



# ACA News

Vol. 43 No. 2

Serving Alberta's Seniors since 1967

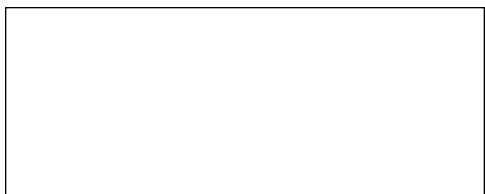
April-May 2010

## Drug plan on hold



Early spring, Banff National Park, Alberta

Come to Morinville on May 26 for our Annual General Meeting



**ASK A FRIEND TO JOIN US:  
MEMBERSHIP FORM P.23**

# ACA News

ACA News is published five times a year by the Alberta Council on Aging.

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# ACA News

Published by the Alberta Council on Aging

April-May 2010



## Experts' diagnosis

A panel of experts gathered on March 23 at the University of Alberta to assess the current state of health care for Seniors in Alberta. Floyd Sweet's report begins on page > **12**

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### AGM on May 26

Alberta Council on Aging's 43rd  
Annual General Meeting  
will be held on May 26, 2010,  
at the Morinville Seniors  
Rendez-Vous Centre.  
Mark your Calendars! > **10**

Visit the Alberta Council on Aging online at [www.acaging.ca](http://www.acaging.ca)

## NEWS FOR SENIORS

# New health minister puts drug plan on hold

Proposed changes to Alberta's Seniors' drug plan scheduled to take effect on July 1, 2010, have been delayed in order to address necessary legislative and regulatory changes and align with other government programs for Seniors.

Meanwhile, the existing Seniors' drug program will remain available to all Albertans 65 years and older. Seniors with this coverage will continue to pay a co-payment of 30 per cent of each prescription's cost to a maximum of \$25 per prescription.

"In 20 years, Alberta's Senior population will have doubled from 400,000 to more than 800,000 — an increase from 11 to 21 per cent of our population," said Gene Zwozdesky, who recently was named Minister of Health and Wellness.

"As a result, a comprehensive approach is needed to address the needs of an aging and rapidly expanding population, and that simply requires more time to get it right."

Questions about existing coverage should be directed to Alberta Blue Cross at 1-800-661-6995, or [www.ab.bluecross.ca](http://www.ab.bluecross.ca). For more information about the plan, please visit [alberta.ca](http://alberta.ca).

Alberta Health news release

## Government to act on health committee report

Consultation on developing a new Alberta Health Act will begin immediately with legislation expected later this fall. The government of Alberta has accepted the recommendations from the Minister's Advisory Committee on Health report.

"Albertans want greater certainty in how the public health care system will function and they want the complete assurance they will have a meaningful say in its development," said Alberta Health and Wellness Minister Gene Zwozdesky.

"I can assure you that we will provide those opportunities," he added

The committee released its 48-page report on Jan. 20 centred around four recommendations:

- Articulate a set of principles that must be sustained and maintained throughout Alberta's health system.
- Legislate an Alberta Health Act for the future.
- Ensure ongoing citizen engagement in the development of legislation, regulation and policy including the development of a patient charter.
- Develop clear directions to guide legislative, regulatory, policy and program delivery changes across the health system.

"We will move quickly to consult with Albertans on the recommendations," said Zwozdesky, who appointed Fred Horne, MLA for Edmonton-Rutherford and co-chair of the Minister's Advisory Committee on Health, to lead this process on behalf of government and to begin it immediately.

A blueprint that reflects the feedback from Albertans, and includes a detailed plan to move forward will be presented to the Minister by Sept. 30.

The Minister's Advisory Committee on Health report is available at [www.health.alberta.ca](http://www.health.alberta.ca) or by calling Health and Wellness general information at 780-427-7164

For more information on the plan, visit [www.alberta.ca](http://www.alberta.ca).

Alberta Health news release



Gene Zwozdesky



## NEWS FOR SENIORS

# Caps make no sense, CACA told

“6% 6% 4% — Why the Caps?” asked Diana Gibson of the Parkland Institute when she addressed 150 members of the Central Alberta council on Aging’s April meeting in Red Deer on April 6. The 6% 6% & 4% is the cap on Alberta Health Services spending over the next three years.

“It is an artificial cap with no basis in logic or fact,” explained Gibson, the Research Director for the Parkland Institute who has extensive background in social and fiscal policy research.

When one examines the net in-migration to Alberta and the expected rate of inflation, then it is clear that these artificial caps on Alberta health spending really translate into a net cut in services.

“There is no doubt “that in-migration and inflation will exceed 4% in a further two years,” Gibson added.

“Get ready for spending cuts,” was her advice. Yet it need not be.

Alberta has by far the lowest rate of corporate taxation in Canada.

“Alberta could add over \$13 billion to its corporate tax take and still be the lowest in Canada.”

She added: “On the personal taxation side, the 10% flat tax is a gift to the rich and a burden to the poor.”

Gibson said Alberta low- and middle-wage earners pay



Diana Gibson of the Parkland Institute addresses a recent meeting of the Central Alberta Council on Aging.

an income tax that is the highest in Canada “by far.”

CACA program Director Shirley Thomas said that Gibson wants to come back to Red Deer to present a day-long seminar.

Dates have not been confirmed,

Stay tuned to what’s happening in Central Alberta.

Submitted by Doug Janssen

# Festival celebrates Seniors in the arts

Share your talent, join in this celebration of the arts.

June 7-13 is Seniors’ Week in Alberta and Edmonton celebrates with the Creative Age Festival.

The Festival is to be kicked off at Edmonton City Hall on Tuesday, June 8, with entertainment by some of the city’s talented older adults. The closing celebration and sponsorship event will be a culmination of the week’s finest entertainment.

Plans are underway for a great week of events and activities. The Arts Cafés take place during the week and Festival organizers want to hear from you if the idea of entertaining a crowd appeals to you. In years past, acts were booked for every 20 minutes during the two-hour Arts Café.

This year we are planning four Arts Cafés to be held at

S.A.G.E, Northgate Lions Seniors Recreation Centre, Strathcona Place Senior Centre and Westend Seniors Activity Centre. Bands, choirs, dance troupes, singers, storyteller will showcase the talent of our Seniors.

The remainder of the week will feature film screenings, Seniors’ theatre workshops, a symposium focused on Connecting to Creativity Through Aboriginal Arts and Healing, Choral Festival, storytelling and displays of the creative achievements of Seniors.

There will be many other opportunities for you to become involved, so stay tuned.

You can visit the Festival website at [www.creativeage-festival.ca](http://www.creativeage-festival.ca) for updates. The Edmonton Seniors Coordinating Council is the main host organization for the Festival at 780-423-5635.

## PRESIDENT'S REPORT

# Change is a constant in 2010

There is an ancient curse that says "May you live in interesting times." The health care scene in Alberta the last few years has been an interesting place.

The rate of change has increased in 2010. A number of proposed changes have either been reversed or have been delayed. Many of these changes concern policies that the ACA opposed. The most recent of these (announced March 31) was the implementation delay in the New Drug Program for Seniors.

We do support the delay and hope if the Pharmacare Program does continue ahead at some point that some problem areas are sorted out first.

Our Preventing Elder Abuse Through Education (PEATE) program is now being widely disseminated throughout the province. Copies were provided to those



renewing their membership and have been provided through many other groups in the province. At this point, the response we are getting on this program is very positive. If you or a group you are involved with would like more information, please contact the ACA office for more detail.

On March 23, we helped co-ordinate a follow-up information session open to the public on such areas as hospital usage, the Pharmacare program, Seniors housing, and information on access to Health Care. This was a joint forum that included groups such as Public Interest Alberta, the Creating Synergy Health Coalition of Alberta, a Seniors Housing Group and the Seniors Community Health Council. The intention of this information session was to provide attendees with a more informed basis for reviewing mainly provincial programs. We hope this will allow them to provide better feedback to the government, MLAs representing their ridings and to better assess suggestions put out by the other political parties.

Respectfully,  
Gary Pool, ACA President

## HAVE YOU RENEWED YOUR ACA MEMBERSHIP?



Consider a lifetime membership and never worry about renewing again!

Annual memberships are valid January to December each year.

- Lifetime memberships are \$250, Household Memberships \$20.
- Organizational membership are \$60; Corporate memberships \$100.
- All memberships and donations over \$10 are eligible for a charitable tax receipt.

Albertans receive a 50 per cent non-refundable tax credit for every dollar donated over the \$200 threshold.

The next time you decide to donate to your charity of choice, remember the charitable tax credit. Not only will the tax credit benefit you as a taxpayer, but your donations will help put money in the pockets of worthy charities across Alberta.

**Call today to renew for 2010!**  
**1-888-423-9666**

## EXECUTIVE DIRECTOR'S REPORT

# Volunteer, for PEATE's sake

### Around the Office

Yolanda had a very successful renewal year. She processed memberships quickly and efficiently.

I commend her for her hard-working efforts.

Memberships and donations are up. Let's keep the momentum going!

We are redeveloping our strategic plan and hope to build a three-to-five-year business plan from this document.

Our 43rd AGM site has been booked at the Morinville Rendez-Vous Centre for May 26.



Invitations have gone to Minister Gene Zwozdesky, MLA Ken Kowalski and Dr. Kathy Kovacs-Burns. The Centre holds about 100 people and we will have lunch catered.

### PEATE

All 2010 household renewals went out with *Preventing Elder Abuse Through Education* handbooks and all 2010 organization renewals received a handbook and DVD. The resources are getting excellent feedback and the requests are flowing in consistently. Word continues to spread across the province on the availability of the resources.

A provincial dissemination plan is being implemented.

Volunteer assistance with distribution of the resources throughout the province would be greatly appreciated! Contact the office if you're interested (888) 423-9666.

### Join us for a GEF Experience!

- Enjoy a complimentary light lunch
- Find out more about the work of the Foundation and how we contribute to the community
- Learn about our housing and services
- Find out about our plans for the future and how we're planning for the wave of seniors that will need our services

Information Sessions & Tours take place from 12:00 p.m.-1:00 p.m. at:

Londonderry Village	March 2
Kiwanis Place	March 16
Porta Place	March 31
Meadowlark Place	April 7
Queen Alexandra Place	April 21
Grace Garden	May 4
Ottewell Place	May 19
Rosslyn Place	June 2
Canora Gardens	June 16
McQueen Place	June 30
Virginia Park	July 14
St. Nicholas	July 28
Britannia Gardens	August 11

Mountwood	August 25
Pleasantview Place	September 9
Father Hannas	September 22
Rosslyn Place	October 6

Apartment | Apartment/Lodge | Lodge

Call or email to reserve your spot!



780-482-6561



[azeeh@gef.org](mailto:azeeh@gef.org)



Greater Edmonton Foundation  
**Housing for Seniors**

[www.housingforseniors.org](http://www.housingforseniors.org)



## REGIONAL REPORTS

### Region 5

Board members of the Central Alberta Council on Aging (CACA) have been active in outreach and information meetings with a number of area Seniors organizations. We promoted membership in the Alberta Council on Aging and discussed the changing Alberta Government Strategies on Pharmaceuticals and Long-Term Care.

On Feb. 5, we shared information with Central Alberta Retired Teachers Association, Edna Warriner, President.

On Feb. 8, the CACA board met with Kerry Bales, Vice President of Central Zone, Alberta Health Services; Sissel Bray, Executive Director, Seniors Health AHS; and Roy Koshy, Director Seniors Health, AHS.

We inquired about how client/patients will be transferred from Valley Park Manor and Red Deer Nursing Home to the new Michener Park facility in the fall of 2010.

We heard that each client/patient will be assessed using a co-ordinated access approach (using the same criteria that will be applied all over Alberta). As a result of the assessment, the decision is made whether he/she has the “right care in the right place” (based on Seniors Living Options, Alberta Health Services).

This may mean that clients/patients who are currently residents of Valley Park Manor may no longer be eligible for long-term care beds, and will have to be streamed into one of the other “senior living options” outlined by the government.

It was noted that this will result in more out-of-pocket expenses for those affected. CACA has asked for clarification on that.

CACA supported “Join Together Alberta” on Feb. 9, with a budget day rally at the Red Deer City Hall. We prepared a list of requests, which was delivered to the constituency offices of our MLAs Mary Ann Jablonski and Cal Dallas. We are waiting for a reply.

On Wednesday, Feb. 24, four board members travelled to Edmonton to attend a forum on Health Care Concerns held in Bernard Snell Hall, University of Alberta Hospital.

On Feb. 25, we attended orientation sessions by Alberta Seniors and Community Supports on the Supportive Living Accommodation Licensing Act.

On March 4, board members made a presentation at Victoria Park Retirement Residences in Red Deer. We promoted membership in Alberta Council on Aging, and

discussed changing Alberta Strategies on Pharmaceuticals and long-term care.

On March 26, two board members travelled to Ponoka to meet with Seniors at the drop-in centre. We promoted membership in Alberta Council on Aging; and discussed changing Alberta Strategies on Pharmaceuticals and Long Term Care.

Our next general public meeting was held on Tuesday, April 6, at the Golden Circle Senior Resource Centre, Red Deer.

The topic was Health and Economic Security for Seniors, with two speakers planned: Diana Gibson, the Research Director for the University of Alberta’s Parkland Institute.

She has conducted research provincially, nationally and internationally on topics varying from Health Care reform to International trade and water security. (*See article on page 5.*)

Sissel Bray, R.N., Executive Director Seniors Health, Central Zone, Alberta Health Services gave a presentation on: New Living Options Guidelines, Living Option Assessment and Placement Process.

Doug Janssen, Director

### Region 6

Region 6 continues to be involved with the board of the Alberta Council on Aging. This extends to a role as treasurer and, as such, a member of the Administration Committee.

The region is represented on a Calgary organization, Eldernet, which is a multi-faceted group planning for the needs of the elderly. It is made up of organizations and community members such as the local health region, post secondary education, United Way and the city. Participation by Region 6 is an opportunity not only to plan services for the elderly but also to inform the various members of the work of the Alberta Council on Aging.

The Council’s efforts during the past year have focused on elder abuse.

Distribution of materials produced for this project has begun. Efforts at outreach led to some non-urban areas as well as some non-traditional groups such as some Lutheran Pastors, financial advisers and condo residents.

This work continues and appears to be well received.

Frank Hoebarth, Director



## REGIONAL REPORTS

### Region 8

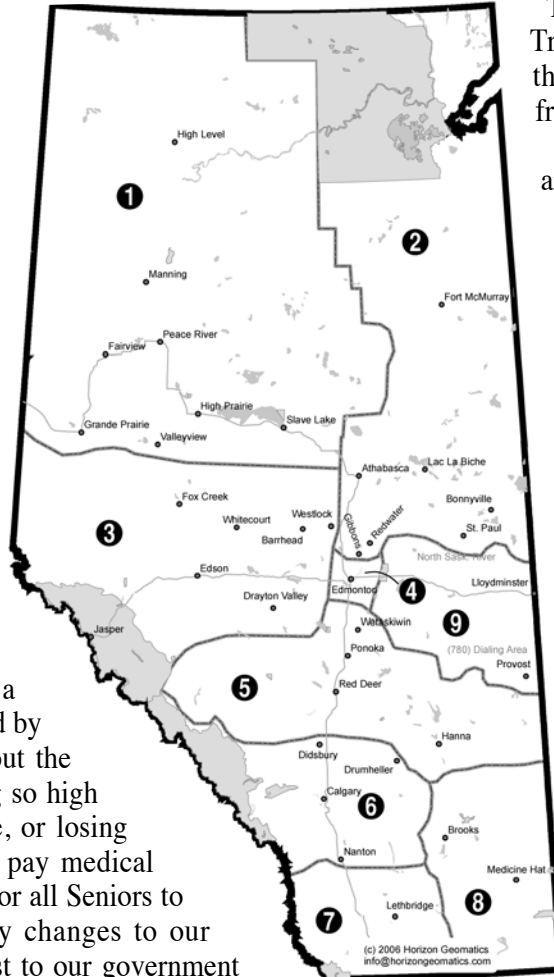
Distribution of the PEATE program continues in Region 8. I recently visited the Hamlet of Suffield's 55+ Group to talk about ACA and to distribute the PEATE Fraud Prevention Program for Seniors. We viewed a portion of the DVD and had a good discussion. What a friendly, active group of Seniors!

I have watched with interest the turmoil in the U.S.A. over efforts to reform health care, having been born in Illinois, with all my siblings still living there.

While our health care system is not perfect, it affords us a degree of security that is envied by many. We need not worry about the cost of private insurance being so high that we cannot afford to retire, or losing our homes due to inability to pay medical bills. Those are some reasons for all Seniors to be cautious and aware of any changes to our health care system and to insist to our government that our concerns be addressed.

Happy spring to all!

Respectfully submitted,  
Beth Turner



The region's finances are secure: Treasurer Hjordis Armitage reported that more than over \$5,000 remains from the 2009 raffle.

Sophie Kassian's minutes were read and approved.

The following people were elected:

President: Fred Olsen

Directors:

Vice-President: Open

Southwest: Alice Hillaby, Fred Olsen

Treasurer: Hjordis Armitage

Southeast: Don Purser

Secretary: Sophie Kassian

North Centre: Mary Karlashewski, Sophie Kassian

Northwest and Northeast: pending

Regional Director, Floyd Sweet was returned for a further two-year term.

### Program information

Following the official business, members heard three presentations on important topics for Seniors.

Mel Sapieha dealt with depression, symptoms and controls.

Shaylenne Baker, a cardiac wellness nurse, focused on heart health and typical anomalies. These included a discussion of the symptoms of stroke – weakness, headache, blurred vision and speech difficulty.

The third presentation was from Lifeline, a safety system for anyone living alone; a button worn about the neck and radio-connected to a special phone that does the job. The button can be activated manually or will act automatically if the person wearing the device falls. It costs \$41 per month plus GST. Sandra Soresstad noted that 76 per cent of hospital admissions were from falls and that, among Seniors, one in three fall yearly!

It was an excellent AGM overall.

Chapter meetings are upcoming, the first one was scheduled for Vegreville on April 7.

Respectfully, Floyd Sweet  
Region 9 Director

### Region 9

Our regional Annual General Meeting took place March 17 at the Viking Senior Centre. On Feb. 19, the regional executive met in Kinsella to plan the AGM.

During the first meeting, members of the executive:

- Reaffirmed the governance structure of two delegates from each of the five chapters, one being the Chapter President.

- Officers were selected from among the directors.

- Tasks were shared for contacting program presenters:

Twenty-three ACA members attended the meeting in Viking, which was chaired by the regional president, Wayne Lebrun.

## ANNUAL GENERAL MEETING

# Notice of Annual General Meeting

The Alberta Council on Aging's 43rd Annual General Meeting will be held on May 26, 2010, at 9:45 a.m. at the Morinville Seniors Rendez-Vous Centre.



Katharina (Kathy) Kovacs Burns, MSc, MHSA, PhD will discuss public policy from a researcher's point of view in the morning, followed by the business meeting and lunch.

Pre-registration is preferred. Tickets are \$25 per person or \$40 per couple. Please RSVP to the ACA office (888) 423-9666.

Mark your Calendars!

## ANNUAL GENERAL MEETING

# Driving directions to meeting

**Morinville Seniors Rendez-Vous Centre**  
**9913 104 Street, Morinville, AB**

### From the North

1. Head south on HWY 2
2. Take the exit toward HWY 642 (Morinville/Sandy Beach Exit)
3. Turn left at HWY 642 towards Morinville
4. Take the 2nd right onto 104 Street

### From the East

1. Take Yellowhead Hwy/HWY-16 W
2. Take the St Albert Tr exit
3. Turn right at St Albert Trail NW
4. Continue onto St Albert Rd
5. Continue onto HWY 2
6. Turn right at Highway 642 (Morinville/Sandy Beach Exit)
7. Take the 2nd right onto 104 St

### From the South

1. Take Hwy 2 North
2. Take the exit on the left toward Hwy 216 W
3. Keep left at the fork to continue toward Hwy 216 W and merge onto Hwy 216 W
4. Continue onto HWY 216
5. Continue onto Ray Gibbon Dr
6. Continue to Stop sign at end of Ray Gibbon Drive and turn right onto Giroux Avenue
7. Turn left at St Albert Rd
8. Continue onto HWY 2
9. Turn right on Highway 642 (Morinville/Sandy Beach Exit)
10. Take the 2nd right onto 104 St

### From the West

1. Take Yellowhead Hwy/HWY-16 E
2. Take Anthony Henday (Highway 216)/Ray Gibbon Drive exit and exit towards St Albert



Google Maps

Darker line in map shows route to Rendez-Vous Centre from St. Albert, Edmonton and points south

3. Continue onto Ray Gibbon Dr
4. Continue to Stop sign at end of Ray Gibbon Drive and turn right onto Giroux Avenue
5. Turn left at St Albert Rd
6. Continue onto HWY 2
7. Turn right on Highway 642 (Morinville/Sandy Beach Exit)
8. Take the 2nd right onto 104 St

### From the Northeast (Fort McMurray, Cold Lake, St. Paul)

1. Take Highway 28 towards Edmonton
2. Just South of Bon Accord turn right on the Highway 642 exit towards Morinville
3. Enter Morinville from the East side.
4. Continue on highway 642 thru Morinville
5. Turn left on 104 St (4th Corner after the traffic lights)

## **SPECIAL REPORT: HEALTH-CARE SYMPOSIUM**

# **ACA asks for a second opinion\* on the state of our health system**

**\* And a third, and a fourth, and a fifth opinion**

The Alberta Council on Aging, with help from U of A nursing Prof. Donna Wilson, hosted an educational evening at Bernard Snell Hall in the University of Alberta. Five topics were addressed by five professionals. Besides Dr. Wilson (RN, MScN, PhD), they included Dr. John Bachynsky (PhD, Department of Pharmacy Sciences), Dr. Katharina Kovacs-Burns (MSc, MHSA, PhD), and Seniors' advocates Carol Wodak and Noel Somerville.

"Runners" from ACA Directors (President Gary Pool, VP Doug Janssen) ACA Policy Advisory Committee (Irl Miller, Tamara Kozłowska) and Federal Superannuates representative Gwen Rutherford, distributed written question sheets. Hosting the information tables were representatives of Senior-serving organizations including our own Yolanda Biermann (Assistant to the Executive Director, ACA)

A total of 125 hardy souls came to learn, to question and went away from the March 23 symposium aware and challenged to share their new wisdom with family, friends and ultimately with their MLAs.

### **Donna Wilson**

Donna Wilson opened the forum with data about who uses Alberta hospitals and emergency rooms. Myth-busting data like the 17 per cent of Albertans over 65 years who use hospitals and the average age of 36 years

for all Albertans using hospitals and ERs, refuted the governments of Alberta's assertions that Seniors are driving up the health care budget. Even the fact that the Seniors require more pharmaceuticals than average Albertans, was rationalized against the cost of alternative health services — such as hospitalization. The truth has a bite to it that isn't always politically desirable in official publications and carefully massaged government releases to the media.

### **John Bachynsky**

John Bachynsky nailed down three of the misinformation aspects of the Pharmaceutical Strategy (which one week later was put on hold), and went on to confirm hospital costs for Seniors, especially if their pills aren't available in an affordable form. Indeed, Alberta Health Care controls which pharmaceuticals will be financially supported, through a committee which recommends a formulary for Albertans. Only 41 of 82 new pharmaceuticals approved by Health Canada were accepted by Alberta Health Care for coverage.

For example, Lantus insulin — a 24-hour basal insulin for diabetics — is not covered by AHC. The committee says that diabetics should be able to live on short-term insulin and not need to access hospital care, which is the measure of inclusion or exclusion of the drug from AHC coverage.



## **SPECIAL REPORT: HEALTH-CARE SYMPOSIUM**



Above: Donna Wilson, Kathy Kovacs-Burns, Carol Wodak, John Bachynsky and Noel Somerville listen to a question; 'runner' Floyd Sweet is standing.  
Left: Session at U of A on March 23 was attended by 125 Seniors and interested parties.

to 4.76%. In fact, only two new drugs had been approved in the period.

He also discussed the positives and negatives of the Pharma Strategy that had been due to take effect July 1.

The pluses included free pharmaceuticals for Seniors below a set income threshold and coverage for extraordinarily expensive drug therapies, such as for cancer or multiple sclerosis.

The minuses included:

1. Taxing Seniors specifically to pay for Alberta Health Care drug coverage, instead of providing universal coverage paid for from general taxation.

2. Bench-marking Senior incomes to determine their premium. As proposed, one dollar more of income based on the Canada Revenue income-tax form could push a family into a higher bracket that would cost that family

Bachynsky took issue with three myths contained in government of Alberta media releases:

1. That Albertans wanted the Pharmaceutical Strategy. There is no evidence available to support that, he said.

2. Pharmaceutical costs were growing three times faster than doctor's costs.

3. New drugs were driving up health-care expenditures

## **SPECIAL REPORT: HEALTH-CARE SYMPOSIUM**

another \$354 per year. Canadians have lived for decades with graduated tax scales — regular federal taxes.

3. The universality of health care is eliminated to be replaced by an “ageism” against people over 65. Discrimination on the basis of age, like religious faith, ethnic origin, and others, is prohibited under the Charter of Rights and Freedoms and under provincial law.

### **Kathy Kovacs-Burns**

Kathy Kovacs-Burns, also a University researcher and health policy expert, presented on Blue Cross program changes. The Blue Cross corporation has been in Alberta for decades providing two services:

1. Administrative Agent to Alberta Health and Wellness to administer the Alberta Health Care program — collect fees when they were still legislated, register all Albertans with an AHC card ensuring eligibility for basic Health Canada services in the Province, and more recently, to administer the Seniors Benefit program — 70% AHC support for many items.

2. Blue Cross was also permitted by the government of Alberta to sell personal health insurance coverage, with Blue Cross receiving a substantial subsidy to keep premiums low for Albertans not on group coverage programs. We believe that subsidy has been eliminated to force Alberta Blue Cross to raise premiums and make the Alberta market force enticing to other health insurance providers. The provincial government is the quarterback all the way!

We share this information because it is factual, and you need to know where to take your bouquets and concerns.

### **Carol Wodak**

Carol Wodak, a Seniors’ advocate talked about “nursing homes” versus “assisted living facilities.” For decades our nursing homes provided 24/7 care to our most needy and vulnerable Seniors. But the government of Alberta’s goals have changed. (Another shattering of Alberta’s Social Contract with Seniors!) Nursing-home beds are no longer being built by Health and Wellness — they were frozen a year ago, though the Premier did promise 600 new ones when he was seeking the leadership. Rather, the government’s wisdom now is to contract out to private builders on a modified P3 basis, the new assisted living facilities. (Nursing homes, as they deteriorate, may become obsolete.)

Carol expertly presented case studies from Medicine Hat, Strathmore and Hinton to demonstrate the variety

of government ‘planning’ for Seniors’ housing. Specifics included, grants (even \$500,000) provided to retrofit a facility to condo style, to ongoing negotiations for private builders to erect multi-level structures to accommodate Seniors from Level 1 (quite independent) to level 4 (the equivalent of our nursing homes). Indeed, the blurring of needs are accommodated from I to IV with variable services, variable costs to the inhabitant and (undisclosed at this time), variable subsidies by the government of Alberta to the building operators.

Who will staff these facilities, by what standards, under what schedule of supervision (in-house versus government), at what personal costs — so many questions! And behind closed doors, yet! Indeed, the uncertainties are unnerving to Seniors and their families.

Carol’s scenarios were a stirring revelation of another shattered item of our Social Contract. For all humanity the highest-order needs are shelter and security; they are inevitably linked.

### **Noel Somerville**

Noel Somerville, a retired educator and chair of the Seniors Task Force (Public Interest Alberta), presented about government of Alberta financing for health care.

Noel put into perspective three assertions that had been used to justify former minister Ron Liepert’s restructuring of the health program:

1. That spending is out of control.
2. That the baby-boom generation will swamp our health system
3. That spending on health care is unsustainable.

A percentage of gross domestic product, spending by the government of Alberta has fallen significantly from 20% of GDP in 1989 to about 13% in 2009. Alberta’s spending on public services, far from out of control, is actually the lowest as a proportion of GDP among all provinces. Alberta ranks eighth in health-care spending.

As for the baby-boomer issue, Albertans over 65 will increase from 10.5% to 22% of the population in 20 years, resulting in a 30% increase in health costs. That can be addressed by increasing health care spending by 1.32% each year, so the system won’t be swamped by old folks.

Noel went on to refute the province’s “sustainability mantra” by revealing that the creation of a low-tax environment has reduced revenues, put pressure on public services and raised the spectre of un-sustainability.

*Continued on page 22*

## INFO FOR SENIORS

# What we can do about the high cost of dying

Make sure your family mourns you, not the cost of your funeral! After buying a house and sending children to college, dying might be the most expensive thing a Canadian will ever do. And cutting the costs is not always easy.

"It's fine to have a nice elaborate funeral if you have the money and that's what you want to do," says Nicole Renwick, executive director of the Memorial Society of British Columbia.

The average funeral costs \$10,000, she estimates. But costs quickly add up. Caskets range from \$300 to \$12,000. Cemetery plots cost between \$2,000 and \$10,000. Then there are extras. "You're going to have to pay for the staff, the ceremony, the use of the funeral home, the cars," says Renwick.

In a survey by the Canadian Independent Group of Funeral Homes, the average cost of a funeral in eastern Canada is \$3,075. In central Canada, professional services can exceed \$4,000. In the West, the average cost is \$2,875.

"If you just want to be cremated — no service with a funeral home — that varies between \$1,000 and \$2,000, depending on the area," Renwick says. But a traditional funeral can easily cost up to \$25,000, she adds.

In most transactions this large, many people would try bargaining on the price. But when it comes to burying a friend or relative, no one wants to seem cheap. That kind of thinking, however noble, is a mistake, says R. Brian Burkhardt, author of *Rest in Peace: Insider's Tips to the Low Cost Less Stress Funeral*.

"Quite frankly, the money should go for the living," says Burkhardt. "Why should you put \$15,000 in the ground for a funeral when the money can go to your grandkid's education or to a relative?"

People shouldn't be shy about opting for a low-cost funeral, especially in this economy, adds Burkhardt.

"If you take away all the emotion from the situation, it is a contract negotiation. Funeral directors will negotiate with you for a lower cost," Burkhardt says. For example, he says, you can opt not to have the body embalmed.

"That is the best way to lower funeral costs," he says.

"It can save you at least \$600 or \$700."

Making funeral arrangements can be highly stressful, however, and most people will want to provide loved ones with the best funeral possible.

This is why funeral experts recommend pre-planning. "Make your decisions beforehand. That way, the children don't feel any guilt," says Renwick. "A lot of people prepay because they don't want their family to have to deal with it."

For those who pre-arrange their funerals, they need to make sure children are well aware of what plans have been made, as well as what has already been paid for.

"I always tell whoever is going to make any kind of arrangement, make sure you speak to your children and tell them what's been done, because 20 per cent of pre-payments are never claimed because there is no paper trail," Renwick says.

But overplanning can also add to the stress of a funeral, says Robin Heppell, a funeral director based in Victoria. Plan the basic outlines, he says, but leave some room for children or others to have input.

"It's good to make arrangements ahead of time, to look after a good portion of the finances and to get your general wishes down, but also leave some degree of creativity or opening where the family can make the service more meaningful," he says. Otherwise, you risk your last goodbye being tinged by bitterness. And no amount of money can change that.

Provided by The Memorial Society  
of Edmonton and District

### Your Views

Send your comments and letters to:

ACA News, 210-14964 121A Ave.

Edmonton, AB, T5V 1A3.

Fax: (780) 425-9246

info@acaging.ca

## **INFO FOR SENIORS**

# Food safety more important as we grow older

Health Canada and the Canadian Food Inspection Agency are reminding Canadians of the importance of food safety for older adults.

As we age, it becomes harder for your immune system to fight off harmful bacteria. This means that older adults can come down with a serious illness if they eat contaminated food.

For this reason, it is very important to choose, handle and cook food properly before eating. It is important for older adults and caregivers to follow food safety steps to reduce the risk of foodborne illness.

It is estimated that there are 11 million cases of foodborne illnesses in Canada every year. Many of these illnesses could be prevented by following proper food handling and preparation techniques. These are:

### **Separate**

At the grocery store, separate raw meat, poultry, fish and seafood from other grocery items. Place these raw foods in separate plastic bags that you can get in the produce or meat sections.

In your home refrigerator, store raw meat, poultry, fish and seafood on the bottom shelf to prevent any juices from the meat dripping down onto other foods.

Wash all plates, utensils, and cutting boards that touch or hold raw meat, poultry or seafood with warm soapy water before using them again for foods that you do not cook before eating, like fresh fruit and raw vegetables or ready-to-eat foods.

### **Clean**

Wash your hands with warm, soapy water for at least 20 seconds before and after handling raw meats, poultry or seafood and after using the bathroom, touching pets or changing diapers.

Always wash raw fruits and vegetables gently in cool, running water. You can also use a vegetable brush to scrub hard skin produce such as carrots, potatoes, melons and squashes.

Remember, you can't always tell whether foods carry surface bacteria by the way they look, smell or taste.

After using reusable bags for grocery shopping, make sure that you clean them after use, especially if they contained raw meat, poultry or seafood.

It is a good practice to have reusable grocery bags specifically for raw meats, poultry, fish and seafood, and to label them as such.

### **Chill**

Make sure you store raw meat, poultry and seafood in the refrigerator at 4°C (40°F) and below. After shopping, make sure your raw meat, poultry and seafood are refrigerated as soon as possible, especially on hot days.

Put leftovers back in the refrigerator as soon as you are finished eating. Never leave food out on the counter for over two hours. The simple rule is: When in doubt, throw it out.

### **Cook**

Make sure that food is thoroughly cooked before eating it. Visual cues like colour are not a guarantee that food is safe. A digital instant-read food thermometer shows when meat and poultry are safe to eat. Cooked foods are safe to eat when internal temperatures are:

- 71 degrees C (160 F) for ground meat.
- 74 C (165 F) for leftover food and boned and deboned poultry parts.
- 85 C for whole poultry.

### **Caution**

Older adults should also pay close attention to what they are eating.

Some foods are at a higher risk for foodborne bacteria than others include: hot dogs and deli meats; raw or undercooked meat, poultry and seafood; refrigerated smoked fish or seafood; unpasteurized juice, cider and milk; soft and semi-soft cheeses made from raw or unpasteurized milk; refrigerated pâtés and meat spreads; uncooked foods made from raw or unpasteurized eggs.

*For more information on food safety, including food recalls, visit: [www.foodsafety.gc.ca](http://www.foodsafety.gc.ca)*



## **INFO FOR SENIORS**

### **Q&A**

#### **Are there programs that Seniors should apply for before turning 65?**

Prior to turning 65, Seniors should contact the federal and provincial governments regarding:

- Federal programs — (six months before turning 65) Old Age Security, Guaranteed Income Supplement, Canada Pension.
- Provincial programs — (three months before turning 65) Alberta Seniors Benefit, Blue Cross Coverage for Seniors.

More information is available by calling toll-free 1-800-642-3853.

#### **Is assistance available for healthy and independent Seniors who require assistance with needs like housekeeping, laundry and meals?**

The Seniors Lodge Program offers single or double bedrooms, meals, housekeeping, linen/laundry and recreational services. Senior citizens who are functionally independent are eligible to apply for this program. More information on eligibility is available on the Seniors and Community Supports website or by calling (780) 427-3919.

#### **Are there any programs to assist Seniors with hearing aid costs?**

Alberta Aids to Daily Living provides a wide range of authorized benefits to Seniors including assistance with the of hearing aids. To apply, call 310-0000 and ask for 780-427-0731.

#### **How long should I expect to live after retirement?**

The most recent measure of life expectancy at birth in Canada was 80.7 years, up from the average 78.4 a decade earlier. Life expectancy for Seniors at the age of 65 has also been rising for several years. On average, a 65-year-old man can expect to live an additional 18.1 years, an increase of two years from the previous decade. A 65-year-old woman could expect to live an additional 21.3 years, up by 1.3 years. Gains in life expectancy in the Senior years accounted for about 70 per cent of the increase in life expectancy at birth.

## **Pilot website addresses unsafe medication**

To err is human. But receiving the wrong medicine, or the wrong dose of a medicine, could harm your health. The fact is, mistakes with medicines happen, but they are preventable. Things like sound-alike names, confusing product labels or problems with the way medicines are handled can lead to mistakes in health care.

Mistakes with medicines (and problems that could cause mistakes with medicines) are called “medication incidents.” When incidents are reported and reviewed, problems that could cause mistakes to happen can often be found and corrected. At the Institute for Safe Medication Practices Canada (ISMP Canada), our job is to study the causes of medication incidents and recommend ways to prevent them.

We believe that consumers can also play an active role in preventing mistakes in health care. That’s why we have created a website, [www.SafeMedicationUse.ca](http://www.SafeMedicationUse.ca), that provides a way for consumers to report medication incidents to ISMP Canada. The website also provides useful suggestions on how to reduce the chances of a medication mistake happening to you or to someone in your family.

You can help prevent harmful medication incidents.

We are inviting you to participate in a pilot test of [www.SafeMedicationUse.ca](http://www.SafeMedicationUse.ca).

We invite you to:

- Visit our site to get information on the safe use of medication.
- Use our on-line reporting system to report a medication incident.
- Tell us what you think, by completing our online survey.
- Spread the news about [www.SafeMedicationUse.ca](http://www.SafeMedicationUse.ca) to your family and friends.

Together, we can make healthcare safer!

This project can only succeed with your participation. Please visit [www.SafeMedicationUse.ca](http://www.SafeMedicationUse.ca) today.

ISMP Canada is a key partner in the Canadian Medication Incident Reporting and Prevention System.

## **INFO FOR SENIORS**

# **Stair safety in 12 easy steps**

Seniors are more at risk for falling on stairs than younger adults, and more likely to suffer severe injuries. In fact, Seniors over 65 account for 70 per cent of the deaths resulting from stair accidents.

Take a few minutes to review the safety of the stairs in your home and how you use them.

1. Is there a light switch at the top and bottom of your stairs? If not, install lights and switches to ensure all your stairways are well-lit.

2. Are all your steps in good repair? Make sure there are no uneven surfaces, cracks, bunched-up stair-covering or protruding nails.

3. Are the steps all the same size and height? Have a carpenter correct uneven steps. They are a major hazard.

4. Are you able to see the edges of the steps clearly? Paint a contrasting colour on the edge of wooden or concrete steps (or on the top and bottom steps), or apply special strips you can buy to enhance the visibility of each step.

5. If you have a carpet or other covering on your stairs, is it fastened securely? Stair carpeting can cause slips. Consider removing it or replacing it with well-secured rubber stair treading.

6. Is the handrail well attached to the wall and easily grasped? Make sure the handrail is well-secured and that

you can get your full hand around it.

7. Is the handrail at a height of 36 to 39 inches (90 to 100 cm)? There should be a handrail on at least one side of all stairways. The height should allow you to use it comfortably when your arm is slightly bent at the elbow.

8. Are your stairs free of clutter? Avoid storing things temporarily on your stairs. Always check the stairs as you walk up or down.

9. Have you removed loose carpets or throw rugs from your stair landings? Loose floor coverings at the top or bottom of the stairs are a hazard. If you have rugs make sure they are nonslip, or have a rubber backing.

10. Do you take your time when going up or down the stairs? Best way is slowly—hand on the handrail.

Rushing is a major cause of falls.

11. Do you make sure your vision isn't blocked as you go up or down your stairs? If you're carrying something, make sure it doesn't hide the stairs and that one hand is free to use the handrail.

12. Do you remove your reading glasses when using stairs? Be sure you remove your reading glasses for walking or climbing up or down stairs. If you use bifocals, tilt your head so you can see the stairs clearly.

Take 12 steps to be safe!

Public Health Agency of Canada

## **TIPS ON MAKING THE TRANSITION TO RETIREMENT**

Retirement can be a major source of stress because our job is usually a very important part of our life. This stress may be even greater if we have been forced to retire because of our employer's retirement policies. Retirees often lose their sense of identity and feel less worthwhile; most miss the daily contact with friends from work.

However, retirement can be one of the best times of life, and there are things you can do to meet the challenges facing you, such as:

- Make a list of your abilities and skills. The skills and experience you have earned from a lifetime of work may help you succeed in a small business or volunteer work for a favourite charity.

- Enrich your life by renewing contacts with neglected

family members and old friends. Too often, work gets in the way of our relationships and those we care about.

- Renew your interest in the hobbies and activities you enjoy. You now have time to play — enjoy!

- If you can afford it, travel. There are probably places you have wanted to see all your life. The early years of retirement can be the ideal time to become a nomad for a while.

Canadian Mental Health Association

### **REMINDER**

If you haven't already renewed your ACA membership, please see the form on page 23

## INFO FOR SENIORS

# Pirates of the Internet

John had a sailboat. The “Moon River” was an ocean cruising vessel, and though it had never seen saltwater, had enjoyed many a summer cutting across the crystal blue waters of the north.

With the kids grown and health becoming more of an issue he decided to sell his boat on an online classified website. Placing the ad was easy, and best of all, free. In moments the *Moon River* set sail across cyberspace.

A few hours later when he next checked his e-mail, someone wanted to buy his sailboat.

“I write about your boat. Father had boat like it when I was small. Had to sell to make money for food. Would like to please father with boat. It would make me happy to buy your boat. Please reply at once.”

The poor English caused John to smile but he knew that his ad was being read by people around the world so this wasn’t abnormal. He typed a quick response telling the buyer he wanted \$18,000 for the boat and went on to describe it in greater detail than what was in his ad.

Within the hour he had a response asking for his mailing address. The deal was closed with the buyer wanting to send John a cheque for the full amount to ensure he “won” the boat. John was pleased.

A week later an envelope arrived containing the cheque made out from a university in Miami. As he had been assured, the cheque was made out to himself in the full amount of \$38,000.

“Thirty-eight thousand,” John said in dismay. “That’s too much.”

He immediately got on his computer and sent the buyer an e-mail. “You sent too much money.”

The reply took moments to return.

“Secretarial error. Wrong cheque in wrong envelope. Deposit cheque as it is good and wire back the difference. Please e-mail money order transit number. Sorry. Will arrange boat pick up through shipper.”

John peered at the cheque against a lamp and it seemed to be genuine. His name and the amount had been stamped in using a cheque writer. The usual security features were imbedded in the cheque itself such as fibres and ghost images.

Satisfied, he took the cheque to his bank and made the deposit. He then wrote a cheque from the account for the



Beware buyers who pay too much.

\$20,000 difference and drove over to the money transfer business.

The money wire went off without a hitch and securing his receipt along with the transit number in his pocket, John returned home to e-mail the number to his buyer.

Days turned into weeks and still no response from the buyer. John began to get worried. His e-mails were not returned, and though he still had his sailboat, his stomach was beginning to turn somersaults at the vague thought he may have been scammed.

After a month, John reported the matter to the police, and after a few quick phone calls they confirmed he was the victim of fraud.

The cheque he received was indeed a real cheque. However a phone call to the university revealed that it was on an old account that the school had closed two years earlier. The university had thrown all the remaining cheques in the garbage — all 1,300 of them!

In chasing down the money order to Miami, the detective discovered the money wire was picked up in Paris, and not in Miami, as John had thought it would.

Of course, the cheque from the university bounced. John’s name and the amount had been added to a blank cheque stolen from the school’s dumpster. John now owed his bank \$20,000, which he is now paying off in the form of a loan.

*For additional copies of A Senior’s Guide to Fraud Prevention, Stop Financial Fraud: Protect you and your Finances DVD or the Helping Hands Service Providers Guide please contact the ACA office at (888) 423-9666.*

## LETTERS TO THE EDITOR

# Closing local hospital forces Seniors to drive long distances

I am very upset hearing that so many local hospitals are being shut down. This doesn't make any sense to us. Things were just fine the way they were.

Our hospital in Ponoka is a vital Health Centre with good care given to all who need it.

There are people who have to go to this hospital for blood tests at least every second day. Some can't drive in the city or for long distances. So they will have to hire someone for this. This will be a great expense which is impossible for some.

That is not improving their health or well being.

Surely some other project can be cut back that won't affect peoples' health.

We are a rich province with money set aside for a rainy day. Use these monies, as it is a rainy day. The sun will shine soon and the economy will rebound again. So hang on.

The Bentley Hospital was turned into a Seniors extra care and is great! Leave it as is. There's room there and very good care for patrons.

I. & G. Taylor  
Ponoka

## Seniors now the main target of health care cuts

Recently, there have been a few encouraging changes in the province's efforts to reform the health care system.

The irascible Ron Liepert has moved on to the energy portfolio and been replaced as Health Minister by the much more affable Gene Zwozdesky who, in his earlier days, was a crackerjack teacher.

Also, the government has backed off Alberta Health Services' plan to move 246 mentally ill patients out of the Alberta Hospital into the community. Instead, 100 geriatric psychiatric patients will be moved into Villa Caritas, a new facility originally intended for Seniors requiring long-term care. Any other patient relocations have been postponed pending a major review of the mental health system.

Additionally, Minister Zwozdesky has overruled a previous decision to close 300 hospital beds in Calgary and Edmonton.

While these changes are welcome, one should not overstate their significance and think they herald a major change in direction. They do not address the damage that has been done to our health care system in the past 20 months. We still have the Alberta Health Services Board dominated by high-profile business types preoccupied with the bottom line.

More particularly, these changes don't address any of the off-loading of government costs onto Seniors. So far, there has been no indication of any change in the Continuing Care Strategy and the Pharmaceutical Strategy announced by Minister Liepert in December 2008.

The 600 new long-term care beds promised by Premier Stelmach have still not materialized and we still have a freeze on the number of long-term-care beds.

The Alberta Health Services Board seems intent on limiting that number to 14,500 by either persuading private operators to build LTC facilities to wring profit from wealthy Seniors, or by forcing middle-income Seniors to settle for Assisted Living facilities where much of the care they require will, unless and until they are impoverished, be billed as extras over and above

Send your comments and letters to: ACA News, 210-14964 121A Ave.,  
Edmonton, AB, T5V 1A3. Fax: 780-425-9246. e-mail: [info@acaging.ca](mailto:info@acaging.ca)



## **LETTERS TO THE EDITOR**

their accommodation fees.

Charging people over 65 for medically necessary services seems to be the accepted way for this government to trim its health-care budget.

Additionally, the Continuing Care Strategy promised an increase in Home Care that has not materialized. Most Seniors want to stay in their own homes as long as possible and the government says that is also what it wants.

But the simple fact is that Seniors are being driven out of their homes into care facilities because of the inadequacy of the public home-care system and the cost of privately operated home care.

Turning to the Pharmaceutical Strategy, July 1, 2010 has been selected as the date to eliminate the existing universal drug plan for seniors and implement a new means-tested plan.

Under this plan, Seniors who choose to participate will be the only Albertans whose drug premiums are a function of their income. Implementing this plan will be chaotic. Seniors cannot estimate what their prescription drug costs will be if they enroll and have to pay the full cost of the many drugs not covered in the government plan. Nor have private insurers yet been able to calculate what premiums to charge seniors who do and do not enroll in the government plan.

At a recent meeting of Seniors' organizations to determine the most pressing priorities for Alberta's Seniors, scrapping of the Seniors' Pharmaceutical Strategy was chosen as the most urgent short-term goal. Seniors groups will be urging their member to contact the new Minister of Health and Wellness and their MLAs to this end. We would all be well advised to do the same.

Noel Somerville, Chair  
Seniors Task Force  
Public Interest Alberta

*(Editor's note: Implementation of the Pharmaceutical Strategy was delayed after this letter was received; perhaps another "encouraging change"? The ACA will watch with interest for new initiatives in this area.)*

### **Thanks from a fan**

Attention Gary Pool and Staff:

Thank you so much for your dedication to the *ACA News* and for the information you accumulate to share with us. We look forward always to the arrival of each issue. I want to be certain you all know how much you are appreciated.

Sincerely,  
G. & N. MacDonald

### **A special poem for older folks**

*A row of bottles on my shelf  
Caused me to analyze myself.  
One yellow pill I have to pop  
Goes to my heart so it won't stop.  
A little white one that I take  
Goes to my hands so they won't shake.  
The blue ones that I use a lot  
Tell me I'm happy when I'm not.  
The purple pill goes to my brain  
And tells me that I have no pain.  
The capsules tell me not to wheeze  
Or cough or choke or even sneeze.  
The red ones, smallest of them all  
Go to my blood so I won't fall.  
The orange ones, very big and bright  
Prevent my leg cramps in the night.  
Such an array of brilliant pills  
Helping to cure all kinds of ills.  
But what I'd really like to know....  
Is what tells each one where to go?*

A. & S. Eleniak

*(Editor's note: Thanks. We all need a good chuckle, twice daily as directed.)*

Send your comments and letters to: ACA News, 210-14964 121A Ave.,  
Edmonton, AB, T5V 1A3. Fax: 780-425-9246. e-mail: [info@acaging.ca](mailto:info@acaging.ca)

## NOTICE BOARD

### *Continued from page 14*

He said the situation was reminiscent of the Reagan administration's strategy of "starve the beast" — since a government can't get elected on cutting social programs, they run on cutting taxes; when taxes are cut enough, social programs become un-sustainable.

Finally, Noel noted the difference between Norway (an oil producer) and Alberta. Alberta after 60 years of extraordinary resources had savings of \$14.4 billion. In 2009 alone, Norway salted away \$29.4 billion to a fund developed in 1990 which has a value of \$457 billion.

The evening wrapped up with thank yous to the presenters, runners, and especially to attendees to learn and carry away new messages.

Attendees were challenged to call friends, inform their families, and where opportunity presents, frame their questions of concern to the government of Alberta, its MLAs, departments and the premier.

Our challenge is to create a way to get these five expert messages out to the whole Province!

*Anyone wishing scripts of the evening, contact the ACA Office at [info@acaging.ca](mailto:info@acaging.ca), (780) 423-7781, or 1 (888) 425-9666.*

Respectfully, Floyd Sweet, Policy Advisory  
Committee Chair

### ACA News Committee

ACA wishes to form an ACA News Committee. Volunteers for this committee must have access to the Internet and e-mail. The committee will meet five times a year either in person or by conference call to plan articles and edit content and layout for final proofing. If you are interested in being a part of this committee, please contact Marcie Hoffman at the office: 1-888-423-9666.

### PLEASE RENEW YOUR MEMBERSHIP

See form on opposite page, or  
Phone: 1-888-423-9666  
[info@acaging.ca](mailto:info@acaging.ca)

## Notice of Bylaw Change

Notice of Motion that the Past President be an *ex officio* member on all committees and the board for the first year following his/her term of office; that term may be renewed by one year on the advice of the Board.

## Thank you donors

ACA would like to thank the following people for their generous donations:

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# Alberta Council on Aging Membership Form

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