

# PATHWAYS TO INDEPENDENCE

JULY 28<sup>TH</sup>, 2021, 1:30PM TO 3:30PM

ZOOM VIRTUAL PEER GROUP MEETING NOTES

**Hosted By:**

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**Guest Speakers:**

Tim Louis

Laura Mackenrot

Elaine Willis

Kari Krogh

More than ever, people with disabilities must come together as a unified group. How we support each other through crisis and every day hurdles will strengthen us as a community and as individuals. Living independently is a choice and comes with challenges. Through unification people with disabilities make a difference; each voice is important.

The goal of Pathways To Independence meetings are for peers to come together and share information and updates on current issues facing people with disabilities.

The July 2021 meeting was attended by approximately 75 people.

## Table of Contents

<b>Technology for Living Updates with Taylor Danielson</b> .....	2
<b>We Talk Tech Seniors</b> .....	2
<b>Accessible Sailing</b> .....	2
<b>Accessible Gardening</b> .....	2
<b>Provincial Respiratory Outreach Program (PROP) Recall Notice</b> .....	3
<b>CSIL Contract Update with Tim Louis, ACE Executive</b> .....	3
<b>Clause 12.2 (C)</b> .....	3
<b>Clause 23</b> .....	4
<b>Translink and the City of Vancouver Updates with Laura Mackenrot, Co-Chair for the Persons with Disability Advisory Committee</b> .....	6
<b>Translink</b> .....	6
<b>City of Vancouver Disability Advisory Committee Update</b> .....	7
<b>Creating a CSIL Survey, with Elaine Willis</b> .....	8
<b>CSIL Temporary Policy Exceptions End Date</b> .....	10
<b>The Association of CSIL Employers (ACE) update</b> .....	10
<b>Payment to family member (PFM) application for exception</b> .....	13
<b>Accessible Nature Wellness Program, with Kari Krogh</b> .....	16
<b>Closing Remarks</b> .....	18
<b>Upcoming Pathway Meeting</b> .....	18

## Technology for Living Updates with Taylor Danielson

### *We Talk Tech Seniors*

Technology for Living is running a new video series called “*We Talk Tech Seniors*” which focusses on issues which are more relevant to the Senior’s community. The Senior’s program is sponsored by a grant from the Government of Canada called The New Horizons for Seniors Program.

New videos will be published Monday, with the goal of the third Thursday of each month. We will talk about the various technologies and topics which are of particular interest to seniors, but everyone is welcomed to watch as there is something we can all learn from them.

The goal is to get seniors more involved with community and to prevent social isolation by supporting seniors to live a fulfilling lifestyle. The technology we offer can do a lot to support their activities.

We put out two videos so far:

***Accessible Sailing:*** Accessible Sailing is an activity which is accessible to everyone of all ages and all ability types. Ean Price and Terry LeBlanc participated in the video and are both advocates for sailing. Terry reported that a gentleman in his 90s is still out sailing, which is great to hear.

Ean has reported that the Sailing Club in Kelowna has recently gained at least three new members.

#### [Watch Adapted Sailing](#)

***Accessible Gardening:*** There are many accessible options for gardening in your home. Flowers, Succulents and Vegetables can be easily grown with methods that are easy and enjoyable; indoors and outdoors.

Terry Le Blanc, myself and Claude LeDoux, who is the retired Parks Manager for New Westminster, speak about options for making gardening accessible; accessible garden beds, community gardens, and of course we have got some technology. I set up an automatic watering system for my plants in my backyard and I also did Terry's rooftop community garden as well.

Recommended: [Orbit B-hyve Smart Hose Faucet Timer with Wi-Fi Hub](#)

#### [Watch Make Your Garden Smart](#)

**Update:** Tech For Seniors with Memory Loss has been published on the Technology for Living YouTube Channel.

#### [Watch Tech For Seniors With Memory Loss](#)

### Upcoming Topics

- Online Dating for Seniors: Peers will talk about how to do date online successfully and safely.
- Communication is coming up later in the year with some of the Smart Tech Devices that can be used to communicate easier.

### *Provincial Respiratory Outreach Program (PROP) Recall Notice*

For those of you on Philips Respironics equipment, we are aware of the Recall Notice and are working hard to deal with this issue for everyone in our program who is using this product.

The Recall Notice is in place due to the interior foam disintegrating and getting into the breathing device, causing headaches.

TFL's Medical Director, Dr Road, is working closely with the replacement process. Dr. Road is contacting your Respiriologists to notify them about the change and to obtain their approval to change out your equipment.

If you do not have a Respirologist, Dr Road will follow up with you personally to ensure that your equipment is swapped out and replaced with safe equipment.

TFL asks that you remain calm. We are ordering equipment and supplies and there is a plan in place to address this issue as quickly and efficiently as possible; we will get to every one of you in turn.

### **CSIL Contract Update with Tim Louis, ACE Executive**

This topic is in Regard to the two clauses in the CSIL Contract between the Health Authorities and CSIL Employers. Clause 12.2 (C) and 23 are, in my opinion very unfair, one sided and arbitrary.

#### *Clause 12.2 (C)*

Clause 12.2 (C) gives your Health Authority the authority to interview one, or more, of your employees. I am certain that no Health Authority enters this kind of wording into any of its other contracts they hold with any of its other third parties.

For instance, when the Health Authority enters into a contract for the supply of goods or services, they would never put that clause in the contract to give them the ability to interview the employees of that third party. That is just simply not done in the real world.

The Health Authority, may as a pretext, say they need to do that for two different reasons:

1. One reason is, what if they have a concern about you, a concern about your health or your safety or possibly abuse that you might be suffering. This is very paternalistic, but CSIL Employers are adults with a legal capacity to enter into that contract.

The Case Manager can simply contact us, the CSIL Employer, and raise that concern with us. Perhaps they felt necessary to contact one of our providers, such as our doctors, but it would be totally inappropriate, in my opinion, for the Case Manager to speak to one of my employees about me.

2. The second pretext that the Health Authority put forward which raised concern was not just for the CSIL Employer, but also for the CSIL Employees. However, within British Columbia, if an employee has concerns about their workplace, they have multiple regulatory bodies to contact.
  - I. BC Employment Standards can be contacted to ensure they are being treated properly under the Act.

- II. WorkSafe BC ensures that their work environment is safe.
- III. BC's Office of the Human Rights Commissioner to ensure they are not facing discrimination.

The Health Authorities do not ever express a concern about the employees of any of their other third parties where they enter a contract for the supply of goods and services. Those employees, go to the appropriate body, and not to the Health Authority.

Unfortunately, from a legal perspective, it is almost certain that this Clause would not be set aside in a court of law because the Health Authorities would be pretty much in the driver's seat and their contract is accepted as it's worded, or we lose our funding.

### *Clause 23*

Clause 23 gives your Health Authority the ability to act in its sole discretion. That is an improvement over the paragraph that used to be there.

The previous paragraph literally gave the Health Authorities the legal right to act unreasonably. Nowhere in Contract Law does one party have the right in a Contract to "*Act Unreasonably*" and that was the reason they replaced the paragraph with one which gives the Health Authority, "*The ability to act in its sole discretion.*"

Those words, "*In its sole discretion*" at first might not sound so bad, until you realize that the clause gives your Health Authority the sole discretion to make any decision with respect to:

- Funding amounts.
- Frequency of funding.
- Suspension of funding.
- The amount that you must contribute to CSIL account.
- Whether to provide you with the opportunity to correct an issue, prior to the Health Authority terminating the agreement.
- What your needs are and whether the services that we purchased are meeting our needs.
- Whether we are complying with the terms in the contract.
- The frequency of reviews to assess changes in funding.
- Whether or not one is eligible at capacity to continue to participate in the program.
- Whether to terminate the agreement without the 30-day notice.

What matters, is that in order to succeed in a court application you would have to convince the court that this warning allows the Health Authority to act unreasonably; it's a bit of a brain twister.

We do not want the Health Authorities to have the legal ability to assert in the contract, to act unreasonably.

We would need to convince the courts that this clause, "*The ability to act in its sole discretion*" does give the Health Authority the legal ability to act unreasonably and that it is unacceptable to have this clause in the contract.

Rather than a court case to petition the court to set this clause aside, it may be better to wait for a fact pattern; to wait for the Health Authority to rely on this clause to act on its sole discretion, where it has the ability to make decisions at its sole discretion where they have acted in an arbitrary manner. Those facts might then get the sympathy of the Court.

That the application has a context, instead of hypothetical, then the CSIL Employer might be successful in getting that clause set aside. So, what do we do?

Many CSIL Employers are simply initialing the removal of these two clauses and returning the Contract to the Health Authority, stating that they removed the two clauses.

Unfortunately, I know several CSIL Employers who have done that, and the Health Authority immediately responded with a new copy of the contract and directed the CSIL Employer to sign it as is, because if they remove the clauses the CSIL Employer runs the risk of having their funding terminated.

**My advice would be to sign the contract without crossing out or removing the clauses and return it under protest. Beside your signature write the phrase “signed under protest”.**

You can include a cover letter indicating why you are signing under protest, that you are signing it under protest because those two paragraphs are outrageous!

### Question and Answers

**Q.** What if we have already signed and sent it and what if I decide to retract it somehow. What are your thoughts on that?

**A.** It can be done, and there is no harm with anyone doing so if someone has signed the contract that they are doing it under protest. There is no harm in writing a letter indicating that you signed the contract under protest with respect to those two paragraphs.

**Paul Gauthier:** Tim has agreed that if anyone has put their contracts forward with the clauses crossed off, he will be pleased to provide further information about signing under protest.

Also, keep in mind Tim’s thoughts of waiting for the Health Authority to act unreasonably, and then pursuing it legally at that time, may be one of the better options.

**Q.** You mentioned a CSIL Employer could sign the contract and then state “*I sign in protest.*” Would the letter be similar to the original letter that they would have sent that outlined the reasons why they crossed it off originally?

**A.** Yes, you can write something like “*You will note that the enclosed contract was signed by me under protest. I signed under protest because you are refusing me to remove clauses “Insert the clauses you disagree with”, as indicated by me in my earlier letter, but these clauses are unacceptable for those reasons.*”

**Q.** Can we get a sample cover letter?

**Paul Gauthier:** We will amend the other letter that was used for the purpose of signing and crossing off and adapt it slightly. I will connect with Tim to confirm that he agrees with that small modification, and then anyone who is interested in a sample, can email me directly at: [Paul@ifrcsociety.org](mailto:Paul@ifrcsociety.org)

Please note that taking these steps is a personal decision.

**Peer Comment:** I am using an old form to do my monthly financial reports, and I am still doing the paper copy. On the top of those reports it says that you have signed it and that you submitted the mini scans from the bank which basically reveals all the cheques that you write. This information goes to

the Health Authorities, and I have had some employees that did not want that information going anywhere else.

I contacted the Privacy Department Legislation to ask them about whether the Health Authority can legally do this, and Privacy Commissioner said no, they should not be doing this.

If it becomes a dispute, it can go before the Privacy Commissioner for resolution. If you speak to the Privacy Commissioner ahead of time, they will provide you with a response you can use with the Health Authority.

What I do is I cross the line off that says I am supplying the print scans and I do not send the print scans in. That way they don't know who my employees are.

The Health Authority insisted that I had to do this, but when I told them I was in touch with the Privacy Commissioner and they had advised me that the Health Authorities are not permitted to do this, they stopped bothering me.

**Q.** I am in the process of having contracts with new employees. In that contract, I have a clause that stipulates that my employees are not allowed to breach my privacy. How can my case manager interview my employees about me?

**A.** The Employee, pursuant to that contract would not be permitted to talk to the Health Authorities. I am afraid there is always a "But".

**But:** When the employee refuses to talk to the Health Authority because the Employment Contract prohibits discussing the employer's confidential business, the Health Authority could demand that the CSIL Employer void the Employment Contract or at the very least, void that part of the Employment Contract that prohibits the CSIL Employee from talking to the Health Authority.

**Q:** Why is that legal? What is the point of a contract, then?

**A.** If you sign a contract with the Health Authority, they can hold you responsible for them getting the information they require. Having a different contract with your employee is something that they would say "you should not have done that, under the basis of what you signed with us." and they could say "If you do not wave that part of the Employment Contract, then you are in breach of the CSIL Contract and we will terminate your funding."

## Translink and the City of Vancouver Updates with Laura Mackenrot, Co-Chair for the Persons with Disability Advisory Committee

### *Translink*

For those who live in the TransLink Metro Vancouver area, some of you who heard about, or perhaps participated in, a consultation, several months ago in a survey.

For the last year and a half to two years, Translink have been talking about bringing in a mandatory interview assessment in order for people with disabilities to use HandyDart. We were very much against this, as is most members of the Disability Community in the City of Vancouver.

There is good news at the 11<sup>th</sup> hour before the report was submitted to Translink and approved in June. The report was modified to state that the interview process would be voluntary. You may receive information that is not up to date, but be assured the interview will be voluntary.

There are two options for people who want to apply to use HandyDART.

- I. Application can be made in paper form, but this may change in the future.
- II. A person may choose to attend a Translink voluntary assessment in order to apply for Translink.

This is good news! In general, the next year or two will be used to determine what that entire process will be, and it will not come out until 2023. I can give updates to you, through this meeting here as it unfolds.

Hopefully, most people will be grandfathered in. To the best of my knowledge, those of you who are already registered with HandyDART would not have to reapply or volunteer for an assessment process.

### *City of Vancouver Disability Advisory Committee Update*

I am the Co-chair of the Disability Advisory Committee, and I would like to bring two issues forward to the group.

We will be getting a presentation on the Bike Lane issue next week at the City of Vancouver's Accessible City Subcommittee. I have heard, informally, that the City is putting in cement blocks. Cement blocks suggests permanence and there are issues around that.

If you have any comments about that please email the parks board or let us know.

[Contact the City of Vancouver Park Board Commissioners Here.](#)

Tomorrow I will be attending a consultation about the Climate Emergency Plan with regards to parking procedures, which could affect people who want to have their care aides or other people park on the streets.

I will review new information with Paul, to update the Pathways Peers.

**Paul Gauthier:** There are many peers who are involved in a variety of committees involving disability issues across the province. Please do not hesitate to send me an email if you are on a committee, and you think that this group would like to know what's going on in your area.

Email Paul at [Paul@ifrcsociety.org](mailto:Paul@ifrcsociety.org)

**Peer Comment:** Effective October 1<sup>st</sup>, 2021, Compass cards will be accepted on HandyDART. If you have an orange Compass Card and you are ages 13 to 18, or 65 and over, your Orange Concession card will be accepted on HandyDART for a discount of \$2 per trip.



## Creating a CSIL Survey, with Elaine Willis

**Contact Elaine:** If you have feedback on this survey discussion, you can email Elaine Willis at [eawillis@shaw.ca](mailto:eawillis@shaw.ca)

**For the CSIL Survey Outline** [Click Here](#)

The idea for this proposal came out of the CSIL Provincial Representation Leadership Group and I am hoping that it is something that the people who are present here will want to support.

**The Objective:** To support the CSIL Employers regarding satisfaction needs, communication, and oversight of the CSIL Program.

### Three phases

Phase one: Formalize the proposal and seek funding to pay for the research.

Phase two: Upon receipt of funding, design a Survey Tool which will seek and engage high participation and then aggregate the data.

Phase three: Analyze the data, prepare a final document for publication, publish, and possibly do a media release.

CSIL Employers are invited to recommend a catchy title that defines the problems we are trying to solve. A catch title could help secure the funding.

I have created a template to explore the five “W’s” and then the “How, What and We”.

1. Who is going to be surveyed?
  - a. The “Who is going to be involved” would be Provincial Government, Health Authorities, contract staff, case managers and CSIL Employers.
  - b. This list is not exhaustive as it may evolve as we move forward.
2. What is a comprehensive survey?
  - a. We want that high participation from our CSIL Employers; it is a good starting place.
  - b. We will then do the aggregation and analysis of data gathered data.
3. When?
  - a. The seeking funding stage will begin as soon as possible in order to have a “complete by” date.
4. Why?
  - a. To fill in the gaps in knowledge of our current practices to compare British Columbia to other jurisdictions.
  - b. Perform study research of other jurisdictions which will provide a unified back voice to the needs; both our met needs and our unmet needs as CSIL Employers.
5. Where?
  - a. This survey will only be in British Columbia

6. How?
  - a. By creating a fundable proposal followed by this comprehensive survey of CSIL Employers and the other proponents, followed by strong data analysis.
  - b. We will review relevant existing research worldwide.
    - i. I have heard that there are jurisdictions in Europe who are doing this type of funding right, and continually improving it ongoing.
7. What?
  - a. We need to design an instrument that funnels the relevant data into reportable and easily understood information, highlighting:
    - I. What is working well?
    - II. What needs improvement?
    - III. What systemic changes are required?
8. We?
  - a. We must create and refine the research questions based on categories created using input from CSIL Employers.
  - b. We must connect with, and seek, support from CSIL Employers to participate in research at the design phase, and in the data collection phase.
  - c. We must define our budget based on the needs which will include the creating of the instrument, the coding transcribing interviews, data analysis and edit proofreading for the final publishing.

### Proposal

We would like to create a partnership between the Association that CSIL Employers and the IFRC to move forward on this. We would appreciate any feedback, ideas from all CSIL Employers.

This group is full of great minds, so if we are missing something from the statement of objectives or if anyone is aware of relevant research, I will appreciate your contribution by letting me know.

**Note:** Elaine Willis' email is at the beginning of this topic.

**Paul Gauthier:** It is important for us to be able to get and narrow down data, because it is data that government is going to listen to.

One of the things that came out of the Leadership Groups was people wanting action and a plan towards action. **Stop talking about it, let's get action!**

This survey was one proposal which came forward and sprouted out as something that was doable, and engaging the peers is a great way to keep it moving forward.

**Q.** Why do you want to interview anyone other than CSIL Employers? The Government, Case Managers; these individuals tend to be the problem.

**A.** What I have learned in my life is that sometimes it's the system that is the problem and not those people, and they may have some great ideas. They may have experience that is useful to us and helpful. Sometimes, by getting everybody involved in the same project, looking to solve the same problems, we can get information from them that they perhaps would not share professionally but can share personally.

**Paul Gauthier:** This comes back to using the power of a collective. Do not forget that we can utilize the data as we wish. We can pull out the data based on how CSIL Employers respond and utilize it to make your points.

If you are able to show that government officials are saying this is a problem, but they cannot talk about it in their professional realm because they have to follow the bureaucratic system, you open it up into a survey and all of a sudden, they are free to speak in person about it. There are good people that know the system and want to make change but can't do it because of the system.

### CSIL Temporary Policy Exceptions End Date

In April of 2021 CSIL Employers were advised that we would be given a 90 day transition period to end the Policy Exceptions once the COVID-19 Emergency Order was lifted.

As many of you know the government announced an end to province's State of Emergency effective June 30, 2021, and as a result the Temporary Exception to the CSIL Policies will be coming to an end as of September 30<sup>th</sup>, 2021.

All CSIL Employers were given 90 days in which to transition back to the guidelines in place prior to the Pandemic. Some employers have been receiving the letters from their Health Authorities advising them of this information.

We know that Fraser Health issued an advisory letter to CSIL Employers on July 7<sup>th</sup>, and we know that Vancouver Coastal Health sent out a letter around July 15<sup>th</sup>.

Note: Peers in the meeting from other Health Authorities reported receiving similar communication from their Health Authorities.

The original guidelines that will be back in place on September 30<sup>th</sup>, as follows:

1. Sick pay will be going back to the to 2% to 3%. If you have the funds available to do it you can offer sick pay as an optional expense.
2. Use of Home Support Agency goes back to just being for emergencies only and short term and requires a document to request authorization as soon as you can get it to them.
3. Hiring an immediate family member is only by exception, it is not going to be automatic. After September 30<sup>th</sup>, you will need to make a Payment to Family Member Application.
4. Personal Protection Equipment (PPE); CSIL Employer's expenditure of \$20 to \$40 per month for supplies for any universal precaution's and safety mechanisms such gloves, hand sanitizer and first aid kit replenishment, etc. will be back in place with the cap.

If you utilize any of these exceptions, you need to start thinking about your transition to ensure that you are complying with the policies.

### The Association of CSIL Employers (ACE) update

The Association of CSIL Employers (ACE) is preparing a letter to the Ministry of Health to address the staffing crisis post pandemic.

Because the Health Authorities and care facilities are hiring more staff, CSIL Employers are in a difficult position and so the PPE and hiring immediate family exceptions should be allowed to continue. The root of the problem is the wage disparity, which is a big concern.

We recognize that as we negotiate for more CSIL funding, it could take one or two years to receive the increase, as it took a long while to get where we are now in regard to parity. The question now, is are we still at parity with the agencies?

We need to know information, data that is factual.

We need to confirm that Traditional Home Support has increased their wages beyond what is expected. It should not matter if you are using an arm's length caregiver or a family member; at the end of the day you still need those many hours of support.

Why does the government feel it's so important that they get to decide who that person is going to be?

If we feel a family member is going to be able to be the best person to support us, that is something we should be able to decide. The letter will address the following three issues:

1. We will request an indefinite extension.
2. Request what the average pay is within traditional home support and facilities.
3. Request the re-engagement with the Ministry of Health, and the Association of CSIL Employers now that the Pandemic's State of Emergency is over.

The root of the problem is the funding dollars; we need family members as another recruitment option. This is just another part of the need for us to deal with a crisis. Hiring family members should not be the fallback plan. The reason why it is the fallback plan at the moment, is because there has not been enough funding to get the caregivers that we need.

**Comment from Ken Kramer:**

I felt that some form of concerted effort to build awareness of the reality that we are all facing is necessary and while the State of Emergency may have ended in the eyes of the Province of BC, the home care issues remain a crisis. The home care issue will remain challenging for many months beyond that 90 day transition window; applying an artificial 90 day time limit is not appropriate.

In the future it is going to be a far more significant dialogue because we have moved the hourly rate and what we had to endure to move that rate back in 2010 and 2011 was significant. The expectation is that that is not going to be a quick fix and based upon prior experience with the Ministry of Health, it could potentially take years before we get to a new number.

However, we are optimistic, and it opens up the doors to re engage in dialogue. If anything, the pandemic has taught us all lessons, and now it is an opportunity to take that information and use it to build and improve the CSIL Program. We will start with that smaller issue of the 90 day window.

**Q.** With the big increase of the Delta Variant, wouldn't it be right, to keep the exemptions going because Dr Henry said we have to make it mandatory for masks, gloves, and a few other things.

**A.** Agreed, and as we formulate that letter, there will be components discussing the increase in COVID numbers again. Although more people are getting vaccinated, it will continue to be a concern.

**Q:** I am wondering if the Ministry will consider different rules for people with higher risk under CSIL Program? Such as a Respiratory Risk. Under the current guidelines, \$20 to \$40 is not going to cut it for people with high needs and complexities of care who use more and the prices are increasing.

**A.** That needs to be discussed further, and it is something that the executive can take a look at because the cost of those supplies are increasing and while people were using it for very specific procedures before the pandemic, now we are using more supplies when we are having our caregivers perform routines. This needs to continue to be discussed.

If anyone receives PWD funding, and not everybody does, or has a medical only file open under PWD, can get gloves, and other medical supplies, through their PWD Funds. If people need to more information about that please let me know and we can have a discussion.

**Chris Hofley:** People on PWD have a limited amount of what they can order. A doctor or an occupational therapist can request additional supplies for the client, but it can be a cumbersome process.

**Peer Comment:** I order my medical supplies three months at a time, small, medium, large, and that helps.

**Peer Comment:** When the pandemic started, they changed the gloves from powder to non powdered. At first, they said that paramedics and ambulance first responders are getting the powder and the nitrile, so my family member had to get unpowered gloves. However, they are not as good. We went to the doctor, put in a request for Nitrile and got a prescription, and they still said no. The Ministry was not going to give Nitrile gloves, that they did not approve it and they would not approve powdered anymore because powder holds the COVID virus in it. Our only option is non powdered right now with the Ministry with PWD, for gloves.

**Note:** Our March 2021 Guest Speakers from Vancouver Coastal Health stated that the powdered gloves have a risk of contamination with organisms getting into the powder. Going forward, the gloves will be powder free.

**Peer Comment:** Gloves are for safety and the responsibility of the employer to provide skin protection for employees and CSIL reimburses me. The only thing that they went up against me was that I got some LED masks for me that were \$30 each and they questioned me. I said they work, and they raise morale and they let me have those. I have not had any push back on gloves.

**Peer Comment:** When you apply for something with the Ministry, when you are a PWD or whenever there is an appeal process, just because they have said no once you have a recourse. There are agencies out there that will assist with that appeal process.

**Q.** Does Disability Alliance BC do any of PWD appeals?

**Peer Responses:**

1. Disability Alliance BC (DABC) is the good option for appeals.
  - a. [Click Here](#)
2. The Action Committee of People with Disabilities in Victoria and Vancouver Island.
  - a. [Click Here](#)
  - b. Tel: 250-383-4105
  - c. Email: [actioncommittee@shaw.ca](mailto:actioncommittee@shaw.ca)
3. The Spinal Cord Injury BC.

- a. [Click Here](#)

## Payment to family member (PFM) application for exception

British Columbia has a province wide challenge of finding personal support workers and many CSIL Employers are facing uncertainty around staffing. During COVID-19 the Exception made it easier to cope when immediate family members could be hired.

Immediate family members are;

1. Parents
2. Children
3. Spouse.

Family members who CSIL Employers can hire without going through the formal application process are;

1. Brothers
2. Sisters
3. Aunt
4. Uncles
5. Cousins

On your financial statements to your Health Authority, you must make a note of how many family members you have working for you.

Regarding immediate family members where you need to transition back to regular policy by September 30<sup>th</sup> but are having staffing difficulties you may want to consider filling out a Payment to Family Member (PFM) application with your Health Authority.

Time is drawing near. At the Individualized Funding Resource Centre Society, we are seeing double the number of people struggling to find caregivers.

You need to decide if you're sending in the PFM application right away. We have made this a priority today to review the policy and application form with the eligibility through the criteria.

Factors to be considered under the exemption criteria include but are not limited to:

- Demonstrated attempts to recruit and retain any related caregivers, other than those in an agency.
  - Interestingly enough, the policy states that your case manager should be working with you, discussing attempts and offering suggestions for places to recruit unrelated caregivers, such as schools and colleges.
- The Health Authority wants to see you demonstrate that you have advertised through a variety of media and advertised different options in the community.
  - You need to show receipts of submitting for advertising with financial forms showing that you have tried to find caregivers
- In order to use a parent, spouse, or child to be paid as caregiver, some employers must submit this application, and the Health Authority will determine if they feel that it meets all of the criteria.

## Criteria

### Nature, and degree of care required

Factors to be considered include but are not limited to:

- complexity of care requires extensive training (e.g., ventilator), or behaviours may affect care needs (e.g., clients with dementia, acquired brain injury or other neurological deficits where clients may become very aggressive or noncooperative/non-compliant with unrelated caregiver);
- issues with trusting caregivers;
- unique scheduling needs.

### Rural or remote Location

Factors to be considered include but not limited to:

- geographic distance and accessibility of property (e.g., road or driveway not ploughed in winter time);
- lack of a public or private service agency;
- lack of availability of individuals for private hire;
- frequency of care required.

### Cultural barriers

Factors to be considered include, but are not limited to:

- customs, cultural values and beliefs that affect client care needs.

### Communication barriers

Factors to be considered include but are not limited to:

- language spoken;
- speech difficulties;
- communication difficulties.

### Family circumstances of the clients have been considered

Factors to be considered included but are not limited to:

- the potential risk for conflicts of interest;
- the potential risk to negatively impact the health and quality of life of the client, and or caregiver if an immediate family member is hired; and
- the financial impact on the family if an exception is granted or denied. **Note:** the financial need of family should not take precedence over meeting the needs of the client.

The clients care plan includes appropriate respite for the immediate family member.

- respite means having another paid caregiver provide relief to the immediate family member from their paid caregiving duties, within the client's allocated CSIL budget or family care home funding;
- the amount of respite determined appropriate by the health authority will depend on the client's and the immediate family member's circumstances, as well as the availability of other caregivers, and will vary from client to client or family to family.

Health Authorities are required to review the exception on a regular basis and approval may be withdrawn if the Health Authority determines that the criteria no longer applies or the needs are still not being met.

The Payment to Family member policy and application is on our website. [Click Here](#)

For a copy of the Sample discussed in the meeting, and for a fillable pdf copy, please email Chris at [Chris@ifrcsociety.org](mailto:Chris@ifrcsociety.org)

In the policy, on page five (5) it states “.....in the case where an application for the exemption has been denied, the case manager will continue to work with the family and community resources to provide the care the client needs and monitor for changes.”

It is an interesting part of the policy because if they deny you to have a family member to be able to work with you, the case manager has to work with you on solutions. It seems that you should respond to a denial with, “We have done all of these things to find caregivers, but we cannot, so help us out.”

If we are not allowed to use agencies on an ongoing basis, please do let us know where we are going to find it, ask them to assist per the policy and then maybe they can revisit their denial.

The question they ask is, describe the client's attempt to recruit and retain an unrelated caregiver, other than through an agency;

Examples:

- I have been advertising on multiple social media platforms since December of 2020.
- I have been using Word of Mouth liaising with other CSIL Employers.
- I have been using advertising platforms such as Indeed and Craigslist.

Putting your best foot forward of the reason why you want a family member to do it, is key. I sometimes feel they put these policies in place but do not realize how it affects people in the community and the people who have to administrate it

We discussed this today because we know that many people did end up utilizing the Payment to Family Member exception. We are paying immediate family members during this crisis, and it should be noted that we have not yet overcome the issue of a family member who is a legal representative, or a Power of Attorney (POA).

If you are a Legal Representative or have Power of Attorney (POA), you will likely not get very far when filing for this exception because under the Representation Agreement Act, you are not able to be paid. It is something we are working out right now to try and figure out if we are going to have more communications with the Ministry of Health on this matter.

We want to review how there can be an exception to allow POA's and Representatives to work for a CSIL Employer. Some people are thinking about changing their Representatives or their POA's so that a family member can apply but there are a lot of components to this.

**Q.** For hiring family members, if the CSIL Employer lives at home are the family members who are living in that home expected to provide a majority of care unpaid? If an employer is allowed 100 hours a month, and then I have to do the rest of the care, is she is going to hire me for some of it to get paid. I can only get paid within that 100 hours and the rest is still unpaid, is that correct?

**A.** I am afraid that does not change. If the employer needs more hours they need to apply for more hours from the Health Authority, through your Case Manager.



It is difficult to request more hours when a family member is working and the health authority expects the family member to be unpaid and this makes it more challenging because as wrong as it is, it should only be based on what the physical needs are.

We have a Leadership Group which is talking about the new Task Analysis Tool (TAT) and, unfortunately, we do not have a copy of it yet. To the best of my understanding, different health authorities are experimenting with it. ACE is attempting to obtain a copy but so far we have not been granted access to it. I believe that the new TAT allows a little more than what it did before.

It may be wise to look at it if people are not getting enough hours of support. Again, it does not matter who is doing it. I think if mom is going beyond the allotted hours with physical care, then the Health Authority should be shown that *“Look, these are the other 20 hours a week, that are not being covered by a caregiver that needs to be covered,”* that's my suggestion.

**Q.** I understand that we should go and obtain additional masks and gloves before the end of September. Did I hear that kind of correctly?

**A.** Absolutely, if you are sourcing masks and gloves and are concerned about the prices, the IFRC has a PPE program where we can source product at reasonable prices.

To be taken to Georis Store, [Click Here](#)

### Accessible Nature Wellness Program, with Kari Krogh

I am very happy to have Kari join us today to provide a brief update on the Accessible Nature Wellness Program which has been a big hit for our group; many Pathway peers have been attending.

#### **Kari Krogh**

We had a wonderful turnout for our last group. I am taken by all of the work that goes into living with disability and that is what I think this meeting has illustrated to me once again. I have had many discussions with members of Pathways and with Paul as well, about how we need to make time to take care of ourselves. That is where Nature Mindfulness comes in.

We have three accessible, virtual Nature Wellness Programs and you can participate from absolutely anywhere. Some participants are reclining in bed, some are outside in their backyard, some are looking out the window. There is a lot of flexibility in how you participate. We received a grant for the program so it's entirely free to participate.

There is no “one right way” to do Nature Mindfulness. You are guided in these different invitations (activities) and there is considerable flexibility. You can have your camera on or off, you can use the chat function or speak out loud to participate, or you can always pass if you do not feel like sharing.

I thought I would share a couple of ideas that people passed along after we did river meditation. We asked people what they noticed or how they felt after having done the river meditation. I live on a Forest Preserve called Eco Wisdom Forest Preserve and all the photos and videos used in the program are mine. I take them when I am out in nature and after viewing them in the sessions people report that they felt noticeably lighter, and that the meditation was very calming and relaxing. I use audio and visual recordings of nature as well, and they enjoyed the sound of the water, as it brought back memories of being at the beach.

This is a somewhat different way of doing a traditional meditation. Some people do meditation by sitting, being still and quiet. The research has shown that we can achieve similar health benefits, by engaging in what is called Forest Bathing or Nature Mindfulness. It has helped me personally, which is a part of the reason why I am so passionate about it.

One of the exercises we did was to watch a little video of wetland and we ended by asking if the participants could use just one word to describe their experience, what would it be. The response was that people said that they felt that it was a nourishing experience and they experienced bonding between participants. The one word they used to describe their experience was; *Joy, grateful, community, energizing, grounding, gratitude, interdependence, peaceful, appreciation and serene*. At the end of this video there is a great Blue Heron, captured on video, which was a lovely way to conclude it.

### **Third and Final Nature Wellness Program**

We will send out an email announcing our third and final Nature Wellness Program, set for September 18<sup>th</sup>.

The session will include our conversation and we will be referencing how Nature Mindfulness is not only good for our mind, mood and body, in terms of building immunity, it can also build resiliency in our brains.

We have already had quite a number of registrations for this program. I had to close it down on Eventbrite, so that we could allocate the rest of the spots for Pathways peers, but we will make every effort to include people who are interested in exploring this method of self care. We have one more to go, and we are hoping to do more when we can get more funding.

**Paul Gauthier:** I enjoyed my participation in this. I have told the group before that I was quite surprised how much I enjoyed it. The sessions gave me some time to stop and take a break from all of what we are dealing with, and it has been a real pleasure.

I want to remind everyone on upcoming events that you are all invited to participate, as you wish, and if you are able to. We will make sure all the upcoming events and times are out there, and everyone will get an announcement through Pathways.

**Upcoming Accessibility Nature Wellness Program date:** Saturday, September 18<sup>th</sup>, 2pm - 4:30pm

**To Register** [Click Here](#)

**To view the Accessible Nature Wellness Program Presentation** [Click Here](#)

People who were involved in the first one, have come back and become co-facilitators in the second one and we are hoping to get more participants for the third one. We anticipate getting many more people from the Pathways Program leading aspects of this program.

## Closing Remarks

I would like to take this time to thank all of our speakers today for providing the group with important and much needed information. There was a variety of information and updates which supports the community.

Please do not hesitate to continue to send in your ideas or suggestions. If you have got some hot topics of news that is happening in your community email us soon as you can so we can include that in our next meeting. We are working on topics suggested to us already, so we hope to have them on Pathways for upcoming sessions.

## Upcoming Pathway Meeting

Wednesday, August 25<sup>th</sup>, 2021 1:30pm to 3:30pm

### Agenda

#### 1. Technology for Living Updates

#### 2. Community Updates

#### 3. Federal Election

- With the upcoming Federal Election, we are working on having representatives from the major parties.
- Each party representative will be given a short period in which to speak on topics which impact the lives of people with disabilities.
- You are invited to send your questions to Hilary at [hilary@ifrcsociety.org](mailto:hilary@ifrcsociety.org) so questions can be presented to the candidates.

Peers are reminded that if they have a topic idea for a future meeting, to please send an email to [pathways@ifrcsociety.org](mailto:pathways@ifrcsociety.org)

**Pathways To Independence Peer Group Meeting Notes and pertinent documents are uploaded to <https://www.ifrcsociety.org/pathways>**

The Pathways To Independence Meeting is in partnership with Technology for Living, whose Technical Team, headed by Ean Price, successfully ensure that peers connect to the meeting from across the province.

**THANK YOU EVERYONE, FOR YOUR ATTENDANCE AND CONTRIBUTION TO THE MEETING!**