

# Alberta Council on Aging

Working to improve the quality of life for older persons

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### On the Cover

Outstanding community builder Donna Fong, picking antioxidant-rich Haskap berries at Rosy Farms

Cover photo and page 25 by Kim Fong

### **Guest Column**

Keith Oberle shares his experience with driving tests page 20

### Health and Wellbeing

page 8 - 13

### **Guest Artist**

Poet/ Farmer William Daskavich page 24

### **Quality of Life Survey**

page 14

Views expressed in this publication do not necessarily reflect those of Alberta Council on Aging. We reserve the right to condense, rewrite and reject material.

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## Table of Contents

Farewell Merry Reimer	4
President and Executive Director's Report	5
Норе	6
Covid-19 Resources	8
How to Wear a Medical Mask Safely	9
Easy Meals	10
Simple Exercise Ideas	11
How Older Adults Can Protect Their Mental Wellness During Covid-19	12
Quality of Life Amidst Pandemic 2020 Survey	14
Guest Column: Driving, Age and Tests	20
Learn Along with Future Geriatricians	21
What are We Working On?	23
Senior's Lockdown Lament	24
Haskap Berry Muffins Recipe	25
How is the Covid-19 Pandemic Affecting Ageing Populations Webinar	26
2020 International Day of Older Persons	27
How to Prepare for a Virtual Meeting with Your Health Care Provider	29
Third ACTion film festival goes online!	30
Membership and Donation Form	31

Thank you to the attendees and sponsors of the 53rd Annual General Meeting June 18 by teleconference





## **Donations and Support**

Heartfelt thanks to Sheba Goldstein, 96 of Toronto who extended her membership to be a Lifetime Member and gifted ACA with a generous donation. When we spoke, she had this to say, "You were there for me when I needed you to obtain my travel insurance. I won't likely be traveling, however, now I want to be here for you!" Sheba said she enjoys the newsletter and appreciates the tidbits of advice and ideas.

Thank you to our recent donors:

Wendy & Greg Armstrong Sheba Goldstein Donna Quinton Anne & David Ruptash Catherine Ryan



Click logo to donate to Alberta Council on Aging today!

### Farewell long time member Mary "Merry" Reimer



Mary (Merry) Reimer, born January 21, 1924, passed away peacefully on June 23, 2020 at the age of 96. She was predeceased by her husband Neil in 2011. Merry was born in Brooksby, Saskatchewan and moved to Regina to pursue an education and work at the Coop Refinery, where she met Neil, her husband of more than six decades. They moved to Alberta in the early 1950s and made their home in Edmonton. Merry played a crucial role in the formation of the New Democratic Party in Alberta. She loved crossword puzzles, as well as playing scrabble and bridge. She was a three-time seniors golfing champion and was made an honorary member at the Riverside Golf Club. Mary also loved to entertain, dance and participate in the Women's Bowling League at Bonnie Doon.

A special thank you to all the staff at Rosedale Estates for their wonderful care of our beloved mom and grandmother.

## President and Executive Director's Report

Beginning in mid-March, Alberta Council on Aging has been an active participant in regular stakeholder teleconferences hosted by the Ministry of Seniors and Housing in response to the Covid-19 situation. The meetings discontinued at the time of Alberta's Stage 2 relaunch, however the ministry is demonstrating open communication and seems sincere in wanting to hear of the issues, challenges, successes and possible solutions around the experience of older Albertans at this time.

This year's Annual General Meeting was held by teleconference June 18 – a first for us. While there were a few glitches, we were able to conduct the necessary business efficiently, economically and most of all, safely. Thank you to all who participated, we appreciate your time and interest.

We are happy to announce we have received approval for year two of the Aging Well in Communities grant from Alberta Seniors and Housing. The grant was originally assigned to Let's Stop Ageism campaign and is repurposed to further develop and support volunteers of which our grassroots organization is founded upon. Also included in the budget is the upgrade of online programs and services, and ease of use for the website.

We are hearing a range of concerns from our members and older adults, from changes to health benefit coverage, provincial pensions, the closure of parks, experience of being in quarantine in a congregate setting and driving and age. Please continue to contact us as well as the regional directors with your thoughts and your suggestions. We appreciate and need your input! Please take the time to respond to our Quality of Life Amidst Pandemic 2020 survey online or on page 14. We have the opportunity to directly speak to concerns on behalf of older persons in Alberta and Canada. Your voice matters now more than ever before.

Regional directors and volunteers will continue to reach out to members through our newsletter, website and social media, emails, and phone calls. Our Volunteer Coordinator Jessica Kinsella will be organizing small forums by phone and internet to take place throughout the province, commencing in the fall. Stay in touch and let us know how your organization, Alberta Council on Aging, can better support you and older adults into the future. We hope everyone will enjoy a safe and healthy summer.

Respectfully submitted,

Ron Rose, President Donna Durand, Executive Director 

Sylvia Shewshun (above) surprised a neighbour on his 90th birthday at the Rosealta Lodge Camrose by dressing up and making some birthday noise outside his window.



"After walking alone through ice, snow, and freezing weather (no public washrooms open), I finally celebrated when I reached my goal of 100 km within one week. I actually exceeded the goal and walked 102 km. I will never forget my 73rd birthday in the time of Covid-19 celebrating under a tree!" - Kathy Owens

Edmonton and area Director Nick Chrapko (left) on his 78th birthday: "I wish I could be this age forever!" Nick has placed over 400 telephone calls; checking in on members. He has also spent a significant amount of time in Age Friendly Edmonton meetings and assisting with ACA human resources.



## Covid-19 Resources

Alberta Government Covid-19 Actions Update By phone: 780-310-0000 (in Alberta)

Federal Government Covid-19 Resources

Healthy Aging CORE is a provincial website providing online resources and education for organizations and individuals

### Alberta Health Link

Free 24/7 telephone health service that offers health advice from registered nurses.



Seniors Supports & Services Information Phone Line - call 211



**Elder Abuse -** For 24 hour support and referral, call the Family Violence Info Line: 310-1818

### Seniors Centre Without Walls (SCWW)

Offering a variety of interactive telephone-based social and health programming, free of charge. To register, call 780-395-2626

### **Caregiver Advisor**

Advisors offer one-on-one assistance to resources, personalized support, and will be there to listen. Phone: **780-453-5088 | 1-877-453-5088 (toll-free)** 

# Stay safe during the Covid-19 situation:

- Wash hands often
- Practice physical distancing
- Wear a mask when in public
- Wear a mask when physical distance cannot be maintained
- Stay home when feeling unwell
- Isolate according to health orders
- Exercise daily
- Get fresh air
- Aim for a balanced diet
- Reach out– call family and friends

Information sourced from the Public Health Agency of Canada

## HOW TO WEAR A MEDICAL MASK SAFELY

who.int/epi-win



Ensure the

colored-side faces

outwords

Remove the mask from

behind the ears or

head



Wash your hands before touching the mask



Cover your mouth, nose, and chin



Discard the mask immediately after use preferably into a closed bin



inspect the mask for tears or holes



Adjust the mask to your face without leaving gaps on the sides



Wash your hands after discarding the mask



Find the top side,

where the metal piece

or stiff edge is

Avoid touching the

mask

Do not wear a loose mask



Do not touch the front of the mask

Do not remove the mask to talk to someone or do other things that would require touching the mask

Place the metal

piece or stiff edge

over your nose

Keep the mask away

from you and surfaces

while removing it

Do not Use a ripped or damp mask



Do not leave

your used mask

within the reach

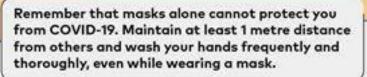
of others

EPI-WIN



Do not wear the mask only over mouth or nose

Do not re-use the mask







# **Easy Meals**

### Can't think of anything to eat?

Here are some ideas for a quick, easy, and healthy meal. Each meal includes vegetables and fruits, whole grain foods, and protein foods from Canada's Food Guide.

Meal Ideas			
	<ul> <li>Fresh or frozen fruit</li> <li>Oatmeal or whole grain cereal</li> <li>Lower fat plain yogurt</li> <li>Nuts and/or seeds</li> </ul>	:	Fresh or pre-made salad Whole grain baked pita pieces or whole grain crackers. Canned chickpeas, tuna, or boiled eggs
	<ul> <li>Fresh or frozen vegetables (celery, carrots, onion) added to lower sodium broth</li> <li>Pot barley or whole grain noodles</li> <li>Tofu, lentils, or cooked meat</li> </ul>	Ser.	Sliced banana Whole grain bread Peanut butter Unsweetened fortified soy beverage
	<ul> <li>Fresh vegetables (lettuce, tomatoes, carrots)</li> <li>Whole grain pita bread</li> <li>Canned salmon or tuna</li> </ul>	-	Boiled vegetables (broccoli and/or carrots) Quinoa Baked chicken or fish
	<ul> <li>Fresh or canned fruit (berries, oranges, pears)</li> <li>Whole grain toast</li> <li>A poached or hardboiled egg</li> <li>Lower fat milk</li> </ul>		Fresh vegetables (spinach, peppers, zucchini) Whole grain pita bread or naan with tomato sauce Cooked meat sliced and grated cheese
	<ul> <li>Tomato sauce with vegetables and a side garden salad</li> <li>Whole grain pasta</li> <li>Cooked ground beef (lean or extra lean) or vegetarian ground round</li> </ul>		Roasted vegetables (corn, peppers, onion) Whole grain tortilla or roti Canned brown, kidney, or navy beans
	<ul> <li>Stir-fried vegetables (broccoli, bok choy, green beans)</li> <li>Whole grain brown or wild rice</li> <li>Sliced cooked meat (beef, pork, turkey, chicken) or tofu</li> </ul>		Sautéed vegetables (peppers, mushrooms, spinach) Whole grain pita bread or chapatti Scrambled eggs

### For more information

#### Visit Canada.ca/Food Guide. .

Visit healthyeatingstartshere.ca to find the Weekly Menu Planner and Healthy Grocery list. ٠

#### Quick and Easy Meals

Page 2 of 2 404231-NES This is general information and should not replace the advice of your health professional. Alberta Health Services is not liable in any way for actions based on the use of this information. This handout may be reproduced without permission for non-profit education purposes. This handout may not be changed without written permission from NutritionResources@albertahealthservices.ca. © Alberta Health Services (Nov 2019)

# **Simple Exercise Ideas**

Exercise and be active every day so you can keep doing what's most important to you.

# Practice all 4 types of exercise for the most benefits.



Walking is one of the easiest and affordable forms of exercise! Get in a routine:

- Set your alarm and start your day with a walk around the block. Try to increase your distance every week
- If you're not an early bird, try to go out for a walk after dinner - it aids in digestion
- Use the buddy system ask a friend to join you as your walking partner (while maintaining physical distancing) to keep you accountable
- Walking can be done anywhere! Around your living room during TV commercials or around your backyard while gardening
- Don't own weights? Use canned goods, like soup or beans. Even toilet paper works!
- Use a chair or wall to practice balancing exercises
- If watching TV and seated, you can do knee lifts, kicks, foot slides, touch your toes, punches or arm circles
- When doing seated activities, get up every 30 minutes or during TV commercials and do an active chore. For example, empty the dishwasher, fold some laundry, go up and down the stairs, or take out the garbage. You will be moving, stretching and will feel more productive!

#### Pictures referenced from

https://www.nia.nih.gov/health/exercise-physical-activity Get exercise ideas, motivational tips, and more from Go4Life<sup>®</sup>, an exercise and physical activity campaign for older adults from the National Institute on Aging at NIH.

### [Health and Wellbeing]



# HOW OLDER ADULTS CAN PROTECT THEIR MENTAL WELLNESS DURING

No one is immune to the psychological toll of COVID-19-related restrictions. For older adults, however, the heightened fear of contracting the virus, a sudden decrease in connectivity, or the loss of outside support can make their situation more difficult. To help self-isolating seniors who are at home during the pandemic, the Mental Health Commission of Canada (MHCC) asked Dr. Keri-Leigh Cassidy, professor of psychiatry at Dalhousie University and founder of the Fountain of Health optimal aging initiative, to share some practical advice on how to deal with the challenges of COVID-19.

### Focus on what you can control

Turn your attention to the things you have control over, such as self-care. To help stay on track, try structuring your day by writing a checklist with things like physical activity, nutritious meals, and meaningful hobbies. Checking off each item as you complete it will help you feel productive and boost your mood. Focusing on areas within your control can also reduce stress and improve long-term resilience. To learn more about self-care and other helpful resources, visit Fountain of Health.

### 2 Get creative about connecting

Social connection looks different these days, but it's as important as ever for bolstering mental wellness. While phone calls are a great way to stay in touch with friends and family, they aren't the only way to connect from a distance. Consider exchanging letters, going for a (safely spaced) walk together, or doing a drive-by visit to catch up with loved ones. You can also explore video-chat options or virtual book clubs to stay in touch.

### Be open to technology

Unfamiliar technology can be intimidating, but it's never too late to learn something new. In addition to communication, technology can be used for entertainment, learning, and accessing helpful resources. Examples include:

- The Wellness App, an evidence-based tool for setting and tracking health goals
- The MHCC Resource Hub, mental health information and resources related to COVID-19
- Wellness Together Canada, the federal government's mental health resource portal
- Skillshare, free video tutorials on a variety of subjects
- Headspace, a mindfulness app offering free content during the pandemic

### Limit your exposure to the news

While it's natural to want to stay informed during a crisis, too much news can increase stress and make it more difficult to focus on what you have control over. Try to limit your news intake to 30 minutes per day and avoid consuming it close to bedtime. When you do seek out the news, choose sources with care and be wary of low-value imagery and sensationalistic language.

For additional guidance, see the MHCC's media consumption tips.

### 5 Self-monitor your mental wellness

With so much change and uncertainty, feeling some negative emotions is perfectly normal. But it's important to monitor your emotional state and be mindful of any negative patterns or impaired functioning that lasts more than a few consecutive days. A decrease in your appetite, weight, level of interest, energy, and concentration, or having feelings of hopelessness and suicide, are all signs of depression that require treatment. If you're concerned about your mental health, don't hesitate to speak to your family doctor or a mental health care professional.

### 6 Ask for practical help

There is no shame in asking for help of any kind. Besides the practical benefits, seeking support can reduce stress and improve your mood. The 211 system is a great way to learn about provincial resources and services that are available. Calling specific health and social service agencies can also be useful. If you have friends and family who can help with things like delivering groceries, don't hesitate to ask.

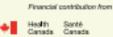
### 7 Channel past resilience

Some older adults can manage the stress related to COVID-19 better than younger adults. Their life experience enhances the ability to put difficult times into perspective. Consider how you overcame past challenges and trust in the resilience you've developed as a result. Given that the pandemic is just another storm, the fortitude you've built over a lifetime may help you weather it.

For more information, visit www.mentalhealthcommission.ca/English/covid19



Mental Health Commission de la santé mentale du Canada



Santé Ganada

Alberta Council on Aging Quality of Life Amidst Pandemic 2020 Survey				
We appreciate your time and input in completing this survey! If you would like to fill out the survey online, you can do so by clicking <u>here</u>				
Age Gender Marital Status				
Where do you live? <ul> <li>House / Apartment / Condo</li> <li>Lodge</li> <li>Supportive/Assisted Living Setting</li> <li>Hospital</li> <li>Long Term Care (Nursing Home or Auxiliary Hospital)</li> </ul>				
How would you describe your overall health before the pandemic?				
Comments:				
Do you think your physical health has improved or declined during this time (post-March 2020) <ul> <li>My physical health has improved</li> <li>My physical health has declined</li> </ul>				
How has your physical health been impacted?				

## [Survey]

Do you think your mental/emotional health has improved or declined during this time (post-March 2020) □ My mental/emotional health has improved □ My mental/emotional health has declined
How has your mental/emotional health been impacted?
Did you need medical attention during this time? □ Yes □ No
If Yes, what was your experience?
Did you receive home supports (meals, housekeeping, laundry) from paid workers or from family/ friends prior to Covid-19? □ Yes □ No
Did these home supports become reduced or discontinued during the pandemic?
□ Yes □ No
Comments:
Continued on page 16

## [Survey]

Did you receive healthcare services from paid workers or family/friends prior to Covid-19? □ Yes □ No
Did these health services become reduced or discontinued during the pandemic? □ Yes □ No Comments:
Have you received timely information on the Covid-19 situation?   Yes
Have you had extra expenses since Covid-19 restrictions have been put in place?
If Yes, have you been forced to defer bill payments or other financial obligations to support yourself or other family members? □ Yes □ No
If you were forced to defer bill payments or other financial obligations to support yourself or other family members, were you able to access any support or help to do so? Yes No Comments:

Were you able to obtain needed groceries, medi	icines, etc. in a timely manner?
If you did require help to receive essential servic Yes No Comments:	es, were you able to receive the help you needed?
What methods did you use to communicate with	n others during the pandemic?
□ Landline phone □ Cell phone	🗖 Email
Online (Social Media, Computer/iPad)	□ In Person
Are you a caregiver for a family member or frien	d? 🗆 Yes 🗆 No
Do you have anything you would like to share rea	garding your personal experience during the pande
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Send us your survey by mail: Alberta Council on Aging	Send us your survey by email:

A light rain From the pale gray sky Falls on An abundance of Miniature pansies Geraniums and roses Offerings to the deities The chit chit chittering Of sparrows and chickadees Fills our yard with song While I stand reflecting With your spirit By my side On the small boys and girls Who survived **Residential schools** By painting And writing And telling their stories Confronting the face of abuse Wearing moccasins to soften The harshness of rocky terrain Good men and women Like rain Slowly sprinkle Their truths Across the land Where we all belong

Adele Fontaine July 4 2020



# Driving, Age and Tests

by Keith Oberle

### My name is Keith and I am an old man.

At least, the provincial government says at age 75 I am too old to be trusted with a driver's license without proving my capability. The required proof is a document from my family doctor, not a driving test! (The "tests" used were the Simard and the Blind MoCa. Check Google for details of both, including the questions asked.) My family doctor's clinic requires that in addition to a physical exam, I must do a test of some mental ability. This test is NOT required (yet, anyway) by the government, even though my doctor said it is. He changed his story and apologized when confronted on this.

## Why is this a concern?

After now having been through the mental test for the last 2 years (I am now 76 and didn't get a clear pass last year), there are several concerns. In addition to the one raised in the opening paragraph — age 75 is the "drop-off" point – who says 75 is worse than 74 or 76, or any other number? What is the connection between the score on a test of memory and one's driving ability? I managed to get through 12 years of regular school, bachelors and masters' degrees, and completed the coursework for a Ph.D before jumping off of the education treadmill. One thing that I learned (there were a few more than one, really!), is I have good recognition memory, but poor recall of nonsense items. Multiple choice tests were my salvation in school! Nothing has changed with my advancing age, and as far as I know I have no apparent cognitive deficit, yet I was required to take these tests which depend on remembering inconsequential details, which has NEVER been my strength. My driving record over the last 57 years is clear except for two speeding tickets and one for coasting thru a stop sign. These transgressions have not been repeated for 30 years.

### More questions:

Why are doctors using these instruments? The government, as stated earlier, has not mandated this. Has the Alberta Medical Association mandated this for their members? Have the doctors decided to duck the responsibility of making decisions related to mental health and driving? Are general practitioners sufficiently educated in the mental and emotional qualities that make dangerous drivers? Now nurse practitioners are permitted to take the place of the MD. I'm not sure that this is an improvement as nurses don't have driving exams in their curriculum either.

### I do believe that our streets and highways need to be safe.

What is needed is some VALID means of assessing our driving ability. Ideally it probably should be administered every few years, either in an actual motor vehicle, or a validated simulator, if such a thing exists. At this time I don't believe that a computer program would work, as some seniors are not adept at using computers and the internet. I just got my first "smart" phone last week! Will self-driving vehicles eventually make this question moot? And will I live long enough and still have enough money to acquire one of them?

### [Feature Column]

## Learn Along with Future Geriatricians!

# Better with Age





Kim

Peter

Krista

We are honoured to have an ongoing column in the ACA quarterly newsletter! Our names are Krista, Kim, and Peter and we are medical residents in Calgary who love Geriatric Medicine and want to be Geriatricians in the near future. Please let us know what you want to hear about. We will do our best to answer your question and we welcome your comments.

> Please send questions and comments in care of: info@acaging.ca and we will respond in the next newsletter!

In this issue, we tackle some questions around the Alberta driving assessment for adults over the age of 75.

As we age, our bodies change in ways that can make driving more challenging. Vision, hearing and brain function (e.g. attention, executive function, and information processing), for example, are among the most important when assessing the ability to drive safely. Older adults are at higher risk of eye changes. Cataracts, glaucoma and macular degeneration make it harder to see the road, other vehicles, pedestrians, and signage. Cognitive problems, such as dementia – which is not a normal part of aging but a diagnosis more common among older adults, can impair one's judgment and lead to unsafe decisions on the road.

The natural process of aging also encompasses muscle and joint changes. Physical weakness and fatigue may contribute to difficulties with steering or braking, and osteoarthritis, (common among older adults), may limit one's neck range of motion making it difficult to shoulder-check when changing lanes or turning. Older adults may also experience a slowing of their reaction time. This may make it difficult to respond to changing road conditions and prevent collisions. Overall, although these age related changes may make it more challenging to drive, they are not sufficient to impair one's ability to drive; it is the accumulation of medical conditions that need to be screened for by a physician to make sure people are safe to drive.

Alberta's current guidelines recommend that anyone with a non-commercial driver's license have a general medical examination at age 75, 80, every 2 years after the age of 80, or earlier depending on your medical history. People who have a commercial driver's license (class 1, 2, or 4), must undergo the same assessment twice a year after the age of 45. Many parts of this examination are similar to when you see your physician for a checkup, such as blood pressure and diabetes management. However, it will also include other components, such as vision, hearing, mental health, and your brain and nervous system; a cognitive screen **may** be a part of this assessment as well.

Cognitive tests like Montreal Cognitive Assessment (MoCA) or Mini Mental Status Exam (MMSE), are used to screen for changes in cognitive function that affect one's ability to complete everyday tasks. The tests are used to assess different parts of the brain, including attention and memory – the loss of these may indicate cognitive impairment, and depending on the severity, dementia. This is important to identify as those with dementia are at higher risk for driving accidents. However, **a poor score on the MMSE or MoCA does not diagnose dementia on its own and does not indicate an inability to drive.** As per the Canadian Medical Association, there is no specific score that mandates discontinuation of driving and having dementia does not necessarily mean that you cannot drive. However, **a** diagnosis of moderate to severe dementia is a contraindication to driving and these diagnoses are not made lightly.

(Continued on page 22)

A flowchart of a driver's assessment can be followed below:

Step 1: Identifying drivers based on criteria<sup>†</sup> Age 75 Age 80 Every 2 years after age 80 More frequently at discretion of licensing authority Step 2: Assessments Medical assessments (Driver's medical examination\*, diagnostic tests)

Functional assessments (Cognitive testing, occupational therapy assessment, eye and hearing tests)

## Step 3: Driver's fitness determination

If there are concerns around fitness to drive, then you will be asked to complete a driving test

If there are contraindications to driving (e.g. new diagnosis of moderate to severe dementia), your license will need to be suspended

\*Alberta medical examination for motor vehicle operators †Adapted from the Canadian Council of Motor Transport Administrators

There are variations of the MOCA that can be used to test memory, including the blind MOCA. Typically, the blind MOCA would be used as an objective measure of cognition if the assessment was being done over the phone as it excludes parts of the exam that requires the patient to use their vision to interpret a question or task. This has been studied and validated in patients who have had a stroke. It is important to note that none of these tests were specifically developed to test ability to drive – these are tools physicians can use to help make a holistic assessment of patients.

Overall, general medical examinations are done to determine if there are any medical factors that would put a patient or others on the road at risk while driving. This is a preventative measure to keep everyone safe on the road. If concerns arise, typically your family doctor will recommend you have an additional road test arranged by Alberta Transportation or a private company that offers functional assessments geared towards older adults. Unfortunately, due to changes in funding from the provincial government, family doctors are now required to charge patients for the medical assessment. Functional assessments may or may not have a cost depending on which route your physician recommends. On-road tests are considered to be the best way to really judge whether your driving is safe or not. The purpose of the medical assessment is to identify people who would benefit from additional observation to protect themselves and others. Keep in mind that many older adults will retire from driving at some point or another (either due to medical issues or personal choice). Making this transition can be very difficult and it is never too early to begin to plan transportation strategies for the future.

#### Authors of this column:

Peter Hoang, Kimberly Moore, Internal Medicine Residents Krista Reich, Geriatric Medicine Fellow Dr. Erika Dempsey, Staff Geriatrician

#### Sources:

https://bit.ly/39DvMMy

## What Are We Working On?

#### Long Term Care in Canada: A National Shame

The pandemic of 2020, now several months in, is revealing both significant strengths and weaknesses across every sector of society. Canada has long prided itself for its observance of human rights and its global ranking as being # 1 in the world for quality of life. How then is Canada currently holding the record for the highest death rate of older adults living in long term care facilities? Alberta Council on Aging has a long history of speaking out about long term care. Initially we were challenged to respond to the grave situation Covid-19 is bringing to light within the care system by forming a coalition. However, many coalitions were quickly formed. Albert Council on Aging board of directors decided rather than compete we would support the existing coalitions and form a position paper to both reflect our members' thoughts and formulate a call to action to be shared with all levels of government. These are some of the areas we are compiling research on.:

- Snapshot of the System
- Expense and Profit
- Person Centered Care
- Upstream from Long term Care
- Solutions to Restoration

Bring the massive amounts of research and reports regarding long term care out of hiding. Bring all to the table. This is no longer about the will to do the right thing - this is about the application of **human rights** and quality of life. This is about having a good life enhanced by care not a challenging end of life brought on by poor quality care and environments. **This is about hearing the voice of those living at risk within settings that are to provide comfort, care, support, dignity and finally a quality of life.** 

**Citizens of Canada**, let your local, provincial and federal governments know we have collectively failed and we are complicit no longer.

- Donna Durand for Alberta Council on Aging

<u>Click here</u> to find your MP's (Member of Parliament) mailing address.

<u>Click here</u> to find your MLA's (Member of the Legislative Assembly) mailing address.

Senior's Lockdown Lament by William Dascavich

Wuhan ... I'd never heard the name For Covid 19, it would take the blame. Around the world Coronavirus spread Leaving many people sick, and some dead.

At first declared to be a local endemic It soon turned into a world pandemic. Causing fear and concern around the world As conspiracy theories and fake news swirled.

It was only a week or two before We found notes pinned to our door. Stay in your room, wear a mask Wash your hands, were all a task.

Quarantined for fourteen days Only out the windows could we gaze. Self isolation was enforced And social distancing endorsed.

No walking in the hallway to and fro Into the courtyard we could not go. As infection numbers grew day by day We had to order our food brought on a tray. Family or friends not allowed to visit On that the rules were very explicit. Staying at home soon became boring There was no fun in solitaire scoring.

Reading books was a great diversion But no trade for an outdoor excursion. Long hours turned into lonesome days As we tried to pass time in various ways.

Long cut off from family and friends Fervently wishing the lockdown to end As slowly days go by, and time unfolds We know not what the future holds.

To front line workers risking their health A bouquet of roses, an abundance of wealth. It's our safety that they have in mind A more dedicated group you will never find.





William (Bill) Dascavich, 92, Past President, Vegreville Chapter, A.C.A, retired from farming in the Mundare, district in 1991.

### [Recipe]

## Haskap Berry Muffins

### Ingredients

- 1 3/4 cups flour
- 1/3 cup sugar
- 1 tsp baking powder
- 1/2 tsp baking soda
- ♦ 1/2 tsp salt
- 1 cup sour cream
- ♦ 1 egg
- ◆ 1/4 cup milk
- 2 tsp grated lemon peel
- 1 tsp vanilla extract
- 1 cup fresh Haskap berries (Add 5 minutes of extra baking time if you use frozen berries)

### Instructions

- 1. Preheat the oven to 400° F. Line the cups of a 12-cup muffin tin (or two 6-cup muffin tins) with paper liners, or grease the cups.
- 2. In a medium-sized mixing bowl, whisk the dry ingredients together: flour, sugar, baking powder, baking soda, and salt.
- 3. In a separate bowl, combine the sour cream, egg, milk, lemon peel and vanilla extract. Add the dry ingredients, stirring until just barely combined.
- 4. Fold in the Haskap berries.
- 5. Divide the batter evenly between the prepared muffin cups. Bake in a preheated oven for 20 minutes or until the tops are golden-brown and a toothpick inserted into the centre comes out clean.
- 6. Let the muffins cool in the pan for 10 minutes, then transfer to a wire rack and let cool completely. Enjoy!



## How is the COVID-19 pandemic affecting ageing populations?

Cities in the Time of COVID-19: How is the COVID-19 pandemic affecting ageing populations? Webinar recording is available online <u>here</u> - Canadian Urban Institute 2020

### 5 Key Takeaways

### 1. COVID-19 is having specific effects on older adults.

Older adults have felt the effects of COVID-19 in profound ways. Access – to clear information, to assistance, to technology, to food and medication – has been a challenge for many. Moreover, the very new effects of social isolation are becoming more apparent. As cities move forward with reopening plans, many seniors are still wary of how to safely inhabit public spaces.

### 2. We must make our communities more age-friendly going forward

As Laura Tamblyn-Watts explained, most seniors – over 90% – will never live in a long-term care facility. Building resilient cities to allow seniors to age in place is therefore essential. This requires considering how to make our public spaces – streets, walkways, and parks – safe for people across all ages.

### 3. When rebuilding, we must focus on the most vulnerable

Behind closed doors, there are many seniors that are suffering. Some are still dying daily in care facilities in horrific conditions – indeed, it took the Canadian Armed Forces to bring this systemic issue to light in Ontario in May 2020. Seniors are experiencing housing instability, homelessness, and mental health challenges. Racialized seniors, isolated seniors, and seniors with disabilities face incredible inequity. Policy must focus on addressing the inequities in our systems and prioritize the most marginalized.

### 4. We know the solutions for fixing our broken healthcare system

Our healthcare system was designed in a time with different care needs, and as such, it is necessary that we find ways to adapt to the future. Solutions have been proposed for many years, and we now need to implement them. Laura Tamblyn-Watts offered four major areas of reform: staffing, infrastructure, adequacy of care/interdisciplinary care, and model of care.

### 5. Collaboration is essential for supporting seniors

The work does not stop with healthcare workers. Creating the best conditions for Canada's seniors demands action across different orders of government and governmental agencies, community organizations, researchers, and advocates. We need to appreciate our interdependencies. Support for seniors is needed in all arenas, and must be targeted at all levels. Some community organizations have begun this process, including faith-based organizations, libraries, community centres, telecommunications companies, neighborhood groups, and more.

In 1990, the <u>United Nations declared October 1 as International Day of Older Persons</u>. In 2017, this day became formally recognized in Alberta. Since then, communities across the province have joined the movement and have made their own proclamations, providing Albertans the opportunity to recognize and acknowledge our older citizens and to raise awareness of and address misconceptions about aging.

# 2020 UNIDOP: "Pandemics: Do They Change How We Address Age and Ageing?"

The year 2020 marks the 75<sup>th</sup> Anniversary of the United Nations and the 30<sup>th</sup> Anniversary of the International Day of Older Persons (UNIDOP). This year has also seen an emergence of COVID-19, that has caused an upheaval across the world. Considering the higher risks confronted by older persons during the outbreak of pandemics such as COVID-19, policy and programmatic interventions must be targeted towards raising awareness of their special needs. Recognizing older persons contributions to their own health and the multiple roles they play in the preparedness and response phases of current and future pandemics is also important.

### What can you do?

### **Declare International Day of Older Persons**

Along with Alberta Council on Aging, encourage your municipal leaders to make a proclamation declaring **October 1** as International Day of Older Persons.

### Host an Event

Bring awareness to International Day of Older Persons and celebrate age in your community showcasing your older adults through local media. Reach out by phone and email. Let people know they matter to your community and families.

For more information and support materials contact: Jessica Kinsella, Volunteer Coordinator <u>coordinator@acaging.ca</u> 780.977.7462





Canada Cares invites Canadians from coast to coast to nominate people in their lives who demonstrate dedication, tenacity and commitment to care that's deserving of recognition. They're also inviting requests for financial assistance with related needs.

To nominate visit: <u>http://www.canadianabilities.org/nomination/</u> or call **416-421-7944** (long distance charges may apply)

## How to Prepare for a Virtual Meeting with Your Health Care Provider

During the COVID-19 pandemic, many health care providers have started speaking with patients by phone or video call, instead of having in-person appointments. Even hospital staff are starting to use technology to communicate with their patients. They are doing this as a way to maintain physical distancing, because the virus can easily be spread from one person to another.

If you have an appointment for a "virtual meeting" it's important for you to be prepared. Before the meeting, collect the following information:

- Your symptoms and what you are worried about.
- Ongoing health issues, including pre-existing conditions (for example, diabetes or heart disease).
- Allergies to medications, foods, or environmental factors.
- A current medication list, including medication name, strength, and instructions.

Look for a summary of recently filled prescriptions from your pharmacy, if you don't have a list.

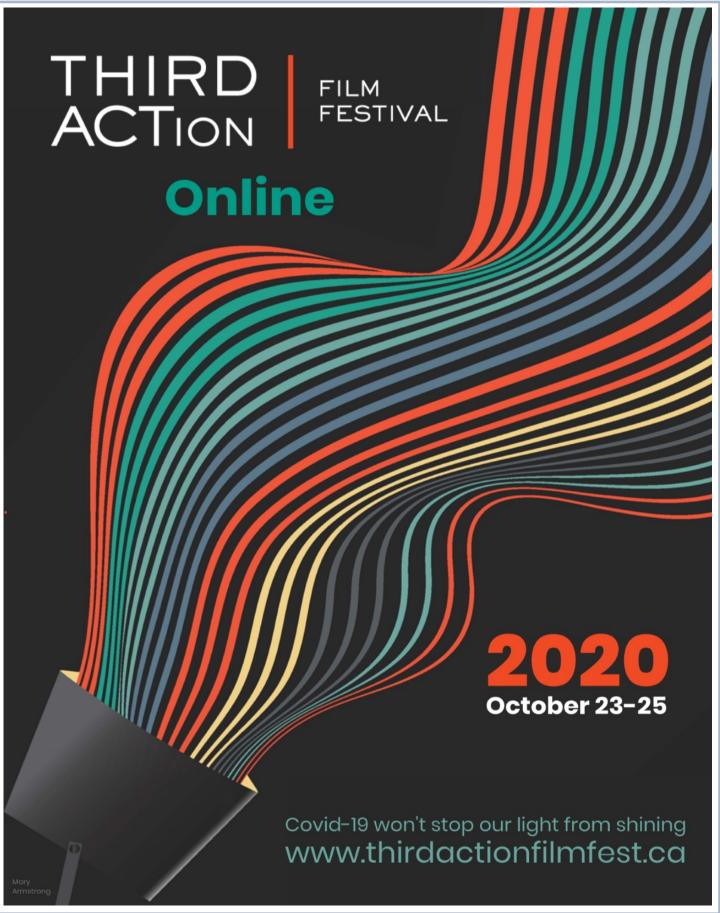
Include any non-prescription and natural health products that you use regularly.

Tell your health care provider if you take your medications in a different way from the instructions on your prescription labels.

- Tests that have recently been done, such as blood work.
- Contact information for your doctor(s) and your pharmacy.
- Your telephone number and the name and telephone number of your key contact person.

Virtual meetings can provide many benefits and they are a new reality in times of physical distancing. Ask for one to replace an in-person appointment. Partnering with your health care team, and having information ready, will help support a successful virtual meeting and safer care.

**Medication safety bulletins contribute to Global Patient Safety Alerts.** Best Medicines Coalition and Patients for Patient Safety Canada. Supported by Health Canada



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