

Winter 2014

## NEWSLETTER

Volume 14 Issue 1



Think Spring!!

70th Annual NPF Convention - page 5 NPF Convention Form - page 6 NPF Donations - page 15 NPF Membership Forms - pages 16 & 17

## NATIONAL PENSIONERS FEDERATION

NPF Executive 2013-2014

#### President: Herb John

249 Peters Road Walpole Island, ON N8A 4K9 Phone: 519-627-0555 Cell: 519-350-3221 E-mail: <u>herb.john@npfmail.ca</u>

#### **Treasurer: Sandra Carricato** 2389 Head Road Port Perry, ON L9L 1B4

Phone: 905-985-8170 E-mail: <u>sandy.carricato@gmail.com</u>

#### **1st Vice President: John Gatens** 1 Joshua Blvd. Brooklin, ON L1M 2J1 Phone: 905-655-6314 E-mail: johngatens@rogers.com

#### **3rd Vice President: Winnie Fraser-MacKay** 75 Cape Rd. RR #1 North Lake Harbour, PEI C0A 2B0 Phone: 902-357-2224

E-mail: winniesbeachhouse@pei.sympatico.ca

#### Member at Large: Zoe' Kopetsky P.O. Box 238 Winterton, NL A0B 3M0 Phone: 709-583-0007

E-mail: zkopetsky@gmail.com

#### Past President: Barry Thorsteinson

4635 Whispering Willow Dr Navan, ON K4B 1J1 Phone: 613-835-3495 E-mail: <u>barry.thorsteinson@npfmail.ca</u>

#### Secretary: Pat Brady

27681 - 56 Avenue Abbotsford, BC V4X 1J9 Phone: 604-856-2430 E-mail: <u>patbrady@uniserve.com</u>

#### 2nd Vice President: Sheila Righi 315 28th St. E. Prince Albert, SK S6V 1X4 Phone: 306-922-8238 E-mail: sheila.righi@npfmail.ca

#### Member at Large: Bernie LaRusic 21 Grandview Street Sydney, Nova Scotia B1P 3N4 Phone: 902-562-1901 E-mail: bernielarusic 392@hotmail.com

#### **Deadline for NPF Newsletter**

submissions is June 1, 2014

#### To the Readers

Editorial Board - Herb John & Pat Brady

All editorial matter published in this NPF newsletter represents the views and opinions of the authors and not necessarily those of the NPF or the publication's editor. Statements and opinions expressed do not represent the official policy of NPF unless so stated.

> Have you got an article you would like to submit for consideration? Please send your articles to the publication's editor, Jean Simpson <u>npscfnews@gmail.com</u> Printed at **UNIFOR** Regional Office, 140 Pine Valley Blvd., London ON



President

#### Seniors Living in Poverty

This year's Federal Budget again left seniors in Canada wondering what our government is paying attention to and why they avoid addressing issues so important to aging Canadians.

In November 2010 the Globe and Mail reported that "The number of seniors living in poverty spiked at the beginning of the financial meltdown, reversing a decades-long trend and threatening one of Canada's most important social policy successes. The number of seniors living below the low-income cutoff, Statistics Canada's basic measure of poverty, jumped nearly 25 per cent between 2007 and 2008, to 250,000 from 204,000, according to figures released on Wednesday by Campaign 2000. It's the largest increase among any group, and

as the first cohort of baby boomers turns 65 next year, could place increased pressure on families supporting elderly parents."

The Conference Board of Canada reports that Canada ranks the third lowest rate of elderly poverty of the OECD countries (Organization for Economic Co-operation and Development). Elderly poverty is defined as "The proportion of individuals over age 65 with disposable income less than 50 per cent of the median income in a given country." According to OECD data which began in the mid 90's Canada's elderly poverty rate increased from 2.9% to 6.7 % in 2010. Statistics Canada data shows that Canada's overall trend of elderly poverty rate fell 25% between 1976 (36.9%) and 2010 (12.3%) but the rate increased from 3.9 per cent in 1995 to 10.2 per cent in 2005 and again to 12.3 per cent in 2010.

There are numerous statistics available about the increased rate of poverty among widows over the age of 75, increased use of food banks, inability to pay for medication, inability to provide proper housing and home care. With these stark realities aging Canadians want to see responsible action from the government instead of never-ending responses of all the wonderful things they have done in the past. Despite making some improvements they have increased the eligibility for Old Age Security from 65 to 67, continually refused to address the future needs of the Canada Pension Plan and refused to renew the Canada Health Accord and tied health transfer payments to the provinces from 6% annually to the rate of inflation. It would be interesting to hear the deep economic theory that creates a relationship between the needs of a quickly growing population of aging Canadians and the cost of living. It would probably sound something like "Watch me pull a rabbit out of my hat!"

On а positive note we launched our new website on Valentine's Day. www.nationalpensionersfederation.ca The website is changing almost daily with updates and information. Please check it out and sign in under the "Join Us" tab. (This tab will be functional soon.) This will give us the ability to communicate more effectively about issues we are addressing and that you can support. As a member of NPF through your club or group you can register for free. We do encourage new supporters and current members to sign up as supporters for \$35.00 a year. This type of funding is important to our ability to function on your behalf. There are some features on the site to make it more user friendly. There is a language translator so you can read the articles in many languages and a button

#### ... continued from the President

to increase the size of the print. The "Call Letter" and "Registration Form" are now available on line. Our convention this year will be in Saskatoon, Saskatchewan on September 17-19. We have the logos of organizations which provide service to our members and organizations which we work with and support in the fight for a better future. When you click on these logos you will find letters and information from these organizations as well as a link to their websites. Please share this website with everyone that is interested in seniors issues. Also feel free to provide articles and information to us that you would like to share on the web site.

As an executive we have been working hard to assign responsibilities to each executive position, develop terms of reference for the committees requested at our last convention, develop a new constitution as required by the new federal not for profit legislation and policy papers for each item we have identified as key issues for aging Canadians. These would obviously include; Health Care, Pensions, Pharmacare and Housing.

The latest attack on seniors is Bill C-23 which will make it much harder for students, seniors, aboriginal people, and low-income Canadians to prove their right to vote, and will prevent many thousands of Canadians from voting. It also prohibits Elections Canada from speaking publicly about democracy or the importance of voting. It also fails to grant Elections Canada's requests for key investigative powers it needs to crack down on electoral fraud such as the "robocall" fraud during the 2011 election.

We believe that working together we can make Canada and ultimately the world a better place to live so we will continue to shine our light on issues that need to be resolved, provide alternative solutions and work with organizations which believe the same.

#### Herb John, President

**REQUEST FOR DONATIONS** As the treasurer for the National Pensioners Federa-Did you know, you may tion one of my duties is raising funds. advertise in this newsletter? We would appreciate any donations that our Clubs/ Groups and individual/family members can make. Business Card \$ 25 Please send your donation to: One Quarter Page \$ 40 Sandy Carricato, NPF Treasurer One Half Page \$75 2389 Head Rd Port Perry ON L9L 1B4 One Full Page \$150

National Pensioners

Federation



September 17 - September 19, 2014 "Heritage Inn" Saskatoon, Saskatchewan

Hotel Registration Deadline: August 17, 2014 102 Cardinal Crescent Saskatoon, SK. Canada S7L 6H6

> Hotel Reservation (888) 888-4374 Rate: \$107.00 plus tax.

Delegate Registration Deadline: August 25, 2014 (Registration Fee \$125.00 each per delegate and visitors) Forms are now available at our new website

Resolution Due Date: August 1, 2014 Convention Registration: September 17, 2014 (afternoon) Meet & Greet: September 17, 2014 (evening) Convention: September 18 & 19, 2014 Banquet: September 19, 2014 (evening)

Registration forms will be mailed and are on the website. For more details, please check our website at

www.nationalpensionersfederation.ca

National Pensioners Federation <b>NPF</b> des Retraités							
70 <sup>th</sup> CONVENTION							
SEPTEMBER 17 <sup>th</sup> – 19 <sup>th,</sup> 2014							
HERITAGE INN 102 CARDINAL CRESCENT, SASKATOON SK							
CREDENTIAL							
Delegate: Address:							
Group/Club#: N Group/Club Name: Secretary:							
PRESENT TO THE CONVENTION CREDENTIALS COMMITTEE NATIONAL PENSIONERS FEDERATION 70 <sup>th</sup> CONVENTION							
<b>SEPTEMBER 17<sup>th</sup> – 19<sup>th,</sup> 2014</b>							
HERITAGE INN 102 CARDINAL CRESCENT, SASKATOON SK							
DELEGATE REGISTRATION FEE: \$125.00							
Name:							
Address:							
Group/Club#: Group/Club Name:							
Secretary:E mail							
<b>PLEASE NOTE:</b> If your Group/Club is sending an additional delegate(s), please photocopy this form as needed. Cut and return the registration portion (bottom) with a cheque (\$125.00 per delegate) payable to "National Pensioners Federation". Mail to: NPF TREASURER, 2389 Head Road, Port Perry, ON L9L 1B4, <b>Att'n: Sandy Carricato</b>							
HAVE YOUR DELEGATE(S) BRING THE CREDENTIAL (TOP PORTION) TO THE CONVENTION							



#### "Right To Work"

Some politicians love that phrase. They especially love "low information voters" (as the federal Conservatives describe them) who believe that it may have something to do with more employment. Alas, it is only a con game wherein the objective is to weaken unions. This "right to work" notion has been rejected through the past 7 decades by all Canadian jurisdictions. Mainly, it merely intends to allow freeloaders to decline paying dues to the union in their workplace. (But please keep up the good negotiations for improved wages, benefits and working conditions, thank you very much).

Most employers do not want this proposed legislation. They prefer stability and productivity in the workplace, not endless bickering between workers about sharing responsibility for their working rights. That has been the experience to date. The current labour law - The Rand Formula - and union security

provisions in contracts have stood the test of time after constant reviews. The right to work proponents have only one objective: to **weaken trade unions**.

Some will argue that this is a good objective. The proof confirms the opposite. About 13 mostly Southern States have had this legislation for many years. Wages are the lowest in the country in those states. Unemployment remains high, unions weak. The poor have less to spend with local merchants. The economy stagnates. Recently 2 northern states passed similar legislation by anti-worker Republican state legislators. So the debate became fashionable again in Canada. "Lets go back to depression era labour laws!" This is not the actual battle cry; rather, that is the reality of the idea.

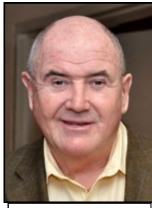
What has this got to do with seniors or pensioners? Directly, it means better pension protection for our existing pensions which could fall victim to weaker unions' ability to negotiate. Indirectly, our children and grandchildren are already falling behind due to income inequality. Who, other than unions, is prepared to do something effective about reversing this trend back to where it was 20 years ago? What kind of standard of living do we want for all of society going forward? (Not to mention a healthy tax base of good income earners to maintain our OAS/GIS benefits, medicare and other programs).

Finally, it should be observed that right to work hucksters rarely include workers. They are usually front spokespersons from organizations that keep their donors a secret. Little wonder that they do not want the truth of their objective spoken openly. They claim to be promoting individual choice. Why then, do they not advocate for those workers to have a union where the majority do not choose to have a union? Beware anti-worker false prophets bearing "gifts" for workers. They are out to con the public and pick pockets in the long run. Pure and simple.

#### Barry Thorsteinson, Past President

## 21 ACTIVE YEARS 1991 – 2012

## SOUTHWEST MARGAREE SENIOR CITIZENS CLUB



**1st Vice President** 

#### WHEN DEATH DO US PART

#### "Lessons from an unexpected death"

By Soren Bech; Editor, COSCO News (December 2013)

Our family gathered at Royal Columbian Hospital on Thanksgiving Day. We were with our father and grandfather when he died from the devastating injuries he suffered in a car crash.

Even though my dad was 94, it was an unexpected and painful death. "I never expected to live this long, I am disgustingly healthy," he recently told me.

Peter Bech was so alive, filled with curiosity, and fun to be with.

Even though he had planned ahead for the inevitability of death, what happened after his car was tboned by a pick-up truck taught us some unexpected lessons.

**Beware joint Accounts -** My parents have held a joint account at the Bank of Montreal since 1958. It was an epic battle to convince them to honour the provisions of my dad's will. "Dealing with the bank should not be the most stressful part of dealing with our father's death," said my brother Poul - but it was certainly right up there. It took three meetings and a lengthy, somewhat threatening e-mail before the bank agreed to pay funeral costs from the estate.

They were quite prepared to pay utility bills for the now-empty family home. However, along with other costs, they initially refused to cover the cost of a wheelchair-accessible taxi and a caregiver to accompany my 89 year old mother to the service for her husband of 66 years. Because it was a joint account, they said they had to "protect" my mother's money. Unfortunately, she has dementia, raising the question of how she can access her money, even to pay for her own care.

**Beware joint Title -** Joint title has benefits and drawbacks. One of the drawbacks is that if one of the partners becomes incapable of giving consent, the other cannot sell the home, not even to downsize to more suitable accommodation. To do so requires an application to the courts for what's known as "committeeship" in B.C., or stewardship in other provinces. This process costs up to \$12,000. When one of the partners dies while the surviving partner is in care, family members must just maintain the home as best they can.

**Help your Executor -** My dad had a will. He gave family members keys to the house. He told us where to find important documents. But some things we didn't anticipate. To obtain a death certificate. You need to know the names and birthplaces of the deceased's parents. "Grandmother and grandfather" won't do, even if grandfather died in 1924.

**Service Canada** - When you apply for survivor benefits under the Canada Pension Plan, you'll need the will, birth, death and marriage certificate. In my view, this benefit should be calculated and given to the survivor automatically. It is not. My application for survivor benefits for my mother, needed to pay the cost of residential care, was rejected because I did not have power of attorney for her. She lacked the capacity to grant it. After being advised that people are considered legally capable until proven otherwise, I asked my mother to sign the application.

It was sleazy. My stomach still churns when I think of it. After a wait of a few weeks, we were thankfully informed that she will get the CPP benefits she needs to pay for her care.

A few suggestions - Exchange enduring powers of attorney with your spouse, and name a trusted

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#### ... continued from 1st Vice-President

alternate - preferably a younger person - in case you both get dementia. Do it now. Make sure you have a will, birth and marriage certificates, and tell your executor(s) where to find these documents.

Check out Memorial Society membership to help keep funeral costs down. It can save up to 40 percent at a time when your loved ones are already in distress.

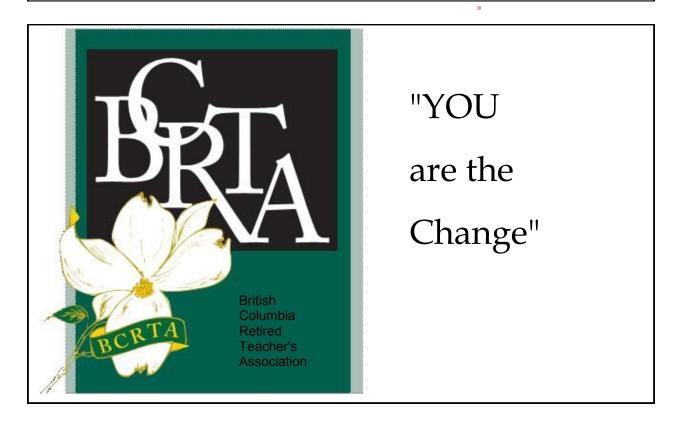
#### John Gatens, 1st Vice-President

**"Retirement" - by Mary Fleck** - I thought I'd let you know how pleased I am with me, that I didn't run again for a place on the executive. So, for the first time, I actually feel like I am "retired". In '91, I retired from my actual work and almost immediately went into a Seniors club, helping, and serving as secretary. Well, 15 years later as their secretary I said ,"enough" and I stepped down.

By then I was president of the Inverness Council, and on the executive of the Nova Scotia Federation then on to the National Pensioners. I enjoyed each position and each one carried with it some responsibility, which gave me some feeling of fulfillment. I appreciated each organization. As pleasant as it all has been, as one grows older, one tires a bit easier. Now you understand this was my real RETIRE-MENT. No work, no great planning, no worries about . .,"I wonder if I can make it to Sydney for the flight, or will the flight be cancelled, again!"

I am looking forward to attending the National Pensioners in September? I look forward to seeing all of you and would love to be of any assistance I can be.

Our winter has been horrendous, terrible, bitter, therefore I have pretty much stayed indoors more than I ever have. My health is pretty darned good, so I am of good cheer.





Living Longer and Living Better

Happy New Year Everyone!! It's hard to believe we are close to Spring of 2014. This has been a very exciting time for NPF. At the least action packed starting with our executive meeting held in Toronto, January 23 & 24 and the launching of our new website and logo on February 14.

This is a wonderful opportunity for all associations and members to share what is happening in their clubs, municipal, provincial, as well as federal governments. E -mail addresses will be posted elsewhere in this newsletter.

**3rd Vice-President** 

The winter edition of our newsletter, reported by our President Herb John, informs us that health care is once again the number one of our 66 resolutions presented.

I have had the great experience over the past ten years interviewing many again Canadians ages 50 -95. We discussed their plans for a longer life and a better quality of life. Many stated healthy aging should not include the challenge to choose between buying healthy food or medications. The majority they should not have to act like victims to aging; both disappointed and angry that our government statements continues to blame the rapidly growing aging population for depleting the health budget. I was surprised and really pleased the majority of seniors I spoke with had plans and were prepared for living longer.

Research has demonstrated that maintaining a mix of productive, social, physical and spiritual activities as you age can lead to increased vitality, social functionality and mental health. Life satisfaction along with decreased symptoms of depression and self-reported bodily pain with activity centered lifestyles intervention to ward off illness and disability may also be more cost effective and have fewer negative effects than prescription drugs.

My portfolio as 3rd Vice-President I'm happy and excited about is health. We know from passed resolutions at our prior AGM's is a very challenging and interesting area. I am asking for your assistance in letting us know what your clubs issues are and what areas of advocating and lobbying we can help you with in your province. All written material will be on the website and policy papers on health issues will be presented to the House of Commons.

Watch for the **"Getting Home Safely"**, a hospital discharge guide for older adults and their families. This guide was developed by National Canadian Pensioners Concerned and the Geriatric Education Initiative (GERI).

The development of this **"Getting Home Safely"** guide was supported by the Canadian Institute of Health Research. We will have the Canadian Coalition for Mental Health for Seniors as well as Dr. Chris Frank from the Geriatric Education Initiative, Kingston, Ontario and Canadian Health Coalition Executive Director, Michael McBane.

We are still waiting in great anticipation for news from our Harper government on the Health Accord Renewal and will be submitting articles to the website periodically.

Winnie Fraser - MacKay, 3rd Vice - President

## Seniors are an Asset not a Burden to Society



Being discharged to go home after a hospital stay is a good thing for most seniors but can be challenging and even a risky time. Transitions home are complicated and there are many parts of the process where communication can break down and mix-ups occur. Studies have found a small but significant percentage of people ending up being re-admitted to hospital, sometimes for illnesses unrelated to the first admission, but also due to complications arising from gaps in discharge planning. These complications include medication and prescription errors, falls and worsening of the

initial condition. Strategies like discharge checklists for patients/families and for health professionals have been shown to be effective.

Improved communication between hospital doctors and the family physician is an important step also. Ensuring accurate medication lists and correct prescriptions is very important too. All of these tasks work better with the active participation of patients and families at various points during the stay, from time of admission to time of discharge. It is important that any patient be as engaged as possible with decision making about discharges home. This is particularly true for seniors who may have several health conditions and multiple medications.

**How should people get involved with planning for discharge?** Ensuring the health team has an accurate medication list and is aware of all the relevant health diagnoses is an important part of the admission and early stay. Clarifying existing supports at home provided by family, friends and Home Care services is also important, as it will guide the needs at time of the transition home. Early in an admission (and admissions are short these days!) It is good to keep up-to-date with the team's plans for the timing of the discharge; getting prepared and ensuring the professionals have done all that is needed to get things ready for discharge will decrease missed items and miscommunications.

When preparing for discharge, getting an up-to-date medication list and ensuring that all questions related to medications is very important. Medication-related issues is one of the most common reasons for problems after discharge. Clarifying the plans for Home Care services and knowing the specific instructions for care of the relevant medical conditions should be done in good time before leaving the hospital. It is also important to ask who to call if there are concerns once home and what symptoms or concerns should get you to seek medical attention.

It is evident from this list of important steps in the discharge that getting home from hospital is a complex process. Canadian Pensioners Concerned has partnered with the Geriatric Education and Recruitment Initiative (GERI) to develop a guide for patients to help them become involved and active in discharge planning.

This booklet has questions to ask the health team, information about the different steps involved in transitions from hospital, and practical ideas for what to do once home. The booklet is available to print on this website or at <u>www.canadiangeriatrics.ca</u> (via the Quicklinks). Hard copies may be ordered from the Canadian Coalition for Seniors Mental Health for a small cost. We hope that members will use the guide when they or a loved one are in the hospital; playing an active role is an important step to getting home and staying there safely.

Dr. Christopher Frank

Don't Plan for Seniors ... Plan with Seniors

#### **Getting Home Safely**



Website: www.nationalpensionersfederation.ca

Toll Free: 1-877-251-7042

Fédération Nationale

des Retraités

### **OBJECTIVES**

National Pensioners Federation is an organization devoted entirely to the welfare and best interests of Canada's elderly.

1. To promote and establish and foster Seniors' Centres (called Clubs or Groups) and Regional and Provincial Seniors' groups throughout Canada.

2. To provide education for persons in the retired and senior citizens age group and other individuals interested in aging, and the status and well being of seniors.

3. To reach out to seniors who are lonely, or isolated, or at risk.

4. To provide programs which promote healthy active lifestyles for seniors, thus sustaining mental and physical health.

5. To assist in developing the knowledge that seniors should learn during their aging process, through promotion of educational experiences.

6. To research the aging process, and any problems and benefits pertaining to the aged that might be of interest to the Federation and to use the knowledge gained from that research to educate seniors and any other party or parties who are or might become interested in these concerns.

7. To provide opportunities for seniors to utilize their volunteer and leadership skills for the benefits of all persons.

8. To consult with other private and public organizations which offer similar services in order to gather any educational information that will add to knowledge and be of use to seniors and the public.



On December 11, 2013, Canada Post announced drastic cutbacks to our public postal service. The Conservative government supports Canada Post's plan to eliminate all door-to-door mail delivery and dramatically increase stamp prices. This is just the latest attack on your public postal service. Compare this to other post offices around the world, which are facing their challenges through innovative services, such as postal banking.

Send a message to your MP

Call Government of Canada toll free at 1-800-622-6232

#### Help Save Canada Post!

PublicPostOffice.ca - Say no to cutbacks, privatization and deregulation



From The Desk Of The Treasurer

#### Health Care in Jeopardy

It has been a horrible winter for everyone in Canada. Every morning when I get up I look at the TV to see the weather across the country. The east coast has been hit particularly hard this winter, and you were in my thoughts.

Our president Herb John has been working with a company to improve our webpage, it's looking good. Please go to <u>www.nationalpensionersfederation.ca</u> and view our page. More work has to be done but a web page is always a work in progress. You can download all you need such as submission for registration, membership, credential forms and get up to the minute news regarding seniors and the NPF's fight to make things better for Canadian Seniors.

Our preparations for the convention in Saskatoon are well underway and you will be receiving the call letter and the credential/registrations forms soon. We wanted to send them out before the increase in stamps took effect,

To the beautiful province of BC, Lorraine Logan has been elected as president of COSCO. Congratulations Lorraine and to our Past President Art Kube who served the NPF, we wish him and Mary all the best.

On to some very pressing issues at hand.

In my last newsletter I wrote that our province was underfunded, well the new Federal Budget came out this week and nothing has changed. It comes down to what is most important, getting rid of the deficit in 2015, right before the election so they can brag about keeping their promise or giving Ont. the money that we deserve to maintain our social programs and in particular our Health Care.

Ontario is in a very difficult fiscal climate with tens of billions having been given away at both the provincial and federal levels in tax cuts for corporations and the wealthy. In Ont. we have a government more concerned about an "austerity" budget regime that pays for tax cuts that lead to negative results in public services.

The biggest threat we have is the provincial government's plan to dismantle community hospitals and contract out their services to private clinics. We must fight this attack, and become a voice that will be heard to save our public not for profit system.

#### If we don't the end result will be an expansion of two-tier health care, we have to:

Stop the cuts to community hospitals and the offloading of patients and services. Stop the privatization initiatives and redirect these funds to improving care. We must defeat the plans to bring in private clinics.

Our public health care system costs money, and we have to develop a plan that would end the "austerity" regime of cuts and privatization. The Ontario Health Coalition is working hard to achieve some significant policy changes in the public interest.

#### Some of their achievements are:

Stopping the closure of a number of small and rural emergency departments and hospitals. Stopped the cuts at more than a dozen hospitals. Won improved staffing in long-term care homes.

#### ... continued from the Treasurer

The only way we can achieve our goal of maintaining a not for profit system is by working together with the Ont. Health Coalition and reminding people that they have to be pro-active, ask questions of prospective representatives both federally and provincially and vote for the party that commits to maintain our health care system. *Health care has to be an absolute priority when we cast our ballot.* 

Last week, we campaigned for Wayne Gates a long time advocate for the stop of cuts to the health care in Niagara Region and a New Democrat. As you may know by now, he won the by-election. Tim Hudak leader of the Progressive Conservatives in Ontario blamed this loss on unions sending in bus loads of union activists.

Do they really think that the residents of Niagara are led around and vote according to Unions directions? That is an insult to their intelligence. They made themselves aware of the issues and they knew that the attacks on health care had to stop; they heard Wayne's arguments against the cuts to health care and voted for the person who wanted them to stop!

A news release dated February 3, 2014 headlined the following;

#### Liberal and Conservative candidates duck health care debate in Niagara by-election: Health Coalition calls for clear answers on health care cuts and closures

The Conservative candidate claimed that he had conflicts on the initial date proposed, but even after the Coalition changed the date to accommodate him, he still would not attend. The Liberal candidate would not confirm for any date, even after weeks of the Coalition calling every day.

#### The following is a direct quote from the Ontario health Coalition:

BUILD CAPACITY - Create our own platform of progressive reform to work to change the conversation from cuts and dismantling to protecting and improving health care.

- 1. Include such issues as better pharmaceutical prescribing practices; better coordination; better training on senior's needs, social determinants of health, among others.
- 2. Use Ontario's action on generic drug pricing as a best practice.
- 3. Include restoring and improving democratic governance of health care institutions and services.

Continue to do outreach to seek new community organizations to join the Board of Directors, including the associations for social workers, agricultural and rural affairs, retirees organizations and improved diversity.

Work to revitalize the Toronto Health Coalition and target development of other local coalitions. Support the expansion and development of a student movement to protect public Medicare. Build new ways to engage our membership in our campaigns, including monthly conference calls for members. Create a strong multimedia hub for health care activism. Provide briefing notes for candidates and questions for candidates in the lead-in to the municipal elections. Hold all-candidates' meetings and raise the key health care issues leading into the municipal elections.

#### We have to get this job done, if we don't our Health Care in Canada will change and not for the better!

Sandy Carricato, Treasurer

## **Donations**

From the desk of the Treasurer

As the elected Treasurer for the National Pensioners Federation, part of my duties is the raising of funds for this occasion. The convention is always a drain on our finances and we depend on the clubs/members for their generosity to offset the costs of this major event.

We would appreciate and thank you for any contribution you can make.

Please fill out the form below and send your cheque to the following:

Sandra Carricato Treasurer. **National Pensioners Federation** 2389 Head Road Port Perry, ON L9L 1B4 ----- (Please cut along line) ------Name of club or Member **Donation \$** Address City **Postal Code** Province Feel free to contact me by phone at 905-985-8170 or email me at sandy.carricato@gmail.com with any questions or concerns that you may have. I look forward to hearing from clubs/members

Please print all information clearly and submit with your payment directly to: Sandy Carricato NPF Treasurer 2389 Head Rd Port Perry ON L9L 1B4 Phone: 905-985-8170 Email: sandy.carricato@gmail.com We need this information in order to keep our records up to date. The names and phone numbers of your executive board members would also be appreciated. On occasion this information is helpful.						
CLUB #	CLUB NAME					
CONTACT	ADDRESS					
PROV	POSTAL CODE					
PHONE NUMBER						
Individual/Family membership is \$25/\$35 respectively and application/payment may be submitted on this form						
Please note that the dues structure was changed at the 2013 Convention in Windsor.						
If you have any questions please feel free to write or call the TREASURER						
THANK YOU FOR YOUR ATTENTION TO THIS ISSUE						

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## NATIONAL PENSIONERS FEDERATION (NPF)

The NPF financial year is from January 1<sup>st</sup> through December 31<sup>st</sup> (the calendar year). Club and Group dues are to be paid each year in January and are based on the listing below.

Please complete this Submission Form (Club/Group address and contact) and submit your dues as early as possible.

Annual Club/Group membership dues:	Select	()
Club/Group - under 100 members	\$35	()
Club/Group from 101 to 500 members	\$75	()
Club/Group from 501 to 1,000 members	\$125	()
Club/Group with over 1,001 members	\$350	()
Donations would be gratefully accepted.		()

The NPF depends on your financial support in order to continue and expand our advocacy efforts.

## **TOGETHER SENIORS CAN MAKE A DIFFERENCE!**

Should you have any questions or concerns, please feel free to call or write the Treasurer. *Thank you* 

Don't Plan for Seniors ... Plan with Seniors





Member-at-Large

#### Presentation to Health Minister Leo Glavine

Good afternoon, Minister Glavine: My name is Bernie LaRusic, Vice President of the Cape Breton Senior Council. President Emerson Jessome is unable to attend. The Senior Council is made up of 18 Clubs which cover Cape Breton Municipality.

On behalf of the Cape Breton Council of Senior Citizens and Pensioners, I want to thank you for the opportunity to place some concerns which impact the senior community, not only here but throughout our province, before you.

Regional Health Authorities - The government has announced a commit-

ment to reduce the number of Health Authorities from 10 to 2. This reduction is only relevant to seniors if more beds are lost due to this commitment.

**Dementia Strategy** - The work to develop and implement a Dementia Strategy must include training for those who care for such individuals including those who look after these individuals at home.

Normal: A senior with dementia and is bed ridden has a Home Care Agency providing a service i.e. Bed Tuck In. This service could occur between 6:00 pm and 10:00 pm. The ability to deliver the service is one thing, but in a timely manner is something else. In the preparation for bed, a senior would be washed and diapered. If the next period of scheduled time is 10:00 am the following day, the senior with the diapered still in place and more than likely has bed soars, has been in that bed and diaper for that extended period of time. Could such an occurrence happen in a Long Term Care facility, maybe yes, possibly due to staff shortages? Planning with a sharp pencil does not give good service.

Seniors, like the one above usually required items as Hospital Beds, Wheelchairs, Walkers, etc which can be obtained from the Red Cross. Those looking after the senior at home, usually the spouse or another senior, may have to buy or rent a pressurized mattress for the one with bed sours. Price \$3000.00, Rent per month \$300.00. Such addition equipment must have financial assistance available to ensure a level of comfort can be maintained without putting addition stress on the care givers.

<u>Continuing Care</u> - The Continuing Care Strategy for a senior to remain independent and in their residence will require addition personnel. Such personnel must meet standards as set out by the government to be employed in this environment. There has been a reduction in the hours an apprentice in trades has to serve to qualify as a journey person. With the need to have addition personnel in Continuing Care/Home Care, such a reduction in training time for employment could be detrimental to the service provided.

**Positive Aging** - There have been studies and reports on a variety of seniors' concerns, one of which is entitled," Strategy for Positive Aging in Nova Scotia". This was produced in 2005 by the Senior Secretariat. At that time the Senior Secretariat consisted of the Minister of Health, Minister of Community Services, Minister of Education, Minister of Service Nova Scotia and Municipal Relations and Minister of Health Promotion.. The Minister of Health served as chairperson of the Secretariat.

There are nine goals in the Positive Aging Strategy some of which speak to Finance, Security, Health and Wellness, Housing, Transportation, Employment. Health is only one of the issues impacting on a senior to have dignity and respect in their community and from their government.

Over one thousand (1000) Nova Scotians from Yarmouth to Neil's Harbour took part in its development.

#### .... continued from member-at-large

**<u>Continuing Care</u>** - I am addressing issues which have been brought forward at senior meetings and senior conventions. I spoke about the changes that could be expected as a result of the downsizing of Health Authorities. Minister Glavin, you must be aware that all these Health Authorities, Cape Breton being one, have a large number of seniors in hospital beds that should be in Long Term Care.

It has been several years since government has invested in allowing more Long Term Care beds to be made available. Approximately ten (10) years ago, it was determined that seniors had registered for more than one Long Term Care facility and the Single Access Entry system was introduced. Although it gave a more realistic number on those in need, seniors still had to wait. The need for additional facilities in Long Term Care will not diminish with a better Continuing Care Strategy. The number of seniors turning sixty-five (65) in Nova Scotia each month is one thousand (1000). With such growing numbers and a present waiting list of two (2) years, additional beds and home care personnel are essential.

<u>Home Care</u> - Presently, Home Care Coordinators are struggling with assessments. Home Care Workers are overworked, accompanied by work related difficulties. On Dec 13/14, I attended a conference in Ottawa, put on by the National Health Coalition. People from all across Canada were in attendance. A number of younger Health Care professionals who work in Long Term Care or Home Care were also in attendance. The most difficulties they presented related to time insufficient time to complete task, no time for patient, both wanting.

If Home Care is to meet the necessary support for these seniors in Continuing Care, as it relates to Home Care, additional personal must become a priority. The adoption of such a go-forward plan must be more than a stated policy

**Partners** - The government addresses the participants in these discussions as partners. Seniors have had a relationship with government since the inception of the Senior Secretariat. From the beginning, a Senior Advisory Group has been a partner with government through the Group of IX for over twenty-five (25) years. The Group of IX was initially under the umbrella of the Senior Secretariat and than the Department of Seniors. With the Premier's announcement in the House that the Department of Seniors will be moving to the Department of Health and Wellness, the Federation, as one of the founding members of the Group of IX would ask the Minister of Health and Wellness to support the continuance of this relationship between the Government and Group of IX as a Senior's Advisory Committee.

Measurable illustrations of the co-operation between government and the Group of IX was in the development of the Single Access Entry system and the mutual agreement on a cost sharing formula for Pharmacare. Departments, such as Housing, Transportation, Community Services have utilized our committee to either obtain information or get the pulse on a program.

**Shingles** - Prevention is an important aspect of Health Care. A vaccine for "Shingles" is available that will prevent this infection for five plus years in persons sixty-five. The Cape Breton Council of Senior Citizens and Pensioners has put this request forward by way of the Nova Scotia Federation of Senior Citizens and Pensioners brief and the Group of IX, to be incorporated into Pharmacare.

In mentioning the Federation's Brief, I hope an early opportunity will allow the Brief to be presented to the Liberal Caucus.

**Leadership** - Mr. Minister, the issues of Long Term Care, Continuing Care, and Home Care speak to the need of beds and personal. It will require action as opposed to rhetoric. Leadership and a strong commitment to the areas deserving attention could be a matter to measure if government is deserving of future consideration.

At the meeting in Ottawa, the Federal MP representing the government, stated they support the Nation

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Health Accord but it is a Provincial Responsibility, particularly when asked to take a leadership role in discussing a Nation Pharmacare Program. In the past, there has been an agreement by the Maritime Health Ministers on pursuing a National Pharmacare program. If the Federal government won't show leadership towards such an initiative, the obvious need for those who support such a view must become more active.

**Housing** - Many senior's residences are with the Provincial Housing Authority. Approximately fifteen (15) years ago Senior Housing Complexes were annexed by the Department of Community Services. Many of their clients are younger and have a variety of social problems. Seniors are afraid and intimidated by them. In its brief, the Federation of Senior Citizens and Pensioners will be asking the government to review the present policy with a view to establish an improved policy on such integration. As it overarches the health and welfare of seniors, recognition of the existence of such difficulties by the Minister of Health and Wellness would be helpful.

<u>**Oral Health</u>** - The government has a number of studies from the Dalhousie School of Dentistry. The most recent report lays out a method of Oral Health. Most seniors are examined from the neck down. Such studies outline how such a program will impact positively on senior's health. The incidents of pneumonia from neglected oral health are preventable and the model has been developed. I encourage the Minister to review the report. by Dr. Mary McNally., Associate Professor, Facilities of Dentistry & Medicine E-Mail: <u>mary.mcnally@dal.ca</u></u>

**Snow Removal** - In conclusion, the weather outside has been frightful. The projected cost of snow removal by municipalities is near its limit. Home Care Workers are not required to provide their services if the walkway is blocked by snow. I understand that a recipient of Home Care will be reimbursed for the cost of having the walkway cleared. Winter is the most difficult season for senior, physically, financially and mentally. The need to budget for snow removal is an additional burden in which a senior should not be concerned. There is a model. Spenser House manages a fund for senior's snow removal in the Halifax Regional Municipality. Again, the ability to deliver the product must have access to the recipient. We would urge the Minister of Health and Wellness to support a more defined snow removal policy for seniors which will enhance both the product and the recipient.

Once again, I want to thank you for this opportunity and should there be questions, I will do my best to answer.

#### Bernie LaRusic, Member-at-Large

(Vice-President, Cape Breton Council of Senior Citizens and Pensioners President, Nova Scotia Federation of Senior Citizens and Pensioners)

"Your time is limited, so don't waste it living someone else's life. Don't be trapped by dogma - which is living with the results of other people's thinking. Don't let the noise of other's opinions drown out your own inner voice. And most important, have the courage to follow your heart and intuition. They somehow already know what you truly want to be become. Everything else is secondary."

- Steve Jobs (co-founded Apple Computers)



Member-at-Large

#### Thank you

This is my first article in the National Pensioners newsletter since I was elected as Member-at-Large in Windsor Ontario in September 2013. I want to express my "sincere Thanks" to all the delegates that supported me. I will do my best to serve as an active member on the NPF Executive Board.

There are a few new initiatives taking place in the province of Newfoundland and Labrador. One is the "Age Friendly" pilot project that is being funded to provide affordable and reliable transportation, to older adults and those with mobility challenges for outings, such as medical and banking appointments, social activities and grocery shopping.

Another program that the government is developing is the "paid Family Caregiving" home support one. Apparently, no other Canadian jurisdiction has developed a policy that aligns with the vision of the present government.

Our Seniors Clubs - We are pleased that there has been an increase in the numbers and we hope that more 50+, retirees and seniors will join several members of the Provincial Federation and to join the National body which is the National Pensioners Federation.

#### Zoe` Kopetsky, Member-at-Large

#### For-profit clinics attack Medicare in court, seek US-style system

#### By Adam Lynes-Ford, BC Health Coalition

We risk losing Canadian Medicare as we know it. Right now, there's a legal attack before the courts that could turn Canada's Medicare system into a US-style system. The attack is driven by Dr. Brian Day, owner of a Vancouver for-profit surgical clinic, Cambie Surgery Centre, known for unlawfully billing patients and the taxpayer-funded Medical Services Plan.

The case is being called the most significant constitutional challenge in Canadian history. And it's going to trial in BC Supreme Court in 2014. This challenge aims to do away with Medicare in Canada by striking down provincial health legislation that limits the for-profit delivery of medically necessary services, claiming that these rules violate the Canadian Charter of Rights and Freedoms.

What does this mean for seniors and their families? If Dr. Day wins this case, we'll lose the public health care system that we all rely on. DD Expensive private insurance will become the new norm, like in the United States where it costs the average family \$16,000 a year. Most bankruptcies in the US are due to medical bills - we don't want to see a system in Canada where we risk losing our homes or go deep in debt when we get sick or injured.

Public wait times will also become longer, as doctors and nurses are drained from the public system to the for-profit system. For seniors, who are already feeling the effects of cuts to public health care, this case would mean a dramatic drop in affordable access to health care services.

Why it's a national issue affecting everyone in Canada Even though the case is in the BC Supreme Court, it threatens health care across Canada. Because of the constitutional nature of the case, if Dr. Day wins the challenge, the laws that protect our public health care system will crumble across the country. We have to make sure Dr. Day is defeated. In contrast to the aims of these for-profit clinics owners, Canadians don't want US-style health care. Poll after poll show that the public favours investment and

#### ... For-profit clinics continued

innovation in public health care to improve the system for everyone, not the expansion of for-profit health care that benefits only a very wealthy elite.

Who's fighting for our public health care system? The BC Health Coalition and Canadian Doctors for Medicare are interveners in this case. This means that we are participating directly in the litigation, and we'll be standing up for Medicare in court. But we know that our participation in the case alone can't ensure this legal attack is defeated. It's going to take a huge public outcry to save Canadian Medicare.

It's going to take talking to out governments, our local newspapers, and our family and friends to make very clear; we want a public health care system that works for all Canadians and this legal attack must be defeated.

This is going to be a big challenge, but we know that together we can win this case and ensure that Medicare is here for generations to come. To get involved, contact the BC Health Coalition at <u>adam@bchealthcoaltion.ca</u> and website <u>www.bcheatlhcoalition.ca</u>

#### Submitted by: Lorraine Logan (President of COSCO)

#### Cape Breton

The Glace Bay Senior Citizens and Pensioners Club is located at 445 Upper North Street. Glace Bay is a seaside community on Cape Breton Island that is world renowned for its scenic beauty and historical heritage. Members of the Club reflect the friendliness and hospitality noted for the people of Cape Breton. The Club's motto is: Active Serving Seniors.

A social event on the last Tuesday evening each month and has been successful for seven years draws over a hundred people who listen, sing along or dance to the music of the popular group known as the "Four Corners". Music of the past brings nostalgia and pleasant memories of bygone years to those attending.

The most valuable resource of the Club is its members. It's all about good people laughing and working together in a friendly environment. Like clubs across Canada, we host a variety of activities for seniors. Dances, dart leagues, cards, guitar group, snooker league, line dancing are just a few. And who could do without an active Ladies Auxiliary. It is the heartbeat of our Club. Seniors of Clubs across Canada, many who have their roots in the Maritimes, are welcome to drop in and visit when travelling to Cape Breton.



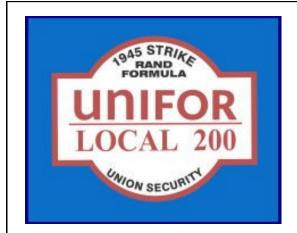
Glace Bay Executive (left)

Submitted by: Steve Andrecyk, President

1-902-849-0655 or 1-902-849-2478

andrecyksg@bellaliant.net

# Saluting the National **Pensioners Federation** The Executive & Membership of the Retired Workers Chapter of UNIFOR Auto Workers Local 222 President - Les MacDonald Secretary Treasurer - Art Field Vice President - Lyle Hargrove Sergeant at Arms - Mike Saunders Member at Large - John Redko Female Member at Large - Wendy Rolfe **Trustees -** Paul Herrington Don Revoy Ron Gay ed Workers Chapter 1425 Phillip Murray Ave., Oshawa, ON L1J 8L4 905-723-1187 1-800-465-5458 www.local222retirees.ca



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