

***The Council on Aging
of Ottawa-Carleton***



***25 Years of Service
to the Community
1975-2000***



*Millennium Bureau of Canada
Le Bureau du Canada pour le Millénaire*

***25 Years of Service
to the Community
1975-2000***

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Foreword

To mark the beginning of the New Millennium, the Council on Aging felt it was important to record its history of the past quarter century for posterity. In doing so, the Council on Aging pays tribute to the seniors and community members who have given so generously of their time and expertise to the Council's work. The Council has evolved over time and its success is due in large measure to the willing and dedicated participation of members and staff, past and present.

This is an inspirational story. It shows what can be achieved with vision, intellect and perseverance. The Council has braved an exceptional climate and altered direction in response to external realities. Much progress has been made in addressing seniors' issues over the past 25 years and yet, many of the same issues in health and social services still require attention. The Council on Aging continues its work with guidance and inspiration from the past.

The Council on Aging is very grateful to the Millennium Bureau of Canada whose support made this legacy for our community possible. I would like also to acknowledge the efforts of Dorothy Milligan and David K. Bernhardt for their preliminary work on this history, as well as those who took time out of their busy lives to remember and reminisce. The Council is especially thankful to Margaret George who took on the task of writing our history. It has been a particular advantage to have someone who knows the Council and many of its members well. Thank you Margaret for your continued support. The Council would also like to thank members of the History Committee, Margaret Wade Labarge, Marian Chapman, Hubert Frenken and Lise Ladouceur, for their guidance and direction.

Joan A. Skene
President
Council on Aging of Ottawa

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Chapter 1 - The Establishment of the Council on Aging

The Council on Aging (COA) came into being on April 1, 1975 as a result of the wise foresight of leading community agencies and individuals.¹ The Council began its work with all the elements for success except for assured core funding. First, in its favour, the climate was right. Area seniors had won recognition and respect and some government services were in operation. Second, there was respected sponsorship through the Ontario Ministry of Community and Social Services and the Social Planning Council of Ottawa-Carleton (SPC). The Senior Citizens' Council (SCC) was closely involved and supported the endeavour as did other government and community agencies. Finally, Council members were of the highest caliber; they were credible, had recognized expertise and were willing to work and to work together to improve the quality of life for seniors in Ottawa-Carleton.

1.1 A Tribute to Seniors

A review of the history of the Council on Aging would be incomplete without a comment about the pioneering work of the senior citizens who went before. Years ago the age group over sixty was lumped together without regard to individual interests and capabilities and was largely ignored. In frustration seniors formed small groups for recreation and stimulation, and by 1957 had attracted the interest of the Ottawa Welfare Council (later the Social Planning Council), which encouraged five of the groups to

¹ Please refer to "A Venture in Cooperative Community Planning - A Short History Prepared For The Tenth Anniversary 1975-1985" for additional information. This document, along with notes prepared by Dorothy Milligan (former President of the SPC and COA Board member), were used extensively in the development of Chapters 1 and 2.

form a central forum to exchange ideas, speak with a common voice on matters of mutual concern, and coordinate activities.

Within months, they had a leadership role in the fledgling United Senior Citizens of Ontario which soon gained the ear of the Ontario Government. Participation in community projects, a TV series which earned first prize of a New Horizons grant in a Canada-wide competition, a published paper widely acclaimed as "the first concrete suggestions for proposed Ottawa housing from any source" and insistence on "a plan for all" rejecting free medical care for seniors, earned the influential support of Senator Muriel Fergusson and community leaders. With the Prime Minister's statement, "We need the advice of this older tested segment of two million Canadians who can still make a rich and varied contribution to our country" - the climate was right to launch the Council on Aging in Canada's capital!

1.2 Background

Realization of the need for a planning and coordinating body to deal with the concerns of senior citizens, particularly in the health field, had been growing in Ottawa since the 1950s. The Social Planning Council of Ottawa-Carleton and the Senior Citizens' Council² believed strongly in the need for such an organization and, in collaboration with key stakeholders, planned in earnest for its creation. An initial meeting was held in 1971 "to discuss the need for a connecting link in health services for older people." The opinion of the meeting was that indeed there was a need for a coordinating body. This resulted in a commitment by three of the participants³ to work together to design a Council on Aging.

² The Senior Citizens Council was the central forum and common voice for approximately 100 seniors' organizations and institutions in the region.

³ Tom Knighton - President, Ottawa Senior Citizens' Council; Bernie Swanlund - Director of Nursing Homes and Special Care

In fact, the need for seniors-led organizations had been stated succinctly by Bill Zimmerman (Assistant Director, Social Planning Council) upon the establishment of the Senior Citizens Council in 1957. "It seemed that everyone had theories about what older people needed without asking the elderly." In essence, the establishment of the Council on Aging was to continue in that same philosophy and apply it to the planning and coordination of services for seniors.

The Social Planning Council provided the staff to coordinate the planning and for the next four years individuals and groups collaborated in the planning for the establishment of a Council on Aging.

Funding was finally secured in 1974 from the provincial government through a temporary Elderly Persons Centre Grant in the amount of \$15,000⁴. Although a significant contribution, this was insufficient to meet the very conservative budget that had been developed for the Council on Aging's first year of operation. A timely gift from the Kiwanis Club of Ottawa of \$7,000 followed shortly thereafter and the Council on Aging was launched.

The initial structure of the Council consisted of 25 members: leaders of Senior Citizens' Groups, consumers and interested senior citizens as well as representatives of health services, social services, religious institutions, housing agencies, funding bodies, recreational and educational groups and facilities. The Executive would all be Senior Citizens. The bi-cultural nature of the Ottawa-

Branch of the Social Welfare Department of the Regional Municipality of Ottawa-Carleton; Bill Zimmerman - Assistant Director, Social Planning Council.

⁴ The Glebe Centre was involved in the acquisition of the temporary grant.

Carleton community was recognized and it was recommended that at least five Council members be Francophone.

It was agreed that in order to maintain the close and rather complex relationships of the Council on Aging with the Social Planning and Senior Citizens Councils, their Presidents would be ex-officio Board members, and their Chief Officers and the consultant of the Ministry of Community and Social Services would participate, but as non-voting members. It was also agreed that the traditional cooperative relationship of the Senior Citizens' Council with its Francophone member agencies and the policy of the Social Planning Council to include Francophone involvement and services in all planning, would be adopted by the new Council as an important guideline in establishing relationships in both English and French environments.

Chapter 2 - The Formative Years (1975-1985)

The early years were focused on establishing the COA with its first board of 25 members. It began its history as the Seniors' arm of the Social Planning Council, and the first staff person, Margery Boyce, was hired on April 1, 1975⁵. At the Council on Aging's 20th Anniversary Ms. Boyce reflected on the challenges of those early years. "The first challenge was to develop the Council - its Board and Committees; the second was to find the ongoing funding to keep it in business; and the third and most important was to establish the COA's credibility by making it an organization that the community would want to keep."

In 1975, the *raison d'être* of the Council on Aging was articulated as:

- ❖ to provide an information bureau on services for the aged,
- ❖ to provide a forum to keep agencies and senior consumers working together,
- ❖ to expose unmet needs, and
- ❖ to encourage community action to meet the needs.

By 1975 a Steering Committee consisting of leaders from seniors-serving organizations worked diligently to develop concrete plans, priorities and programs for the proposed Council on Aging. They decided on a committee approach, defined the responsibilities of the Executive and Standing Committees and worked to obtain the backing of relevant community groups. At the heart of their vision for the COA was a strong focus on determining needs, recommending the development of services where required and encouraging other organizations to deliver the services. This approach has consistently remained at the center of the Council's operations.

⁵ Margery Boyce was the only staff person until 1980.

The Council on Aging was at the forefront of the seniors' movement. It broke new ground and, due to the lack of other seniors' organizations or departments, served as a catalyst in bringing seniors' issues to the attention of both the general public and government bodies. The Council also provided the impetus in the establishment of other seniors' organizations. This was a very exciting time for the Council. Despite the fact that the Council was primarily a regional organization, it became involved provincially and nationally as a recognized voice for seniors.

2.1 The Development and Use of Standing Committees

The first priority of the Council was to establish a clear understanding of the current situation for seniors living in the region through an inventory of existing services and facilities. Standing Committees were struck in the areas of education, health, housing, recreation, social services, transportation, economics and Francophone concerns. Shortfalls in the system were documented and recommendations were made for the future. In 1976 a forum was held to inform the community of their findings and to encourage a response. The recommendations in the "Report to the Community" and the philosophy behind them were to form the basis of the work of the Council on Aging for years to come.

In order to act on the recommendations, a different type of expertise was required as well as long-term commitment. Adequate funding continued to be a problem requiring some of the Council's energy to be diverted from current issues to the ongoing quest for stable funding.

Despite this challenge, the Council had a number of successes. In 1978 the Council received funding (\$2,500) from the United Way. In 1981 provincial funding was received from the Ministry of Community and Social Services. A year later the Council began receiving an Elderly Persons Centre Grant from the province, as well as a municipal contribution. This was the beginning of a

budget which enabled the Council to expand its staff to better meet the increasing demands being placed on the Council.

2.2 Growing Pains

Of continuing concern to the Council were the issues of funding and of its desire to be an autonomous body. The two were related. Proposals were developed to create an independent "Office on Aging" and later a "Bureau on Aging". The aims were identical to those of the Council but it had always lacked the funding to assume the role. Both of these proposals were turned down.

Discussion continued over the next few years and under the visionary leadership of Dr. John Moore (COA President, 1982-85) planning focused on bridging health and social service sectors. Finally a "Reconstituted Council on Aging" was proposed, an independent voluntary agency with a stronger mandate, and agreed to by the District Health Council and the Social Planning Council. The Council would be a source of expertise and guidance in the planning and coordinating of social services for the elderly for the SPC and in matters of health for the DHC. Although the DHC could not delegate its responsibilities, particularly by age groups, the following revised agreement was accepted:

"The Council on Aging will serve as the planning arm of the SPC in respect to the social needs of the elderly, will be a major resource for the DHC in respect to the social aspects of health planning for the elderly, and effect the maximum possible degree of joint planning for the elderly where this is required and particularly at points at which services to meet 'health' and 'social' needs converge."⁶ With this new agreement the Council on Aging became a consultative body to the DHC and affirmed the

⁶ Council on Aging of Ottawa-Carleton, (1984), "A Reconstituted Council on Aging for Ottawa-Carleton", p.1.

usefulness of complementary yet independent planning for the 'health' and 'social' needs of the elderly.

The "Reconstituted Council on Aging" called for a Council independent of the SPC. Regional Government did not approve of what it felt were too many separate planning bodies so the COA and the SPC developed an agreement that allowed the Council on Aging to be neither totally subservient to, nor totally independent of, the SPC. The SPC had the legal responsibility and a general policy responsibility while allowing the Council on Aging to function as an intelligent, committed and largely autonomous group.

It was not until 1984 that the Council received core funding for three of its staff. This provided more stability and security not only for the staff but for the whole organization.

New guidelines were adopted that expanded the COA's membership. More demands were being made on the time not only of the staff but also of the volunteers. It was decided to increase the number of Board members to 36 in order to have more people available to respond to requests to represent the Council on Boards and committees, to give speeches and to support programs such as Telechek and meals services. The Council was strengthened by dividing the expanded membership into three. One-third of the members were to be senior citizens who might represent organizations; one-third knowledgeable citizens or service club members who might or might not be seniors, but who had proven interest in advancing the needs and wishes of seniors; and one-third professionals employed in related fields.

The committee structure continued to evolve. The ability to address issues as they arose was critical in maintaining the credibility of the Council, but with limited staff it was difficult to address all the pre-established priorities as well. By 1984 the Guidelines called for three types of committees: Standing, Task

Forces and the Nominating Committee. The Standing Committees were: the *Comité des services aux aînés francophones*, Finance, Education, Economics of Aging, Health Issues and Home Support. Planning for committee activities became more rigorous and each Committee was to take responsibility for its own public relations. The Task Forces were set up and dismantled as deemed necessary by the Council.

By 1985, the Council on Aging had been under the leadership of four Presidents: George Jackson (1974-1976), Marjorie Mann (1977-1979), Don Simpson (1980-1982), and Dr. John Moore (1982-1984). Susan LeConte was hired in 1980 as Margery Boyce's Executive Assistant and then assumed the position of Director upon Margery's move to the Department of Veteran's Affairs, in 1982.

2.3 Accomplishments

Between 1975-1985 much was accomplished due to the perseverance of dedicated volunteers and staff. Despite the ongoing challenges with funding and the inevitable growing pains of a new organization, significant progress was made, some of which was funded through special project grants. In keeping with Council policy to be a planning and not a service delivery organization, the Council developed programs and then sought ongoing sponsorship through existing organizations.

One of the major accomplishments of the first ten years was the building of an invaluable network of personal relationships that many consider being the Council's most important contribution to helping the elderly in the community. Relationships were forged between volunteers and professionals, Francophones and Anglophones, and funding bodies were included as active participants on the Council as well as on Committees. Furthermore, the Council on Aging encouraged a closer working relationship between the Social Planning Council and the District Health Council.

The Council on Aging had become a respected vehicle for community consultation with seniors, providing advice to service providers, particularly when plans were being made for the development or expansion of services. Another major achievement was the awareness about seniors' concerns that the Council built up in the community, by writing briefs to local, regional, provincial and federal governments.

Much of the early work of the Council focused on education and on counteracting the negative image of aging. The media was used extensively and seniors were shown to be active and contributing members of society. The Education Committee developed the Seniors in Schools program in elementary schools and the Wider Intergenerational School Enrichment Program (WISE) at the secondary school level. These two programs gave seniors a sense of their own worth, allowed them to contribute to their community, and gave the young an appreciation of the elderly. The Education Committee also stimulated the University of Ottawa and Carleton University to start an Ottawa branch of the International Elderhostel Program.

Ground breaking work was done in the area of retirement planning which had not received attention at this time either provincially or nationally. The COA was instrumental in the establishment of the National Capital Retirement Education Association. This Association coordinated and set standards for all the pre-retirement courses in the region.

Furthermore, advances were made into the Medical School at the University of Ottawa. Seniors began to speak to medical students and sensitize them to the needs and particular circumstances of seniors⁷. Dental care was one of the areas of focus for the Health

⁷ Don Simpson and Marjorie Mann were instrumental in this work.

Issues Committee and much was done to educate dentists regarding the needs of seniors.

In the field of Home Support, the Telephone Assurance Program (TAP) was the first project promoted by the Council. This project required volunteers residing in Homes for the Aged and Nursing Homes to keep in touch on a daily basis with other seniors who were housebound or who lived in isolated areas. Another area of activity related to meal services. The Council worked with a number of community groups to develop, improve and coordinate meal programs and to develop standards of service delivery. A third project, Postal Alert, was organized by the COA with the Letter Carriers' Union where the letter carrier would alert a neighbour if something appeared to be amiss in the home of a registered client. This was an initiative to build supports for isolated seniors and was later taken on by the Senior Citizens' Council.

An important undertaking of the Home Support Committee was to stimulate the growth of home support programs in the region. Community workshops were held and a handbook on how to set up a home support program was developed. Through collaboration between the Health Issues and Home Support Committees a major policy statement on home care entitled: "Home Care/Home Support Services: Proposed Guidelines for Policy and Practice" was developed.

In the field of advocacy, the Economics of Aging Committee was very active. Briefs on pensions, retirement income, and retirement age policy were presented to various levels of government. The Committee also produced a report on the socio-economic situation of single women 55 - 64 years of age.⁸

⁸ Bert Hanmer was responsible for leading this endeavour.

The richness of the volunteers and their variety of skills and background were such that the Council could effect change. Due to the breadth and depth of seniors' involvement, the Council could reach into the far corners of the community. The Nominating Committees actively searched for seniors with specific skills and expertise. "These articulate and experienced seniors were fearless in what they tackled."⁹

2.4 Francophone Concerns

The Council on Aging was always conscious of the needs of the Francophone senior population. Francophones were actively recruited to the Council and they decided not to form a separate Francophone Council but rather participate in Council activities through a Standing Committee, with its Chairman an ex-officio member of the Executive. Members of the Francophone Concerns Committee would participate on each of the other Standing Committees of the Council. This model of a committee liaison that allowed its members to speak in their mother tongue in their own committee was a unique and very successful solution to a situation that continues to be of great importance in Ottawa-Carleton.

The chief concern of Francophones was the lack of availability of services in the French language. A brief to this end was submitted to the Ministry of Health's Task Force on French Language Health Services in 1975.

In 1980, the Francophone Concerns Committee joined with the French Languages Services Committee of the SPC to produce a report entitled "*L'Avenir des services en français aux aînés d'Ottawa-Carleton*". Two of the major recommendations of this report were the development of a Francophone Day Centre for the elderly and the establishment at the Council on Aging of the position of Francophone Coordinator. Both recommendations

⁹ LeConte, Susan (1995) Council on Aging 20th Anniversary.

were implemented. *Le Centre de jour polyvalent des aînés francophones d'Ottawa-Carleton* became the first and only French language Day Centre serving seniors in the region.¹⁰

Through the Francophone Concerns Committee, the Council coordinated the work of community agencies and organizations which provided services to Francophone seniors in order to avoid duplication, help get programs underway, and provide consultation upon request. Some of the projects started by the Council such as WISE, and the Elderhostel Program, were adapted for the Francophone population.

¹⁰ The Council was very proactive in advocating for the Day Centre and co-ordinated a busload of seniors to be present as the case was made to the funders. This was probably the first and only time that the Council became somewhat activist. Yolande Soucie, Sr. Gisèle Richard and Jean-Serge Lauzon were very active volunteers in this effort.

Chapter 3 - A Time of Growth and Expansion (1986-1995)

The era between 1986-1995 was marked by greatly intensified activity arising from new provincial government policies and priorities for the elderly. The provincial government's announcements in "A New Agenda", the White Paper which introduced a new emphasis on community health and social services for Ontario's elderly, included the expansion of community support services, a new emphasis on health promotion and improving the quality of care in residences and nursing homes. Each of these areas required a major effort by the Council to coordinate the views of the elderly and the agencies and governments concerned.

"Taking Charge" and "Taking Care"¹¹ were two themes which continued to provide both continuity and future direction for the Council on Aging. The Council's founding objective was reflected in, and renewed by, the increasing numbers of seniors who were "taking charge" - providing leadership not only within the Council, but in many activities throughout the community.

Creating the services, and supports to "take care" of the growing numbers of the very old and vulnerable elderly, continued to be a priority and one which called for sensitivity, and the vigorous, vital voice of the senior population working in partnership with health and social service professionals. The COA considered itself - and continually strove to become - a vehicle where all, regardless of language, religion or race, could freely express their concerns and needs.

¹¹ "Muggah, Betty, Report of the Executive Director, "Council on Aging Annual Report 1985-1986".

Dr. Margaret Labarge, in reflecting on her years as President (1989-1991), recalls it as a time when the COA was at the peak of its power and influence. There were several reasons for this. First, and probably most important, the Council had stable core funding in place from the province, as well as the region, the city and the United Way. This allowed for sufficient staff to carry the heavy load of work resulting from a number of very active committees. Secondly, although the Board was large, it allowed the Council to have a generous representation of seniors themselves, of professionals involved with the needs of seniors, and a useful number of representatives of the various agencies which provided services to seniors. The amount of activity generated attracted a considerable number of recently retired specialists, who were happy to keep their skills polished for a good cause.

As a sign of the COA's continuing growth and maturity, it found itself more and more called on by various provincial and municipal bodies to respond to projected programs or changes in policy which had a particular effect on seniors.

3.1 Incorporation of the Council on Aging

In 1989 a task force was set up to examine the relationship between the Council on Aging and the Social Planning Council and to suggest changes to the current agreement to more accurately reflect the expanded activities and responsibilities of the Council on Aging. The next year The Council on Aging decided to proceed with the incorporation of the Council as a legal entity in order to enable it to deal more effectively with its growing workload. At the same time, there was recognition of the need for continued, and even enhanced, collaboration and coordination with the SPC, since the concerns and needs of both bodies continually overlapped.

The COA completed a major reorganization when it became formally incorporated as of October 1991 and assumed responsibility and management of its personnel, financial and

material resources in January 1992. By becoming incorporated, the Council on Aging established itself as the main agency within the region responsible for planning and evaluating the needs of a growing senior population and for promoting the development of programs required to meet these needs. At the same time, the Council remained committed to collaborating with other agencies in the promotion of the well-being of residents of all ages within its community.

Many of the COA efforts in the early 1990s were directed toward the development of policies and procedures and the implementation of the various steps involved in legal incorporation. Germain Aubut (COA President 1991-1993) and Denis Henley, Executive Director, worked diligently to ensure a smooth transfer of responsibility for human, financial and physical resources. Following the COA's incorporation, the by-laws were drafted in both official languages to formally establish the 39 member Board of Directors.¹²

1991 was indeed a watershed year. Independence was assured; funding now seemed secure. The committees mushroomed as did the number of projects undertaken. Each year more than two hundred persons would be involved in the work of the Council. By 1994 there were 13 full and part-time staff members. They managed 34 committees and task groups as well as the Board and the projects.

In September of 1994 a Strategic Plan was completed for the Council on Aging. The Mission of the Council had been revisited and the Values and Vision statements were developed along with specific goals and objectives. This document was to guide the Council for the following four years.

¹² This work was done in large part by a Council member, Charles Scott, QC.

3.2 The Establishment of the *Assemblée des affaires francophones*¹³

Since the early days of the Council on Aging, the issue of how best to meet the needs of Francophone seniors within the Council's structure was a challenge. There were always two factions: one in favour of a separate Council for Francophones and the other in favour of being a component of a bilingual Council on Aging with appropriate Francophone representation.

A task force, drawn equally from the membership of the COA and the *Comité des services aux aînés francophones* concentrated on trying to work out a satisfactory structural relationship between the Council and the *Comité* which would enable the Francophone Committee to be satisfied with their ability to meet their own needs, but still find it useful to be part of the larger COA. At the same time, the incorporation of the COA was creating a need to review and develop many new policies and structures.

After lengthy negotiations an *Entente de principe* was signed in January 1992. This was a positive and constructive agreement which sanctioned the principles of close cooperation in specific areas between the two linguistic groups. Under its new mandate the *Comité* was designated as the *Assemblée des affaires francophones (AAF)* and reorganized as an entity responsible for addressing specific concerns of the Francophone population while, at the same time, retaining an overall interest in issues affecting all seniors. In the following year the *AAF* and Council built upon this agreement through the development of a bilingualism policy and application for designation under the French Language Services Act.

¹³ Margaret Labarge, Germain Aubut and Gaëtan Beauregard were instrumental in negotiating the agreement which resulted in the creation of the *Assemblée des affaires francophones*.

3.3 The Planning Environment

Between 1985-1995, there were two different political parties in power. It is important to note that Council activities were greatly influenced as the political masters changed. From the early to mid 1990s there was an unprecedented amount of consultation and involvement as the newly elected government consulted extensively on virtually all seniors' issues. Notwithstanding the ever-changing political and economic climate, the COA remained responsive to the needs and issues of seniors. The COA was flexible and adopted organizational structures to best meet the needs at the time.

The Council continued its liaison and close working relationships with the District Health Council and the Social Planning Council. There were many areas of shared interest and joint planning and activity which resulted in strengthening the community and enriching the network of programs and services for the elderly. In 1988/89 the COA participated with SPC in the preparation of the first United Way sectoral report on seniors.

A couple of years later changes were beginning to reshape the COA's environment and modify the roles and cooperative links established over the years. The DHC had been given new functions and the government was proposing that Multi-Service Agencies (MSAs) be set up in response to the increasing needs of seniors in the community. In this same time period, the COA was given the responsibility to take charge of the Seniors Sector of the Social Services Planning Project (SSPP).

3.4 Accomplishments

The Council on Aging continued to grow and develop as it addressed multiple issues and projects. Significant attention was given to the changes in health and social service policies which included the areas of housing, transportation and issues affected by the economic climate of the day. Creative projects and programs

were developed to improve the quality of life for seniors in the region.

3.4.1 Grants Review

The organization of the Grants Review Committee as a standing committee with an expanded mandate to evaluate applications for funding of programs and services for the elderly was a significant development for the Council on Aging. The Committee provided a formal and thorough process for the review of grant applications and ensured that funding bodies - United Way, City of Ottawa, Regional Municipality of Ottawa-Carleton, and the Ministry of Community and Social Services (MCSS) - received complete and accurate information prior to making decisions regarding new or expanded programs. The Committee promoted a planned approach to funding based on agreed upon objectives.

In the late 1980s most of the meeting time was spent on rearranging the funding streams brought about by the MCSS's 70% flat-line funding of home support projects. By 1992/93 the Grants Review began a process of reviewing and adjusting its mandate as a result of changing expectations and needs. The name of the Committee then changed from the Grants Review to the Program Review Committee. The new mandate became to review and prioritize the proposals for funding presented by the community agencies, with reference to COA priorities based on the needs identified in the community.

As mentioned previously, the COA was given the responsibility for work related to the Seniors' Sector within the context of the Social Services Planning Project. The Program Review Committee was the body within the COA that was given responsibility for the project.¹⁴ Various Council committees participated in this project by providing information and evaluating data from their areas of

¹⁴ The SSPP project was chaired by Charles Hurst.

responsibility. The project evolved into an enormous undertaking and focused the efforts of staff and members of the Council for many months. During the project 1,100 seniors and service providers were interviewed and those interviews took place from Burritts Rapids to Fitzroy-Galetta and Carp to Cumberland.

3.4.2 Advocacy Initiatives

Advocacy was always at the heart of the Council's activities and an important aspect of this activity was the study of a wide range of public policies affecting the senior population. The Council advocated for seniors' rights and services in many varied domains such as economics, housing, transportation, health and social services. At times, specific committees worked on issues within their mandates, while, on other occasions, advocacy was conducted through the Board by forming special task groups or through inter-committee collaboration. Between 1985-1995, the Council on Aging was very active in advocating at all government levels, local, provincial and federal. The success in 1985 of the nationwide protest to the Federal Government over the decision to reduce indexing of the old age pension confirmed the fact that senior citizens could and would be heard.

Advocacy by and on behalf of seniors was the subject of a meeting of major national and provincial seniors organizations held in Hull in 1985. The Council on Aging hosted and organized the meeting on behalf of the "One Voice Network". In the mid-1980s the Council's other advocacy activities concerned telephone rates, the city elections, the regional welfare budget for special assistance, legislation to reform the Canada Pension Plan and private pension plans, provincial legislation on extra-billing by physicians and on the regulation of prescription drugs.

In the mid 1980s the emphasis of the COA and the community was on reducing the "institutionalization rate" of the elderly. The rate was 9% in the region compared to 5% in Europe. The DHC and the COA were instrumental in bringing over Dr. Dall from

Scotland to help in the development of geriatric services in Ottawa. The subsequent introduction of the Regional Geriatric Assessment Program was a great step forward in meeting the needs of seniors.

In addition, the Council was occupied, in conjunction with the District Health Council, in discussions and correspondence with the Ministry of Health on the urgent need for more nursing home beds for the elderly in our region. However, the Council's focus was primarily on people being able to remain in their own homes with the availability of appropriate supports. Fortunately during this time period other positive steps were taken by the Ontario Government by providing additional funding for homemaking services for the frail elderly.

In 1986/87 the Council prepared submissions directed to federal, provincial and local governments on issues as diverse as income tax reform, patent drug legislation, regulation of private pension plans, OC Transpo fares, continuing education programs for seniors offered by Boards of Education and, a couple of years later, the proposed Free Trade Agreement. Briefs were also presented by Council members to the two provincial government committees conducting the Social Assistance Review and the study of amendments to the Nursing Home Act.

The issue that commanded undoubtedly the largest proportion of the Council's time and resources were the government proposals and proposed legislation on Long Term Care. As each provincial party came to power a new document was put forth on how the long term system would be changed. "Strategies for Change" in 1990 required and received a substantial reply by the Council on Aging. Over the next couple of years the COA's response to the "Redirection of Long Term Care (LTC)" required a tremendous pooling of effort, both by personnel and volunteers, in producing a document that reported on the needs and improvements that needed to be considered in the implementation of the new system within the region.

In 1993, a LTC Redirection Task Force was established to include representatives from all committees of the Council and related seniors' agencies. The mandate of the Task Force was to identify key issues in order that the Council could advocate on behalf of seniors and promote the development of comprehensive care for the senior population within the region. The Council then responded to the series of multi-coloured Long Term Care Redirection documents distributed by the provincial government.

The COA also responded to Bill 101 - The Long Term Care Statute Law Amendment Act - which dealt with many issues such as the way that facility care is accessed and funded. A written response was prepared and a presentation made by Sylvia Goldblatt to the Standing Committee on Social Development. Continued vigilance of the outcome of this new legislation led to correspondence with the MOH, a meeting with local politicians and a special meeting with a senior bureaucrat, Geoffery Quirt, who agreed to come to Ottawa to hear the Council's concerns.

In 1995 a submission was made to the Standing Committee on Social Development during public hearings on Bill 173 - An Act Respecting LTC. Responses were also written with respect to draft documents such as those of "Wellness" and "Supportive Housing." A brief was sent to the Federal Minister of Finance concerning the implications for seniors of the 1995 budget and provincial, regional and municipal politicians and agencies received a brief with respect to the need for more accessible taxis in Ottawa-Carleton.

In addition to changes under the LTC Reform, the Council actively participated in responding to revisions of the Ontario Drug Benefit Program, the role of Chronic Care Hospitals and the Mental Health Reform. The Council also studied and commented on Bill 120, The Residents' Rights Bill, which followed from the recommendations of the Lightman Commission report and was written to bring the tenants of care homes under the protection of the Landlord and Tenant Act.

Another important advocacy initiative during this period was the work the Council conducted on the proposed Advocacy Act and its Companion Legislation. The Council struck a special Task Force¹⁵ to study the proposed legislation.¹⁶

In December of 1994, The Special Senate Committee on Euthanasia and Assisted Suicide invited the COA to present a brief to the Committee in early 1995. Their hearings were drawing to a close and they had not heard from a seniors' group. The Council was honoured to be asked and worked over the holiday period to prepare a response.

3.4.3 Home Support

a) Home Support Inventory and Service Development

An important role of the Home Support Committee was in the provision of a common meeting ground for seniors, politicians and service providers to identify gaps in community programs and services and recommend ways that improvements could be made.

In 1986 the Ministry of Community and Social Services approached the COA to request its assistance in planning for more consistent and equitable community-based home support services in Ottawa-Carleton and to produce an inventory of home support services. At that time some communities were receiving services but the groups were informal, sponsorship varied and they served very specific areas. It became the mandate of the COA to work with the providers to ensure that there were no geographic service gaps and fewer gaps in the types of available services. The Home Support Committee was set up to initiate this work.

¹⁵ Charles Scott, QC chaired the Advocacy Task Force.

¹⁶ Please refer to section 4.3.1 for additional information.

Responding to the emphasis being placed on community care for the elderly, the Council expanded its mandate and program to assume responsibility for the development of home support services in Ottawa-Carleton. The Province, the Region and the City of Ottawa agreed to fund this activity. With many areas of the Region lacking a network of home support services, consultation with community groups and planning for the needed programs became a priority. A detailed "Inventory of Community Home Support Services" was published and provided the basis for more extensive planning and development of services. As services became established, the planning, development, and coordination of these services were directed by the Council on Aging's Home Support Committee.

The Home Support Committee responded to the draft report of the Interministerial Committee on Visiting Homemaker Services and was also actively involved in advocacy both provincially and within Ottawa-Carleton, to increase the supply of trained homemakers and to urge new policies for homemaker wage and rate structures.

Through the mid to late 1980s the Committee continued to work with local community groups to establish and expand home support services throughout the region of Ottawa-Carleton. The COA became known as a leader in the development of Home Support services provincially and was called upon by other communities to share its experiences and to provide advice.¹⁷

An updated Home Support Inventory was published for 1990/91 which provided a more comprehensive look at the services available by geographic area through the inclusion of data from other agencies serving seniors. In 1992, in response to the need to assess the impact of changing demographics, hospital restructuring

¹⁷ Betty Muggah and Carol Burrows were very active in this work.

and financial constraints on the community, the Community Support Committee updated and analyzed the 1990/91 Inventory of Home Support and Related Services. Over the next couple of years, the Committee produced a report "Service Requests of Home Support Agencies in Ottawa-Carleton" and then updated and analyzed home support services in the report entitled: "Analysis of Home Support Inventory Data from 1989 to 1993".

b) Seniors' Day Care

In 1988 an inventory of existing Seniors' Day Care programs was conducted after which a Day Care Sub-Committee was formed. The report: "Seniors Day Care Programs in Ottawa-Carleton: Key Issues for Planning" was produced and identified the need for the development and enhancement of seniors' day care programs. True to the Council's mandate, the Day Care Subcommittee remained at the Council for several years until the Council was able to gradually hand over the responsibility to the community under the auspices of what became the Seniors Day Care Providers Association.

c) Multicultural Services

In the latter part of the 1980's the Home Support Committee co-sponsored a workshop with the Multicultural Health Coalition to examine access to home support services for ethno-cultural seniors. A sub-committee was struck which initiated planning of special models for service delivery. Subsequently, a strategy was developed for providing information about existing services to ethno-cultural groups with the goal of assisting them to reach out to these services. Mechanisms to facilitate cross-cultural recruitment of volunteers and paid workers were developed with the assistance of the Ottawa-Carleton Immigrant Services Organization.

A Multicultural Sub-committee was established and was involved as a resource in the development and funding for several community agency initiatives designed to serve ethno-cultural

seniors. In addition, the Committee worked with meals-on-wheels groups to foster the development of service to seniors whose dietary patterns differ from the majority of clients.

By 1990 the Multicultural Committee had become a standing committee of the COA. Its first task was to complete a concise directory of resources useful to ethno-cultural seniors. The Committee received a grant from MCSS to develop a profile of the ethno-cultural communities in the region. This facilitated the investigation of ways in which ethnic groups could be matched up with existing home support agencies.

In 1993 the Multicultural Committee published a set of "Guiding Principles for the Delivery of Community Services to Ethno-cultural Seniors" and by the next year the Multicultural Committee had held its second information exchange with seniors and professionals who work with ethno-cultural groups in the region.

d) Telephone Assurance Program (TAP)

The Telephone Assurance Program continued to evolve. In 1987 a Community Awareness and Development Sub-Committee was established to promote the programs and assist centres in their development. The following year the COA completed a comprehensive evaluation of TAP and coordinated 13 TAP centres active throughout the region. A new TAP Manual was then produced which incorporated recommendations from the evaluation and the TAP Advisory Committee became a sub-committee of the Home Support Committee in 1989 to better reflect the increased involvement of home support agencies in the administration and delivery of the program. Guidelines were established for the smooth transfer of TAP in the event that any of the existing TAP centres felt unable to continue the service. A bilingual brochure was produced and circulated.

Given the increased role that Home Support Agencies were playing in the delivery of the TAP Program, the mandate of the

TAP Advisory Committee was broadened to include a more comprehensive range of programs. The Seniors' Safety and Security Committee was established in 1992 and began its activities by creating an inventory of all seniors' safety and security programs and services within the region. By 1994, the Committee had developed a "Consumer Guide to Personal Emergency Response Systems".

e) Housing¹⁸

In 1990 the Home Support Committee was renamed the Community Support Committee to better reflect its broadened mandate "to develop a continuum of care and to examine holistically the services required to assist seniors in maintaining their independence." This broadened spectrum of interest resulted in requests to respond to such issues as "Regulation of Rest and Retirement Homes," and to participate in the development of a seminar on unmet support needs associated with seniors housing in Ottawa-Carleton. In 1991, the Council on Aging co-sponsored a forum with the Regional Housing Authority and produced a report: "Aging in Place: Needs and Realities."¹⁹ This triggered a new project which dealt with the coordination of services for seniors in Regional Housing Authority buildings. Through the Community Support Committee, the Council on Aging collaborated with community partners and led the Aging in Place Project which resulted in the publication of a "Service Coordination and Tenant Support Model for Seniors."²⁰

¹⁸ Please refer to section 3.4.6 for information on earlier initiatives in the area of housing.

¹⁹ The forum was co-chaired by Sylvia Goldblatt and Jacqueline Holzman.

²⁰ Marian Chapman chaired the Aging in Place project which was a joint venture with the Regional Housing Authority.

By 1993 a Housing Working Group had been established and it began its work by responding to the Ministry of Housing's document entitled: "People-Centred Access - Design and Implementation Options." The Working Group also responded to the Consultation Draft document entitled: "Long-Term Care Division - Supportive Housing Policy." Other issues addressed included: rural aging-in-place, the proposed windows on Technology Centre for Ottawa-Carleton, Private/Public Partnerships with Canada Mortgage and Housing Corporation, Life Leases, Reverse Mortgages and Subsidized Housing.

f) Other Activities

Work was also done by the Community Support Committee in the area of transportation in collaboration with community partners. Formed in 1993, the Transportation Advisory Committee²¹ concentrated on studying ways to make regular transit more accessible to vulnerable senior citizens. Accessible taxis were an issue of concern which captured the Committee's attention. In response to the limited knowledge and understanding of rural transportation problems, the Committee completed a report entitled: "Transportation Implication of Aging-In-Place in Ottawa-Carleton."

Another important on-going issue of the Home Support Committee was the development of a coordinated network of services to support seniors in their homes which included: Home Support Agencies, Resource Centres, Home Care and the Integrated Homemaker Program. Nutrition was another important area and through the work of the Nutritional Services Working Group, a Nutritional Services Inventory for Ottawa-Carleton was developed. The Community Support Services Committee also initiated the organization of the Caregivers Support Interest Group, bringing

²¹ Bert Hanmer consistently provided leadership to the Council in issues dealing with transportation.

together a range of professionals and consumers from community and institutional service sectors and co-sponsored a community conference for caregivers.

3.4.4 Health Issues

During 1985/86, the Health Issues Committee addressed two critical gaps in the care system - services for the frail and increasingly very old elderly who wish to continue living at home, and services for those seniors with a range of mental disabilities. The Committee worked collaboratively with other community agencies and participated in extensive planning and community consultation leading to the development of a proposal for a new homemaker program for the frail elderly to be sponsored by the Ministry of Health. As mentioned previously, this was implemented by the provincial government.

a) Specialized Services

The need for a specialized information and referral system to provide counsel and direction to the elderly and their families was recognized as a major service gap in the community. The "One-Stop Shopping" approach proposed by the provincial government provided an opportunity to address this important concern, and in the fall of 1986 the Council released a discussion paper to spark community dialogue. Later that same year, a Community Steering Committee on "One Stop Shopping" was formed under the joint sponsorship of the Council on Aging and the District Health Council to study the various options and models for coordinating community care services with an emphasis on the "gateway" into the system. In conjunction with key stakeholders in the community, The Council on Aging was given the mandate to prepare a proposal for a pilot project for One-Stop Shopping. In 1989 a study and report with recommendations for establishing a coordinated Information and Referral Service System for seniors in Ottawa-Carleton was completed.

Work on psychogeriatric care and mental health services was also undertaken in conjunction with the District Health Council. In 1987 Council members and staff worked closely with the DHC to complete a comprehensive report on Mental Health Care of the Elderly which presented a wide range of recommendations for community and institutional programs required to the year 2000. Council members and staff also participated with the Regional Health Department's Seniors' Planning Committee to prepare an innovative and challenging five year departmental plan for seniors' programs. This represented an important new direction for the Health Department.

Another joint project with the District Health Council dealt with respite care.²² Current services were evaluated including a survey of caregiver needs and recommendations were made regarding ways to meet the growing respite care needs of the population.

Dental care for seniors also remained a focus for the Committee and a brief was submitted to the provincial task force on dental health care for seniors. In addition, submissions were made to the Provincial Task Force on Use and Provision of Medical Services, as well as a presentation to the Pharmaceutical Inquiry of Ontario.

In 1992/93, recommendations were made by the Committee concerning the Canadian Hearing Society's Senior Outreach Program, the future direction of the Élisabeth Bruyère Health Centre, nursing home beds from the Ottawa Centre Nursing Home, and the hours of training in geriatrics for medical students. In this same period, the Committee made members of the public and elected officials aware of the concerns that seniors had about Bill C-91 - An Act to Amend the Patent Act.

²² Jessie Whyte chaired the Respite Care Task Force which provided a comprehensive analysis of, and direction for, the development of respite care services in the community.

Warm Water Aquatics was yet another issue which was brought to the attention of the Committee. An Aquatic Task Force was established and the Council received a grant from New Horizons to develop a course for seniors to act as peer trainers and to develop promotional materials describing appropriate aquatic programs. In 1988/89 a study and report had been completed on warm water aquatics programs for seniors through consultation with seniors, health and recreation professionals.

Footcare, another priority during this time period, was addressed by the Council in collaboration with the DHC. A forum on footcare was sponsored in 1990 followed by the creation of a Regional Footcare Committee with the mandate to prepare a comprehensive strategy for footcare services in the region.

b) Elder Abuse²³

Elder abuse had been identified as a neglected, poorly understood, and growing problem which warranted special attention. The Council appointed an Ad Hoc Committee to study the issue and provide a focus for education, research and the development of services. A study of the reported incidence of elder abuse was completed. The second phase of activity involving the preparation of education programs directed to elderly, the general public and professionals, and the organization of a community conference followed.

In 1987/88 the Council continued to provide leadership in raising community awareness about the nature and incidence of elder abuse and in identifying strategies for prevention. Special funding was received from the Ottawa-Carleton Community Foundation

²³ Margaret Labarge chaired the original Ad Hoc Committee on Elder Abuse which was then carried on and expanded into a Task Force headed by Tim Hutchinson, and ultimately brought to fruition by Barbara Burns.

and the New Horizons Program for the preparation of educational programs and the organization of a community forum. A report with recommendations followed.

A year later, an Implementation Task Force was established to spearhead the implementation of the recommendations made by the Elder Abuse Ad Hoc Committee in 1987/88. Sub-committees were formed to further investigate issues relating to legal issues, housing options and health and social services. A survey of police services was undertaken. One outcome of this work was on the development of a short "elder friendly" prevention oriented screening tool, to be used by professionals.

Over the years, Elder Abuse remained a concern of the Council and a priority item of the Health Issues Committee. In 1992/93 additional financial resources were required in order to implement the recommendations of the Task Force on Elder Abuse. A timely grant from the Trillium Foundation enabled the Council to build on the years of previous work that it has accomplished in this field. The three areas that the project addressed were the establishment of a 24-hour crisis line, emergency accommodation, and initiatives in the areas of information and education.

c) Medication Awareness Project (MAP)²⁴

The Medication Awareness Program (MAP), a major initiative developed by the Health Issues Committee, was generously funded in 1989 by the Seniors Independence Program (SIP) of Health and Welfare Canada as a separate three year project under the supervision of the Council. Collaborating jointly with the COA was the Academy of Medicine, Regional Geriatric Assessment Program, Regional Health Department, Pharmacists' Association, the Faculty of Medicine and the Senior Citizens' Council. The

²⁴ The Medication Awareness Project was first under the chairmanship of Isabelle Allen and then Dr. Campbell Lamont.

objective of the project was to reduce the inappropriate use of medications by increasing knowledge about medications and promoting a responsible approach to medications taken by seniors. The project began with a community-wide information campaign on the wise use of medications in conjunction with the development of a core of senior peer educators to work with Public Health nurses, pharmacists and physicians in promoting the wise use of medications.

In 1991/92, additional funds were secured from SIP to complete the Medication Monitoring Component which used feedback to physicians and peer volunteers to alter medication use. Plans were also progressing to find sponsoring bodies for the educational components. A Resource Kit was released in June 1992. The Medication Awareness Project helped to heighten the consciousness of both the elderly and those who take care of them to the particular dangers of seniors being over-medicated, or taking incompatible medications.

3.4.5 Francophone Services and Activities

In the mid 1980s the *Comité des services aux aînés francophones* continued to pursue the implementation of recommendations in the updated report, "The Future of French Language Services for Senior Citizens of Ottawa-Carleton." Housing, health, and social services were a particular focus in discussions with regional and provincial officials.

In its determined effort to improve access to Francophone services, the *Comité des services aux aînés francophones* compiled and published an annotated directory of services for Francophone seniors, made possible by a grant from the Office of Francophone Affairs. The *Comité* continued to provide leadership in monitoring and responding to the French Language Services Act to ensure the development of services which are sensitive to the linguistic and cultural needs of the Francophone community.

In this same time period, the *Comité* reviewed many issues and made recommendations on implications for Francophone seniors. The *Comité* initiated meetings regarding the situation of Le Patro and participated in strategic planning for Résidence St-Louis. It studied and made recommendations regarding the role Ottawa's Francophone senior citizens could play in the activities covered in the educational and social plans for the National Gallery of Canada. The *Comité* also worked on the distribution of Francophone nursing home beds.

Work in the area of education became a focus of activity in the late 1980s. Representatives met with University of Ottawa officials to discuss the possibility of offering gerontology courses in French. Following this meeting the *Comité* was requested to submit a program to the University for introduction of gerontology courses in French that relate to the situation of Francophones.²⁵ In addition, the *Comité des services aux aînés francophones* directed the preparation of a Master's level program in gerontology/thanatology for the University of Ottawa and the Université du Québec à Hull.

In 1988/89 the "*Ensemble*" newsletter was produced with funding from the Office of Francophone Affaires. Four newsletters were produced with the following themes: an overview of the profile of Francophone senior citizens in Ottawa-Carleton; social policies; economic considerations; and health problems/essential conditions for quality living. In addition the *Comité* continued to participate in advocacy and planning initiatives of the Council, such as the Mental Health Reform and the LTC Redirection. As mentioned previously, in 1992 with the incorporation of the Council on Aging and the signing of the *Entente de principe*, the

²⁵ Denise Allard and Hélène Dallaire played an important role in this endeavour.

name of the *Comité des services aux aînés francophones* changed to the *Assemblée des affaires francophones*.²⁶

Other activities which spanned the 1985-1995 period included: the organization of a training workshop in French for the coordinators of volunteers who work with Francophone seniors; production and presentation of a report to the DHC on the reduction of services in hospitals of the Ottawa-Carleton region; study on the Ottawa General Hospital financial difficulties and advocacy regarding concerns; and, involvement in the production of a television program for Francophone seniors.

A French-Language Community Support Services Committee was struck in 1992 and assessed the distribution of Francophone seniors in Regional Municipality of Ottawa-Carleton (RMOC). The Sub-Committee reviewed French language home support services, home care, seniors' centres and health promotion programs through consultation with the Francophone community for comments on the level of satisfaction with French-language community support services.

The Francophone Mental Health Committee, worked diligently on implementing the recommendations developed after a consultation held in 1991 on French language mental health services. The committee organized a meeting with community organizations providing mental health promotion programs to develop joint strategies for reaching the Francophone senior population. Collaboration occurred with the Senior Citizens' Council in identifying French-language services to be included in the SCC's 1994 "Directory of Resources for Senior Citizens." The Committee also contributed to the development of a day care program for Francophone seniors with psychiatric and cognitive

²⁶ Please refer to Section 3.2 for additional information.

disorders and worked on the development of a Peer Counseling Project for Francophone seniors.

In 1993/94 the *Assemblée des affaires francophones* acquired a grant from the LTC Division in Ottawa-Carleton (O-C) to undertake a project to initiate new housing options for Francophone seniors in O-C. This work dovetailed with the Council's project entitled: "Aging in Place". The *Assemblée* was very active in advocating for improvements at Home Care, Para-Transpo and Home Support Agencies. A study was also undertaken to determine ways to improve the participation of French-speaking ethno-cultural seniors in activities at Francophone senior centres.

The role of the Professional Services and Volunteer Committee, created in 1993, was to promote the recruitment and training of Francophone and bilingual professionals, as well as Francophone volunteers in health and social services organizations working with seniors. To realize this objective, the Committee compiled a list and defined the nature of the university and college programs that are offered in French in the Ottawa/Hull region. The Committee also surveyed organizations working with seniors in O-C to evaluate difficulties in the recruitment of bilingual professionals and Francophone volunteers.

3.4.6 Economic Concerns

Over the years, the Economics on Aging Committee was instrumental in the development of advocacy initiatives which focused on local, provincial and federal budgets, pension plans, tax reform and, in essence, any type of issue which had economic or financial implications.²⁷

²⁷ Please refer to section 3.4.2 Advocacy Initiatives for more information.

In 1987 the Minister of Finance released the government's proposals for tax reform. The Council and the Senior Citizens' Council prepared a joint brief concerned with the long-term erosion of the incomes of seniors.

In the time period 1987-88, adequate income and housing, which are basic to the health, dignity and autonomy of older persons, were areas of focus. A grant was provided by the Regional Municipality of Ottawa-Carleton (RMOC) and two studies were initiated under the direction of the Economics on Aging Committee. The first was a compilation of an inventory and description of existing and proposed sheltered housing for seniors exclusive of nursing homes and homes for the aged. The second was an analysis and profile of the population aged 55 and over in Ottawa-Carleton using 1986 census data with a special emphasis on the living and housing circumstances of the population. The first "Fact Book on Aging in Ottawa-Carleton"²⁸ was produced and was the first detailed neighbourhood profile of Ottawa-Carleton's older population and provided essential information needed to plan and develop appropriate housing and support services for seniors.

In 1989/90 the Economics of Aging Committee continued to give considerable priority to issues connected with seniors' housing. The last of three reports on housing, a Fact Book entitled: "Selected Socio-Demographic Characteristics of the Older Population in Ottawa-Carleton" was released. The Committee worked jointly with the Community Education Sub-Committee to review the provincial government report on the regulation of residential care facilities and prepared a detailed review of the recommendations. The Council responded to the provincial government report "Rest and Retirement: A Report on the Regulation of Residential Care Facilities" advocating for

²⁸ Jenny Podoluk was instrumental in the development of the Council's first "Fact Book on Aging".

comprehensive government regulations with respect to the standards of care in private residential facilities. Work on the implications on seniors of the proposed Goods and Services Tax was also undertaken by the Committee.

In 1992 a basic document on "Special Banking Services for Seniors" was developed by the Economics of Aging Committee. This material was then used as a basis for newspaper articles and the preparation of a brochure to serve as banking guidelines for seniors. The year 1993/94 brought the final stages to two of the Committee's projects: banking services and work on the Ontario Fair Tax Commission. The brochure "Are You An Older Citizen? Banking Know-How for You" was widely distributed.

3.4.7 Education

The Education Committee, like other COA Committees, evolved over time. In the early years educational initiatives were at the front and fore of the Council's activities. Although education remained important in later years, the COA was broadening its purview in response to many of the changes that were occurring in the area of service development for seniors.

a) Various Programs

Despite this evolution, much was done in the area of education. In 1985, "Are We Prepared?" a study on the status of gerontological and geriatric education in professional and non-professional programs in Ottawa-Carleton was conducted. This was followed by a comprehensive report on "The Realities and Issues of Long Term Care" which was the product of a forum held in 1986. A survey of senior learners in the same year provided valuable information on which to base programming for seniors. Another focus was on the development of outreach programs for seniors residences and nursing homes and the need was reaffirmed for lifelong learning.

Between 1984-86 the Education Committee started to focus on family caregivers and the supports that they require. This resulted in the development of the "You and Your Aging Parent" program which was maintained initially by this committee then divested to a community organization able to support the initiative - the Family Service Centre. This was ground-breaking work and was just at the point when society was beginning to think about issues such as caregiver burden and the fact that most of the caregivers of seniors are seniors themselves.

During 1988/89 a variety of issues were addressed and initiatives implemented. These included a Task Force on legal services and response to the final report of the Advisory Committee on Substitute Decision-making for Mentally Incapable Persons (Fram Report). Time and energy was also spent working with the Public Health Department to develop the Department's Inservice Education Program regarding seniors, as well as involvement in the evaluation of the sexuality module which was developed by the Public Health Nurses.

The next year the issues of importance in the area of education were the establishment of a Resource Centre on Aging; education of service providers; and, legal services for the elderly. The "Guide for Selecting a Long Term Care Facility" was another product of the Education Committee which later came under the responsibility of the Institutional and Long Term Care Committee.

A three-day conference entitled: "Let Seniors Talk!" was organized as a joint activity between the Community Relations Committee and the Education Committee in 1992. The project was funded by the New Horizons Program, Health and Welfare Canada and the conference was attended by over 140 seniors. Concerns and issues were identified and a report prepared and distributed to relevant organizations.

b) Seniors Active and Mobile (SAM)²⁹

Responding to the growing interest in health promotion, and specifically the recognition of the importance of physical activity in maintaining the health of older persons, the Council launched a new community development project in 1987 "Seniors Active and Mobile" (SAM) which received funding and support from the Ontario Ministry of Tourism and Recreation, and the federal government's Fitness and Amateur Sport. This project, under the direction of the Education Committee, involved several hundred seniors and service providers in workshops leading up to a major public forum in 1989 entitled: "Challenging the Barriers." This forum assisted in the development of a comprehensive strategic plan for improving physical activity among older adults of all ages and abilities.

The SAM report on physical activity for seniors, was widely distributed in 1989/90 and an implementation Task Force was formed to promote the implementation of the SAM recommendations by the relevant target groups.

3.4.8 Institutional Long Term Care

From the inception of the Council on Aging there was concern about quality of life issues in nursing homes and homes for the aged. The first real step forward was the LTC Forum held in 1986³⁰ where the Council acknowledged and recognized the needs of both residents and staff. This Forum was followed by a report and a guide was developed for families of those in long term care facilities, helping them to visit, talk with someone with dementia and work with staff.

²⁹ This project was conducted under the chairmanship of Jean Shaw.

³⁰ Please refer also to Section 3.4.7.

In 1992/93, the Institutional Long Term Care Facilities Committee took the lead in the establishment of an inter-committee task force to review Bill 101, the Long Term Care Statute Law Amendment Act.³¹ The Committee also prepared letters of support related to issues affecting the availability of appropriate accommodation for seniors in both LTC Facilities and Chronic Care Hospitals. The "Guide for Selecting a Long Term Care Facility" was revised for national distribution made possible through funding from the Seniors' Secretariat.³²

In 1993/94 to more accurately reflect the revised and expanded mandate of the committee, its name was changed to the Residential and LTC Facilities Committee. The Committee continued to monitor LTC Reform and changes in legislation affecting seniors living in LTC Facilities in the region. A survey was subsequently conducted to determine the extent of cuts in nursing services due to the implementation of the "levels of care" funding as presented in Bill 101. The Committee continued to collaborate in COA advocacy initiatives which fell within its mandate.

3.4.9 Recreation and Leisure

In 1988 a standing committee on Recreation and Leisure was established to assist the City of Ottawa and other regional municipalities identify planning needs with respect to community recreational programming and facilities for seniors. The Committee also examined and advised municipalities, upon request, concerning major capital projects related to seniors' recreation use whenever municipal funding was being sought. This occurred in conjunction with the City of Ottawa passing its

³¹ Please refer to section 3.4.2 Advocacy Initiatives for more information.

³² This work had previously come under the purview of the Education Committee.

“Seniors Policy” which recognized the Council on Aging as a planning resource. A resource manual, based on seniors recreation programs and demographics in the City of Ottawa wards, was assembled and the various projects were reviewed.

In 1989 the Committee, on behalf of the COA, presented a brief to the Standing Committee on General Government supporting the demand for the allocation of unspent lottery funds toward meeting recreational needs. In 1992 the Committee conducted a pilot project in conjunction with tenants at 800 St. Laurent Boulevard to identify isolated seniors and encourage the development of leisure opportunities for them. And, in 1993, a grant was received from the New Horizons Program to sponsor the “Joy of Leisure Project” at the Great Maturity Show in collaboration with the Senior Citizens Council.

3.4.10 20th Anniversary Celebration

From 1985 to 1995, the second ten-year period, the Council on Aging had been under the leadership of Fred Price (1985-1987), Sr. Gisèle Richard (1987-1989), Margaret Wade Labarge (1989-1991), Germain Aubut (1991-1993), Sylvia Goldblatt (1993-1995) and Marian Chapman (1995-1997) with Sue LeConte (1981-1986), Betty Muggah (1986-1988), and Denis Henley (1988-1996) as Executive Directors. For the Anniversary Celebration, former Presidents and Executive Directors gathered to share their memories.

It is ironic, in retrospect, to realize that the dramatic change in the environment and the challenges that the Council would face coincided with the celebration in June 1995 of twenty years of success. The Council was rightly proud of its accomplishments and of the work of so many seniors, their colleagues in the health and social service fields and other interested persons in the community. The following few years would find the Council, unexpectedly, struggling for its very survival.

Chapter 4 - Fiscal Constraints and Streamlined Operations (1996-2000)

In June of 1995 the Council had been anticipating a change in government and in the political climate. This change came quickly in 1996 in the form of numerous government initiatives, both in legislation and in drastic fiscal restraints. In particular, the effect of funding cuts on the COA was immediate and traumatic. However, the Council rose to the challenge of responding to these changes while continuing its work.

The seniors of Ottawa-Carleton, in the course of 1996, faced enormous changes in the health and social services on which they depended. A change in government had occurred and a new vision for the planning of seniors’ services was unfolding. These changes came at a time when the Council itself was reorganizing and repositioning itself in the light of drastic funding cuts.

By 1999 significant changes in the social and political environment, such as the decrease in subsidies to public agencies and the reorganization of the regional health care system meant that the COA needed to reflect on its role within the current context and establish new partnerships. This was a difficult time for the COA. A workshop entitled: “Taking Your Organizational Pulse” was held in the fall of 1999 to look at its role, what had already been accomplished, evaluate current activities and look at other possibilities for a viable role that the COA could play within the current context.

4.1 Funding Cuts

The first change came in 1996, when the COA’s planning function was eliminated and with it cuts to the funding which had supported that work. The funding from the RMOC was dependent on a contribution from the province. Consequently, when the province decided that the DHCs would be responsible for both the health

and social service planning for seniors, the RMOC discontinued their funding to the Council immediately. The reduction from the province was to occur the following year to coincide with the implementation of Bill 173 - The Long Term Care Act. The City of Ottawa then followed suit by reducing the Council's funding by 5%.

This was a very difficult time for the COA as it struggled to maintain its commitment to the community, yet with decreased resources it was unable to maintain the level of activity which had become expected of it. This same problem was faced by many organizations in the health and social service sectors at this time.

4.2 Council Realignment³³

The loss of MOH funding demanded drastic action. The offer by Michel Bilodeau, CEO of the Sisters of Charity of Ottawa Health Service (SCOHS), to move to the Élisabeth Bruyère Pavilion was both opportune and most welcome. With the permission of the landlord to break the lease, and with the financial support of the LTC Division of the MOH and the RMOC, the move was made possible. With the funding cuts, the Council's staff was reduced by three positions³⁴ - a very difficult and disheartening situation.

The challenge necessitated by reduced funding and less staff was the maintenance of the effectiveness of the Council on Aging. Over the summer of 1996, task groups were established to address areas critical to the Council. Overwhelming support for the continuation of the Council's work came from the community. Discussions with the Senior Citizens' Council were also

³³ Marian Chapman (President from 1995-1997) led the Council through this very challenging period.

³⁴ This represented a significant decrease in the Council's professional staff.

undertaken to explore options for the most effective form of partnership between the two organizations.

A Board retreat was held to deal with the issue of the structure of the Council itself. It was felt that the COA did not have the staff to manage the large Board and the number of committees that had evolved over the years. It was decided that the size of the Board should be reduced to 15-17 persons, one half of whom would be seniors, that seniors were to be defined as persons 55 years and over, and that 20% of the Board should be Francophone persons. In addition, a broad membership in the Council was developed. Standing Committees were disbanded to be replaced by time-limited work groups and task forces. In order to remain responsive to the needs of constituents, forums would be convened at regular intervals. Only those projects which were self-sustainable with assured funding would be undertaken. Such projects were to be consistent with the Vision and Mission of the Council on Aging. Thus, the direction of the Council was set for the next five years.

As previously noted, changes occurred in that the Ministry of Health (MOH) now funded the Champlain DHC for work previously conducted by the COA. As a way to compensate for this loss, the DHC then contracted the COA to continue to produce documents such as the Home Support Inventory. This both built on the COA's past expertise and prevented further staff reductions.

In 1998 an emphasis was placed on fundraising in an effort to gain revenues to offset the previous funding cuts. The Board and staff responded to the challenge by developing a Fundraising Plan and by creating an Endowment Fund within the Community Foundation of Ottawa-Carleton. The intent in creating the Endowment fund is to make the Council less dependent, in the long term, on uncertain government funding. The "Friends of the COA" was established as a group of persons committing themselves to contribute \$1000 over a lifetime in support of the COA.

4.3 Accomplishments

With the new provincial government coming into power in 1995, true to form, it felt it necessary to make its mark in the reorganization of long term care. This time, however, there was limited consultation and changes were imposed rapidly.

4.3.1 Advocacy Initiatives

In 1996 the COA presented a brief to the Standing Committee on the Administration of Justice on Bill 19 - The Advocacy Act and its companion legislation, The Consent to Treatment Act and The Substitute Decisions Act. This brief was written in collaboration with several agencies concerned with the impact of this Bill on the lives of vulnerable adults and on the agencies serving this group. This work also resulted in a presentation to the Standing Committee on the Administration of Justice. Other advocacy initiatives included letters written to provincial ministries regarding the Ontario Drug Benefit Program, Hospital Restructuring and Reinvestment Strategies, and the Community Care Access Centres (CCACs). The COA also responded to the proposed changes to the Ontario Building Code - "Back to Basics", the sale of Social Housing stock, and the decrease in transportation services, in particular the decreased availability of accessible taxis in the region.

In response to the proposed reform of the Federal pension system, a document entitled: "A Sustainable System of Economic Security for Older Canadians"³⁵ was developed. The COA was also directly involved in the consultations and many committees concerning the Health System Reconfiguration Project of the DHC.

³⁵ Peter Cornell led the COA in many economic initiatives including the analysis of Canada's system for the economic security of older Canadians.

1999 was the International Year of Older Persons (IYOP) and the Council on Aging participated, beginning with the official launch at Regional Headquarters in Ottawa. David Bernhardt (President, 1998-2000) participated in national celebrations during the year and many activities at the Regional Municipality of Ottawa-Carleton. As part of the IYOP, the Council held several forums at RMOC, organized a Francophone lecture series and printed several special issues of the Council's Newsletter, "The Guidepost".

As a follow-up to the presentation made in 1995 to the Senate Committee on Euthanasia and Assisted Suicide, the Council was again requested to make representation to the Committee. The purpose of the Senate Committee's work at this time was to determine whether any changes had been made due to the recommendations from their previous study of the issue. This time the COA was asked to address the issue of Advance Directives.

4.3.2 Board, *Assemblée* and Committee Work

As stated previously, from the mid-1990s, the Council on Aging experienced a turbulent time. Despite staff cuts and relocation, the Council continued to evolve and was able to complete multiple projects on a variety of seniors' issues and concerns. Between 1996 and 2000 the Council was led by Marian Chapman (1995-1997), Georges Latour (1997-1998) and David Bernhardt (1998-2000) with Margaret George (1996-1997), Jean-Serge Lauzon (1997-1998), Yvon Cloutier (1998-1999) and Alex Cullen (1999-2000) as Executive Director.

a) Council Committees

During 1995/96 the Recreation and Leisure Committee evolved into the Healthy Lifestyles Committee. The Committee completed two important initiatives. It developed a "Discover Your Pleasure in Leisure" brochure and produced a Fact sheet entitled: "Ottawa-Carleton Seniors Speak Out on Recreation and Leisure."

In this same time period, the Health Issues Committee amalgamated with the Residential and Long Term Care Facilities Committee in response to the need for streamlined Council operations. The Committee kept abreast of the classification systems used in the chronic and long term care sectors and studied the Health System Reconfiguration Project, forwarding recommendations onto the Board. A Geriatric Mental Health Working Group³⁶ was established and set to work on finalizing a booklet on Geriatric Mental Health Services and developing a listing of educational materials and courses in geriatric mental health. The Working Group also revised materials previously developed by the Committee on the elderly and mental illness to be incorporated into the Canadian Mental Health Association's Frontline Trainers' Manual.

Other initiatives included the development of a revised version of the "Guide for Selecting a LTC Facility" which was to be used in TV Ontario's Distance Learning Program. Work on the "Guide for Selecting a Retirement Residence" began and was completed the next year. The Committee was also active in forwarding recommendations to the Board regarding changes to the Ontario Drug Benefit Program and participated in meetings regarding the packaging of generic drugs. Involvement in the development of a Seniors Substance Abuse Prevention and Treatment Network In Ottawa-Carleton was conducted in collaboration with the Health Department, the Lifestyles Enrichment for Senior Adults Program and other community partners.

³⁶ Beatrice Wickett-Nesbitt was key in the COA's activities dealing with mental health issues.

b) Projects

In 1996 two major projects were completed. The first, "Elder Abuse", and the second, "Aging in Place". Consistent with Council operations, several aspects of the Elder Abuse project developed in partnership with community organizations were then taken on by them as part of their operations. This included a shelter for abused seniors, a speakers' bureau, and a crisis telephone line. The "Aging in Place" project was in its final phase. The implementation of the model developed during the earlier COA project was under the direction of the Regional Housing Authority and its funding had come to an end.

In 1997/98, due to funding from Merck Frosst, Healthy Activity training was offered to senior fitness instructors and to those who work with the frail elderly. The Ontario Residential Care Association funded the publication of the COA "Guide for Selecting a Retirement Residence." The Regional Sexual Assault Treatment Program funded the Council to provide outreach activities to seniors on its services. In partnership with the DHC the COA held a workshop for Friendly Visitors and produced a "Welcome to Friendly Visiting: A Resource Guide for Friendly Visiting Programs." Also, in partnership with the DHC, the Council produced inventories on the community services sector and the day care sector. The on-going support of the Trillium Foundation of Ontario continued the work of the "*Vieillir chez soi*" Project (Aging-in-Place) at 160 Charlotte St.³⁷

In addition, new funding from Trillium enabled the COA to undertake a project directed at developing the self-advocacy skills

³⁷ The original "Aging in Place" study had included as one of its research sites the seniors' building at 160 Charlotte St. The AAF had successfully obtained financing to continue the work "*Vieillir chez soi*" in the provision of services to meet the needs of seniors in that residence.

of seniors and the creation of a Web Page. This work was done in partnership with the Disabled Persons Community Resources.

By the fall of 1999, numerous projects were underway. "Improving the Quality of Life of Canadian Seniors" was a Health Canada project conducted in cooperation with the University of Toronto. The "Elder Abuse: Community Response Network Project", funded by the United Way, was a project to organize a coalition of organizations and service providers to work together to better deliver services to seniors who have been abused. "The Community Support Services Inventory", a Champlain DHC funded project was expanded from its traditional Ottawa-Carleton area to include Renfrew, Prescott-Russell, Stormont-Dundas-Glengarry counties, that now form part of the Champlain DHC's catchment area. Finally, an updated and revised "Fact Book on Aging"³⁸ was produced and well received.

c) Conferences and Forums

The Councils on Aging Network of Ontario (CANO) elected its first Board in May 1997 at a conference hosted by the COA. For a number of years the Council on Aging had taken a very active role in the establishment of CANO as a strong and effective voice for seniors.

The Multicultural Committee organized two community consultation meetings at which service providers helped identify how sensitivity in the delivery of services could be improved and how acceptance of services by consumers could be ameliorated.

³⁸ Hubert Frenken provided the expertise and analysis for the updated publication.

A conference entitled: "Making it Work - Hospital to Home"³⁹ was held in April, 1998 due to funding received from The Older Women's Network. This conference brought together seniors, family caregivers, discharge planners and health/social care professionals to develop strategies to address the issues around the transfer of care between the hospital and the community. Based on the results of the conference, the publication: "In and Out of Hospital - Seniors' Guide for Your Stay in Hospital and Return Home" was produced and distributed in 2000. This publication was enthusiastically received across Canada.

Community forums on home care and on the regulation of retirement residences underlined that these issues must be considered as part of a continuum, that they must be part of a more holistic, comprehensive strategy for seniors' services and cannot be treated in isolation from the larger context within which seniors live. This prompted the Council to begin examining these challenges, initially through the publication of a discussion paper: "Opportunities for Planning in Ottawa-Carleton."

d) *Assemblée des affaires francophones*

In 1997 the AAF was very involved in the planning and organizing of the first COA community forum which took place in October 1997. The AAF also participated in certain COA projects such as the Friendly Visiting project, the Sexual Abuse awareness project, the Discharge Planning Conference and the Aging-in-Place project. A conference was held with the Francophone community under the theme "*Les aînés au service des aînés: comment aider les personnes âgées isolées.*"

In 1999/2000 the *Assemblée* held three public lectures which provided the occasion for reflection on the role of Francophone

³⁹ A COA Task Force had been established to oversee the project under the chairmanship of Ada McEwen.

seniors within society and the various implications. A community forum on the delivery and coordination of municipal services in French in the new amalgamated City of Ottawa was also held. The AAF continued the "*Vieillir chez soi*" project, as previously mentioned, at 160 Charlotte St. and the training of peer counselors which had been an on-going project of the Assemblée was transferred to *Service d'entraide communautaire pour les aînés francophones d'Ottawa-Carleton*. The AAF also acquired a grant from the Ministry of Culture, Tourism and Recreation to oversee a project of recreational activities for ethno-cultural seniors.

Chapter 5 - The Council on Aging in the 21st Century

The Council on Aging will be needed more than ever as we proceed into the 21st century. The aging of the population combined with recent developments in health services restructuring and municipal amalgamation pose significant challenges for planners, funders and, most importantly, for seniors themselves. Seniors will need a strong voice to speak out on their issues, to the public and to government at all levels. Without organizations such as the Council on Aging, seniors' views would not be heard.

As we face these very challenging times, continued participation of seniors and members of the community in COA activities is crucial. The realities with which we are now faced present both opportunities and challenges which the Council on Aging believes are still best met by consumers, community leaders, government officials and service providers working cooperatively to search for solutions and translating these into effective action.

One of the great strengths of the Council on Aging comes from the fact that it is led and directed by seniors supported by a capable staff. There is a collegiality between volunteers and staff which makes it easy to express opinions, solve problems and share responsibilities. This is unique and has remained the mainstay of the Council's operations since its beginning. The Council on Aging has greatly benefitted from the knowledge, expertise and time generously provided by its many volunteers.

"Over the past 25 years, the Council on Aging has adapted and remained responsive to community needs within the context of an ever-changing wider environment. It has broadened its scope and reputation by reorganizing to cope with changing requirements, introducing more sophisticated equipment and methodology, and continuing negotiations for adequate funding to meet growing demands for its advice and opinions. The Board and volunteer

committees and project task forces are still of the highest caliber, and are in demand for public speaking and official involvement with other organizations. The Council may truly celebrate its Silver Anniversary with pride in its past and faith in its future, and with deepest thanks to the thousands of volunteers and contributors on whom it depends.”⁴⁰

⁴⁰ Notes from Dorothy Milligan.

Appendix A - COA Highlights

1975-1976

- ❖ Council on Aging of Ottawa-Carleton established
- ❖ Appointment of Margery Boyce as first coordinator
- ❖ Election of first 25 members of Council
- ❖ First Elderly Persons Centre grant from the Province

1976-1977

- ❖ Funding from the City of Ottawa and the Regional Municipality of Ottawa-Carleton

1977-1978

- ❖ United Way funding commences
- ❖ COA sponsorship of the Telephone Reassurance Program (later TAP) begins

1978-1979

- ❖ Provincial grant to develop meal services for seniors in Ottawa received
- ❖ The “Seniors in School” Program
- ❖ The Seniors Learners Lecture Series and the Senior Resource Centres at the Universities

1980-1981

- ❖ Report with SPC of *L’avenir de service en français aux aînés*
- ❖ Provincial EPC Francophone funding begins
- ❖ Coordinator becomes (Executive) Director

1981-1982

- ❖ Employment of first full-time Francophone Coordinator
- ❖ Move to King Edward Street, staff have private offices for the first time, first full-time secretary
- ❖ First newsletter

1982-1983

- ❖ Approval of proposal for a reconstituted COA with a clarified and enlarged mandate

1984-1985

- ❖ 10th anniversary celebration dinner at the National Arts Centre

1985-1986

- ❖ First Bilingualism Policy established

1986-1987

- ❖ Publication of first *Inventory of Home Support Services*
- ❖ Elder Abuse becomes an area of interest and committee established
- ❖ Grants Review Committee established

1987-1988

- ❖ Seniors Active & Mobile (SAM) project launched
- ❖ Publication of *An Annotated Directory of Services for Francophone Seniors in Ottawa-Carleton*

1988-1989

- ❖ Publication of *Directory of Housing & Residences for Seniors in Ottawa-Carleton*
- ❖ Publication of *Fact Book on Aging*

1989-1990

- ❖ SPC Sectoral report on Seniors for United Way
- ❖ Designation as a bilingual agency
- ❖ Funding received for Medication Awareness Project (MAP) for 3 years
- ❖ Publication of SAM Report
- ❖ Publication of *Telephone Assurance Program Manual*
- ❖ Establishment of the Multicultural Committee

1990-1991

- ❖ Forum: "Aging in Place: Needs and Realities in Ottawa-Carleton" from which developed the "Aging in Place" Project
- ❖ Publication of *Guide to Selecting a Long Term Care Facility*

1991-1992

- ❖ Incorporation of the Council on Aging
- ❖ *Assemblée des affaires francophones* established
- ❖ Publication of *MAP Resource Kit*
- ❖ Move to new and separate quarters at 256 King Edward Avenue

1992-1993

- ❖ Brochure on *Banking Services for Seniors*
- ❖ Forum "Let Seniors Talk"
- ❖ Charitable, non-profit status received
- ❖ Second Bilingualism Policy established

1993-1994

- ❖ Ongoing reports on long term care reform
- ❖ Trillium funding received for the "Elder Abuse" project

1994-1995

- ❖ Strategic Planning to set the course for the future
- ❖ "Social Services Planning Project - Seniors' Sector"
- ❖ Brief to Special Senate Committee on Euthanasia & Assisted Suicide
- ❖ Brief on Accessible Taxis
- ❖ 20th Anniversary of COA

1995-1996

- ❖ Significant provincial & RMOC funding cuts
- ❖ Loss of planning function
- ❖ Council public fund-raising commenced
- ❖ Brief *A Sustainable System of Economic Security for Older Canadians*

1996-1997

- ❖ Restructuring of the Council on Aging including a reduction in the size of the Board of Directors and the establishment of memberships
- ❖ Friends of the COA designation established
- ❖ Move to the Élisabeth Bruyère Pavilion

1997-1998

- ❖ Publication of *Guide for Selecting a Retirement Residence*
- ❖ Forum "Making it Work - Hospital to Home"
- ❖ Counseling *Entrepairs - les aînés aux service des aînés*

1998-1999

- ❖ International "Year of the Older Person" activities
- ❖ Reorganization with move to self-sustainable projects and contract staff

1999-2000

- ❖ Publication of *Fact Book on Aging*
- ❖ Publication of *In and Out of Hospital - A Senior's Guide for Your Stay in Hospital and Return Home*
- ❖ Community forums on Home Care and on the Regulation of Retirement Residences
- ❖ Report to Senate Committee on Advance Directives
- ❖ 25th Anniversary celebrations at City Hall and at the Ottawa Congress Centre

Appendix B - Council on Aging Presidents

1. George Jackson, 1975-1978

George Jackson, the first COA President, had recently retired from the Public Service of Canada where he had been Director of Organization, Classification and Salary Scheduling. He was also an amateur actor and musician.

2. Marjorie Mann, 1978-1980

Marjorie Mann had been head of the English Dept. at Laurentian High School, and a President of the Senior Citizens Council. Marjorie was active in the United Way and with other community groups and led a campaign ("Laughter Does Matter") to increase laughter in the lives of Ottawa's seniors.

3. Don W. Simpson, 1980-1982

Don Simpson was a retired educator who had been the Administrator of the Federal native school system. He was an active participant in the Elderhostel program and helped to get the local universities involved with the COA.

4. John J.O. Moore, 1982-1985

John Moore had been an academic and administrator at the University of Missouri and McGill University (Director of the McGill School of Social Work). He guided the Council through the development of a new organization, new guidelines and more involvement with all levels of government.

5. Fred W. Price, 1985-1987

Fred Price had been a senior consultant for the Canadian Dept. of Health and Welfare. He had been active with the United Way and President of Maison Fraternité.

6. Gisèle Richard, 1987-1989

Soeur Gisèle Richard (the first non-senior COA president and the first Francophone president) was a teacher in arts and communications. She had been involved with the Centre de jour polyvalent des aînés francophones and had served as the chair of the Comité des services aux aînés francophones.

7. Margaret Wade Labarge, 1989-1991

Margaret Labarge is a distinguished medieval historian and Adjunct professor of history at Carleton University. She is the author of a number of books on medieval history. She entered the work of the Council as Chair of the Elder Abuse Committee.

8. Germain Aubut, 1991-1993

Germain Aubut was an administrator in the Federal Public Service where for ten years he was Director of the New Horizons Program. Volunteer community work included serving on the Board and as President of the Service d'entraide communautaire.

9. Sylvia Goldblatt, 1993-1995

Sylvia Goldblatt worked with Canada Mortgage and Housing Corporation with a major focus on housing for elderly and disabled people. Her other volunteer work included the Sandy Hill Health Centre and Hillel Lodge.

10. Marian Chapman, 1995-1997

Marian Chapman had a background in research and teaching. Her involvement with the Council arose from her years of caring for elderly members of her extended family. Following her presidency she has continued to be involved with community groups working to advance the quality of life of seniors in the Ottawa area.

11. Georges Latour, 1997-1998

Georges Latour was a social worker who was employed in a number of departments of the Federal Public Service. He became involved with the Council on Aging as President of l'Assemblée des affaires francophones.

12. David K. Bernhardt, 1998-2000

David Bernhardt was a Professor of Psychology at Carleton University. Before joining the Council on Aging he had spent a number of years on the Boards of the Good Companions Seniors Centre, the United Way, the Association of United Way Agencies and the Social Planning Council.

Appendix C – Presidents and Executive Directors

Council on Aging Presidents

1975 - 1978	George Jackson
1978 - 1980	Marjorie Mann
1980 - 1982	Don W. Simpson
1982 - 1985	Dr. John J. O. Moore
1985 - 1987	Fred W. Price
1987 - 1989	Soeur Gisèle Richard
1989 - 1991	Margaret Wade Labarge
1991 - 1993	Germain Aubut
1993 - 1995	Sylvia Goldblatt
1995 - 1997	Marian Chapman
1997 - 1998	Georges Latour
1998 - 2000	David K. Bernhardt

Présidents de l'Assemblée des affaires francophones

1991 - 1993	Diets Habets
1993 - 1993	Estelle Huneault
1994 - 1994	Germain Aubut (Interim)
1994 - 1997	Georges Latour
1997 - 1998	Jean-Marc Trépanier
1998 - 1999	Diets Habets
1999 - 2000	Jean-Marc Trépanier

Council on Aging Executive Directors

1975 - 1981	Marjorie Boyce
1981 - 1986	Sue LeConte
1986 - 1988	Betty Muggah
1988 - 1996	Denis Henley
1996 - 1997	Margaret George (Acting)
1997 - 1998	Jean-Serge Lauzon
1998 - 1999	Yvon Cloutier
1999 - 2000	Alex Cullen

Appendix D - Honorary Members in the Year 2000

Honorary members of the Council on Aging are members of the Council who have served at least two terms as a Director and also as an Officer and/or Committee Chairperson and who have made an exceptional contribution to the work of the Council.

Lucio Appolloni	Bert Hanmer	Sr. Gisèle Richard
Germain Aubut	Charles Hurst	Marion Routledge
David Bernhardt	Arthur Irwin	Don Saxon
Francine Boutet	Margaret Labarge	Charles Scott
Anne Burns	Campbell Lamont	Ginette Séguin-Roberge
Barbara Burns	Georges Latour	Dorothy Senior
Ruth Campbell	Ada McEwen	Jean Shaw
Marian Chapman	Jessie McPherson	Don Simpson
Peter Cornell	Dorothy Milligan	Jessie Whyte
Don Evans	Sr. Gilberte Paquette	Bea Wickett-Nesbitt
Pearl Greenberg	Jenny Podoluk	

Appendix E - Margaret Griffiths Award

Following her retirement from the McGill School of Social Work Margaret Griffiths became actively involved in many organizations concerned with the health and welfare of seniors in Ottawa. These included the Good Companions Seniors Centre, the Glebe Centre, the District Health Council and the Council on Aging. The Margaret Griffiths Award was established by the Council on Aging to recognize Margaret Griffiths' outstanding contribution in the volunteer field. The award is presented annually to a senior volunteer who has contributed substantially to the betterment of the quality of life of seniors in Ottawa.

Awards have been given to the following seniors who made an outstanding contribution to the Council on Aging:

1994	Bert Hanmer
1995	Margaret Labarge
1996	Sylvia Goldblatt
1997	Jessie Whyte
1998	Germain Aubut
1999	Charles Hurst
2000	Marion Routledge

Appendix F - Council on Aging Staff, 1975-2000⁴¹

Professional Staff

Margery Boyce, Yvon Cloutier, Alex Cullen, Margaret George, Denis Henley, Jean-Serge Lauzon, Sue Le Conte, Betty Muggah.

Sylvie Anderson, Huguette Bernier, Carol Burrows, Francine Brunet-Bérubé, Ellen Caplan, Tara Cogan, Christine Dawson, David Gibson, Danielle Lalonde, Claudette Légaré, Cal Martel, Rachel Ouellette, Robert Prasow, Jean-Luc Racine, Norma Strachan, Sonia Théberge, Diane Vist.

Support Staff

Lise-Michèle Bouchard, Marielle D'Aoust, Sandra Dutrisac, Gay Firth, Jeannine Lavigne, Ann Pepper, Francine Poudrette-Cowley, Diane Prasow, Annette Vander Haeghe, Pierrette Villeneuve, Andrienne Zarzosa.

Contract and Project Staff:

Stephanie Amos, Cathy Austin, Gwen Barton, Barbara Burns, Solange Claude, Jean Coolican, Paul Cormier, Christine Davis, Jacqueline De Bruyn, Margaret Denton, Cathy Dunne, Sandra Dutrisac, Mark Farren, Antoinette Gagné, Roch Gaudet, Judy Gerencser, Nancy Gnaedinger, Linda Hayward, Alison Hunter, Tom Jones, Hilary Kemsley, Victoria Larsen, Lydia Lawless, Ian Marriott, Jacynthe Mayer, Michael McCulloch, Rachelle Meloche, Sandy Miller, Janepher Moss, Grazynka Shaarani, Ingrid Shantz, Joanna Sirois, David Waite.

⁴¹ Our apologies if any names have been inadvertently omitted.

Appendix G - Abbreviations

<i>AAF</i>	<i>Assemblée des affaires francophones</i>
COA	Council on Aging
EPC	Elderly Persons Centre
LTC	Long Term Care
MCSS	Ministry of Community and Social Services
MSA	Multi Service Agency
O-C	Ottawa-Carleton
RMOC	Regional Municipality of Ottawa-Carleton
SCC	Senior Citizens' Council
SIP	Seniors Independence Program
SPC	Social Planning Council
SSPP	Social Services Planning Project