



# City of Richmond

## Report to Committee

**To:** Parks, Recreation and Cultural Services  
Committee

**Date:** November 9, 2015

**From:** Cathryn Volkering Carlile  
General Manager, Community Services

**File:** 07-3400-01/2015-Vol  
01

**Re:** 2015-2020 Seniors Service Plan

### Staff Recommendation

That the Community Services 2015-2020 Seniors Service Plan: Active and Healthy Living, presented as Attachment 1 in the staff report titled "2015-2020 Seniors Service Plan", dated November 9, 2015, from the General Manager, Community Services, be adopted.

Cathryn Volkering Carlile  
General Manager, Community Services  
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Att. 3

| REPORT CONCURRENCE   |                                     |                                       |
|--|-------------------------------------|---------------------------------------|
| <b>ROUTED TO:</b>  | <b>CONCURRENCE</b>                  | <b>CONCURRENCE OF GENERAL MANAGER</b> |
| Arts, Culture & Heritage   | <input checked="" type="checkbox"/> |                                       |
| Parks Services   | <input checked="" type="checkbox"/> |                                       |
| Recreation Services  | <input checked="" type="checkbox"/> |                                       |
| <b>REVIEWED BY STAFF REPORT /<br/>AGENDA REVIEW SUBCOMMITTEE</b> | <b>INITIALS:</b><br>                | <b>APPROVED BY CAO</b><br>            |

## Staff Report

### Origin

At the May 11, 2015 Council Meeting, Council received a report regarding the draft 2015-2020 Seniors Service Plan. At that time, Council adopted the following resolution:

*That the staff report titled Update to the Older Adults Service Plan, dated April 8, 2015, from the General Manager, Community Services, be circulated for comment to a wide array of partners and community organizations that the Community Services Division works with in service provision to older adults.*

In addition, Council directed staff to circulate the draft to the Prime Minister, Premier, Minister for Seniors, MP's and MLA's, and to use the City's Let's Talk Richmond platform for public input. Staff circulated the Draft and sought comments from the public and a wide array of partners and community organizations, including the aforementioned parties. Based on the feedback received, staff revised the Draft and prepared the final version of the Seniors Service Plan presented in Attachment 1.

The purpose of this report is to provide an overview of the process undertaken to obtain comments on the draft Seniors Service Plan and to seek Council adoption of the amended final version.

This report supports Council's 2014-2018 Term Goal #2 A Vibrant, Active and Connected City:

*Continue the development and implementation of an excellent and accessible system of programs, services, and public spaces that reflect Richmond's demographics, rich heritage, diverse needs, and unique opportunities, and that facilitate active, caring, and connected communities.*

2.2. *Effective social service networks.*

### Findings of Fact

#### Background

With a vision to be a nurturing, connected community that promotes healthy and active aging, the 2015-2020 Seniors Service Plan: Active and Healthy Living represents a comprehensive, update of the previous Service Plan and sets the goals and actions for seniors' services and programs in Richmond for the next six years.

The Seniors Service Plan has been developed by building on the achievements of the previous Service Plan and conducting consultation with seniors, key stakeholders and community partners. As well, a Steering Committee comprising of seniors representatives, community stakeholders from a variety of community organizations and staff working to support seniors' services in Richmond provided guidance and advice to the development of the Seniors Service Plan.

The 2015-2020 Seniors Service Plan reflects Richmond's current reality including demographic changes and emerging social and health trends and their impacts on the health and wellness of seniors. It builds on best practices gleaned from literature, lessons learned from other jurisdictions, and is consistent with the City's strategic mandates and objectives.

The process for preparation of the Seniors Service Plan involved:

Phase 1: Information Review

- Review of best practices related literature and jurisdictional scan.
- Review of demographic profile, social and emerging trends of Richmond's local population.
- Review of program and service data.

Phase 2: Data Collection and Engagement

- A survey of 378 Richmond seniors through the City's Let's Talk Richmond platform and the distribution of hard copies.
- Fourteen focus groups engaging 161 individuals from a range of stakeholder groups, including seniors and service providers.
- In-depth interviews with 23 key informants, including four seniors representing vulnerable target groups, senior service providers in the city and key city personnel.
- Community mapping at 10 locations around the city.

Phase 3: Development of the draft 2015-2020 Seniors Service Plan

Phase 4: Circulation of draft Seniors Service Plan for comment

Phase 5: Revision and Seniors Service Plan adoption

Solicitation of Comments on Draft Seniors Service Plan

A concerted, multi-pronged approach was used to solicit comments on the draft Seniors Service Plan. To support the process of gathering feedback, a feedback form (Attachment 2) was developed. The following channels were used to solicit comments:

- Distribution of draft Seniors Service Plan and feedback form to Community Associations/Societies, community groups, external organizations, Provincial ministries, Federal MPs offices and MLA offices.
- Posting of the draft Seniors Service Plan and feedback form on the City of Richmond website – a section on the 55+ page was created to provide updates since the launch of the Seniors Service Plan update, which included links to related information and documents.
- Hosting the draft Seniors Service Plan and feedback form on the City's Let's Talk Richmond platform – public comments were sought from August 18, 2015 to September 18, 2015.

- Placing hard copies of the draft Seniors Service Plan and feedback form at various locations<sup>1</sup> across the city. Comment period was open from August 18, 2015 – September 18, 2015.
- Presenting the draft Seniors Service Plan and facilitating feedback at meetings with the Minoru Seniors Society, Richmond Seniors Advisory Committee, the City’s Area Coordinators and Association’s Seniors Coordinators.

In total, 54 submissions were received – 38 from the public and 16 from community partners and community organizations. The anecdotal comments received are included in Attachment 3. Summarized below are key themes that emerged from the feedback received:

1. Respondents felt the Seniors Service Plan was progressive in its approach and covered comprehensive needs; as one respondent noted, “No one is left behind.”
2. Respondents were overwhelmingly supportive of the proposed Strategic Directions, and associated actions and outcomes.
3. Questions emerged pertaining to the development of implementation and evaluation plans for the Seniors Service Plan.
4. Respondents requested to see the addition of proposed partners across more of the proposed actions.
5. Respondents provided examples of programs that they would like to see implemented.
6. Suggestions for minor wording revisions to provide clarity in particular areas and to certain terms.

### Seniors Service Plan Revisions

While the response was overwhelmingly positive, based on careful consideration of the feedback received as well as further reflection from staff, revisions have been made to the Seniors Service Plan. The key changes undertaken include the following:

- Added to the Executive Summary of the Seniors Service Plan, the intended next step of developing an implementation plan and an evaluation plan to support the execution of the Seniors Service Plan.
- Added information related to the purpose of the Age-Friendly Assessment and Action Plan in order to distinguish between the mandate of the Age-Friendly Plan and the Seniors Service Plan.
- Added proposed partners across all actions, as appropriate.
- Minor wording changes to sections and actions of the Service Service Plan.
- Added definitions to provide clarity to certain terms.

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<sup>1</sup> City Hall, Minoru Place Activity Centre and community centres (Cambie, City Centre, Hamilton, Sea Island, South Arm, Steveston, Thompson or West Richmond)

Some comments received to the draft Seniors Service Plan may be of relevance to other areas of the City and/or to community partners, therefore comments will be forwarded to relevant parties as deemed appropriate.

### Implementation

The 2015-2020 Seniors Service Plan provides a guiding framework and outlines key service priorities and actions to be addressed by the City and its partners over the next six years. Implementation of the plan will be the joint responsibility of the City, its partners and a range of other community organizations. It is only through partnership that the Seniors Service Plan's vision will be realised.

### **Financial Impact**

None.

### **Conclusion**

Preparation of the 2015-2020 Seniors Service Plan involved an extensive process encompassing engagement and consultation at the crux. Following presentation of the draft Seniors Service Plan to Council in May 2015, a rigorous effort was made to reach out to the public, partners and community organizations to elicit comments on the Draft. Although major revisions were not warranted, it is believed that the revised Seniors Service Plan is a stronger document than the earlier version and offers an effective planning tool for addressing the priorities for Richmond's seniors for the next six years.

It is recommended that the 2015-2020 Seniors Service Plan, presented in Attachment 1 of this report, be adopted. Following adoption of the Seniors Service Plan, staff will begin the implementation process in collaboration with the City and its community partners.



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- Att. 1: 2015-2020 Seniors Service Plan: Active and Healthy Living
- 2: Feedback Form
- 3: Summary of Feedback Received



Seniors Service Plan  
Active and Healthy Living  
2015–2020



# ACKNOWLEDGMENTS

The process of updating this Service Plan depended on the involvement of many stakeholders and members of the community who volunteered their time to complete surveys and participate in focus groups and interviews. We are grateful to all of those who contributed and we would like to acknowledge the special contribution of:

## Steering Committee

- Claire Adamson, Program Manager, Corporate Programs Management Group
- Mandeep Bains, Project Manager, Performance
- Olive Bassett, Richmond Seniors Advisory Committee
- Henry Beh, Richmond Chinese Community Society
- Belinda Boyd, Vancouver Coastal Health
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- Eva Busich-Veloso, Coordinator, Seniors Services
- Aileen Cormack, Richmond Seniors Advisory Committee
- Rishma Dhalla, Fall Prevention Team, Vancouver Coastal Health
- Carol Dickson, Richmond Cares, Richmond Gives
- John Foster, Manager, Community Social Development
- Francine Gosselin, Richmond Addiction Services
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## EXECUTIVE SUMMARY

In 2008, the City of Richmond developed the 2008-2012 Older Adults Service Plan to address service needs of the important and growing demographic of those 55+. The Service Plan aimed to ensure that effective, meaningful and appropriate services, programs, and opportunities were provided for seniors in Richmond. Objectives and actions for planning, development, and monitoring of seniors services over the course of five years were established. Many of the objectives and actions were achieved and the Service Plan provided an important framework from which to meet the needs of seniors in Richmond.

This updated 2015–2020 Seniors Service Plan<sup>1</sup> has been developed by building on the achievements of the previous Service Plan, collecting best-practice information from other jurisdictions in Canada, exploring related research, and conducting extensive community consultations with seniors, key stakeholders, and **community partners**.<sup>2</sup>

The community consultation took place from May to September 2014 and in order to paint a valid picture of the needs of seniors, a mix of data collections/strategies were used. These included:

- A representative survey of 378 seniors from the city. Responses from seniors were obtained through community centres, local service providers and the “Let’s Talk Richmond” website.
- Fourteen focus groups engaging 161 individuals from a range of stakeholder groups, including seniors and service providers.
- In-depth interviews with 23 key informants, including seniors representing vulnerable target groups, seniors service providers in the city and key City personnel.
- Community mapping at 10 locations around the city.

The vision of the 2015–2020 Seniors Service Plan is for the City of Richmond to be a nurturing, connected community that promotes healthy and active aging. This vision will be best realized by maintaining a focus on inclusion that ensures accessibility, and promotes intercultural and intergenerational interaction while coordinating services that collaborate with partners, volunteers, and seniors. Creating comfortable environments that are welcoming, safe, responsive and empowering will allow seniors the most positive environment to age in place.

<sup>1</sup> For the purpose of this Service Plan and future programs and services, the 55+ demographic will be referred to as seniors rather than older adults.

<sup>2</sup> Words in **bold italic** are defined in Appendix A: Glossary.



One of the most recurrent topics identified through the consultation process was a recognition of the significant and growing **diversity** of the seniors population in Richmond. Respondents also noted the positive impact of many health promotion initiatives, including the range of active living offerings, wellness clinics, free or low cost meal provision for those in need, and the success of the Community Garden programs. Challenges that were identified included increasing difficulty in addressing the complex needs of frail and vulnerable seniors, those seniors living independently in their communities, as well as effectively supporting newcomer and visible minority older people.

Recognizing both the achievements realized and the opportunities ahead, this Service Plan serves as the blueprint for the next six years to meet the service and program needs of the diverse seniors population of Richmond. The framework of the 2015–2020 Seniors Service Plan (see Figure 1 on page 8) consists of five strategic directions (with associated items for action) and is guided by overarching principles and a vision statement. The proposed length of the actions are specified as short, medium, and long-term. Each action includes a description of the role of the City as well as the potential partners, as appropriate. Finally, suggestions for implementation and monitoring are outlined.

The actions identified in this document have been framed at a broad level. A comprehensive implementation and evaluation plan with detailed and specific actions and associated measures of progress will be developed as part of the next phase of the planning process.





# 1.0 INTRODUCTION

As the population ages, cities are increasingly aware of the necessity to design services and programs appropriate for addressing the unique needs of seniors. Supporting active aging is a key factor in assisting those over the age of 55 to not only live longer, but to age with a better quality of life. Healthy aging is multidimensional; it encompasses the avoidance of disease and disability, the maintenance of physical and cognitive function, and sustained engagement in social and productive activities. Active aging emphasizes the benefits of maintaining an active lifestyle throughout a lifetime, and is comprised of having meaningful work (either paid or in a volunteer role); play (including hobbies and creative expression); relationships and connections with family, friends, and community; giving service to others; maintaining physical and spiritual health; and continued learning through self-discovery and gaining new skills. Seniors regularly seek out services and programs within their city to meet these needs.

## Background

In 2008, the City of Richmond developed the 2008–2012 Older Adults Service Plan as a means to provide a framework to recognize the unique service and program delivery needs of an older population. The Service Plan outlined the City's commitment, "...to be a community where seniors live healthily and actively in a cooperative, welcoming and inclusive environment, which promotes engagement, encourages lifelong learning, and values the contribution of seniors." The 2008–2012 Older Adults Service Plan focused and guided service delivery to ensure that effective, meaningful and appropriate services, programs and activities were provided for seniors in Richmond. Since that time, great strides have been made and many of the original actions of the Plan have since been achieved.

## 2015–2020 Seniors Service Plan Framework

The updated 2015–2020 Seniors Service Plan will orient the actions and decision-making of the City for coming years. A focused effort on the Service Plan will help ensure that a responsive and effective program and service portfolio meets the evolving needs of Richmond's seniors population. The following vision and guiding principles provide a framework for the work proposed in this 2015–2020 Seniors Service Plan.

*Seniors in Richmond have the highest life expectancy in Canada and are living an average of 84.9 years, four years longer than the national average of 81.*

*Statistics Canada, 2011 Census*



*Figure 1: 2015–2020 Seniors Service Plan Framework*

**Direction #1: Communication and Awareness**

**Objective:** Communication with seniors is timely, effective and appropriately delivered and received.

**Outcomes:**

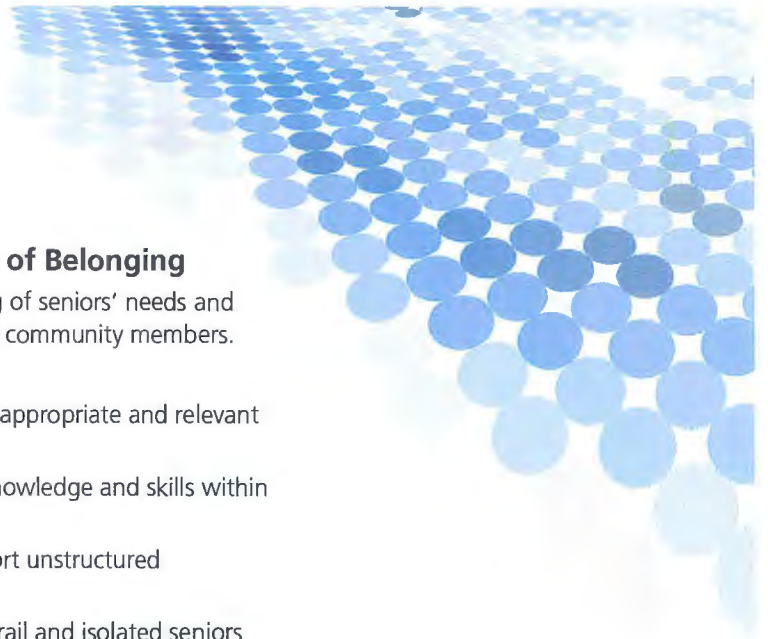
- Increased knowledge and awareness among the diverse seniors population (e.g. under-informed seniors, diverse populations, frail, isolated, etc.) of programs and services available.
- Promotional materials for family focussed events encourage participation of seniors.
- Improved knowledge of health and wellness benefits.

**Direction #2: Responsive and Relevant Services**

**Objective:** Programs and services are developed based on best practices, direct consultation, and program evaluation to reflect changing needs and priorities.

**Outcomes:**

- The needs of underserved segments of the seniors population (e.g. men, hard-to-reach) are met through the offering of a wide range of program and service opportunities.
- Intergenerational understanding among program participants, and the community, is enhanced.
- Programs and services reflect the diversity of the seniors demographic group (e.g. function, age, ethnicity, etc.).
- A wide range of volunteer opportunities are provided to support seniors to be active, productive members of the community.



### **Direction #3: Respect, Inclusion and Sense of Belonging**

**Objective:** There is a citywide focus and understanding of seniors' needs and wants. Seniors are celebrated and recognized as valued community members.

**Outcomes:**

- Seniors' needs are met by a range of culturally appropriate and relevant programming.
- Diverse seniors have a conduit to share their knowledge and skills within the community.
- City buildings have welcoming spaces to support unstructured gatherings.
- Improved access and reduction of barriers for frail and isolated seniors (e.g. transportation to community programs, Fee Subsidy program, etc.).
- Consistent terminology, that is reflective of this segment of the population, is established.
- Seniors are positively portrayed in all City communications.
- An informed community that respects the contributions and needs of seniors.

### **Direction #4: Coordinated Service Delivery**

**Objective:** The City, works with partners including *Community Associations* and *community organizations* to ensure services to seniors are coordinated citywide.

**Outcomes:**

- Improved collaboration, information sharing, and transparency among partners to bring a coordinated and collaborative response to service delivery to seniors in Richmond.
- Service delivery is enhanced through standardized referral processes and defined parameters on service boundaries.

### **Direction #5: Targeted Training and Professional Development**

**Objective:** City staff, volunteers, and community partners are aware of the most current, evidence-based information related to seniors programs and services.

**Outcomes:**

- Roles and responsibilities, in the delivery of services, for community partners and staff are clear and defined.
- An informed, knowledgeable staff, volunteer, and community partner team to serve seniors.
- A seamless, consistent approach of service delivery at all civic facilities.
- Staff and community hold positive perceptions of seniors, reducing stereotypes and ageism.



## Vision and Guiding Principles

### The vision of the City of Richmond is:

*"For the City of Richmond to be the most appealing, livable, and well-managed community in Canada."*

In order to create an environment that encourages opportunities for Richmond's seniors population to live healthy and active lives, the following vision has been created to help direct this Service Plan:

*"Richmond is a nurturing, connected community that promotes healthy and active aging."*

Along with both vision statements, the following guiding principles will be embraced in the delivery of services and programs to seniors:

- Maintaining a focus of respect and inclusion that ensures accessibility, and promotes intercultural and intergenerational interaction.
- Coordinating services that collaborate with partners, volunteers and seniors.
- Creating comfortable environments that are welcoming, safe, responsive and empowering.



## Link to the Official Community Plan and the Social Development Strategy

Over the years, a number of founding strategies have shaped the work of the City and helped to align service and program areas under common objectives. The City of Richmond's Official Community Plan and City of Richmond Social Development Strategy are two founding documents that are critical to consider in developing the priorities, and actions of the 2015–2020 Seniors Service Plan.

### Official Community Plan 2012–2041

The City of Richmond's Official Community Plan 2012–2041 (OCP) provides a framework for long-term future community planning within a city. The OCP recognizes the unique needs of seniors through policies, many of which are relevant to this Service Plan update. This includes efforts to:

- Continue to target 'hard to reach' populations (e.g. new immigrants, socially isolated individuals), people with disabilities, seniors and youth (especially low-asset youth).
- Promote opportunities for active lifestyles for aging populations and programs that allow seniors to 'age in place'.
- Respect and capitalize on the knowledge, skills and abilities of Richmond's seniors by providing them with opportunities to continue to make meaningful contributions to the community through volunteer activities and advice.
- Adopt "seniors planning for seniors" approach to the planning and delivery of seniors programs and services.

### City of Richmond Social Development Strategy (2013–2022)

The City of Richmond's Social Development Strategy (2013–2022) includes a direction that the 2008–2012 Older Adults Service Plan be updated, placing priority attention on:

- Pursuing approaches that involve planning with, not for, the seniors population.
- Expanding the volunteer base to serve the seniors population, as well as providing meaningful volunteer opportunities for seniors.
- Ensuring seniors and their families and caregivers are aware of available recreation, leisure, wellness and health promotion opportunities in the community.
- Expanding recreation, leisure and wellness services and programs to frail and isolated seniors allowing them to remain in their own homes for as long as possible.





- Reviewing the pricing structure for City programs for seniors to ensure it remains equitable and sustainable, while also being affordable for those with limited incomes.
- Exploring partnerships with service providers, strata councils and housing providers to bring wellness outreach programs into buildings with a high concentration of seniors.
- Connecting non-English speaking seniors with appropriate recreation and wellness services and programs (e.g. through the use of multilingual volunteers, translation services and partnerships with community groups).
- Developing a communication strategy to increase the awareness of the young-old (55–65 years) regarding health, wellness, the aging process, legislation, programs and benefits available to seniors.

Other City of Richmond Strategies and Plans that relate to the 2015–2020 Seniors Service Plan are the:

- Parks and Open Space Strategy, 2012–2022
- Richmond Arts Strategy, 2012–2017
- Parks, Recreation and Cultural Services Volunteer Management Strategy, 2007–2012
- Richmond Affordable Housing Strategy, 2007
- Age Friendly Community Plan
- Richmond Intercultural Strategic Plan and Work Program, 2012–2015
- Richmond Community Wellness Strategy, 2010–2015
- Richmond Sport for Life Strategy, 2010–2015
- Museum and Heritage Strategy, 2007



## 2.0 CREATING THE 2015–2020 SENIORS SERVICE PLAN

Implementation of the Seniors Service Plan falls within the mandate of the Community Social Development Department of the Community Services Division—a multi-disciplinary division, established in 2009 to address social, recreation, arts, heritage and parks opportunities and challenges facing Richmond in forthcoming years.

The Community Social Development Department focuses on working cooperatively with other agencies in the development of networks, programs and processes to promote social interaction and cultural enrichment. It focuses on responding to the needs of vulnerable populations, respecting social diversity, and ensuring the City puts priority on nurturing and enhancing the community's social capital.

The Division structure better enables the City to address the opportunities and challenges facing Richmond in forthcoming years. Within this structure, the scope of seniors programs, services and initiatives implemented through the 2015–2020 Seniors Service Plan spans beyond a parks, recreation and culture focus to encompass a more cohesive and holistic response to the wellbeing of seniors; thus creating an environment that encourages opportunities for Richmond's seniors to live connected, healthy and active lives.



The update process began with a review of the related literature. This was completed in order to provide an overview of current research and best practices as they relate to selected topics in City services and programs for seniors. A jurisdictional review was then conducted to provide a snapshot of planning and delivery of services in similar jurisdictions, both locally and nationally. From the information compiled in both reviews, a foundation-setting strategy and community engagement strategy was developed.

During the course of developing the 2015–2020 Seniors Service Plan, the City of Richmond was concurrently developing the Age-Friendly Assessment and Action Plan. The community consultation process for the 2015–2020 Seniors Service Plan was completed in collaboration with the Age Friendly Assessment and Action Plan, as many of the same stakeholders, members of the seniors' population and City staff were consulted for both projects. In addition, a joint Older Adult Service Plan Update/Age Friendly Assessment and Action Plan Steering Committee was formed. The Committee represented a spectrum of stakeholders including seniors, Community Associations, non-profit agencies and City staff, who worked to provide input into the development of both documents. Although both plans were developed in a collaborative process, each has a distinct focus and purpose in serving Richmond's seniors population.

The purpose of the Age-Friendly Assessment and Action Plan is to provide an assessment of current Age-Friendly features in the City and to outline a framework that addresses priority areas moving forward. While Richmond has many age-friendly attributes, the City is seeking to increase the number and scope of these features, as well as to further develop age-friendly policies and programs.

The 2015–2020 Seniors Service Plan represents a comprehensive, evidence based update of the 2008–2012 Older Adults Service Plan and sets the goals and actions for planning and development of services and programs for seniors in Richmond for the next six years. The Service Plan is consistent with the City of Richmond's strategic priorities and builds on the innovative approaches and best practice delivery of the 2008–2012 Older Adults Service Plan.



## 3.0 KEY OPPORTUNITIES

The 2015–2020 Seniors Service Plan communicates a continued commitment to Richmond’s seniors population. Over the next six years, emerging opportunities and challenges will require the City and its partners to work in new and creative ways. While input was received from Richmond’s seniors, key stakeholder groups, and City staff, the data collection process confirmed that many of the existing directions of the 2008–2012 Older Adults Service Plan are still valid. It also flagged the need for a renewal of these directions to keep focused on the key priorities that matter most for addressing the needs of the seniors population. Key opportunities as determined in the data collection process:

- Targeted efforts around both services and programs and promotion and communication for particular groups.
- The City is perceived as having a key role in awareness-raising and disseminating information about community supports and health services for seniors.
- There is a need to increase dedicated resources for responding to the needs of seniors.
- A number of the Service Plan goals will need to be implemented in partnership with Community Associations and other partners (e.g. Vancouver Coastal Health, non-profit agencies).
- There is a high demand for intergenerational programming.
- There is a need for more targeted social opportunities for seniors, including intercultural events where seniors from diverse backgrounds can meet and mix.
- Seniors aged 65–74 need some extra support around physical wellness as their rating of their physical health as “excellent” or “good” was quite low.
- Civic engagement of seniors emerged as a need across more than one strategic direction.
- The sense of belonging that older residents feel to the community of Richmond can be harnessed and promoted by the City. There is a need to provide more recognition of seniors and foster ongoing volunteer opportunities. Doing so could address seniors need for more civic engagement.
- A prevalence of demand for services and programs targeted at the younger seniors (for those who are retired or semi-retired) emerged as a need.



## 4.0 SERVICE PLAN DIRECTION

The following tables summarize and outline five primary directions, which have been refined and updated to reflect achievements to-date and the changing needs of Richmond seniors.

Each direction includes items for action and associated timelines for completion, which are characterized as short-term (0–2 years), medium-term (3–4 years), long-term (5+ years), and those which are ongoing. Responsibilities for implementation are outlined according to City role and key partners.

The actions identified in this document have been framed at a broad level. A robust and comprehensive implementation plan, with detailed and specific actions will be developed as part of the next phase of the planning process.





## Direction #1: Communication and Awareness

### Objective:

Communication with seniors is timely, effective and appropriately delivered and received.

### Outcomes:

- Increased awareness and knowledge among seniors and their families (e.g. under informed seniors, caregivers, diverse populations, frail, isolated, etc.) of programs and services available.
- Promotional materials for family focussed events encourage participation of seniors.
- Improved knowledge of health and wellness benefits.

| Actions  | Responsibilities  | Timeline    |
|--|---|-------------|
| 1.1) Develop and implement a promotion and communication plan          | <p><b>City Role:</b><br/>Engage and empower community</p> <p><b>Proposed Partners:</b><br/>Organizations serving diverse populations</p>  | Short-term  |
| 1.2) Translate appropriate City materials                              | <p><b>City Role:</b><br/>Collaborate and establish partnerships</p> <p><b>Proposed Partners:</b><br/>Ethnocultural community partners</p> | Short-term  |
| 1.3) Develop and implement a <i>benefits-based engagement campaign</i> | <p><b>City Role:</b><br/>Engage and empower community</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>                     | Medium-term |





## Direction #2: Responsive and Relevant Services

*According to the 2011 Statistics Canada census, those 55-64 years old are the largest cohort of seniors in Richmond and account for more than half of the older population.*

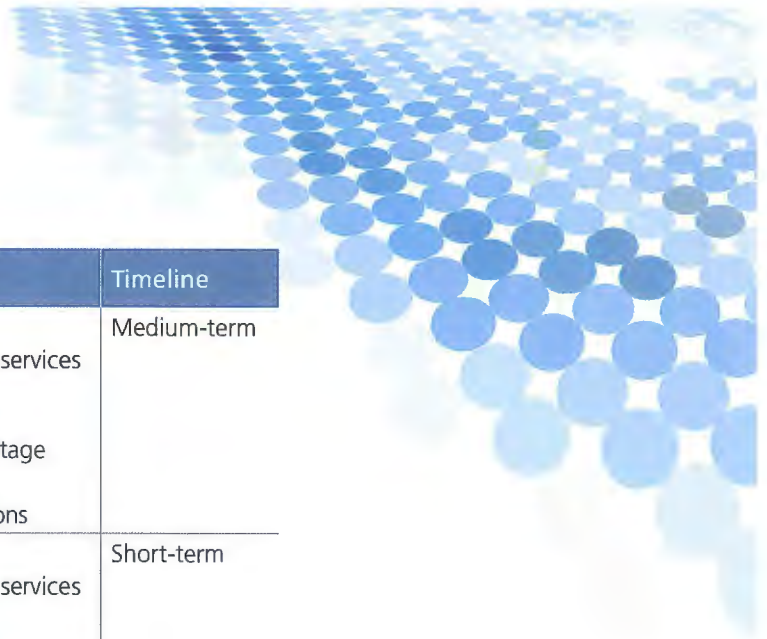
### Objective:

Programs and services are developed based on best practices, direct consultation, and program evaluation to reflect changing needs and priorities.

### Outcomes:

- The needs of underserved segments of the seniors population (e.g. men, hard-to-reach) are met through the offering of a wide range of program and service opportunities.
- Intergenerational understanding among program participants and the community is enhanced.
- Programs and services reflect the diversity of the seniors demographic group (e.g. function, age, ethnicity, etc.).
- A wide range of volunteer opportunities are provided to support seniors to be active, productive members of the community.





| Action  | Responsibilities  | Timeline    |
|---|---|-------------|
| 2.1) Increase the proportion of arts, culture and heritage programs                                     | <p><b>City Role:</b><br/>Deliver programs and services</p> <p><b>Proposed Partners:</b><br/>Arts, Culture and Heritage community partners, Community Associations</p> | Medium-term |
| 2.2) Review and assess the proportion of outreach programming for seniors                               | <p><b>City Role:</b><br/>Deliver programs and services</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>  | Short-term  |
| 2.3) Develop and implement a tailored consultation approach to gather feedback from underserved seniors | <p><b>City Role:</b><br/>Engage and empower community</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>   | Short-term  |
| 2.4) Expand intergenerational programming   | <p><b>City Role:</b><br/>Deliver programs and services</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>  | Short-term  |
| 2.5) Form a committee to establish a <i>functional segmentation</i> approach in service delivery        | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>                       | Medium-term |
| 2.6) Create a welcoming environment for seniors at family and community events                          | <p><b>City Role:</b><br/>Engage and empower community</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>   | Medium-term |



| Action  | Responsibilities  | Timeline    |
|---|---|-------------|
| 2.7) Continue to implement and expand civic engagement opportunities to orient seniors to City operations | <p><b>City Role:</b><br/>Engage and empower community</p>   | Long-term   |
| 2.8) Expand the scope and range of volunteer opportunities creating more long-term volunteer options      | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p> <p><b>Proposed Partners:</b><br/>Community Associations</p> | Medium-term |



## Direction #3: Respect, Inclusion and Sense of Belonging

### Objective:

There is a citywide focus and understanding of seniors' needs and wants. Seniors are celebrated and recognized as valued community members.

### Outcomes:

- Seniors' needs are met by a range of culturally appropriate and relevant programming.
- Diverse seniors have a conduit to share their knowledge and skills within the community.
- City buildings have welcoming spaces to support unstructured gatherings.
- Improved access and reduction of barriers for frail and isolated seniors (e.g. transportation to community programs, Fee Subsidy program etc.).
- Consistent terminology, that is reflective of this segment of the population, is established.
- Seniors are positively portrayed in all City promotional material and communications
- An informed community that respects the contributions and needs of seniors.

*According to the 2011 National Household Survey (NHS) almost 60% of Richmond residents were immigrants compared to 28% in BC.*

| Action  | Responsibilities   | Timeline           |
|---|--|--------------------|
| <p><b>3.1)</b> Maintain and improve a program planning and service delivery process with a lens on diversity</p>  | <p><b>City Role:</b><br/>Deliver programs and services</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>   | <p>Medium-term</p> |
| <p><b>3.2)</b> Continue to partner with programs (e.g. <b>Community Actions Ambassadors</b>) to serve as a bridge between seniors and information, resources, services and programs</p> | <p><b>City Role:</b><br/>Engage and empower community;<br/>Deliver programs and services</p> <p><b>Proposed Partners</b><br/>Ethno-cultural Community Partners</p> | <p>Ongoing</p>     |

| Action   | Responsibilities   | Timeline    |
|--|--|-------------|
| 3.3) Explore and respond to opportunities to increase dedicated space available for seniors to socialize and gather in City buildings                            | <p><b>City Role:</b><br/>Provide land, space, or funding</p> <p><b>Proposed Partners:</b><br/>Ethno-cultural Community Partners and Community Associations</p> | Ongoing     |
| 3.4) Work with Community Associations to expand outreach to vulnerable populations   | <p><b>City Role:</b><br/>Engage and empower community;<br/>Deliver programs and services</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>       | Long-term   |
| 3.5) Incorporate the needs of low-income seniors in subsidy and pricing to enhance access to programs  | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>                | Short-term  |
| 3.6) Create consistency in terminology to address seniors across the City  | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p>  | Short-term  |
| 3.7) Incorporate images that are representative of the diversity of seniors and portray a positive image of aging in all promotional and communication materials | <p><b>City Role:</b><br/>Engage and empower community</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>  | Medium-term |
| 3.8) Launch an educational campaign to combat stereotypes and ageist attitudes   | <p><b>City Role:</b><br/>Engage and empower community</p>  | Medium-term |



## Direction #4: Coordinated Service Delivery

### Objective:

The City works with partners including Community Associations and community organizations to ensure services to seniors are coordinated citywide.

### Outcomes:

- Improved collaboration, information sharing, and transparency among partners to bring a coordinated and collaborative response to service delivery.
- Service delivery is enhanced through standardized referral processes and defined parameters on service boundaries.

*Seniors in Richmond had one of the highest rates of self-reported good functional health (73%) in the Lower Mainland.*

2011 United Way Seniors Vulnerability Report: Community Profiles

| Action   | Responsibilities  | Timeline   |
|--|---|------------|
| <p><b>4.1)</b> Develop a Communication Plan for the dissemination and adoption of the Seniors Service Plan Citywide</p>                                | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p> <p><b>Proposed Partners:</b><br/>Community partners</p>   | Short-term |
| <p><b>4.2)</b> Work with health care Community Partners on the development of a <i>scope of practice</i> for seniors service providers in the City</p> | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development; Collaborate and establish partnerships</p> <p><b>Proposed Partners:</b><br/>Community partners</p> | Long-term  |

*A vibrant seniors community contributes to the economy, supports extended families, and makes Richmond a nurturing, connected community that promotes healthy and active aging.*

| Action   | Responsibilities   | Timeline    |
|--|--|-------------|
| <p><b>4.3) Develop a network among key stakeholders, community partners, and the City that focuses and advances a systems view of service delivery</b></p> | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development;<br/>Engage and empower community;<br/>Collaborate and establish partnerships</p> <p><b>Proposed Partners:</b><br/>Health Care and other relevant community partners</p> | Medium-term |
| <p><b>4.4) Make pertinent research data and information available to Community partners upon request</b></p>   | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development;<br/>Collaborate and establish partnerships</p>  | Short-term  |





## Direction #5: Targeted Training and Professional Development

### Objective:

City staff, volunteers, and community partners are aware of the most current, evidence-based information related to seniors programs and services.

### Outcomes:

- Roles and responsibilities in the delivery of services for staff, community partners are clear and defined.
- An informed, knowledgeable staff, volunteer, and community partner team to serve seniors.
- A coordinated seamless, consistent approach of service delivery at all civic facilities.
- Staff and community hold positive perceptions of seniors, reducing stereotypes and ageism.

*According to the 2011 Statistics Canada census, 53,650 residents of Richmond were 55 years or older.*

| Action  | Responsibilities  | Timeline    |
|---|---|-------------|
| 5.1) Develop a scope of practice for the Senior Services Team staff                   | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p> <p><b>Proposed Partners:</b><br/>Community Associations</p> | Medium-term |
| 5.2) Offer information sessions to community partners on the service needs of seniors | <p><b>City Role:</b><br/>Collaborate and establish partnerships</p> <p><b>Proposed Partners:</b><br/>Community Associations</p>                 | Medium-term |



| Action   | Responsibilities  | Timeline               |
|--|---|------------------------|
| 5.3) Implement professional development training to staff, volunteers, and partners on the needs of seniors                    | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p> <p><b>Proposed Partners:</b><br/>Community Associations</p> | Ongoing                |
| 5.4) Provide educational opportunities to staff, volunteers, and partners to dispel myths and stereotypes of seniors and aging | <p><b>City Role:</b><br/>Undertake planning, research and/or policy development</p> <p><b>Proposed Partners:</b><br/>Community Associations</p> | Short-term and ongoing |

## 5.0 IMPLEMENTATION AND MONITORING

Implementation of this 6-year Seniors Service Plan will be guided by a phased availability of financial and staffing resources. Timelines provided recognize that it is not realistic to implement all actions at once, but to stage their implementation as resources allow. Implementation of this Service Plan will be the responsibility of the City in partnership with Richmond's Community Associations as well as a range of other community organizations and partners. It is only through engaging with and maximizing the expertise and leadership of all partners to better serve seniors needs that this Service Plan's vision will be realized. Key staff and other respective roles in addressing the Service Plan are as follows:

- The Coordinator, Seniors Services position, located within the Community Social Development Department is a Citywide position which provides expert advice, strategic direction, information and support related to aging and seniors issues to Community Associations, agencies and staff.
- The Seniors Wellness Coordinator located within the Community Social





Development Department provides wellness related initiatives for seniors, supports monthly Wellness clinics across Richmond and acts as a resource to individuals, groups and caregivers.

- Seniors Coordinators located throughout the city at community centres, and employed by Community Associations and are ultimately accountable to those organizations, are responsible for the development and implementation of comprehensive programs for seniors 55+, for a designated geographic area, in a recreational setting.

Annually, the City will develop and update an implementation plan highlighting priorities for work to be done over the year that relate to each Service Plan direction. The implementation plan will primarily serve as an internal resource, however the Seniors Services Team, comprised of City and Community Association dedicated staff for seniors services and programming, will provide advice and guidance to community groups on initiatives to implement the Service Plan. As well, given the natural connection between the 2015–2020 Seniors Service Plan and the Age-Friendly Action Plan, a strong and permanent linkage of these two documents will be established.

Opportunities to seek alternative sources of funds will also be investigated. With the increase in seniors in the overall population, there are many resources being allocated for seniors initiatives at both the Provincial and Federal government levels.

## Evaluation and Monitoring

To measure outcomes and monitor work progress an evaluation plan will be developed. The Senior Services Team will meet on an ongoing basis to review and realign actions and will produce annual reports highlighting progress made towards the Service Plan directions and achievements realized.

Every two years an information communique summarizing the progress and achievements realized will be produced and disseminated to the public and community organizations serving seniors.

## CONCLUDING COMMENTS

The 2015–2020 Seniors Service Plan builds on and advances the momentum achieved through the 2008–2012 Older Adults Service Plan. The Service Plan articulates a framework that provides opportunities to foster positive outcomes in the community and support Richmond’s vision “to be the most appealing, livable and well-managed community in Canada.”

The challenge and opportunity for the next six years and beyond is how to meet the needs of the significant and growing diversity of the seniors population in Richmond. Supporting active aging is a key factor in assisting seniors to live longer and to age with a better quality of life. Through involvement in programs and services, seniors will continue to feel that they are an important part of community life. The Service Plan identifies beneficial and meaningful opportunities to enhance seniors quality of life and promotes the possibilities, promise and value of aging in the community. The Service Plan will continue to move Richmond towards becoming a nurturing, connected community that promotes healthy and active aging. By collaborating and working together we can make a difference in the lives of seniors.



## APPENDIX A: GLOSSARY

**Acculturation:** Acculturation is a process in which members of one cultural group adopt the beliefs and behaviors of another group.

**Assistive technology:** is defined as “Any equipment or system that helps people who have difficulties, due to age or disability, in carrying out everyday activities. Assistive technology aims to provide its users with the ability to control their environment more effectively partly by physical manipulation.”<sup>1</sup>

**Benefits-based engagement campaign:** A promotional campaign designed to highlight the positive outcomes and benefits which can be realized through participating in services and programs.

**Community Action Ambassadors:** trained senior volunteers who offer peer-to-peer support to isolated seniors from all cultures, connecting them to community services and educating them about healthy aging, including mental health issues and the use of alcohol and drugs.

**Community Association:** Non-profit community organizations with which the City operates community facilities. The City provides the facilities and core staffing, while the partners plan and fund programs and services. The Association’s mandate is to reflect the needs of the residents of the neighbourhood area and provide recreational opportunities to meet those needs.

**Community organization:** Non-profit agency providing programs and services for seniors in Richmond.

**Community partners:** The City and their community partners (i.e. community associations, Minoru Seniors Society, Vancouver Coastal Health, etc.) together offer a variety of recreational, cultural, educational, and social opportunities for those over the age of 55 to be involved in the community and stay active.

**Diversity:** The unique characteristics that people possess that distinguish them as individuals and that identify them as belonging to a group or groups. Notions of diversity include age, culture, ethnicity, class, gender, religion, sexual orientation or disability and other.

**Functional segmentation:** Functional segmentation is a way to differentiate seniors with different, needs, abilities, and experiences that moves away from chronological segmentation.

Chronological segmentation classifies seniors based on how many years that they have been alive rather than how they are aging. One of the ways to create a more representative way to segment groups of seniors is to use the measure of functional age. Functional aging is used to make a distinction of how people are able to function regardless of chronological age. One’s functional age is dependent on one’s socio-economic location, life story, and perceptions and representations of one’s own abilities.

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<sup>1</sup> Barlow, J., & Venables, T. (2004). Will technological innovation create the true lifetime home?. *Housing Studies*, 19(5), 795-810. doi:10.1080/0267303042000249215.

**Geolocation technology:** Geolocation technology such as ASKIT or MAPPED can empower users by providing a higher degree of independence and ultimately improved quality of life. This technology can also increase mobility, social connectedness, and help users navigate transportation systems in the most efficient and cost effective way possible. Cities can benefit from encouraging users to interact with their communities in a more accessible way while improving the use of public transit.<sup>2</sup>

**Grey resources:** Those resources that fall outside the scope of academic scientific literature (e.g. professional bodies or organizations, websites, news feeds etc.).

**LGBTQ:** Lesbian, Gay, Bisexual, Transgender, Two-spirit, Queer and Questioning.

**Scope of practice:** describes the procedures, actions, and processes that an individual is permitted to undertake in keeping with the terms of their professional role.

**Structural lag:** Refers to the time delay between the changes in the needs of a specific population and the associated political and societal change needed to address these changes. This lag has meant that seniors have less opportunities for meaningful social roles than their younger counterparts. Urban settings are thought to be best positioned to provide effective symbiotic programs that use the skills and expertise of seniors while simultaneously increasing their activity levels, social connectedness, and need for meaningful engagement.<sup>3</sup>

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- 2 Boulos, M., Anastasiou, A., Bekiaris, E., & Panou, M. (2011). Geo-enabled technologies for independent living: Examples from four European projects. *Technology & Disability*, 23(1), 7-17. doi:10.3233/TAD-2011-0300.
  - 3 Fried, L.P., Carlson, M.C., Frick, K.D., Glass, T.A., McGill, S., Rebok, G.W., Seeman, T., Tielsch, J., Wasik, B., & Zeger, S. (2004). A social model for health promotion for an aging population: Initial evidence on the Experience Corps Model. *Journal of Urban Health*, 81(1), 64-78.

# APPENDIX B: 55+/SENIORS— CITYWIDE SERVICES

## Citywide Health/Wellness Programs— Wellness Clinics & Holistic Health Services

Health monitoring, holistic health options and information/education sessions are offered at the following locations:

|  |              |
|--|--------------|
| Steveston Community Centre.....                | 604-238-8098 |
| South Arm Community Centre .....               | 604-238-8070 |
| East Richmond Community Hall .....             | 604-233-8399 |
| Minoru Place Activity Centre.....              | 604-238-8450 |
| Beth Tikvah – Kehila Society of Richmond ..... | 604-271-1973 |
| Thompson Community Centre .....                | 604-238-8429 |
| Hamilton Community Centre .....                | 604-718-8055 |
| West Richmond Community Centre .....           | 604-238-8405 |
| City Centre Community Centre .....             | 604-204-8588 |

## Information and Referral Services

Richmond Cares, Richmond Gives provides this free service to assist seniors to find the resources and information they need, either by phone or in person (by appointment). This program is offered in collaboration with Vancouver Coastal Health/Richmond Health Services and in partnership with the City of Richmond, Seniors Services.

Volunteers offer a wide variety of information on topics of concern to seniors including: such as housing, government pensions, BC Medical Plan, Fair PharmaCare, Shelter Aid for Elderly Renters.

For more information, call 604-279-7020 or email at [info@volunteerrichmond.ca](mailto:info@volunteerrichmond.ca).

## Seniors Peer Counselling

Senior Peer Counselling (SPC) is a province-wide program developed based on the belief that when seniors are experiencing worry, frustration and loss they prefer to talk to other seniors who may have similar life experiences.

This one-on-one service is offered at no charge to Richmond seniors. A referral is not required for this service. Please call or leave a message at 604-279-7034 or visit [www.volunteerrichmond.ca](http://www.volunteerrichmond.ca).



## Richmond Seniors Directory

Richmond has a wide range of services and programs to help seniors lead healthy and independent lives. The Richmond Seniors Directory has information about health services and other programs and services available to seniors living in Richmond.

Previously the directory was produced through a partnership between Richmond Cares, Richmond Gives and The Richmond Review. Moving forward the directory will be produced in partnership between Richmond Cares, Richmond Gives and the Richmond News.

## Community Leisure Transportation

Supported by the Minoru Seniors Society and City of Richmond, the Community Leisure Transportation program reduces transportation barriers to allow Richmond residents opportunities to participate in the programs and services offered by the Community Services Division and other partners. For more information call 604-238-8456.



## APPENDIX C: CREATING THE 2015–2020 SENIORS SERVICE PLAN THE PROCESS

In order to embark on an update of the 2008–2012 Older Adults Service Plan, a Steering Committee was formed. The Committee represented a spectrum of stakeholders including seniors, Community Associations, non-profit agencies and City staff, who worked to provide input into updating this plan.

The update process began with a review of related grey and academic literature. This was completed in order to provide an overview of current research and best practices as they relate to selected topics in city services and programs for seniors. A jurisdictional review was then conducted to provide a snapshot of planning and delivery of services in similar jurisdictions both locally and nationally. From the information compiled in both reviews a foundation-setting strategy and qualitative and quantitative data collection strategy was developed. The work of these strategies included:

- **Conducting a representative survey** of 378 subjects aged 55+ from Richmond. A convenience sample was developed through community centres, local service providers and the “Let’s Talk Richmond” website.
- **Facilitating fourteen focus groups** which engaged 161 individuals from a range of stakeholder groups, (including seniors and service providers).
- **Carrying out in-depth interviews** with 23 key informants, including four seniors (who represented vulnerable target groups), seniors service providers in the city, and key City personnel.
- **Reviewing City strategic policies and documents.**
- **Reviewing characteristics, demographic profiles, social and emerging trends** of Richmond’s local population.
- **Assessing achievements realized in the past five years** from the implementation of the current Service Plan, which included evaluative data compiled by the City.
- **Reviewing secondary data** including administrative level program and service data including current program and service inventories.



## A.1.1 Analysis

During the qualitative analysis, data was thematically coded both according to which strategic direction it belonged. As is common with qualitative analysis, frequencies are not given but comment was provided on the emphasis on the themes in the data. Quantitative data was then analyzed to generate descriptive statistics from the sample, including frequencies for each item in the survey and cross-tabulations with the main demographic variables tracked through the survey. This included age, gender, ethnicity and City of Richmond Planning Area.

All of the information was collated, analyzed and reported in three comprehensive background documents (available upon request). The following information summarizes the key trends which were identified in each stage of the Service Plan update process.

## A.1.2 Key trends found in the review of the related literature

A review of related academic literature was completed to provide an overview of the current research and best practices as they relate to selected topics in City services and programs for seniors. General Internet searches were performed to identify additional or **grey resources**. Website reviews were also used in order to access additional resources and references not easily available from traditional database searches. Of particular interest were municipal bodies, organizations, universities and research groups engaged in emergent or ongoing research or practice related to City services and programs for seniors.

Some of the most significant trends and gaps noted in the review included:

- A movement away from chronological segmentation and towards functional segmentation as a way to differentiate seniors who have different, needs, abilities and experiences.
- A recognition of how socioeconomic status can impact functional mobility and disability rates among seniors.
- A concerning note that homelessness in the seniors population is on the rise.
- A notable gap in service and in a significant volume of literature that exists for the older Lesbian, Gay, Bisexual, Transgender, Two-spirit, Queer and Questioning (**LGBTQ**) community and urban-dwelling Aboriginal/ First Nations seniors.
- A recommendation to use the International Classification of Functioning Disability and Health model<sup>4</sup> as a basis for programming and service delivery for those seniors with functional impairments and disability.
- A recognition of how physical, intellectual, and social wellness in seniors is impacted by **structural lag**.

4 Rejeski, W., Ip, E., Marsh, A., Miller, M., & Farmer, D. (2008). Measuring disability in Seniors: The International Classification System of Functioning, Disability and Health (ICF) framework. *Geriatrics & Gerontology International*, 8(1), 48-54. doi:10.1111/j.1447-0594.2008.00446.x.

- A prevalence of demand for education on a variety of topics for those who are retired or semi-retired. Many cities have already started to shift programming and funding to meet this demand.
- A notable shift in **assistive technology; geolocation technology** was found to be one of the most rapidly growing assistive technology fields currently in use with seniors.

### A.1.3 Key trends reported by interviewees during data collection

Key informant interviewees were asked to summarize the important trends regarding seniors in Richmond. The main overarching trends that interviewees identified were:

- The recognition that seniors (55+) are a rapidly growing demographic group in Richmond, and that this group can be further sub-divided into a range of different cohorts, either by age, functionality or specific target group (e.g. those with mental illness or living in poverty). The challenge is how to respond to the differing needs of each of these cohorts, including the best strategy for the City to take in segmenting seniors customers.
- Many service providers noted the increasingly complex needs of the frail and vulnerable clients. They reported that because clients are living longer, their needs increase making them more vulnerable to mental and physical health difficulties. This situation makes service delivery more complex and makes drawing service boundaries a challenge. Helping those with complex needs to access City programs and services requires outreach and perhaps individualized support.
- The difficulty assisting seniors to access and negotiate services that they require within the context of increasingly complex needs and already overburdened services (e.g. respite and day care services, mental health services, etc.).
- The challenge of supporting the integration of newcomer and visible minority seniors through service provision so that they do not become isolated due to obstacles such as language barriers and, in some cases, lack of family or social support.

## A.1.4 The Local Demographic Profile

**Table 1.4 City of Richmond Age Cohorts**

| Age            | Population    | Male          | Female        |
|----------------|---------------|---------------|---------------|
| 55 to 64 years | 27,625        | 13,235        | 14,390        |
| 65 to 74 years | 14,210        | 6,735         | 7,475         |
| 75 to 84 years | 8,635         | 3,940         | 4,695         |
| 85 years plus  | 3,180         | 1,125         | 2,055         |
| <b>Total</b>   | <b>53,650</b> | <b>25,035</b> | <b>28,615</b> |

According to the 2011 Statistics Canada census, 53,650 residents of Richmond were 55 years or older. This represents 28% of the total population. Women make up a larger portion of the seniors population overall (53%). Those 55 to 64 years old are the largest cohort of seniors in Richmond and account for more than half of the older population (Table 1.4).

Overall life expectancy in Richmond is the highest in Canada at 84.9 years.<sup>5</sup> Projection reports estimate that there will be a 195% increase in seniors living in Richmond by 2036 with a 127% projected increase in residents 80 years and older.<sup>6</sup> However, seniors in Richmond are not a homogenous group. The following sections provide information regarding the different geographical distribution by age cohorts, numbers of those living alone, and other social and emerging trends facing older residents in Richmond.

## A.1.5 Demographics notes in area plans

The seniors population in Richmond reside in all parts of the city. When examined by City planning areas,<sup>7</sup> the largest concentration of older residents (almost a quarter of the older population) live in the City Centre. Steveston, Broadmoor, and Blundell make up a further 39% of older residents with the remaining 37% disbursed throughout the rest of the city. The areas with the lowest numbers of seniors are Gilmore (n=190 or less than 1%), Sea Island (n=165 or less than 1%), and Fraserlands (n=60 or less than 1%).

5 Statistics Canada, 2011 Census of Population, Age(1310 and Sex (3) for the Publication of Canada, Topic Based Tabulations, Statistics Canada Catalogue Number 98-311-XCB2011018. Retrieved from: <http://www12.statcan.gc.ca/census-recensement/2011/dp-pd/tbt-tt/Index-eng.cfm>.

6 Population Projections (2013). BC Stats. Province of British Columbia. Retrieved from <http://www.bcstats.gov.bc.ca/StatisticsBySubject/Demography/PopulationProjections.aspx>.

7 Statistics Canada, 2011 Census.

## A.1.6 Cultural Diversity

The population of seniors in Richmond is a culturally diverse, growing group. According to the 2011 National Household Survey (NHS) almost 60% of Richmond residents were immigrants (those born outside of Canada). This compares to approximately 28% in the overall British Columbia population. China and Hong Kong were the most common countries of birth for Richmond's immigrant residents. Overall, visible minorities make up approximately 70% of the population in Richmond with the largest groups identifying as Chinese or South Asian.<sup>8</sup>

There were 1390 senior immigrants who settled in Richmond between 2000–2010 (13% of Metro Vancouver numbers and 11% of BC respectively).<sup>9</sup> For new immigrants, the *acculturation* process is a multidimensional one that includes physical, psychological, financial, spiritual, social, and family adjustments. This process can be very stressful for immigrant elders because they typically have fewer resources (e.g. income and education) to assist them in adapting to their new life situation.<sup>10</sup>

Many seniors immigrants in Richmond also face significant language barriers. Within Metro Vancouver municipalities, Richmond has the highest proportion of seniors who could not speak English (24.4%). Those who speak English as a second language most frequently reported their mother tongue to be Mandarin, Chinese, and Cantonese.<sup>11</sup>

8 Statistics Canada. Ottawa: Statistics Canada. National Household Survey. 2012. Available from: <http://www.statcan.gc.ca/survey-enquete/household-menages/5178-eng.htm>.

9 Social Planning and Research Council of British Columbia and the United Way of the Lower Mainland (2013). Seniors in the Lower Mainland: A Snapshot of Facts and Trends.

10 Mui, A. C., & Kang, S. (2006). Acculturation Stress and Depression among Asian Immigrant Elders. *Social Work*, 51(3), 243-255.

11 Social Planning and Research Council of British Columbia and the United Way of the Lower Mainland (2013). Seniors in the Lower Mainland: A Snapshot of Facts and Trends.



## A.1.7 Socioeconomics and Housing

Socioeconomic status is typically defined by income, education and occupation.<sup>12</sup> Low socioeconomic status among Richmond seniors is a growing problem. The United Way reported that in 2006 19% of males and 24% of females 65+ living in Richmond were considered to be of low income status. A quarter of all seniors in Richmond live below the poverty line and 8.5% of Richmond seniors (the largest percentage in Metro-Vancouver) receive the maximum Government Income Supplement.

Housing types for those 55+ also vary. The most common kind of housing for seniors in Richmond is single detached houses without a secondary suite (45%), followed by low rise apartments. Although many seniors in Richmond may own their homes, there is still a significant proportion who rent. Rent in Richmond has increased by 5% since 2006 making non-market a necessity for many seniors. Richmond also has the fourth highest number of seniors non-market housing units in the Lower Mainland (1,036).<sup>13</sup>

There are 18.7% of seniors residents living alone citywide in Richmond. This number is much lower than other census tracts in the Lower Mainland, where in many instances 40% or more of seniors live alone. Of significant note is that the number of seniors living alone decreased between 2000 and 2010 (in 2000 21% lived alone).

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12 Grundy, E., & Holt, G. (2001). The socioeconomic status of Seniors: How should we measure it in studies of health inequalities? *Journal of Epidemiology and Community Health*, 55(12), 895-904.

13 Social Planning and Research Council of British Columbia and the United Way of the Lower Mainland (2013). *Seniors in the Lower Mainland: A Snapshot of Facts and Trends*.

## A.1.8 Other important trends in Richmond's demographic information

Some other important consideration about seniors in Richmond are:

- Seniors in Richmond have the highest life expectancy in Canada and are living an average of 84.9 years, almost four years longer than the national average of 81.
- In research conducted by the United Way, seniors in Richmond had the one of highest rates of self-reported good functional health (73%) in the Lower Mainland.<sup>14</sup>
- 50% of seniors 65+ in Richmond reported having activity limitations.
- In 2011, seniors in Richmond reported one of the lowest rates of a sense of community belonging in the Lower Mainland at 67.1%.<sup>15</sup>
- The number of seniors who have a regular medical doctor has been steadily declining since 2003.<sup>16</sup>
- There is a high number (41%) of seniors living with arthritis (a significant factor for chronic pain and reduced function) in Richmond when compared to the rest of the Lower Mainland.<sup>17</sup>

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14 2011 United Way Seniors Vulnerability Report: Community Profiles. United Way of the Lower Mainland.

15 Social Planning and Research Council of British Columbia and the United Way of the Lower Mainland (2013). *Seniors in the Lower Mainland: A Snapshot of Facts and Trends*.

16 2011 United Way Seniors Vulnerability Report: Community Profiles. United Way of the Lower Mainland.

17 2011 United Way Seniors Vulnerability Report: Community Profiles. United Way of the Lower Mainland.

# APPENDIX D: PROGRESS & ACHIEVEMENTS SUMMARY

## 2008–2012 Older Adults Service Plan

Working together with the Minoru Seniors Society, Community Associations and other Community Partners progress was made towards realizing the vision of the Older Adults Service Plan, 2008–2012:

*Richmond to be a community where seniors live healthy and active lives in a cooperative, welcoming and inclusive environment, which promotes engagement, encourages lifelong learning, and values the contribution of seniors.*

### Strategic Direction #1: Ensuring Seniors are Well Informed

- ✓ Special events and official recognition celebrating seniors:
  - United Nations International Day of Older Persons/National Seniors Day in October.
  - Annual Positive Aging Photo Campaign featuring Richmond residents 55+.
  - Seniors Week (first week of June) citywide programs and events.
  - Activate Wellness Fair.
- ✓ Developed marketing tools targeting older people:
  - Focus on Wellness Newsletter was created by Senior Services to increase awareness of the many diverse health and wellness opportunities for seniors city-wide.
  - City increased translated promotional documents targeting Chinese and Punjabi.
  - Restructured 55+ section of Parks, Recreation and Culture Guide to make navigating more user-friendly.
  - City of Richmond website alterations to based on feedback from seniors.
  - Richmond News promotional insert for Minoru Seniors Society programs/services.
- ✓ Increased referrals and information dissemination related to programs and services for seniors between Community Associations and Vancouver Coastal Health.



## Strategic Direction #2: Providing Relevant and Appropriate Services

- ✓ Increased and purposeful Intergenerational programming with partner agencies (SD 38, City Centre Community Centre, Arts Centre, Minoru Seniors Society).
- ✓ Seniors Services, Minoru Seniors Society and Community Associations have increased adaptive exercise programming to serve seniors with physical limitations.
- ✓ The Wellness Connections Program, an outreach to frail and isolated seniors service, evolved from a Union of BC Municipalities (UBCM) funded pilot project. In partnership with Vancouver Coastal Health (VCH) Richmond Health, this service received a BC Recreation and Parks Association (BCRPA) program Excellence Award in 2009, and was featured in a national publication by the Active Living Coalition for Seniors.
- ✓ Seniors Services has recognized the varying needs of the young and active seniors, an emerging market niche. Specialized programs, events, and workshops are slowly replacing more traditional pursuits to meet the needs of Baby Boomers.
- ✓ Partnership with Simon Fraser University and Kiwanis Senior Citizens Housing Society to ensure adequate use of social amenity space in the City of Richmond Kiwanis Tower Development.

## Strategic Direction #3: Promoting Cultural Inclusion and Harmony

- ✓ An increase in participation from seniors of South Asian and Chinese descent in programs such as Chinese Senior Circle, Wellness Connections and through various volunteer opportunities.
- ✓ Community Action Ambassadors supporting seniors with language skills to reach out to others in their first language at Wellness Clinics, facility tours and specialized services.
- ✓ The Wellness Connections Program has been offered in Chinese as well as English.
- ✓ Seniors Services and Community Associations worked with internal and external partner specialists to assist and bridge cultural understanding.



## Strategic Direction #4: Building a Sense of Belonging

- ✓ Increased community gardening opportunities promoting self-reliance and enabling seniors to connect with youth and the community in East Richmond, City Centre and Terra Nova.
- ✓ Increased opportunities for peer to peer education, for example the Acting Out Troupe and Tech Lab at Minoru Place Activity Centre.
- ✓ West Richmond Outdoor Fitness and Wellness Circuit. The first seniors fitness circuit in Richmond designed for seniors to provide a free option to improve flexibility, balance, strength and endurance.
- ✓ Increased dedicated space and allocated resources for seniors at community centres.

## Strategic Direction #5: Providing Affordable Access to Programs

- ✓ Standardized pricing for programs and services at Community Centres based on industry standards developed by a Citywide Fees and Charges Committee.
- ✓ Wellness Clinics provide a combination of free and very low cost services.
- ✓ Access to low-cost/no-cost information and educational workshops.
- ✓ Fee subsidy established by Community Associations on demand.
- ✓ Tax Clinic for low-income offered citywide.

## Strategic Direction #6: Increasing Volunteerism

- ✓ A coordinated Citywide volunteer management system with an up-to-date database of opportunities and a method to track hours.
- ✓ Facilitated hundreds of City and community partners meaningful volunteer opportunities focusing attracting younger seniors and new immigrants to Richmond.
- ✓ Utilization of the Community Action Ambassadors program of Volunteer Richmond Information Services was very instrumental at targeting seniors to assist with implementation of programs and translation at events.
- ✓ Dedicated volunteer management staff at numerous community facilities.

## Strategic Direction #7: Coordinating Citywide Delivery of Services through Partnerships

- ✓ Seniors Services worked closely with community partners, Associations/ Societies, and agencies combining resources and expertise to provide programs and services.
- ✓ The City increased health promotion, inclusion, and diversity events/ programs with community partners.
- ✓ City of Richmond depiction in Age-friendly community videos produced by the Ministry of Health, Healthy Living Secretariat.
- ✓ Increased Community Associations partnerships in delivery of specialty programs for seniors with specific needs (e.g. Steadyfeet fitness program, Vancouver Coastal Health).
- ✓ Coordinated approach of education and information sessions delivered by community partners (e.g. Minds in Motion, Alzheimer's Society).

## Strategic Direction #8: Easy Physical Access and Providing Comfortable Places

- ✓ City of Richmond hazard reporting system has allowed seniors and the general public in Richmond to report unsafe areas to make sure the city is safe and accessible.
- ✓ Improved comfort, accessibility and aesthetics of seniors spaces at community centres.
- ✓ Enhanced Community Leisure Transportation program with additional accessible buses available to community organizations.
- ✓ Provision of education for transit riders including HandyDart and Translink.
- ✓ Community facilities were assessed by the Rick Hansen Foundation's Planat accessibility ranking process.

## Strategic Direction #9: Involving Seniors through Consultation

- ✓ City and Community Associations engaged seniors to contribute to policies, programs and services through Planning Committees including Boards.
- ✓ City conducted an Older Adult Needs Assessment as part of the overall Community Needs Assessment in 2009.

## Strategic Direction #10: Monitoring & Evaluating the Service Plan

- ✓ Utilized data collection for annual reporting of progress by the City and Community Associations.
- ✓ City and Community Associations annual staff work plans reflecting the priorities of the Plan implementation.



## City of Richmond

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DRAFT 2015-2020 SENIORS SERVICE PLAN  
 FEEDBACK FORM CIRCULATED TO SUPPORT COMMENTS TO DRAFT SERVICE PLAN

**Draft Seniors Service Plan 2015-2020: Active and Healthy Living**  
**FEEDBACK FORM**

|   |                          |                 |              |                       |
|---|--------------------------|-----------------|--------------|-----------------------|
| <b>Service Plan vision statement: Richmond to be a nurturing, connected community that promotes healthy and active aging</b>  |                          |                 |              |                       |
|   | <b>Strongly Disagree</b> | <b>Disagree</b> | <b>Agree</b> | <b>Strongly Agree</b> |
| <b>Q1.</b> I support the draft vision of the Seniors Service Plan for <i>Richmond to be a nurturing, connected community that promotes healthy and active aging</i> | <b>1</b>                 | <b>2</b>        | <b>3</b>     | <b>4</b>              |
| <b>Here are other comments and suggestions on the vision statement</b>  |                          |                 |              |                       |

|   |                          |                 |              |                       |
|---|--------------------------|-----------------|--------------|-----------------------|
| <b>Direction 1: Communication and Awareness - Communication with seniors is timely, effective and appropriately delivered and received.</b> |                          |                 |              |                       |
|   | <b>Strongly Disagree</b> | <b>Disagree</b> | <b>Agree</b> | <b>Strongly Agree</b> |
| <b>Q2a.</b> I agree <i>Communication and Awareness</i> is a priority Direction  | <b>1</b>                 | <b>2</b>        | <b>3</b>     | <b>4</b>              |
| <b>Q2b.</b> I support the Actions identified for the <i>Communication and Awareness</i> Direction   | <b>1</b>                 | <b>2</b>        | <b>3</b>     | <b>4</b>              |
| <b>I have the following comments to provide on this Direction and associated Actions.</b>   |                          |                 |              |                       |

**Direction 2: Responsive and Relevant Services - Programs and services are developed based on best practices, direct consultation, and program evaluation to reflect changing needs and priorities.**

|  | Strongly Disagree | Disagree | Agree | Strongly Agree |
|--|-------------------|----------|-------|----------------|
| <b>Q3a.</b> I agree <i>Responsive and Relevant Services</i> is a priority Direction                    | 1                 | 2        | 3     | 4              |
| <b>Q3b.</b> I support the Actions identified for the <i>Responsive and Relevant Services</i> Direction | 1                 | 2        | 3     | 4              |

I have the following comments to provide on this Direction and associated Actions.

**Direction 3: Respect, Inclusion and Sense of Belonging - There is a citywide focus and understanding of seniors needs and wants. Seniors are celebrated and recognized as valued community members.**

|   | Strongly Disagree | Disagree | Agree | Strongly Agree |
|---|-------------------|----------|-------|----------------|
| <b>Q4a.</b> I agree <i>Respect, Inclusion and Sense of Belonging</i> is a priority Direction                    | 1                 | 2        | 3     | 4              |
| <b>Q4b.</b> I support the Actions identified for the <i>Respect, Inclusion and Sense of Belonging</i> Direction | 1                 | 2        | 3     | 4              |

I have the following comments to provide on this Direction and associated Actions.

**Direction 4: Coordinated Service Delivery - The City works with partners including Community Associations/Societies and community organizations to ensure services to seniors are coordinated citywide.**

|  | Strongly Disagree | Disagree | Agree | Strongly Agree |
|--|-------------------|----------|-------|----------------|
| <b>Q5a.</b> I agree <i>Coordinated Service Delivery</i> is a priority Direction                    | 1                 | 2        | 3     | 4              |
| <b>Q5b.</b> I support the Actions identified for the <i>Coordinated Service Delivery</i> Direction | 1                 | 2        | 3     | 4              |

I have the following comments to provide on this Direction and associated Actions.

**Direction 5: Targeted Training and Professional Development - City staff, volunteers, and community partners are aware of the most current, evidence-based information related to seniors programs and services.**

|  | Strongly Disagree | Disagree | Agree | Strongly Agree |
|--|-------------------|----------|-------|----------------|
| <b>Q6a.</b> I agree <i>Targeted Training and Professional Development</i> is a priority Direction                    | 1                 | 2        | 3     | 4              |
| <b>Q6b.</b> I support the Actions identified for the <i>Targeted Training and Professional Development</i> Direction | 1                 | 2        | 3     | 4              |

**I have the following comments to provide on this Direction and associated Actions.**

**Q7. In my opinion, the following important areas related to the Richmond seniors population, program development, and service delivery to this group have been left out:**

**Q8. Here are my other comments and suggestions to strengthen the document:**

**SUMMARY OF FEEDBACK RECEIVED TO DRAFT 2015 – 2020 SENIORS SERVICE PLAN**

- Feedback was sought between August 18, 2015 – October 2, 2015
- 38 Responses were received from the public
- 16 Responses were received from the following community partners and organizations:

City Centre Community Association  
 West Richmond Community Association  
 East Richmond Community Association  
 Thompson Community Centre Association  
 Seniors Advisory Group

South Arm Community Association  
 Richmond Seniors Advisory Committee  
 Minoru Seniors Society  
 Steveston Community Centre Society  
 Richmond Intercultural Advisory Committee  
 Richmond Fitness and Wellness Association

Immigrant Service Society of British Columbia  
 Richmond Centre for Disability  
 Vancouver Coastal Health  
 London Heritage Farm Society  
 Office of the Seniors Advocate  
 BC Seniors' Health Promotion, BC Ministry of Health

**TABLE 1:**  
 The following table summarizes the responses received to the rating questions from the Feedback Form

|   | <b>Public Feedback</b>                                 | <b>Community Partners &amp; Organizations</b>          |
|---|--|--|
|   | <i>Respondents indicating strongly agree or agree:</i> | <i>Respondents indicating strongly agree or agree:</i> |
| Draft vision of the Seniors Service Plan for Richmond to be a nurturing, connected community that promotes healthy and active aging Vision Statement  | 93%  | 100%   |
| Direction 1: Communication and Awareness - Communication with seniors is timely, effective and appropriately delivered and received.  | 96%  | 100%   |
| Direction 2: Responsive and Relevant Services - Programs and services are developed based on best practices, direct consultation, and program evaluation to reflect changing needs and priorities.  | 96%  | 100%   |
| Direction 3: Respect, Inclusion and Sense of Belonging - There is a citywide focus and understanding of seniors needs and wants. Seniors are celebrated and recognized as valued community members. | 100%   | 100%   |



|  | <b>Public Feedback</b>                                 | <b>Community Partners &amp; Organizations</b>          |
|--|--|--|
|  | <i>Respondents indicating strongly agree or agree:</i> | <i>Respondents indicating strongly agree or agree:</i> |
| Direction 4: Coordinated Service Delivery - The City works with partners including Community Associations/Societies and community organizations to ensure services to seniors are coordinated citywide.          | 96%  | 100%   |
| Direction 5: Targeted Training and Professional Development - City staff, volunteers, and community partners are aware of the most current, evidence-based information related to seniors programs and services. | 92%  | 100%   |

**TABLE 2:**

The following table provides the anecdotal comments received to the draft Service Plan.

\*The comments noted below are verbatim based on what was received from respondents.

**Feedback on draft vision statement: Richmond to be a nurturing, connected community that promotes healthy and active aging**

|                               |  |
|-------------------------------|--|
| <p><b>Public Feedback</b></p> | <ol style="list-style-type: none"> <li>1) I am quite new to Richmond. I find the plan to be comprehensive and forward-thinking. Thank you.</li> <li>2) Prefer the name older adults rather than seniors. I also think that the younger older adults need to be accommodated. there is a vast difference between the needs of the 55+ and the 80+</li> <li>3) Richmond's seniors promote an active physical and mental environment in their golden years.</li> <li>4) I agree seniors need more access to all the City of Richmond facilities and events.</li> <li>5) More advertisement of these facilities and events will entice seniors to get out and visit the facilities and get involved in the events for them.</li> <li>6) I like identification of whether the goal is short term, medium or long term, I think it will provide focus/direction achieving easy wins and working on a highly identified need first</li> <li>7) For reasonably active/healthy or even those more frail seniors it does great job. It needs to reference more to seniors with ongoing health issues ie: macular degeneration and services to accommodate. strategies for inclusion of partners/caregivers of those with issues such as dementia (which often prevent the caregiver/spouse from attending any programs) working more with VCH to provide more adult daycare to allow spouses to be involved in wellness activities for themselves</li> <li>8) As long as it is implemented and not just another plan that gets put on the shelf to gather dust.</li> </ol> |
|-------------------------------|--|

**Feedback on draft vision statement: Richmond to be a nurturing, connected community that promotes healthy and active aging (continued).**

**Community Partners and Organizations**

- 1) We liked: the 5 directions (very appropriate); short/medium/long term goals; that the document is open for facilities to choose how they would like to address the various objectives. We did not like: how some of the wording was too fluffy, vague or non-concrete; how some of the goals would be difficult to measure or evaluate; how the document does little to address/include seniors who are younger or coming of age; lack of examples.
- 2) Well captured, progressive
- 3) The vision statement covers all 5 of the key directions, very strong, clear and proactive statements.
- 4) The City of Richmond has worked with the Ministry of Health on the age-friendly BC strategy. The Seniors Service Plan complements the Age friendly assessment and actions plan.
- 5) The vision statement is an encompassing one that includes a broad spectrum of scopes and goals. We particularly like the word "connected" because looking at the Service Plan Direction and some key opportunities presented, "being connected" is crucial to the success of this service plan; also maybe one that the target population is mostly yearning for. The statement also carries a positive connotation about "healthy" and "active" aging. In the diverse cultural environment within the City of Richmond, some groups may not view "aging" as a positive and the service plan may provide a paradigm shift for a brighter and more fulfilling senior livelihood.
- 6) RSAC is happy with the draft vision.
- 7) For Richmond to be a nurturing, connected community that promotes healthy and active we recommend. Under guiding principles, first bullet, move the word "promote" in the second line

**Feedback on Direction 1: Communication and Awareness - Communication with seniors is timely, effective and appropriately delivered and received.****Public Feedback**

- 1) The City should take responsibility for the program over the long term not just engage and empower.
- 2) I have some concerns about this. I agree communication is important but I don't want to see a large amount of money spent on marketing. I'd like to see it targeted in a practical way that seniors relate to. News letters pamphlets, information sessions etc.
- 3) But the whole report is way too flowery needs to be much crisper and focused
- 4) Translated resources will be key in this area. How will advertising be done? We are now down to one local newspaper, but I would think that only reaches a small number of Richmond residents. Continued use of Chinese radio/newspapers will be an important. I always feel bus shelters advertising is a good place, but I imagine it is too costly.
- 5) If no one knows about it then it will surely fail so communication is key.
- 6) "Face to face communication is best because some seniors have poor eyesight, hearing and comprehension."
- 7) I think there should be a action where we can mix and mingle with elementary age children - teach them, manners, respect, and old fashioned charm. Ask a 10 year old to hold a door for an elderly person they look at you like you're crazy.

**Feedback on Direction 1: Communication and Awareness - Communication with seniors is timely, effective and appropriately delivered and received (continued).**

**Community Partners and Organizations**

- 1) With changes: section 1.3 needs more clarity; "city role" is vague and repetitive; small groups and community users need to be encouraged to guide, not always to be guided.
- 2) What languages? How do you determine the number of languages and what they are?
- 3) Direction 1 will also fit into the "Age-friendly assessment and Action Plan" deliverables on communication and information. Richmond may wish to include as an action item under this direction #1.
- 4) There is no doubt that communication and awareness are important factor to bring the information to the targeted population. For Action 1.2, translation will be helpful; nonetheless to be more cost-effective and conducive to inclusion-promoting, using simplified, direct and everyday English in promotional materials may also be received well. Moreover visual promotional tools can also be impactful. The community is more diverse; and to nurture sense of belonging needs to bridge gaps by finding some common grounds. Nonetheless for some translation is necessary, perhaps some simple English accompanying may be appropriate. For Action 1.3, a benefits-based engagement campaign is an interesting idea. Without much information of this action it is challenging and unfair to comment. However, just looking at the action and corresponding outcomes, we believe the main focus will be on accessibility and affordability for the seniors.
- 5) The outcomes and subsequent actions identified in this area help support directions championed by the Office of the Secretariat to empower, entitle and engage seniors. The RSAC likes the action words being used and it is admirable that these will be measureable. The RSAC would like to see more rigor developed in the implementation plan that identifies who and how the plan is implemented.
- 6) Awareness - Communication with seniors is timely, effective and appropriately delivered and received.  
  
For purposed partners on page 17, I will suggest to include Richmond seniors residents be included.  
  
Under "Outcomes" expand and spell out what is meant by "diverse" seniors. In Richmond over 60% of the population are a visible minority. What is the V.M. % of the seniors population? Whatever the figure, the VM distribution would show that seniors' population of that segment will continue to increase.
- 7) More concrete actions with metric
  - 1.1 add community associations as partner; how do we measure
  - 1.3 - benefits - too jargony; benefits of participation rather than activity

**Feedback on Direction 2: Responsive and Relevant Services - Programs and services are developed based on best practices, direct consultation, and program evaluation to reflect changing needs and priorities.**

**Public Feedback**

- 1) 55+ do not go to the senior centre they are still working!! the age range should be 65+
- 2) Programs for seniors should be developed through consultations with seniors. As volunteers are scarce, I believe that the City staff should volunteer their services at the senior centre as part of their employment conditions.
- 3) But the whole report is way too flowery needs to be much crisper and focused
- 4) This is larger than a City of Rmd issue, but the ability to be aware of and access appropriate services is a concern for myself as I age, and currently for my mother who is older. Guides/ one stop information that would link/ provide access to who to contact where and for what services. The Province of BC does have a guide, but even it is not the most user friendly. I'm sure there are issues with keeping up to date with programs/ services
- 5) I think this is crucial to develop this more. I can't remember if affordability and transportation was in this section, but I view this as being one of the main determinants of seniors being able to access leisure/health services.
- 6) Who decides the relevant services? People affected or some committee that thinks it knows what is needed.
- 7) "You must be quick to change required action or service i.e. be onsite and daily interaction."
- 8) There needs to be some sort of communication between the health providers and the community centres. The Dr knows this OAP is sitting at home and can't get out now how do we get them to comment. A active person lives longer and less change of dementia.

**Feedback on Direction 2: Responsive and Relevant Services - Programs and services are developed based on best practices, direct consultation, and program evaluation to reflect changing needs and priorities (continued).**

**Community Partners and Organizations**

- 1) Following changes: 2.2 add education for seniors; 2.3 should include not just frail, but everyone including ethnic groups. Add another point; 2.5 what is functional segmentation? Could state "please refer to glossary"; 2.7 civic engagement is very vague, can it be reworded? Can it be in marketing section?; 2.9 provide education for pre-seniors, people coming of age, so they can plan and be proactive in maintaining their health and planning for retirement.; include examples of effective and successful strategies that provide a clearer picture of "engagement".
- 2) All well and good but there should be no increase in taxes to fund all 5 actions.
- 3) Agree with the action item.
- 4) We think that to reach the underserved segments of the seniors population, specialized program and services are needed. Sometimes it is not as straightforward as it seems; some seniors are hard to reach or isolated because of myriads of reasons, other than the more apparent ones like transportation or lack of awareness/knowledge. There may be psychological factor, social status issues, financial hardship, health challenges, loneliness; it takes more than outreach programming to address them. Their engagement will be lengthy and requires the collaboration of many services agencies and healthcare professionals. This will be better addressed if it is a stand-alone issue.
- 5) The RSAC feels that this is greater than just a City role. How do the other partners fit into these actions and does it fit with their mandates? If partners are involved in the actions, how do they report on their actions that help contribute to the objective? The RSAC finds the wording of Action 2.5 to be confusing. Could this be reworded to be clear on what the action is? The RSAC likes Action 2.7 and would like to see more options created. This could provide more opportunities for seniors to contribute and provide a "gift to the City"
- 6) Responsive and Relevant services - Programs and services are developed based on best practices, direct consultation and program evaluation to reflect changing needs and priorities.
- 7) Missed community associations as partners 2.2-2.8  
2.1 don't reduce programs - increase  
remove "and activities for those 55+"  
2.8 harnessing volunteers who have recently retired.

**Feedback on Direction 3: Respect, Inclusion and Sense of Belonging - There is a citywide focus and understanding of seniors needs and wants. Seniors are celebrated and recognized as valued community members.**

**Public Feedback**

- 1) Services provided are excellent and the older adult centre should be run like a community centre.
- 2) Work with Community Associations/Societies to expand outreach to vulnerable populations with a shuttle bus between community centres.
- 3) Should include and respect all cultures not just new immigrant cultures. We are losing our sense of belonging in Richmond.
- 4) As above - if you provide an excellent infrastructure of good facilities programs and resources then this would be automatic !!!
- 5) I am not sure if I feel this is as important, as I personally am not sure if we do not already "respect/include" the elderly already. Richmond sense of community had really declined over the years I have resided here, and I do feel it is important to improve this. Public spaces need to be age friendly/ mobility wise/ even sitting spaces (seats are often too low).
- 6) Working WITH senior adults is important as we have a lifetime of experience and knowledge to draw from. Coming from different backgrounds and countries only adds to the expertise
- 7) Inclusion for all not just a small section of the community.
- 8) "We need access & reduction of barriers - hopefully the new building will have all that. We do not want to have access where young people are running around. We need separate access."
- 9) "Properly trained and paid caregivers, volunteers, supervisors etc. to only provide service excellence but prevent senior abuse"
- 10) Long time resident and I have walked into groups and I feel as tho I don't belong. This shouldn't happen in my community!! I want to see English 1st on all signs. Our 2nd language is French - wow can't remember seeing that on any signs. This is Canada all programs should be offered in English.



**Feedback on Direction 3: Respect, Inclusion and Sense of Belonging - There is a citywide focus and understanding of seniors needs and wants. Seniors are celebrated and recognized as valued community members (continued).**

**Community Partners and Organizations**

- 1) Changes: 3.2 Cultural Ambassador program needs more clarification or put in the glossary; 3.6 is fuzzy. Change to "identify" or "standardize" instead of "harmonize", on how to portray seniors. Pre-seniors would be good to include also.
- 2) Again, no increase in taxes. A re-allocation of existing \$ is best. Not sure 3.8 is applicable these days
- 3) Direction 3 fits into the Age-friendly assessment and action plan - section 2.5 respect and social inclusion.
- 4) Richmond offers support for seniors groups for the diverse population and celebrate the value members provide to their community. Support all the action items in direction 3.
- 5) When it comes to terminology, it is interesting to note that the previous service plan was for Older Adults, and this one is for "Seniors". We think the overall action plan is good, particularly Action 3.5
- 6) The RSAC believes that Action 3.3 is "Ongoing" as it is likely tied in with future development of public facilities. We would like to ensure that the funding in put in place to support these actions and allows the appropriate spaces to be made available.
- 7) The RSAC question whether there are enough resources to enact many of these actions. Will there be additional staff required for Seniors Services to help move the service plan along?
- 8) The Action 3.7 should be moved to a short-term action.
- 9) Respect inclusion and sense of belonging - There is a citywide focus and understanding of seniors' needs and wants. Seniors are celebrated and recognized as valued community members.  
 Action 3.1) Lens on Cultural diversity. Change timeline to short term.  
 Action 3.4) "Spell out" vulnerable population; to include Ethnic seniors from third world countries.  
 3.7) Specifically mention "cultural diversity" as a major part of that overall diversity.
- 10) objective - seniors  
 city promotional communications  
 3.3) provide land (remove) or funding - should be space only  
 ethno cultural community partners  
 provide vs. increase? Remove dedicated suitable? Seniors friendly

|  |   |
|--|---|
|  | <p>-seniors vs. older adults</p> <p>harmonize should be standardize. Link to social development strategy.</p> |
|--|---|

**Feedback on Direction 4: Coordinated Service Delivery - The City works with partners including Community Associations/Societies and community organizations to ensure services to seniors are coordinated citywide.**

|   |   |
|---|---|
| <b>Public Feedback</b>                      | <ol style="list-style-type: none"> <li>1) I wouldn't like to see this translate into a whole load of new government jobs. Coordinate through access to information on websites. Use technology for the professionals not more jobs.</li> <li>2) Very important so resources are best used, services are not duplicated (or gaps in services can be noted)</li> <li>3) One stop shopping will all health/wellness needs is always ideal!</li> <li>4) There is wide variety of abilities re: technology for senior adults so reliance on computer or technology is not the best. Having a person to point out the available opportunities, navigate the bureaucracy or answer questions is imperative.</li> <li>5) Not sure how this will be implemented.</li> <li>6) "City resources are stretched thin and will require even more as seniors longevity and health needs increase.</li> <li>7) If services to seniors are coordinated city wide would I pay the same at all centers and shouldn't all programs be offered at all centers.</li> </ol>   |
| <b>Community Partners and Organizations</b> | <ol style="list-style-type: none"> <li>1) Could we have a list of community association partners and organizations as examples; 4.2 identify individuals to services and their responsibilities to them.</li> <li>2) 4.2 Are you saying you haven't been working "with health care community partners..." or is it "continue to work with..."</li> <li>3) Suggestion: Creating a central repository on what services re available to seniors in their community. Ensuring the information is current for the older adult population in Richmond. For example, other age friendly communities have developed yearly resource guide or one-stop resource centre for seniors to obtain information. Not all seniors use the computer, it is important to have other options available.</li> <li>4) Action 4.2 is particularly important. We wonder if there is a more concrete plan outlining the approach to be taken, the strategies, the potential partners, etc. Is there any buy-in from the healthcare professional?</li> <li>5) Coordinated services Delivery - The City works with partners including Community Association/Society and community organizations to ensure services to seniors are coordinated citywide.</li> <li>6) Clarify com</li> </ol> |

|  |   |
|--|---|
|  | <p>4.1 The City, too jargony, scope of proactive, systems view transparency?<br/>Outcomes - not clear on first bullet</p> <p>4.4 research data - made available</p> |
|--|---|

**Direction 5: Targeted Training and Professional Development - City staff, volunteers, and community partners are aware of the most current, evidence-based information related to seniors programs and services.**

|   |  |
|---|--|
| <b>Public Feedback</b>                      | <ol style="list-style-type: none"> <li>1) I would like to see annual open houses held for families to see what is available for their grandparents.</li> <li>2) The seniors do not have a role?</li> <li>3) Senior citizen should well aware that the world now is all i-related, be prepared to get in the i-world through latest technology and equipments. City should provide relevant info and teach them how to fit in to the on-line world, and they them walk in pace with the modern technology.</li> <li>4) Very keen to the success of the program.</li> <li>5) "A video of related subject may assist the new staff volunteers who may hold the position for a short while. Training sessions can be wasted and exhausted by manpower"</li> <li>6) "On site training is more relevant and cost efficient"</li> <li>7) This booklet is lovely but at what cost? How much could have been saved do it in black and white? Actions are stronger than words. I believe hospitals, Dr's, etc. should have communication with seniors reps at the centers. We have a senior advisor at each center and all these centers do they talk weekly/monthly so it is united?</li> </ol> |
| <b>Community Partners and Organizations</b> | <ol style="list-style-type: none"> <li>1) All good.</li> <li>2) Agree with outcome - no suggestions</li> <li>3) We would think that Better Practices have already been established from past service plan and previous experience. Some of the actions here seem to be duplicating that; unless it is perceived to be a need to "develop more practices" etc.</li> <li>4) We have the following comments to provide on this Direction and associated Actions.<br/><br/>The RSAC felt that the actions in this Direction were slightly repetitive. It is really about developing a network and system wide approach. It was felt that the actions could be consolidated rather than restating similar actions.<br/><br/>The RSAC would like to ensure that cultural sensitivity is also included as part of any training curriculum.</li> </ol>   |

It is important to recognize that training in this area needs to be attended by relevant staff and community partners. Often, the people who attend that training are those who understand that importance and the need to be informed. Those who may choose not to attend training sessions can often not recognize the importance and benefit to attending and participating. We believe that training is important and helpful in providing appropriate services for seniors.

The training is currently a stand-alone direction; however, it could have been integrated through all the other directions.

There is repetition between Action 5.4 and Action 3.8.

The RSAC believes that Community Partners are missing in the Responsibilities in Direction 5. They need to be added as they work with the City in the delivery of programs and services for seniors.

- 5) 5.4 - Timeline should be in order - short-term to long term

#### Other comments provided:

#### Public Feedback

- 1) I would like to see regular bus trips from the senior centre to other community centres that have seniors programs in order to promote a stronger connectivity with all the older adults in Richmond
- 2) A seniors' committee should be involved and report to Council on the effective and timely implements of the plan and the performance of the City staff and volunteers responsible for providing the seniors service plan.
- 3) Document is way too long and flowery needs to be much crisper and focused - a good report is often not the longest!!
- 4) Transportation - I don't want to live in the concrete city centre, but have concerns about being able to age in place in my home (or even if I move to townhouse) as walking out to a transit link can be difficult to impossible as I age/ if my mobility becomes less. My mother lives in Vancouver in an apartment, within 1 block of a bus line. At 80, this has allowed her to age in place - she can take the bus downtown to the YMCA to participate in aquafit 3 times a week and never really have to walk more than a couple blocks. It is the issue that may force me to leave Richmond as I get older/ if my mobility gets less. I believe it is also the issue that leads to some of the current senior isolation.
- 5) Nice plan but keep the costs down for the individual senior. They don't all have deep pockets.
- 6) I strongly support the emphasis on facilitating volunteering for seniors. As you undoubtedly know, it is a great way to get people engaged!
- 7) think it was well done
- 8) VCH needs to work closer with city and provide more programs targeted to

#### Public Feedback

keeping seniors active - ie adult day care which allows the caregiver/family to keep their loved one longer but keep themselves healthy. work different with seniors health issues - most will not be "cured" in traditional way but learning to live with ongoing health issue for themselves and family and allow city to provide appropriate recreation programs to support them ie: fighting obesity, managing diabetes, living with macular degeneration, recognizing hearing loss, etc.

- 9) Many asian seniors have the English language barrier, may be we could have a small group designated those have the English barrier.
- 10) Keep Richmond GREEN!!!! Stop the overdevelopment and dessimating our small forests!!! It is unhealthy and will shorten our life spans. Richmond is no longer balancing buildings and green space
- 11) "Seniors Teaching students is good! Music and dancing is so important for all!
- 12) "Easy access to social and physical activity ie. On bus route or walking distance or in same building."
- 13) "The Minoru Seniors Café is a good location in the current status. It is isolated from swimming pool and ice rink. Easy access with wheel chair. The café is a 'gem' for disability who may simply bring the own containers to get the food for next meal. The changes are reasonable and reasonable and the food qualities are very well keeping."
- 14) "The report of the Seniors Service Plan is too academic, which looks like a thesis paper for the University graduate studies and which seems to be a bit difficult for other ordinary people to get the whole picture in a concrete way. Is easier for us to understand if there's a table, summary, which summarizes all the important ideas. Appendix D is a good LONG summary and provides practical ways to deal with the need. However it's too long. Just make the appendix simple, short and easy for us to understand."
- 15) "Build a housing and service centre in cooperation with churches i.e. Gilmore Park United Church and Gilmore Gardens. The church(es) would donate the land, the church members could invest their RRSP's, proceeds from the sale of their homes, other interested parties could invest i.e. Diversicare, Provincial gov't i.e, John Yap, MLA, federal gov't i.e. Alice Wong and banks i.e. TD. The centre could be run similar to a community centre association with City participation et al. I believe this concept would minimize direct City funding and allow greater participation especially from seniors rich or poor, healthy or sick. Especially since this is a federal election year and provincial and municipal politics involve seniors issues i.e. housing and health care and many churches have dying congregations, I believe we could be laying foundations before the end of this year!"
- 16) All of the "Directions" make sense, but are somewhat generic and "apple pie". As such, I am only returning this first page of the Feedback Form.  
-I am now a senior (age 66) and disabled (MS). My mobility is getting very

**Public Feedback**

limited and I am now going through the process of reviewing housing and care options.

-I am finding that the advice or recourses available are spotty, at best (they may be there, if one can only find them).

-What resources that are available tend to be generic and not much specific to Richmond.

-What I would like to see (perhaps part of Direction 1) is:

1. A coordinated and staffed resource/information centre with a specific mandate of providing assistance on the transition steps and option.

Advice, specific to Richmond, on resources for home care, assisted living and extended care

Advice on the transition steps including time lines.

Materials advising of these resources distributed to the care homes and hospitals, to be distributed as a matter of course"

- 17)** Many Richmond residents want to take a course or join a group at 1, 2 or more community centers in Richmond. I believe we should pay 1 fee for all community centers. It becomes costly paying a fee at each center. More handicapped parking at centers is a priority for senior to want to come there needs to be a close parking space and or a bus stop. I understand the city decides where bus shelters and bus benches are on the street perhaps someone could look into seats and or shelters be at all community centers this would benefit all of the community. If we can't get to or from the centers what is the use of any of this???

## Other comments provided (continued):

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- 1) More examples; more lists (community partners); more about pre-seniors - continuum of services
- 2) All-encompassing plan.
- 3) All is good.
- 4) Note: Executive summary on page 4 would be much more clear if it was re-worded as PURPOSE. The process was cumbersome and time-consuming.
- 5) No suggestions, everything has been covered and well thought out.
- 6) FYI: I think Volunteer Richmond Information Services (page 29) is now Richmond Cares, Richmond Gives.
- 7) intro too texty; executive summary should be more prescriptive, more succinct
- 8) The Subsidy age of 55 should be reviewed
- 9) Concur with the Seniors Service Strategy and nothing to add at this point in time
- 10) Thank you for the opportunity to provide feedback. The draft document is very thorough and will complement the age friendly assessment and action plan. Congratulations on all the work that went into creating the service plan.
- 11) Richmond received Age friendly BC recognition this year and also developed an Age-friendly assessment and action plan. With both plans, Richmond will be well prepared for the growth of the aging population. Thank you for your work on supporting seniors health and well being.
- 12) The needs for seniors in different age categories. Seniors over the age of 75 and 85 years often have different needs than those 55-65 years.
- 13) Communication with the health authority and improved coordination of community and health services.
- 14) Needs of more vulnerable seniors with physical and/or cognitive challenges.
- 15) Needs of caregivers of seniors with physical and/or cognitive challenges.
- 16) Improved access and reduction of barriers for frail and isolated seniors (e.g. Transportation to community programs, financial subsidy program, etc.).
- 17) While these two elements are important, I feel that this determinant of seniors health deserves a stronger profile in the Plan including opportunities for assessment and improvement. If it's not too late to include another dimension, including physical environments as dimension #6 should be considered.
- 18) The Centre for Hip Health and Mobility's Walk the Talk research program has identified the following built and social aspects that influence older adults outdoor mobility:  
  
sidewalks and crosswalks, neighbourhood features, social opportunities, other social factors, perceptions of safety, aesthetics and personal ability. 'Sidewalks

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and crosswalks' and 'neighbourhood features' themes were perceived to have the highest ratings for both importance and feasibility to change.

[http://www.hiphealth.ca/media/CHHM%20-](http://www.hiphealth.ca/media/CHHM%20-%20Concept%20Mapping%20OTHER%20STAKEHOLDERS%20--%20Final.pdf)

[%20Concept%20Mapping%20OTHER%20STAKEHOLDERS%20--%20Final.pdf](http://www.hiphealth.ca/media/CHHM%20-%20Concept%20Mapping%20OTHER%20STAKEHOLDERS%20--%20Final.pdf)

In particular, the elements of the physical environment that were identified as important are as follows:

- Access to public transportation
- Places to go to meet/socialize with people
- Well-lit streets, roads, parks and buildings
- Presence of benches
- Accessible parking
- Sidewalks on at least one side of the street for safety
- Streets and sidewalks cleared of mobility hazards such as snow, ice, sand and gravel
- Curb cuts
- Presence of handrails

In addition, the strategic directions of the Seniors Plan should be reflected in other important strategies of the City of Richmond such as the Community Wellness Strategy.

**19)** We feel that the intergenerational programming would be very beneficial to attain the set-up outcomes and purposes of the service plan. The society is composed of a continuum of people at different ages; it is certain that the senior population will be dominant in number, but youth presence is also important especially the seniors are indeed a wealth of knowledge and experience on many aspects of life. Many seniors gear their quality of life on the company of the younger generation, hence it is important to engage the seniors, and similarly crucial to have participation and involvement of the younger generation.

**20)** Moreover, educating the general public, especially the middle-aged group of citizens of healthy and active aging will assist a smooth transition for many into older adulthood.

**21)** My only note would be the lack of settlement services (information & referrals and form-filling especially) for seniors who have become citizens. Many have minimal English, but under both CIC and provincial funding there's very little we are allowed to do for them.

Service Canada used come onsite at many of the settlement service offices in BC once a week and offer service to citizens in Mandarin, Cantonese and other relevant languages based on the area, but they stopped in June of 2014. We still get people, usually seniors, coming in looking for Service Canada and all we can do is give them directions to the office on Cooney, where they might, or



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might not, be able to get help in their first language.

- 22)** The evaluation piece she felt was deserving of more attention.
- 23)** The needs of seniors in different age categories. Seniors over the age of 75 and 85 years often have different needs than those of 55-65 years.
- Communication with the health authority and improved coordination of community and health services.
- Needs of more vulnerable seniors with physical and/or cognitive challenges.
- Needs of caregivers of seniors with physical and/or cognitive challenges.
- 24)** Seniors with mental and addiction issues have been left out in this document. We would like this population to be part of the discussion.
- Page 11 of the draft, first bullet: In "hard to reach population" include ethno-cultural seniors, in particular those from the third world countries who do not speak English.
- Page 13, of the draft, second paragraph. Spell out what we mean by "vulnerable population" - include ethno-cultural seniors.
- 25)** "There were 1,390 senior immigrants who settled in Richmond between 2000-2010. For new immigrants, the acculturation process is a multidimensional one that includes physical, psychological, financial, spiritual, social, and family adjustments. This process can be very stressful for immigrant elders because of they typically have fewer resources (e.g. income and education) to assist them in adapting to their new life situation"
- "Many seniors immigrants in Richmond also face significant language barriers. Within Metro Vancouver municipalities, Richmond has the highest proportions of seniors who could not speak English (24.4%). "(Page 35)
- More specific and practical actions are needed to help those most vulnerable and most in need seniors.
- Recognizing the difficulties alone is not enough. Saying to work with community partners to bring a coordinated and collaborative response without measurements and accountability is also not enough.
- 26)** The RSAC feels that this is a comprehensive report and congratulates the committee on putting this draft together. We feel that all areas important to improving seniors program and service delivery in Richmond have been covered and look forward to seeing further implementation. We also felt that the report was put together in a format that is easy to follow.
- The RSAC will look forward to seeing progress reports on the directions once the plan has been passed by City Council.
- 27)** It would be great to work with the immigration department (CIC). Start to engage new immigrants in an early stage. It can help them to understand their community better and build a sense of belonging.

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There are certain aspects of community's concerns on seniors that are recognized but not that clearly laid out in those planned actions.

"Challenges that were identified included increasing difficulty in addressing the complex needs of community dwelling, frail and vulnerable seniors, as well as effectively supporting newcomer and visible minority older people." (Page 5)

"The OCP recognizes the unique needs of seniors through policies. This includes efforts to; Continue to target 'hard to reach' populations (e.g. new immigrants, socially isolated individuals), people with disabilities, seniors and youth (especially low-asset youth)..." (Page 11)

"There were 1,390 senior immigrants who settled in Richmond between 2000-2010. For new immigrants, the acculturation process is a multidimensional one that includes physical, psychological, financial, spiritual, social, and family adjustments. This process can be very stressful for immigrant elders because of they typically have fewer resources (e.g. income and education) to assist them in adapting to their new life situation"

"Many seniors immigrants in Richmond also face significant language barriers. Within Metro Vancouver municipalities, Richmond has the highest proportions of seniors who could not speak English (24.4%). "(Page 35)

More specific and practical actions are needed to help those most vulnerable and most in need seniors.

Recognizing the difficulties alone is not enough. Saying to work with community partners to bring a coordinated and collaborative response without measurements and accountability is also not enough.

**28) Add grandparents taking care of grandchildren**

City Centre pg. 29

**29) Steveston Society concurred with the Seniors Service Strategy and had nothing to add at this point in time.**

**30) The needs of seniors in different age categories. Seniors over the age of 75 and 85 years often have different needs than those of 55-65 years.**

Communication with the health authority and improved coordination of community and health services.

Needs of more vulnerable seniors with physical and/or cognitive challenges.

Needs of caregivers of seniors with physical and/or cognitive challenges.