



RTOERO Response to 2021 Manitoba Budget Consultation



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On behalf of RTOERO, we are pleased to submit this feedback to help inform the 2021 Manitoba provincial budget.

Since 1968, RTOERO has been a voice for teachers, school and board administrators, educational support staff and college and university faculty in their retirement. Our mission is to improve the lives of our members and seniors.

The issues we describe here are of prime importance to our 81,000+ members. They have been for some time, and resonate even more during what has been a challenging period for health care in general and many seniors in particular.

In listing our 15 priorities, we note that many in some way tie into the spending priorities the Government of Manitoba queried about in an [online budget survey](#). These include:

- improving the health care system
- providing financial support for people and businesses affected by COVID-19
- investing in infrastructure, such as roads, bridges and water/wastewater treatment plants
- improving care in long-term care facilities
- providing more resources for seniors to “age in place”
- investing in infrastructure, such as bridges and roads

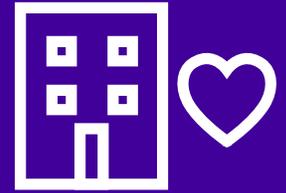


A. Geriatric Health Care

Today Canadians age 65 or older account for 17% of the population. Statistics Canada predicts this will rise to 20% — one-in-five Canadians — by 2024. Manitoba had more than 200,000 people in this group in the last census. The numbers will only increase as the younger Baby Boomers turn 65.

COVID-19 is a backdrop for any discussions about geriatric health care. The pandemic has been a huge test of Canada's health care system overall. Sadly, the system disappointed despite the heroic efforts of many dedicated health care professionals. This cannot continue. Nor can fragmented, siloed or patchwork solutions. It's time for a health care system overhaul, and for a fresh look at how it serves our older population.

1. Long-Term Care



During COVID-19, the health care system has failed one of Canada's most vulnerable populations — residents of long-term care homes. These homes have been understaffed, understocked, unprepared, under-protected and under-serviced. Their personnel have been underpaid and under-skilled. The deaths rates from COVID have been especially high in privately-owned institutions.

Now, the tragedy in long-term-care is only accelerating during this current wave of the pandemic, looking at the number of homes in outbreak, active resident and staff cases, and deaths.

Manitoba has experienced more than 1,400 cases and 175 deaths linked to outbreaks at personal care homes and assisted living centres. Just days ago, the Manitoba government announced it will implement all 17 recommendations in the external review of Maples Long Term Care Home, where 74 staff and 157 residents tested positive for COVID-19, with 56 deaths linked to the outbreak. As the government said, there is more work to be done to prevent these same issues from occurring at other sites.

Across the country, the conditions that have allowed such outcomes have been presented to governments again and again. Manitoba's Health and Seniors Care Minister, Heather Stefanson, has said: "We know there is work to do to upgrade our facilities to support the care needs of personal care home residents. This has been an ongoing problem for decades."

If the same number of people who have died in long-term care had died in day care, the institutions would have shut down. The government responses would likely have been very different. Indifference or inaction is a reflection of ageism at its worst.

Along with a public inquiry into the long-term care situation we've experienced with COVID-19, we call for:

- immediate steps to improve conditions and inspections in long-term care homes;
- funding for more permanent staff in long-term care residences;
- limiting staff to working in only one nursing home;
- increasing wages, job security and benefits for staff (especially sick leave);
- support for a national plan for long-term care homes, with national standards and processes for robust accountability; and
- a transition to an entirely not-for-profit long-term care home model.

2. Universal Pharmacare



The province has a pharmacare drug benefit program for eligible Manitobans whose income is seriously affected by high prescription drug costs. That's helpful – but not enough.

Canada needs a national Pharmacare program that ensures access to medications and treatments essential to well-being and health. We are the only developed country in the world that has a universal health-care plan with no universal drug coverage. We consistently pay among the highest prices for prescription drugs. Ten per cent of citizens don't have adequate coverage to meet their needs. One in four households can't afford to fill their prescriptions.

Economics indicate universal health coverage is cost-effective: centralizing infrastructure; providing Canada with superior leverage for negotiating drug prices; and guaranteeing the whole country benefits from the deals.

Pharmacare is now fragmented, with a few provinces offering some drug coverage. The solution demands a national initiative. We want to see Manitoba support a national health plan, and efforts to assist financially-strapped older adults – so they needn't choose between purchasing the necessities of everyday life or their medical prescriptions.



3. Aging in Place



Most seniors want to stay in their own homes as long as possible. Health, finances, transportation, safety and other considerations can derail that dream. In many cases, it is difficult for adults over age 65 to live at home when the costs of equipment and remodelling living quarters for health issues are unaffordable. Yet long-term care, where people often go reluctantly, can cost far more both financially and emotionally.

Today, almost nine in 10 health care dollars go towards institutional care. We spend significantly less on home and community care than the OECD average. Health care costs increase on the continuum from home care to long-term care to acute care.

Managing health care for seniors must start before situations become acute. Successful home care programs remove considerable burden from the long-term and acute care situations. In fact, community-based solutions are key to solving the crisis in long-term care.

With proper teams skilled in physical and mental health, and support for home accommodation, many more older adults can continue to live where they want to be – in their own homes and communities. That's best practice for compassionate and economic reasons.

COVID has shown us the cost of not investing in care and services for seniors. We need to build on Manitoba's aging in place initiative, with increased support to help older persons continue to live at home, and receive the health care attention they need while there.



4. Healthy Aging

Many older people live in conditions unfavourable to well-being. Healthy aging encompasses active lifestyles, social inclusion, mental health, age-friendly communities and coping with change. Yet care, services and policies for seniors can often focus more narrowly on physical health.

We need to evaluate how older adults are faring in terms of their overall well-being, and provide resources/programs to support healthy aging in every dimension.



5. Geriatric Training



Older adults constitute about 16% of our population, but account for nearly half of our health and social care systems costs. Basic education and training relevant to geriatrics and gerontology should be essential in any health care or psychosocial program. Yet we don't invest enough in recognizing and understanding older adults' needs. We need programs throughout the pipeline of health care workers to ensure that people who train in geriatric care earn the respect and salaries reflecting their education.

Geriatric training should lead to careers worthy of full-time positions with respectable remuneration, incentives and benefits. COVID-19 proved that insufficient training, patchwork teams and under-paid, over-worked staff can be deadly. Specialized training for managers of these services should be mandatory.

Over the next two decades, the numbers of Canadians aged 65-plus will double. Those 85 and over will quadruple. The availability of appropriate health, social and community care providers supports healthy aging. Geriatricians play a vital role in helping older adults to remain healthy and independent for as long as possible.

Canada currently has only 300 geriatricians serving the older population – one for every 15,000 adults. Manitoba has only six of those. Among the provinces, only Saskatchewan and Newfoundland have fewer geriatricians per capita. That is unacceptable if our senior population is to age with dignity and receive the best health care.

We want to remove the cap restricting the number of graduates specializing in geriatrics. And also see special post-graduate programs and diplomas to help create careers in geriatrics for health care and psychosocial service workers.



6. Elder Abuse Prevention

Any situation that limits or controls the rights and freedoms of an older adult is a form of elder abuse. This includes physical abuse, but also psychological/emotional abuse, financial abuse and neglect.

North American studies show that anywhere from 2-10% of older adults will experience some type of elder abuse each year. In Manitoba, an estimated 7,500-19,000 older individuals experience one or more forms of abuse or neglect. The numbers could rise significantly, with the 65-plus population increasing quickly. This is a widespread yet mostly hidden problem.

The province has made efforts, with resources such as Prevent Elder Abuse Manitoba, and the Seniors Abuse Support Line. and Still, the awareness of the issue and resources available to help remain lacking. Even those willing to seek help often do not know where to find it. Many perpetrators do not even recognize that their behaviour is abusive. We need to invest in the resources that detect older people at risk, serve victims, and raise the profile of elder abuse.



B. Seniors Strategy

Seniors are Canada's fastest growing demographic. Gaps in our healthcare and social policies are creating barriers — to seniors' independence, and to their essential role in vibrant, healthy communities and economies.

COVID-19 illustrated the worst kind of neglect ageism inflicts. No one can argue against changing the status quo. The health care and financial infrastructures that theoretically support Canadians as they age (including psychosocial services) must be redesigned and re-engineered. This cannot happen overnight, but we can immediately put plans in place to truly provide dignity and quality to older peoples' lives.

7. Health Care



COVID-19 proved that we need national standards covering health care for older adults. These must govern aging concerns along the whole pipeline and all networks within the pipeline. Maintaining well-being involves teams of experts collaborating to find solutions to address physical illnesses, disabilities, social isolation, loneliness and elder abuse.

The provincial government needs to support health standards for older adults in a holistic way. Such standards will guide health care practices for the aging – around mind, body and spirit – and establish robust accountability models.





8. Financial Security

12% of senior families and 28.5% of single seniors qualify as low income. Canada Pension Plan, Old Age Security program and Guaranteed Income Supplement are a step in the right direction. Yet more needs to be done.

Defined benefits pensions are proven to make retirement secure. With that, older Canadians can continue to contribute meaningfully to our economies and pump money right back into our local communities. What is the government doing to strengthen defined benefit pensions, protect accrued benefits and protect employees and retirees ensnared in corporate insolvencies?

9. Income and Health Care Rights

Canada's older adult population needs basic rights ensured in terms of income and health care. Manitoba can work with the federal government, and other provinces and territories, to establish national standards that guarantee these rights. The province also needs to take steps to improve the infrastructure that failed our older population so badly this past year.

10. UN Convention on the Rights of Older Persons



RTOERO backs the International Longevity Centre (ILC) Canada's demand of the Canadian government to take immediate and decisive steps toward leading and supporting such a UN Convention. We believe this is exactly the time to take decisive international action on a rights-based approach to the needs of seniors. This is a moment in which the decades-long neglect of long-term care has been painfully brought to the forefront of Canadians' consciousness.

Society is focused, rightly so, on dismantling of social structures that reinforce racism, discrimination and oppression. Ageism is a deadly and systemic bias too. RTOERO upholds that an international legal framework to protect the rights of older persons is an essential component of the difficult work of dismantling systemic ageism, and ensuring a more just and fair society for all Manitobans and other Canadians as we age.

We call on the provincial government to support this UN Convention and push to move it forward, to hold us accountable for how we treat our older citizens.



11. Social Isolation

Meaningful connections with others keep us engaged and active. In contrast, social isolation can trigger mental, emotional and cognitive distress and worsen chronic health problems (high blood pressure, heart or respiratory disease, diabetes, etc.). It may also lead to various forms of elder abuse as they become prey to financial or other abusers.

COVID-19 has made all of us isolated in some way. For many seniors, it's an ongoing reality. Isolation can be a particular risk when people retire, lose a spouse, or experience decreased mobility or cognitive decline. Upwards of 30% of seniors are in danger of becoming socially isolated.

The government should support more ways to connect seniors to family, friends, neighbours, colleagues and their communities. Reducing social isolation will have a meaningful impact on the emotional, mental and physical health of our seniors.



C. Environmental Stewardship

A sustainable future depends on responsible use of resources, conservation, and protecting our air, land and water. Individuals, companies, industry groups and governments all have a part to play in environmental stewardship. We need to maintain the viability of our ecosystems for ourselves, our children and our grandchildren.

12. Single-Use Plastics



The federal government will ban many single-use plastics starting in 2021. Questions remain around what items will be on the list and the phase-in period. The ban doesn't address the issue of the use of non-essential plastics. We need a government approach to manage the entire life cycle of plastics.

13. Common Recycling Standards

With all the recycling efforts made by municipalities and companies, there's much room to improve. For instance, Deloitte reports that just 9% of the plastic waste generated annually in Canada is recycled. One hurdle to greater progress is the lack of a harmonized approach across jurisdictions.

Government policies or incentives can help us move from a linear economy (ongoing consumption of resources) to a circular one (reusing resources). Other steps can help us to increase the recycling rate, and lower contamination rates (i.e. non-recyclable material in the recycling system).

14. Environmentally-Sustainable Transportation



Transportation accounts for about one-quarter of Canada's carbon emissions. As our population and economy grows, so do the number of vehicles on our roads.

The Manitoba government launched the Conservation and Climate Fund last year. In announcing some projects this January, Conservation and Climate Minister Sarah Guillemard reiterated that Manitoba continues to work toward becoming Canada's cleanest, greenest and most climate-resilient province.

Progressive government policies can drive more sustainable transportation, i.e. electric vehicles, cleaner public transport, clean fuel standards, biking, etc.

15. Safe Water Supply

Our freshwater resources are a national treasure. Yet pollution and misuse threatens that. Meanwhile, while urban centres enjoy access to clean water, several First Nations in Manitoba – Tataskweyak Cree Nation, Shamattawa First Nation and Wuskwi Sipiik First Nation – experience drinking water advisories.

Legislation and changes in business practices both have a role in protecting our freshwater sources. Beyond just calling on the federal government to fulfill its responsibility, Manitoba can also play a part in supporting upgraded water systems and alleviating the drinking water crisis in the province's First Nations communities.

Who we are

RTOERO is a bilingual trusted voice for healthy, active living in retirement. With 81,000+ members in districts across Canada, we are the largest national provider of non-profit group health benefits for education community retirees. We welcome members who work in or are retired from the early years, schools and school boards, post-secondary and the broader education sector.

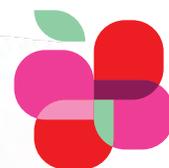
We believe in the power of our community to secure a better future.

For more information:

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