percentage of seniors in B.C. higher, report says

Between 2018 and 2019, the percentage of seniors living in the province increased from 14% to 18%

CBC News · Posted: Dec 12, 2019 2:20 PM PT | Last Updated: December 12, 2019



B.C. Seniors Advocate Isobel Mackenzie released her office's annual report on services for seniors. (CBC)

comments



The annual report from the office of the B.C seniors advocate says the percentage of the

population of people age 65 and over continues to expand, up from 14 per cent in 2018 to 18 per cent in 2019.

The growth represents the bulge of the baby boomers moving into the seniors demographic, but B.C. Seniors Advocate Isobel Mackenzie says the proportion of seniors is not evenly distributed throughout the province.

"Vancouver Island does have the highest percentage of people over the age of 65 — 24 per cent ... compared to the north where only 13 per cent of the population is over the age of 65. So, we might want to pay more attention here on the island," Mackenzie told CBC's *On the Island* host Gregor Craigie.

According to Mackenzie, the health-care system won't feel the full impact of the aging baby boomers for another few years.

- [View the report Monitoring Seniors Services 2019.](#)

According to the report, the number of seniors' subsidized housing units continued to shrink for a fifth straight year, with the waiting lists for such units increasing in tandem.

- [Low wages, few job openings driving B.C.'s care worker shortage, not lack of staff: seniors advocate](#)

"That's a troublesome trend," said Mackenzie. "We're certainly going to be having some discussions with B.C. Housing about why we're seeing that."

Staffing shortages and other problems

Mackenzie said a report coming in January will look at whether care providers are actually providing the care they are being funded for.

"As we review a great amount of the data and reports back from care facilities to the funders, we find that, first of all, not everybody is delivering the hours of care they're funded to deliver," said Mackenzie. "And two, they're not spending all of the money we've provided

to them on delivering those hours of care."

Earlier this year, complaints forced Island Health to take over the administration of senior care facilities in Courtenay and Nanaimo after they were found to be chronically understaffed and non-compliant with the [Community Care and Assisted Living Act](#).

- **[Bentall Centre, Vancouver's largest office complex, selling for secret price](#)**

The facilities in question are part of a group of 23 seniors homes that were bought by China's Anbang Insurance Group in 2017 in a federally approved sale.

The Chinese government took control of Anbang in 2018 when the company's [founder was convicted of fraud in China](#).

Seventy per cent of all the long-term care beds in the province are contracted out, receiving \$1.4 billion in public money annually.

Mackenzie said there needs to be better tools to keep care providers in compliance.

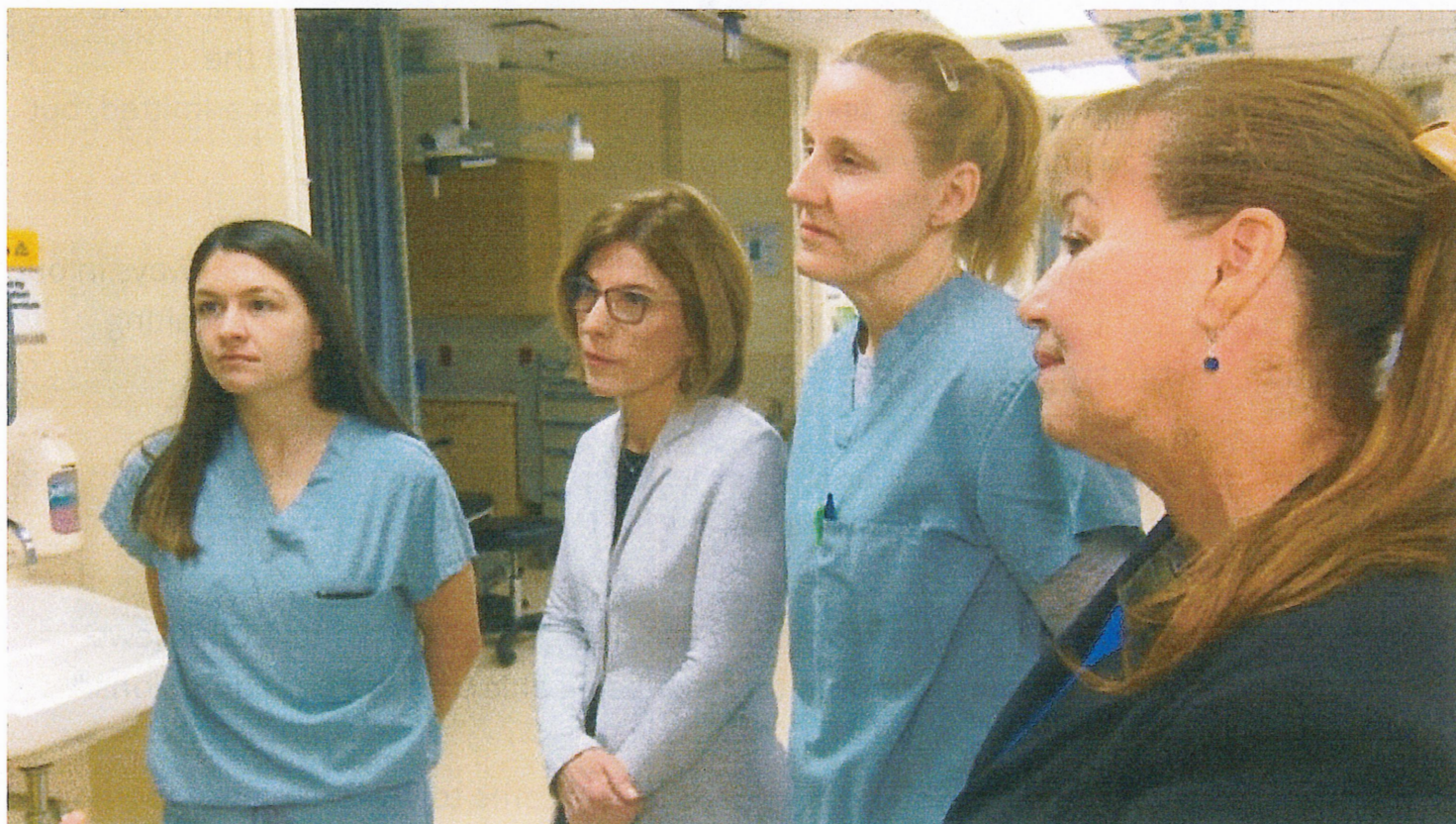
"I'd like us to start talking about whether we can levy financial penalties for infractions far earlier in the process," she said. Right now, there's no incentive for a care home provider to be better than the next care home or to be excellent from a financial perspective. They get paid the same."

Toronto

How one hospital tackles hallway medicine, starting in the emergency room

Sunnybrook's 'ED One Team' aims to help seniors avoid hospital by boosting home supports

Mike Crawley · CBC News · Posted: Feb 13, 2020 4:00 AM ET | Last Updated: February 13



Some of the members of the Sunnybrook ED One Team, from left, include occupational therapist Faith Gallant, social worker Valerie Soper, physiotherapist Belinda Wagner, and geriatric nurse clinician Judith Keen-Bingham. (Paul Smith/CBC)

comments



One Ontario hospital is trying to lessen its "hallway medicine" problem by forming a new team of health-care workers in its emergency room with the aim of reducing admission rates among seniors.

The "ED One Team" at Sunnybrook Health Sciences in Toronto launched in late October and is already showing evidence of success, according to figures provided by hospital officials that suggest a nearly five per cent drop in admissions.

The team brings together a social worker, a geriatric emergency medicine nurse, a physiotherapist, an occupational therapist, a community care co-ordinator, a psycho-geriatric case manager and staff from agencies that provide home-care services.

The team helps patients who come to the emergency room avoid being admitted to the hospital by ensuring adequate supports are available for them at home or in the community. Its target group is those aged 70 and older who don't need to be admitted, but who can't otherwise go home safely straight from the emergency room.

The team has helped Sunnybrook "reduce the number of patients who are in hallways in our emergency department, as well as the number of patients who are stuck in the waiting room," said Dr. Aikta Verma, the hospital's chief of emergency services.

Dr. Aikta Verma, chief of emergency medicine at Sunnybrook Health Sciences Centre, explains how a new team helped prevent a hospital admission for an elderly patient. 0:43

"I'm really proud of the work that the team has been doing here," Verma told CBC News. "This has really made a difference for us in terms of being able to lower our admissions."

Verma pointed to the recent case of an older patient who came to the emergency room with what the doctor described as a "very minor" foot fracture but was unable to walk.

A year ago, said Verma, she would have decided that the patient needed to stay in hospital. Instead, Verma contacted the ED One Team, whose members taught the patient how to walk with support, got her the equipment she needed to be safe at home, and avoided admission.

"This was better for the patient as well as for the system overall," said Verma.

Sunnybrook hopes the team's efforts will help alleviate some of the demand for beds that has led to the "hallway health-care" trend on its wards and in hospitals across the province.

An [investigation by CBC News](#) last month revealed dozens of Ontario hospitals were filled beyond capacity for weeks at a time in 2019. The data showed Sunnybrook with a higher than 100 per cent occupancy rate on 47 days in the six-month period analyzed.



Members of Sunnybrook's team meet every day to discuss the cases of emergency room patients who may need extra supports to make the transition home, rather than be admitted to hospital. (Paul Smith/CBC)

Premier Doug Ford has promised to [end hallway medicine](#). The government's statistics show a five-to-six per cent drop over the past year in the number of hospital patients in "unconventional spaces" such as hallways and storage rooms, but that still means some 950 patients are falling into that category every day.

Sunnybrook's ED One Team operates seven days a week from 8 a.m. until 11 p.m.,

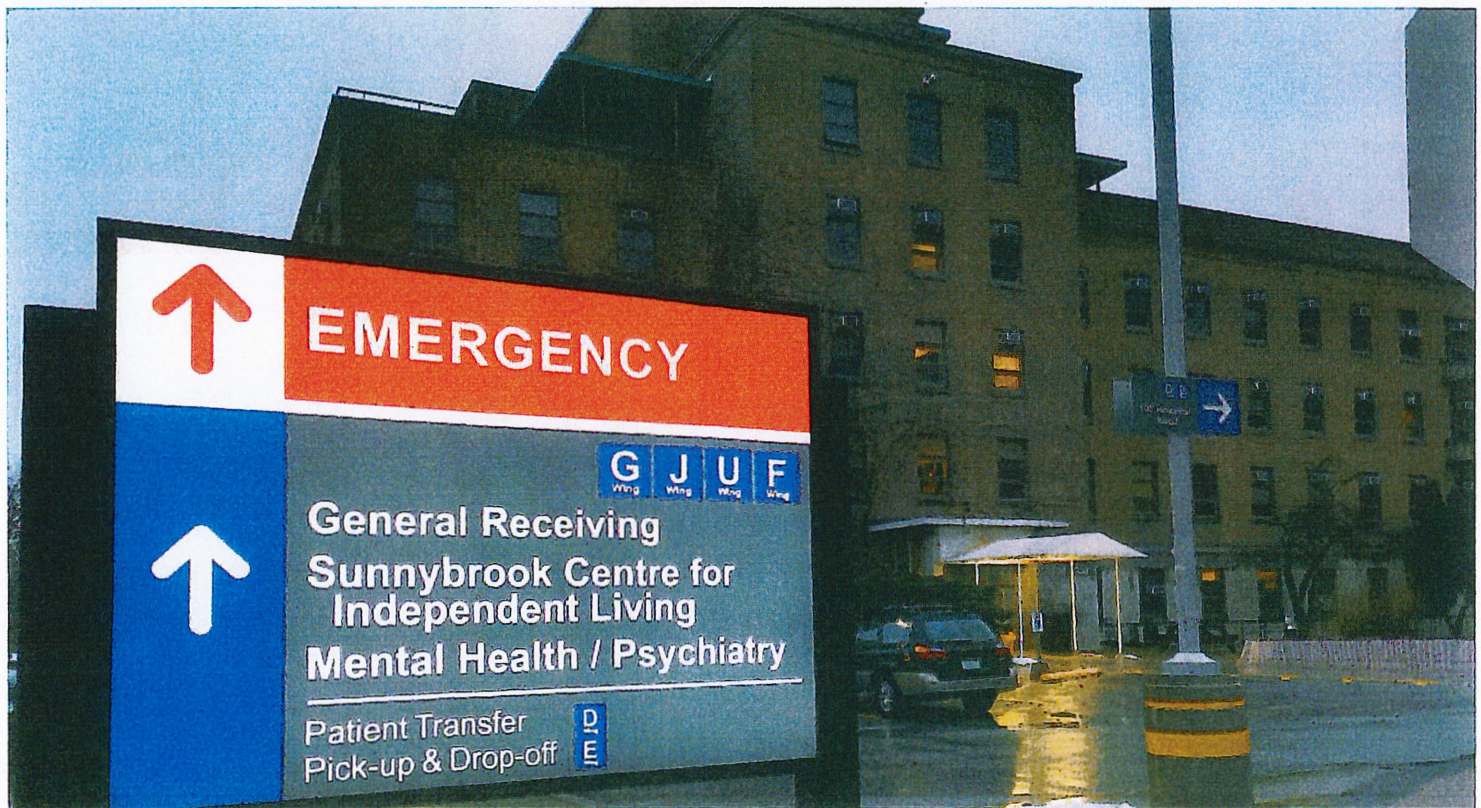
working with the emergency department medical staff to identify patients who don't need hospital admission, but need some form of extra care.

- **Doug Ford boasts of 'tremendous progress' on hallway health care**
- **CBC INVESTIGATES** **How Ontario's 'hallway medicine' problem has become an everyday reality**

That could include physiotherapy right in the emergency room, something that previously was only provided to patients who'd been admitted, unnecessarily taking up a hospital bed sometimes for days.

Physiotherapist Belinda Wagner said the team typically sees patients who come to the ER with an injury or an illness that affects their ability to function safely at home but who don't require a hospital stay.

"If they're medically stable and they're ready to leave this level of care but not necessarily go home safely, we as a team can put our brains together and figure out what is the best next place for them to go," said Wagner.





The ED One Team operates seven days a week from 8 a.m. to 11 p.m. in the emergency department at Sunnybrook. (Doug Ives/Canadian Press)

Team member and social worker Valerie Soper says it's "fantastic because we all come to the table with a different lens and there's so many improvements that have been made in the emergency department."

Soper worked in Sunnybrook's ER long before the formation of the team and said the change has meant each professional's work gets done more efficiently, patients' needs are being met in a more timely fashion, and discharges happen more quickly.

- **One of Ontario's most overcrowded hospitals is in the health minister's riding**
- **ANALYSIS** **How Ontario health care will change with Ford government's reforms**
- **Hallway medicine in Ontario, from the people who've been there**

By working until 11 p.m., the team can set up home-care supports that typically only get arranged during the daytime.

"We're able to see patients in the evening and facilitate a safe discharge home instead of having these patients stay overnight," said occupational therapist Faith Gallant, one of the team members.

In its [health-care reforms](#), the Ford government is encouraging hospitals to work more directly with outside agencies such as home-care providers with the aim of improving connections within the health system for patients.



Natalie Coyle is the co-ordinator of Sunnybrook's ED One Team. (Paul Smith/CBC)

Sunnybrook's ED One Team is putting that into practice in a range of ways:

- Doing physiotherapy or occupational therapy assessments in the ER makes it possible to refer patients directly to a physical rehab facility without the patient having to wait in the hospital.
- Home-care agencies involved in the team can arrange for a personal support worker to accompany the patient home.
- A psycho-geriatric case manager keeps tabs on patients at home after discharge to reduce the risk of re-admission.

The emergency department has seen a 4.5 per cent reduction in admission rates among the team's target caseload since the launch in October, according to hospital officials. That has meant 74 fewer patients admitted to the hospital's already crowded wards.

There's also been a noticeable increase in patient satisfaction with the hospital experience, said Natalie Coyle, the team's co-ordinator.

"We've heard from some patients who have written in to say, 'It was really great that someone followed up with me and was able to provide extra service and ensure that I was safe,'" said Coyle.

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