**ACER-CART – West**

Report for Executive Meeting

January 14, 2021

Directors in Western Canada shared updates from their provinces as they responded to the following suggested guidelines:

1. A December 29, 2020 poll released by *Leger and the Association for Canadian Studies*showed the following *Premiers Approval Rating*s:  British Columbia – 59% approval; Alberta – 30% approval; Saskatchewan – 39% approval; Manitoba – 31% approval.  Could you share the thoughts of your Member Organization that can explain those results?
2. What is the plan of your Government for vaccinations?
3. How has your Member Organization maintained communication with your membership during the pandemic?  Anything special for the Christmas season?
4. In my last communication to you, I mentioned that the ACER-CART Priorities will focus advocacy on the issues associated with aging (long term care issues, ageing in place, national Pharmacare).  Please comment on what is most relevant for your membership.
5. Any thing else that you feel should be shared with the executive.

**BCRTA – British Columbia Retired Teachers’ Association**

(submitted by Steve Bailey, BC ACER-CART Representative)

Happy New Year from the BC Retired Teachers’ Association. With you, we hope 2021 will bring good news as COVID vaccination programmes are rolled out across the country - and indeed, the world. The BCRTA enjoyed an on-line Christmas celebration event on December 18. Organized by Executive Director Tim Anderson, the zoom event featured some singing and a dramatic reading based on Dickens’ *Christmas Carol*by Vancouver actor and director, Ron Reed who is Artistic Director Emeritus of the Pacific Theatre Company.

As the Leger and Association for Canadians Studies recent poll indicated, B.C.’s Premier John Horgan enjoys 59% approval - the highest of any Premier in Western Canada. This rating reflects the confidence in Horgan’s handling of the COVID situation and the excellent work of Health Minister, Adrian Dix, and Provincial Health Officer, Dr. Bonnie Henry. Horgan handily won majority government status in October’s election. Vaccination efforts are in full swing, with a priority on essential service workers, seniors’ care homes and efforts to reach remote communities and First Nations communities. There are legitimate concerns being expressed by school districts, parent groups and local teacher union associations as well as the BC Teachers’ Federation about the safety of students and teachers engaging in face-to-face teaching situations, but Dr. Henry’s message is that schools are safe places for people to be. There is no plan at present to lengthen the school winter break.

We expect that with vaccination priorities, the BC roll-out will continue with front line workers, residents, and staff of seniors’ care homes at the front of the line. Citizens over 75 will follow. The hope is that the general population will have access to vaccines by March/April and carrying on through the summer.

Communication with BCRTA members during this pandemic time has continued chiefly through the publication of *BCRTA Connections* and *PostScript*. The website is kept updated, and branches are being encouraged to keep up local connections through email and newsletter. This Fall we held a zoom meeting involving representatives of all BCRTA zones. This meeting was an opportunity to gather ideas on moving forward together, and the offering of help to smaller branches. One example of a specific initiative involves the offer of the Surrey Branch to partner with smaller branches to share on-line workshops. The meeting involved a plenary presentation for representatives form all branches, and then break-out rooms in zone branch groups. Minutes of the zone meetings were submitted for compilation and items will be addressed - some as part of an upcoming Strategic Planning session. Our BCRTA associated organization, the RR Smith Charitable Foundation, has just published its winter newsletter highlighting reports from groups that have received grants this past year. We need to make particular mention of the significant attendance of pre-retirement teachers who have attended BCRTA on-line retirement workshops. These workshops are filled with practical information and provide an opportunity for those attending to join the BCRTA. The transition of our retirement workshops to an an-line format has been a highlight this past year.

The BCRTA has adopted ACER-CART’s statement of priorities as its priorities moving forward this year. Long term care issues continue to be in the national spotlight along with ageing in place and the institution of a national Pharmacare Programme. Mention of this issue is constant in the news media, so we need to keep up our own informational and lobbying efforts.

The BCRTA has a round of committee and board meetings later in January, and planning for commemoration of our 75th anniversary continues. We are looking forward to the results of the ACER-CART pension survey when they become available.

**ARTA** – **ALBERTA RETIRED TEACHERS’ ASSOCIATION**

(submitted by Lawrence Hrycan, ACER-CART Representative)

Approval Ratings of Premiers

Many people in Alberta are disappointed with the leadership shown by Premier Kenney and his UPC government. Savings given to large corporations in the form of tax breaks, the on-going fight with doctors, the handling of the pandemic, and a general lack of transparency are reasons for the premier to have a 30% approval rating.

On their website, the Alberta Government advises against non-essential travel outside of Canada, aligning with a federal advisory.

When it was disclosed that at least 8 MLAs and senior staff left the country for holiday and other purposes, his initial reaction was to do nothing – he stated publicly that he had not made it clear that they were not to travel. What he has done since, in the accepting of some resignations, has been too late and not enough in the eyes of the public. The arrogance and entitlement shown by MLAs in the province is not sitting well.

Vaccination Rollout

The Alberta goal was to have 29,000 vaccinations completed by December 31, 2020. As of January 5, only 14,244 vaccinations were completed. Phase one, lasting until April, involves immunizing front-line health workers, long-term care residents and staff, those over 75 years of age and First Nations. Israel seems to be leading the world in having 150 vaccination sites and have vaccinated over 1,000,000 people. We are far behind, not only in Alberta, but in Canada.

Communication with Membership

ARTA continues to send out communications monthly in the form the newsletter *ARTAfacts*, and their magazine*, news&views.* There has been more communication recently for two reasons:

1. The ARTA Office has moved locations
2. ARTA has changed health providers and is now self-administering the health program.

In addition, each branch president is sending out communications to their membership keeping everyone informed.

The Board of Directors each received a nice pair of slippers in the mail. Wonderful Christmas surprise!

Priorities

The priorities in Alberta are the same as those for ACER-CART – long-term care, ageing in place and universal pharmacare. I sit as a representative for ARTA on the Public Interest Alberta, Seniors Task Force. This task force, on December 8, 2020, met (via Zoom) with the Honorable Josephine Pon, Minister of Seniors and Housing. She had with her several senior staff members who shared in the discussion. In the debriefing afterwards, the Seniors Task Force felt that the Minister and her staff were basically there to tell us what they were doing and did not hear anything that we shared regarding our concerns for seniors.

The 2 questions raised with Minister Pon were as follows:

1. Alberta has designated levels of care assigned to their long-term care facilities. We shared our concerns regarding the conditions in Alberta of these long-term care facilities; for example, sharing of rooms and bathrooms, and a shortage of qualified staff because of poor wages and benefits.
2. The Seniors Task Force asked that the government legislate the establishment of a new Seniors Advocate as part of the solution to the unacceptable conditions in our seniors’ congregate living spaces. It was suggested that the B.C. model could be looked at.

Other

Sandra Azocar, from Friends of Medicare, shared with the Seniors Task Force that after SARS there was a protocol put in place on how to handle a pandemic. This was not followed for Covid. Minister Pon invited the task force to submit further questions that she would look at. One of the questions will be a request for the break down of how Covid affected which type of long-term care facilities – public, non-profit and for-profit.

**STS – Superannuated Teachers of Saskatchewan**

(submitted by Murray Wall, STS Executive Secretary)

In brief I would share the following from Saskatchewan, although much of it is from my personal perspective:

1. Approval Ratings:  Our provincial Executive has not had an opportunity to discuss the approval ratings and although polling is an indicator, I often find it to be an inexact one.  For example, Angus Reid also conducted recent polling and found some somewhat different results (see below).  I’m not saying I favor one firm over another, I’m just saying results are varied.  We did have an election in October of 2020 and with the current governing party (SaskParty) receiving the same amount of seats as prior to the election (48 seats to the NDP 13).

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1. Vaccination Plan: Saskatchewan has developed a COVID-19 Vaccine Delivery Plan, and will be ready to administer the vaccine when the first shipment is received.  Saskatchewan is working closely with the Public Health Agency of Canada (PHAC) which negotiates and procures vaccines directly with manufacturers on behalf of provinces and territories.  
     
   The Vaccine Delivery Plan first phase focused on targeted vaccination of priority populations, and widespread access to the vaccine in the second phase.  
     
   Vaccines for approximately 1,950 people is expected to arrive by December 15, 2020.  The pilot will see the vaccine administered at Regina General Hospital and delivered to health care workers providing direct care to COVID-19 patients.  The first recipients of the COVID-19 vaccine will be health care workers in ICUs, Emergency Departments and Covid Units at Regina General and Pasqua Hospitals and staff at testing and assessment centres.  Pilot recipients will receive their second dose 21 days following the administration of the first dose (during Phase 1).  
     
   The Vaccine Delivery Plan’s first phase focuses on immunizing priority populations who are at a higher risk of exposure to the virus or more at risk of serious illness - health care workers, elderly residents in care homes, seniors over 80 and residents in northern remote communities.  Phase 1 is anticipated to commence in late December, 2020 with 202,052 doses expected within the first quarter of 2021.  This includes expected weekly allocations of 10,725 doses of Pfizer vaccine. Weekly allocations of Moderna are currently being finalized.   
     
   The second phase of the Vaccine Delivery Plan is anticipated to commence in April, 2021 and will continue priority population immunization while providing widespread vaccine access to immunize the general population.  Distribution in Phase 2 will occur throughout the province at public health clinics and other vaccination delivery sites across the province.  
     
   For more information on Saskatchewan’s COVID-19 vaccine planning, visit [saskatchewan.ca/COVID19-vaccine](https://www.saskatchewan.ca/government/health-care-administration-and-provider-resources/treatment-procedures-and-guidelines/emerging-public-health-issues/2019-novel-coronavirus/covid-19-vaccine).

1. Communication:  Our communication has continued primarily through our website as well as our publication, *Outreach*.  Our provincial Executive has been meeting regularly through Zoom.

1. ACER – CART Priorities:  The priorities mentioned would resonate with our membership and I would suggest in the order that you’ve listed them (long term care issues, ageing in place, national pharmacare).  Our members are currently quite concerned with long term care issues (especially in regards to COVID), ageing in place (especially given our dispersed and often rural population) and lastly pharmcare (the pharmacare would generally be a lower priority than the other two).

**RTAM - Retired Teachers’ Association of Manitoba**

(submitted by JoAnne Hoyak—RTAM Vice President and ACER-CART Director)

In response to:

1. RTAM has no official statement in terms of a reaction to Premier Pallister’s low approval rating in the various polls. The general interpretation, as reported by various pundits, is the dissatisfaction of Manitobans with the Conservative’s complacency and lack of preparation for the second wave. This, coupled with the deep austerity measures enacted by this government BEFORE the pandemic, which included deep cuts to health care, Public Health, Manitoba Government Employees etc, put our province in an untenable position from the get go. The result was Manitoba having the worst number of cases and resulting deaths per capita in Canada.
2. As far as vaccination roll out plans are concerned, I can only refer you to the Manitoba Government’s Official Covid website as the situation and reactive measures are fluid and constantly change as pandemic conditions and vaccine supplies change. It is my understanding that frontline health workers of a certain age are first in line. They are notified of their eligibility and then must make an appointment by phone, which has proven to be inefficient with the result that too few responders caused many hours waiting time on phone lines, missed vaccination appointments and the purposeful destruction of vaccines.

In addition, the 5-day suspension of vaccinations over Christmas has, on reconsideration, been deemed a mistake.

1. We continue to carry on with RTAM business utilizing ZOOM. This includes committee, executive, Board meetings as well as those with our partner stakeholders such as MTS and TRAF. Our general membership is served by KIT-our magazine and, of course, our website.
2. RTAM concurs with the priorities outlined by you. In fact, through our Political Advocacy committee, a Position Statement was developed on Long Term Care Facilities advocating that the Public Health Act be amended so that LTC facilities become PUBLICALLY insured under this Act. This would allow for regulations to be consistently administered, as well as the levels and types of care provided be at an established legal requirements.
3. Further items of note: RTAM will provide an additional 50 cents per member this year to help support ACER-CART’s pamphlet development in preparation for an expected spring election. To address member recruitment, RTAM is providing first year membership for free. An initiative with TRAF has allowed for the administration of this. And, to help expedite the development of a membership email list, a contest for gift cards tied to the provision of members’ emails has been devised.

I should also mention our spiffy ZOOM Christmas party on Dec. 18. We had the pleasure of sharing Christmas readings, stories, jokes, a craft recipe and music-- including a ukulele sing along and with apologies to BTO, a rendition of Taking Care Of Christmas.

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I am very appreciative of the input from the Western Directors/Executive Directors. Following our last executive meeting, I forwarded to the Western Reps the same report that I had submitted to the Executive. It seems to have been well received, so I will do the same following this meeting.

Respectfully submitted,

Marilyn Bossert

ACER-CART West Representative