**Recommendations for Grenada National Policy on Aging - 2018**

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***Section 1.0 Introduction***

**Part 1.1 Background**

Grenada is in the process of a demographic shift in its age structure. According to the United Nations Population Fund, between 1990 and 2010, the average life expectancy in Grenada rose by 5 years for both men and women while the fertility rate dropped from 3.8 to 2.2. Additionally, the island is experiencing a large out migration of young people aged 20-39. By 2020, it is expected that individuals 60 years or older will constitute 25% of the population, a significant increase from 10% in 2017 (*Bagazinski, Hopkins, & Khadr, 2018*).

**Part 1.2 Purpose**

During an eight-week period, from May 7th – June 30th, 2018, Jordan T. Mizell, an intern from the University of Michigan School of Public Health worked with the Ministry of Social Development, Housing and Community Empowerment to collect information from various stakeholders invested in the improvement of the quality of life for older persons in Grenada, Carriacou, and Petite Martinique. Through reviewing literature, visiting geriatric homes on Grenada and Carriacou, attending consultations, and conducting interviews with representatives from government agencies and organizations that work directly or indirectly with older persons, recommendations for policy, a strategic plan of action, and the improvement of the assessments for geriatric homes and geriatric care within the Homes have been generated. These recommendations will inform the Ministry to address policy, programs, services and the implementation of key strategies needed to better serve the population of older persons in Grenada. These recommendations will also inform efforts to improve the service delivery framework at the Geriatric Homes in Grenada and Carriacou, and the assessments conducted at each home. In addition, a database of agencies and organizations serving older persons has been created.

Interviews and consultations included representation from the following stakeholders: Ministry of Social Development, Housing, and Community Empowerment; Desk of the Elderly; Ministry of Agriculture, Lands, Forestry and Fisheries; Ministry of Carriacou and Petite Martinique; Grenada Association of Retired Persons; Grenada Hotel and Tourism Association; Extended Care through Hope and Optimism; National Council on Aging; Grenada National Organization for Women; Grenada Food and Nutrition Council; Grenada Fire Department; Grenada Bureau of Standards. Individuals, documents and materials consulted for the preparation of these recommendations are enumerated in the references section.

***Section 2.0 Population Dynamics, Aging, and Sustainable Development***

During a workshop with key stakeholders in Grenada on the topic of “Population Dynamics into Sustainable Development, Aging, Social Protection and Socioeconomic Challenges,” a team was formed to identify challenges faced in implementing actions and strategies to address two action areas:

1. Full integration of population dynamics into sustainable development with equality and respect for human rights
2. Aging, social protection and socioeconomic challenges

**Part 2.1 Challenges**

Upon analyzing priority actions under the abovementioned action areas, the following challenges were identified:

1. **Action**: Reinforce public policies and actions needed to eradicate the cycles of poverty and exclusion.
   1. **Challenge**: Fragmented and siloed approach by various institutions. Policies are not readily accessible or publicly known.
2. **Action**: Build and strengthen national and subnational public and private institutions with responsibility for population and development issues.
   1. **Challenge**: A paucity of financial resources and a dearth of political will at times. There is also a lack of financial accountability among organizations.
3. **Action**: Ensure active participation of non-governmental stakeholders in population and development issues in a sustainable manner with public institutions.
   1. **Challenge**: Sentiment that the government lacks appreciation of the contribution made by civil society and other non-governmental organizations. Stakeholders are unaware of policies or programs that other stakeholders have implemented, including a lack of awareness about governmental initiatives.
4. **Action**: Draw on sociodemographic information and harnessing technological advances for sustainable development planning in land use.
   1. **Challenge**: Lack a culture of research and issues with data sharing among stakeholders elude to broader communication issues amongst the entire island (including Carriacou and Petite Martinique).
5. **Action**: Pursue sustainable development as a means of securing present and future human well-being on an equitable basis.
   1. **Challenge**: Sentiment that building capacity for every individual to improve their own well-being cuts into each other’s profit or success. Reflects a “zero sum game” mentality.
6. **Action**: Guarantee sustainable consumptions patterns and avoid climate change phenomena brought on by human activity.
   1. **Challenge**: Need leadership whereby challenges are dealt with rather than shifted from one place to another. Lack of societal buy-in to sustainable practices.
7. **Action**: Formulate policies to ensure a good quality of life for all genders in old age within the urban and rural areas of the island.
   1. **Challenge**: Geriatric homes are not meeting industry standards and there is a lack of financial security to support older persons. Barriers include public and private discouragement for involvement in the productivity and economy of society, discrimination at the national and subnational levels, and lack of utilizing older persons as a resource. The previous aging policy was too vague, limited and was not implemented. Lack a clear definition of “quality of life.”
8. **Action**: Design public policies and programs at all political and administrative levels that take into account changes in age structure and opportunities and challenges associated with these changes over time.
   1. **Challenge**: Lack of system to fully capture the number of older persons in regions around the island, emphasizing the lack of age-disaggregated data. The gap between the youth and older persons impedes engagement between the generations.
9. **Action**: Ensure the inclusion and equitable participation of older persons in the design and application or policies, plans and programs that concern them.
   1. **Challenge**: Lack of governmental support to facilitate this inclusion, lack of non-governmental involvement into what should go into policy and lack of input from older persons themselves and an overarching body to facilitate this.
10. **Action**: Establish human rights programs with respect to aging with dignity to tackle and eliminate violence against older persons in the public and private spheres.
    1. **Challenge**: Privacy and confidentiality is lacking in public and private institutions, and the culture does not support non-disclosure (small island mentality). Lack a structure for the reporting of violence against older persons, resulting in those who suffer in silence. Such an issue might be within the purview of an ombudsman.
11. **Action**: Bring health policies into line with challenges of the changing epidemiological profile arising from aging.
    1. **Challenge**: Need clarification for understanding the function of the Desk of the Elderly and development of policies that support older persons who want their independence in their own homes despite current health/social conditions.
12. **Action**: Promote the development of allowances and services relating to social security, economic security, social justice, and health and education.
    1. **Challenge**: Lack of financial capital to support efforts, lack of retirement planning across the board for older persons, and lack of system to recognize patients’ wishes in hospice care, which highlights the need for hospice coordination.
13. **Action**: Extend social protection and social security systems, with a gender perspective, to include women in productive work, whether as domestic workers, in rural areas or informal workers.
    1. **Challenge**: Lack of encouragement to pay into National Insurance Scheme (NIS), and the method of communication between NIS and their target group is insufficient.

The identified challenges highlight the need for improvement in strategizing against known challenges. It was expressed by stakeholders that many of these challenges are not novel to the island, which emphasizes the need for strategies that strengthen the institutions with responsibility for population and development. The Government and other stakeholders must be committed to the elimination of social, legal, institutional, and physical barriers that prevent or limit substantive equality for older persons with respect to other population groups. The Government must facilitate the integration of population dynamics into sustainable development planning, sectoral policies, public policies, and programs in general at the national and subnational levels. In this way, the Government will be better able to build capacity for older persons to make their own decisions, and live independent lives as much as possible. Many of these advancements will be predicated on the capacity of statistical systems and institutions to conduct official measurement, build a stronger culture of research, perform data disaggregation, conduct administrative recordkeeping, and monitor policy implementation according to key indicators.

***Section 3.0 Geriatric Homes and the Assessment Tool***

**Part 3.1 Observations from Weekly Home Assessments**

Assessments were conducted at eight of the twelve homes in Grenada and Carriacou, including: Top Hill Senior Citizens Home on 10 May 2018; St. Cecilia's Nursing Home and Missionaries of Charity-Mother Theresa Home for the Aged on 30 May 2018; Grand Anse Gardens Home and Chichester Home for the Aged on 6 June 2018; Richmond Home for the Aged on 13 June 2018; and Hill View Home for the Aged and Charles Memorial Home on 20 June 2018. The assessment team for all homes visited consisted of a representative from the Desk of the Elderly, Grenada Food and Nutrition Council, Grenada Council on Aging, Grenada Bureau of Standards, Fire Department and a Geriatrician, except for the preliminary visit to Top Hill Senior Citizens Home on Carriacou with the Desk of the Elderly. According to standards, each home had areas of success as well as areas where improvement is needed. The key observation that is most salient among all the Homes however, is that each Home finds ways to circumvent their obstacles, whether large or small, and give their residents the best quality of care and attention that the Home and staff can afford to provide, and that fact is most commendable and deserves to be highlighted. It is evident that the matrons have an earnest desire to care for their residents, reflecting that where there is a will, there is a way.

Observations according to each Home were as follows:

**Top Hill Senior Citizens Home:** Residents are articulate, savvy and active with song and dance, but wish there was more frequent engagement, especially with activities for mental stimulation. Home is nicely decorated, equipment for assistance with disabilities is available in good condition. Office space is small, lacks adequate storage space. Building infrastructure is not particularly conducive to older persons, highlighting a flaw in building design that did not account for standards according to corridors, room spacing, trip hazards, etc, and highlights need for ramps. Outdoor area could be better structured for utilization with recreation and physical exercise.

**St. Cecilia's Nursing Home:** Building infrastructure precludes the Home's ability to meet certain standards and requirements. Ramp is needed for the common room, as well as space for visitation purposes, as visitors currently meet in the residents' rooms. Repairs are needed in areas around the building such as painting, caulking, and repairs to decorative items. Lacks written procedures for infection control, contacting residents' family, etc. Matron expressed struggles with difficult families/guardians of residents, highlighting the need for each Home to have clear, documented policies articulating specific legalities, terms and conditions for residents' occupancy in the Home.

**Missionaries of Charity-Mother Theresa Home for the Aged:** Home is kept very clean and well decorated. Many residents place in one room, with insufficient spacing between beds, presents an issue with potential infection control. Lack of ramps for bathroom showers and lounge area, as these are not wheelchair accessible and puts unnecessary strain on sisters who must lift residents. Building infrastructure precludes the Home's ability to meet certain standards and requirements. Area originally intended for hospice care for HIV/AIDS patients is unfortunately not being put to any use (social stigma plays a role). Lack an on-site office space. Sisters circumvent obstacles through improvisation but could use more staff to give them more adequate time for themselves to rest and rejuvenate.

**Grand Anse Gardens Home:** Outside of home is very beautiful, grounds and gardens are well kept and presents a welcoming vibe. Ramp outside is built into the structure of the building and the spacing is sufficient to accommodate a stretcher in the event of an emergency. Repairs are needed to rectify visible safety issues such as electrical outlets in very poor condition. Building infrastructure can be renovated to eliminate hazards such as trip hazard near rear escape door, shelving in kitchen obstructing its escape door, and gas line level in kitchen which is behind the stove. Residents appear to be engaged by staff and among themselves, which is good for social interaction and stimulation. Matron is very receptive to assessment team's recommendations.

**Chichester Home for the Aged:** Residents engage themselves in common area, assist each other, move freely through corridors, and visibly appear excited to see visitors. Matron has very welcoming personality and it seems to be reflected in the residents. Safety concerns around the upkeep of residents' rooms, especially fire hazards with electrical sockets and curtains covering room fans. Home needs to implement safety protocols, fire drills, general safety preparedness.

**Richmond Home for the Aged:** From the outside as well as inside, the Home looks depressed, extremely unkept with intense repairs needed in many places, and equipment in very poor condition. For example, one dilapidated wheelchair appeared to be very old, and patched with duct tape many, many times. Rust in metal around the perimeter of building, uneven concrete throughout walkways outside, broken windows barely hanging on, storage space in one of the buildings is broken down due to termite infestation, downstairs work space in poor condition, and inadequate privacy for residents in large second floor room. Despite being extremely well staffed with nurses and caregivers, residents appear to be "waiting to die" and lacking due dignity. One resident expressed frustration with caretaking that lacks the proper respect due to elders. Home meets almost all standards for health and health care services, but caregivers need to engage residents more in physical exercise and stimulation, which could provide a much-needed energizer for the residents and foster a better relationship with caregivers. Matron is aware of many areas for improvement and expressed difficulties in getting the manager to follow through with requests for identified concerns. Matron is very receptive to assessment team's recommendations and could benefit from closer assistance from the government, especially the Ministry of Health whom has jurisdiction over this government owned Home. Unfortunate to see the only government owned Home in this condition.

**Hill View Home for the Aged:** Outside of home appears nice and managed adequately. Matron is very engaged, shows a positive attitude, and "knows" her residents. Office space is adequate and kitchen area is kept, although counter tops need renovating. Caregivers report some difficulties in getting residents to adhere to proper nutrition, but shows the residents have energy and will to take control of and maintain a level of independence. Home meets almost all standards for food safety and nutrition.

**Charles Memorial Home:** Residents appear happy to see visitors. Matron commands a good presence in the Home. Home meets almost all standards for food and safety but need better care of their food storage room.

Regarding the most recent Outgoing Report (2014) for the Desk of the Elderly, and having reviewed the Grenada National Standard for the Requirements for the Care and Protection of the Elderly (2007), established by the Grenada Bureau of Standards, the following recommendations have been made in reference to the Annual Work Plan established by the report and the Assessment Tool for the Geriatric Homes (the recommendations are accompanied by a suggested timeline and priority level, based on the perceived feasibility of each recommendation and capacity to implement them, which can be found in a table in the appendix below):

**Part 3.2 Policy Recommendations**

1. Need to establish a categorical approach to homes to appropriately recognize the differences between them, establish clear definitions for each type of home, and recognize the different types of standards they must be held to
   1. The current assessment tool assesses all types of homes (general "Care Homes") according to standards that are not applicable to all Homes
   2. Recommend specialization of the assessment tool for applicability to different types of homes
      1. Residential homes vs Nursing Homes
2. Need to form a team that will always be present for the assessments of the Homes, ensuring consistency of assessments
   1. Requires back-up plan if someone cannot be present
      1. Establish a chain of command
   2. Suggested Team:
      1. Gerontologist (or other person trained in geriatrics)
      2. Lay person/Older person in the community
         1. Within each parish
      3. Matron of a Geriatric Home
      4. Registered Nurse
      5. Dietician
      6. Fire/Police Department representative
      7. Bureau of Standards representative
      8. Ministry of Health representative
      9. Ministry of Social Development representative
      10. National Council on Aging representative
      11. Grenada Association of Retired Persons representative
      12. Counselor/Psychiatrist/Psychologist
   3. Recommend this team facilitates enhanced communication between the multidisciplinary groups in the context of increasing the island's capacity to service older persons
3. Need to explore sources for funding and donations
   1. Recognizing the difficulty of many residents in the Homes to pay their monthly fee and the strain it places on the functionality of the homes
   2. Recognizing difficulty of Homes to purchase safety and cleaning supplies, geriatric supplies, food and cooking supplies
      1. Do NOT recommend increasing the cost of stay (2014 report from Ministry of Social Development, Housing and Community Empowerment, and Desk of the Elderly), as this will not address the root issue: inability of residents to pay
      2. Recommend continuation of Public Assistance for residents of Homes to increase ability to pay for Burial, purchase Medication, purchase daily needs/toiletries, water supply
         1. Must strengthen the capacity of older persons in Homes to pay the monthly fees and reduce the strain on Homes' ability to conduct daily business
      3. Recommend increasing the annual subvention given to Homes
   3. Recommend re-visiting ideas and opportunities for Homes to fundraise
      1. Opportunity to involve residents in fundraising activities, utilize their skills and sell products/services to the public
   4. Recommend seeking out local, regional and international agencies/organizations for the provision of resources (financial, human, material) for distribution to ALL Homes within the Geriatric Caregivers Program
      1. Special need for equipment and materials:
         1. Wheelchairs, walking canes, bed frames, mattresses, bedding (sheets, blankets), incontinent pads, dressings, ramps, night lights, etc.
      2. Current/Past sources:
         1. World Bank
         2. Basic Needs Trust Fund (BNTF)
         3. Canadian Red Cross (CRC)
         4. Caribbean Development Bank (CDB)
         5. Canadian International Development Agency (CIDA)
         6. Grenadian Diaspora in New York
         7. National Disaster Management Agency (NaDMA)
         8. St. George's University (SGU)
         9. Pan-American Health Organization (PAHO)
      3. Potential future sources:
         1. Age International, Subsidiary of HelpAge International global network- ECHO is the associated branch within Grenada
         2. Baxter International Foundation, philanthropic arm of Baxter International Inc.
         3. USAID
            1. Has no known partnerships with Grenada, opportunity to petition for the establishment a Grenadian sector/program
         4. World Food Program
            1. Has no known partnerships with Grenada, opportunity to petition for the establishment a Grenadian sector/program
            2. Offers cash and in-kind assistance
         5. Peace Corps
         6. National Insurance Scheme (NIS)
         7. Nurses and Midwives Council (GRENCASE constituent)
         8. Hills and Valley Pharmacy
         9. Caribbean Regional Communication Infrastructure Program (CARCIP)
         10. FASTCASH
4. Need to evaluate the cost and feasibility of providing care services at the Homes
5. Need to establish a closer supervisory role with GRENCASE who is responsible for the caregivers provided to the Geriatric Caregivers Program
   1. Training is lacking across **all staff** who interact daily with the residents of the Homes
      1. Training in areas of:
         1. Care of the elderly
         2. Changes affecting the body during ageing
         3. Diseases affecting the Elderly
         4. Mental health and Cognitive Impairments
         5. Emergency and Disaster/Evacuation Preparedness
         6. Nutrition
         7. Recordkeeping
         8. Medication
            1. Need standardized approach to giving medications at all Homes
         9. Work Ethics
         10. Professionalism and Interpersonal Skills
             1. Interacting with family/friends/special interest groups of the residents
             2. Recommend hosting a Business Etiquette Workshop with **all levels of staff at Geriatric Homes**
      2. It is imperative for the improvement of training, especially when incorporating the youth, to emphasize the importance of this skilled position and the mindset that caregivers must have when interacting with the older persons. Trainees must understand that this position requires a high level of skills and competence, and the job should not tolerate attitudes or actions that devalue older persons and the care that they receive. Training must properly include attention to the psychosocial aspect of the field.
   2. Recommend the establishment a central repository for caregivers **before** they seek employment at the Homes
      1. Establish a standard vetting/interview scheme including:
         1. Medical/Physical fitness check
         2. Training certification
         3. Background check
         4. Literacy tests
      2. If a central repository for trained and registered caregivers cannot be created for the island, the assessment tool should include requirements for holding this **skilled** position
         1. Recommend developing a separate assessment tool for the qualifications of the caregivers OR include in the assessment tool for the Homes
6. Need standardized and mandatory training for **all levels of staff** who interact with residents of the Homes
7. Need registration and mandating employment contracts for retention of staff
   1. In order to reduce the turnover rate of staff, recruitment and selection must strengthened and intensified for all staff
      1. Caregivers
      2. Cooks
      3. Nursing staff
      4. Grounds keeping
   2. Payment scheme (salaries vs hourly wage), transportation allowance, other fees must be explored to support the work of the staff
8. Recommend hosting a recurring (monthly or quarterly basis) forum for all types of Homes, government (public), private, church-owned
   1. Shall enhance coordination between the mainland and the sister isles of Carriacou and Petite Martinique
   2. Establish an understanding of the difficulties experienced at each home in order to come up with solutions for particular problems, as well as standard approach to tackling common issues
      1. Offers opportunity to bounce ideas off each other, understand methods that work for some and assess if any ideas can be applied elsewhere
   3. Establish a team-based approach to providing geriatric care around the island
      1. Combine ideas together for common solutions
   4. Establish an efficient means of communication between all Homes
   5. Requiring the involvement of **all** Homes into any and all decisions or changes made concerning older persons at the Homes
      1. Necessary if all Homes are to be assessed by the same standards
      2. Must involve private, faith-based Homes, i.e. Missionaries of Charity
   6. Function of Geriatric Networking Group must be emphasized
      1. Must re-establish and fortify this group to create greater connections between all Homes and between the mainland, Carriacou and Petite Martinique
9. Need mandated frequency for clinician, pharmacist visits the Homes
   1. Must adhere to provisions established in the policy
      1. Policy mandates free visits by doctor, but this is not being realized at all Homes
      2. Must clarify if the doctor visits to the Homes are free or residents' visits to the doctors' office is free
         1. If this is a requirement for all Homes, the cost should be standardized or free for all
      3. In reference to Section 5.1- Primary healthcare- they have to pay for the MD visits (should not be so)
      4. Pharmacist to make annual review of residents' medications
   2. Recommend partnering with Hills and Valley Pharmacy
      1. Hills and Valley Pharmacy sponsored a Business Etiquette Workshop with GRENCASE
   3. Must not be affected by Homes that allow residents' healthcare needs to be addressed by their private doctors (i.e. St. Cecilia's Nursing Home)
10. Need to mandate requirements for infrastructure and set up of buildings, for standardization and elimination/minimization of risk based on proper assessments
    1. Mandates for infrastructure should include:
       1. Electrical setup
          1. Electric breakers
       2. Gas Lines
       3. Layout/building blueprint
          1. Residents rooms,
          2. Bathrooms
          3. Nursing stations (where applicable)
          4. Kitchen
          5. Corridors
          6. Laundry rooms
          7. Storage rooms
          8. Escape routes
11. Need to distribute guidelines for Infection Control and Disaster Response Plan to all Homes
    1. Must be approved by Ministry of Health and Fire/Police Department
12. Recommend supplying each geriatric home with at least one dedicated bus or van for transportation of older persons to clinics, markets, recreational centers and other whereabouts
    1. Must allow drivers training for bus or van for at least one caregiver

**Part 3.3 Assessment Tool Recommendations: Specific Areas for Improvement**

The 2007 Standards set by the Grenada Bureau of Standards were either altered or had additions made to them. Some standards were omitted entirely. It is recommended to conduct a review of these original items. A recommendation is also made for the retainment of some of the original items and updating or elimination of some of the items currently being used on the Assessment Tool.

* Section 1.0- Minimal Requirements for Nursing and Residential Homes
  + 1.1.2
    - Recommend wording in the item to be updated stated, "flame-resistant sliding curtains" -as per recommendation from Fire Department
  + 1.14
    - Recommend this item retain the original wording: "There shall be an adequate number of well-ventilated rooms maintained ready for occupancy by patients suspected of having a communicable disease or requiring special care: one (1) room for every twenty-five (25) patients"
      * "special care" is ill-defined
* Section 3.0- Employee Requirements
  + 3.1
    - Recommend this item retain the original wording (2007): "All Nursing Homes shall have or be managed by a qualified nurse
      * To recognize Homes that are not nursing homes
      * Residential homes and Homes for the Aged are often not managed by a registered/qualified nurse
  + 3.5
    - Recommend updating this requirement to recognize that the infrastructure of the buildings may not allow this standard to be upheld by all Homes
      * Some homes are utilizing storage rooms as Nursing stations, resulting in cluttered spaces, e.g. Top Hill Senior Citizens Home, *Carriacou*
  + 3.6
    - Must define ancillary staff to understand this standards applicability to the different Homes
    - All staff must be trained in emergency training if this standard is to be upheld
  + 3.7
    - Recommend updating this requirement to recognize that the infrastructure of the buildings may not allow this standard to be upheld by all Homes
      * Homes that have limited rooms may need to reduce the capacity for residents in order to meet this standard
* Section 4.0- Safety Issues
  + 4.1
    - Recommend making assessment of how dangerous materials are being disposed of
* Section 5.1- Primary Health Care
  + 5.1.1
    - Recognition that some Homes host residents who have their own private doctors and what implication this has on access to external primary health care services
      * Currently, if residents have private doctors, they are ineligible for public primary health care
  + 5.1.2
    - Recognized through assessments that Homes are NOT receiving "free" general physician's attendance
      * Assessment tool states "at the government's clinic" but this should be applied to clinical visits conducted at the Homes as well
      * Needs clarification for if the residents must be present at the government clinic or if clinical visits at the Homes is free
* Section 5.2- Environmental Health
  + Recommend this section to be evaluated by Fire Department or other environmental specialists who are more qualified to assess these standards, under safety issues (Section 4.0)
* Section 5.3- Medication at Home
  + 5.3.5
    - Recommend a standard system/chart of recording for all types of Homes, including required medications for patients, when they shall be administered, who administered the medications and signatures of receipt for each individual patient
    - Recommend this item retain its original wording + sample: "

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Administered By (signature)** | **To Whom** | **Name of Medication** | **Time** | **Date** |
|  |  |  |  |  |

* Section 5.4- Physical Exercise
  + 5.4.1
    - Recognizing that physical exercise is paramount to the continuity of good health, must promote physical exercise for older persons in homes by requiring a designated time for exercise. Encouraging the caregivers is not enough; it must be required to ensure residents maintain physical and mental health, as elderly may lack the self-empowerment, strength, etc. to engage themselves
    - An exercise program should be created for each individual resident, whether fully mobile, in wheelchair, or bedridden
    - Professionals trained in geriatrics should hold the capacity to create physical programs for residents in their care, as well as a frequency for exercise, e.g. two times a week, etc.
    - Clinician can also be requested to create an exercise program for residents during their visits to the Homes
    - Source: Chang, C.-F., Lin, M.-H., Wang, J., Fan, J.-Y., Chou, L.-N., & Chen, M.-Y. (2013). The Relationship Between Geriatric Depression and Health-Promoting Behaviors Among Community-Dwelling Seniors. *Journal of Nursing Research*, *21*(2). Retrieved from <https://journals.lww.com/jnr-twna/Fulltext/2013/06000/The_Relationship_Between_Geriatric_Depression_and.3.aspx>

**Part 3.4 List of Geriatric Homes**

An updated list of the geriatric homes can be found in a table in the appendix below.

***Section 4.0 Database of Agencies Serving the Elderly***

A Database of agencies serving the elderly was created to begin building a repository of information to be distributed out to all agencies and organizations. The goal is to make each organization and agency cognizant of the programs, initiatives, and activities that each organization is conducting in the interest of the improvement of collaborations and alignment across stakeholders in Grenada. In this way, programs will not overlap unless necessary, resources will not be wasted, and better coordination among stakeholders and the government will be encouraged. The expectation is for this database to be updated on an ongoing basis and also distributed to the community at large to increase public awareness. This database can be found in a table in the appendix below.

***Section 5.0 Recommendations for National Policy on Aging***

Based on gaps and areas for improvement in the previous aging policy, which have been observed by and discussed amongst key stakeholders, and considering the overarching goal for the new policy that is in alignment with core human rights principles, the following are recommended to strengthen the redraft of the National Policy on Aging:

**Part 5.1 Institutional Structures to Implement the National Policy on Aging**

The Minister of Social Development, Housing and Community Empowerment will have overall responsibility for the National Policy on Aging and bears responsibility for the implementation and monitoring of the policy. The Minister will link the Cabinet and the institutional structures for aging issues. The first figure below represents a proposed organogram of the institutional framework for implementing and monitoring this policy, including all structures required to effectively lead, coordinate and monitor implementation of the policy. The second figure below represents a proposed organogram for the restructuring of the Desk of the Elderly.

Figure 1. Organogram of 
Institutional 
Structures to 
Implement the 
National Policy 
on Aging 
Health 
Key 
Subdivions 
Social 
Implementation 
Economic 
Division of 
Aging 
Inter-Ministerial 
Body 
Parliament 
Cablnet 
Minister for Social 
Development, Housing 
and Community 
Empowerment 
ermanent Secretary, 
Ministry of Social 
Development, Housing 
and Community 
Empowerment 
Director of Social 
Development, Housing 
and Community 
Empowerment 
Chief Social 
Development Officer; 
Chief Medical Officer 
Desk of Elderly 
-Head of Technical tJnits 
Non-Governmental 
and Civil Society 
Body 
National 
Council on 
Aging 
National 
Committee of 
Older Persons 
Technlca[ units for Coll 
Older Persons *Figure 1.*

Organogram of 
The Desk of the 
Elderly 
National 
Council on 
Aging 
Advisory 
Role 
Grenada 
Association fo 
Retired 
Persons 
Minister for Social 
Development, Housing 
and Community 
Empowerment 
ermanent Secretary 
Ministry of Social 
Development, Housing 
and Community 
Empowerment 
Chief Social 
Development Officer 
Coordinator for Desk 
of the Elderly 
Chief 
Supervisor 
Field 
Supervisor 
(upper region) 
Social 
Workers 
Field 
Supervisor 
(middle region) 
Social 
Workers 
Field 
Supervisor 
(lower region) 
Social 
Workers 
Geriatric unit 
(GRENCASE) 
Field 
Supervisor (St. 
George's) 
Social 
Workers 

*Figure 2.*

The Government of Grenada shall propose to strengthen and/or establish the following national structures to facilitate the implementation and monitoring of the National Policy on Aging:

* + 1. **Desk of the Elderly**
    2. The main Department through policy and program implementation will be monitored is the **Desk of the Elderly**. The Desk will ensure the proper implementation of the National Policy on Aging and the Strategic Plan of Action through establishing clear procedures for ongoing monitoring and evaluation, putting systems in place to ensure the government's compliance with the implementation of and reporting on international and regional commitments. The Desk will also increase awareness of and accessibility to services available to the older persons, create and implement programs geared towards active aging and the preservation of our national heritage in collaboration with stakeholders. Within the Desk, there shall be one field supervisor to oversee matters in each of four regions in Grenada, including the Upper region (will also cover Carriacou and Petite Martinique, the middle region, and the lower region of the mainland, as well as one for St. George's, four in total.
    3. Functions of the Desk of the Elderly:
       1. Serve as a clearinghouse for information related to programs and services for older persons
       2. Establish the key quality indicators for measurement of the efficacy of the policy
       3. Facilitate the development procedures to monitor and review quality indicators in collaboration with relevant sectors
       4. Develop standards of care for older persons
       5. Assess, monitor and regulate all the Homes for the Aged, ensuring the homes operate in accordance with acceptable standards
       6. Develop and maintain a directory of services supporting older persons
       7. Supervise the geriatric unit and geriatric services
       8. Organize programs for the celebration of the Month of the Elderly
       9. Establish and maintain a national database for older persons, and prepare strategic research/analytical reports, policy briefs, newsletters, etc. to inform national policymaking and planning, and to respond to international and regional commitments
       10. Collect and disseminate age-disaggregated statistics on the work of all stakeholders, including participation in and the impact of policies and programs
       11. Write and distribute the quarterly senior newsletter, including the celebration of centenarians
       12. Coordinate and over emergency assistance and disaster management
       13. Strengthen the administration and management of the activities of the Desk of the Elderly
       14. Oversee investigation and assessment of, and recording and reporting for the National Policy on Aging
       15. Oversee collaborations across the Inter-Ministerial Body, Non-government and Civil Society Body, and the National Committee of Older Persons
       16. Ensure the continuity of staff for fieldwork, social work and client casing and management
    4. **National Council on Aging**
    5. The main Department through which policy and program implementation will be advised is the **National Council on Aging**. Through strengthened capacity at the national and parish levels, the Council will coordinate and track efforts by a broad range of stakeholders, including Government, private sector, community organizations, civil society groups, faith-based organizations and international partners to actualize the development of pertinent strategies and programs. International agencies (such as HelpAge International) who offer funding and support will recognize the functionality of Grenada's Aging Policy via an operationally viable national council for the elderly. As such, international stakeholders will operate with an established umbrella body for the support of older persons. The Council must remain strong and functional to further the agenda for older persons in Grenada. Without this, advocacy for older persons is extremely limited.
    6. Functions of the National Council on Aging:
       1. Act as a consultative and advisory body to the Ministry of Social Development, Housing and Community Empowerment, Desk of the Elderly, and the Division of Aging on matters related to aging issues
       2. Serve as a clearinghouse for information related to problems of older persons
       3. Lead and advocate on aging issues, protect the rights and highlight the needs of older persons in Grenada
       4. Liaison between the public and private sectors for the identification of gaps in support for older persons
       5. Assist the Ministry in all matters pertaining to problems of older persons
       6. Source, recommend and make cases for legislations and programs relating to older persons
       7. Develop plans, conduct and arrange for research and demonstration programs in the field of aging
       8. Provide technical assistance and consultation to parishes and political subdivisions thereof with respect to programs for older persons
       9. Offering economic analysis of the feasibility of interventions and the savings that certain interventions will offer over others
       10. Analyze the effectiveness of all services and policies related to older persons for which recommendations will be made for strategies to improve current efforts
       11. Prepare, publish, and disseminate educational materials dealing with the welfare of older persons
       12. Gather statistics in the field of aging which other government agencies are not collecting
       13. Identify all public and private agencies that have an invested interest in the improvement of the quality of life of older persons and secure the full participation of all agencies and organizations involved
       14. Stimulate more effective use of existing resources and available services for older persons
       15. Coordinate the meetings of the public, private and **National Committee of Older Persons**
       16. Establish principles for determining the priority of projects and programs in Grenada, and provides for approval of such projects in the order determined by application of such principles
       17. Promote activities that create sustainable networks for older persons to combat social isolation and forms of abuse
    7. **Division of Aging**
    8. Recommend creation of a Division of Ageing within the Ministry of Social Development, Housing, and Community Empowerment, which will operate in coordination with the National Council on Aging, in accordance with the tenets of the Madrid International Plan of Action on Ageing (MIPAA). This main Department through which policy and program implementation will be facilitated is the **Division of Aging.** The Division will coordinate efforts across all key stakeholders to facilitate the implementation of the National Policy on Aging and the Strategic Plan of Action. The Division will comprise three sectors for issues concerning Health, Social and Economic aspects of life for older persons, so as to give each sector due diligence in programing and implementation of the National Policy on Aging and the Strategic Plan of Action.
    9. Functions of the Division of Aging:
       1. Coordinate the implementation of the Strategic Plan of Action for the National Policy on Aging by public and private sectors and civil society
       2. Organize and coordinate training programs, seminars and workshops for care providers of older persons
       3. Conduct research on matters pertaining to aging and older persons
       4. Conduct public sensitization programs island wide on issues regarding aging and older persons
       5. Coordinate a network with Ministries, the private sector, and civil society groups with invested interest in older persons
       6. Manage the flow of information and communication between public and private sectors
       7. Develop, implement and support an ongoing sensitization of aging issues in all national legislation, policies, plans and programs, as well as education and training programs throughout Grenada
       8. Facilitate the process of reform of legislation, regulations and policies to advance the quality of life of older persons
       9. Liaison between the public and private sectors for the coordination and implementation of support for older persons
       10. Facilitate the meetings of the public, private and **National Committee of Older Persons**
       11. Put systems in place to ensure the collection, collation, analysis and use of age-disaggregated data
    10. **National Committee of Older Persons**
    11. Recommend creation of a National Committee of Older Persons which will operate in coordination with an Inter-Ministerial Body and a Non-Governmental and Civil Society Body. The Committee will be divided into sub-divisions for representation of each parish on the mainland of Grenada, as well as Carriacou and Petite Martinique, and will be comprised of older persons in the community who may be identified as non-political public figures who are knowledgeable about the concerns and needs of older persons in their parish. These representatives for each parish shall be appointed by community members who trust that they will represent the collective interest and wellbeing of the community of older persons through coordinated, informal forums held in each parish. The Committee will establish the full participation of older persons in the development and implementation of policy and programs for the National Policy on Aging and the Strategic Plan of Action to ensure that the perspectives of older persons are fully integrated in all aspects.
    12. Functions of the National Committee of Older Persons
        1. Act as a consultative body to all public and private sectors serving older persons on matters related to the concerns and needs of older persons
        2. Organize and facilitate forums in each parish to gather concerns and ideas from the perspective of older persons in a report
        3. Write and present reports indicating any issues and other relevant concerns to the Desk of the Elderly, the National Council on Aging and the Division of Aging
        4. Strengthen linkages between older persons and the Inter-Ministerial Body and the Non-Governmental and Civil Society Body, in order to raise awareness of the concerns and needs of older persons in Grenada, Carriacou and Petite Martinique
        5. Keep governmental agencies abreast of aging issues and put forward new and emerging issues for consideration by the Government of Grenada
        6. Maintain a clear line of communication between the Inter-Ministerial Body and Non-Governmental and Civil Society Body
        7. Monitor the communal response to policy, programing, services, and social support for older persons in each parish
        8. Assist in managing the flow of information between public and private sectors and the community of older persons in each parish, relaying pertinent information between these sectors and the constituents to which they serve
        9. Liaison between public and private sectors and the community of older persons in Grenada, Carriacou and Petite Martinique
    13. **Non-Governmental and Civil Society Body**
    14. Recommend establishing a coordinated and collaborative body comprised of all non-governmental and civil society groups invested in the improvement of quality of life for older persons in all facets of life. This Body will have a representative from each non-governmental organization representing older persons, private sector organizations, faith-based organizations and civil society groups.
    15. Functions of the Non-Governmental and Civil Society Body
        1. Organize and establish a knowledge base of programs and services administered by each group
        2. Keep abreast of efforts being proposed and actualized by each group to foster deeper collaboration across all groups
        3. Engage in opportunities to support the Inter-Ministerial Body and National Committee of Older Persons in implementing programs and services for older persons, and monitoring the communal response to such programs and services
        4. Maintain a clear line of communication between the Inter-Ministerial Body and National Committee of Older Persons
        5. Collaborate amongst all representatives and build contacts with any newly established non-governmental organization representing older persons, private sector organizations, faith-based organizations and civil society groups
        6. Promote sensitization of aging issues in the mission, vision and responsibilities of each member organization of the Body
        7. Create and facilitate opportunities for professional development, training and education on aging issues, and sensitization to the needs of older persons for all professional staff within each member organization of the Body

**Part 5.2 Guiding Principles**

* 1. **Evidence-based programming, monitoring and evaluation**
     1. This policy requires ongoing research, monitoring and evaluation, and the use of evidence-based approaches through identified best practices. This policy recognizes the utility of relevant quantitative and qualitative data in policy formulation, programming, monitoring and response to ensure that issues concerning older persons are systematically reviewed and promote adherence to the enumerated guiding principles and implementation of the policy
  2. **Respect for Human Rights and Dignity**
     1. This policy requires the protection and promotion of the inherent dignity, and of the fundamental rights and freedoms enshrined in the constitution, universal declaration of human rights and the core human rights instruments ratified by Grenada. This policy affirms non-discrimination based on any social identities which include sex, gender, age, disability, health status, marital status, socio-economic status, religion, race, ethnicity, and culture, and will embed values of equality into all national policies and strategies. Older persons have the right to be treated equally with dignity and without fear of discrimination.
  3. **Gender equality** 
     1. This policy reinforces that all older persons of all genders, conforming and non-conforming, have a fair opportunity to attain a desirable quality of life. The dynamics of power, opportunities and results between all genders must be equalized to ensure sustainability for all older persons.
  4. **Equitable Access and Accommodation**
     1. This policy advocates for services that are reasonably located, user-friendly and delivered in a fair and objective manner in keeping with the rights-based approach, such that older persons in the community can obtain the services they need in a timely fashion. This policy recognizes that access can be impeded by poorly organized delivery modalities, factors such as socio-economic status, gender, age, ability and culture, and the lack of proper accommodation to support the needs of older persons.
  5. **Multi-Sector Approach**
     1. This policy advocates for the involvement of all stakeholders including older persons, the public and private sector, in the design, implementation, monitoring and evaluation of programs and services. Efforts will be bolstered by meaningful collaborations and synergism that contributes to social and economic development, and will ensure inter-ministerial cooperation and integration of policies that are reflective of discussion with all stakeholders invested in the improvement of the quality of life for older persons
  6. **Political Will and Accountability**
     1. This policy reinforces the need for providing direction in decision-making, financial commitments and action that fosters outcomes of maximum efficiency which are measured, assessed and publicly reported.
  7. **Older Persons-Centered**
     1. This policy reinforces a system which regards the interests of older persons as the central priority when making decisions. The needs of older persons are identified and addressed, and they participate in decision-making to improve their quality of life and ensure capacity building, empowerment and participation of older persons in the decision-making process. This policy recognizes that older persons are not simply passive beneficiaries of social support.
  8. **Quality Care and Affordability**
     1. This policy requires that services are delivered within acceptable clinical standards, by qualified service providers, in an environment of teamwork, creativity, and commitment and at a cost which shall not act as a barrier to access.
  9. **Sustainability**
     1. This policy advocates for services and geriatric care to be structured and supported in a way that ensures stability of human resources, efficient use of financial resources, and long-term affordability

**Part 5.3 Policy Areas**

This section presents nine (9) policy areas for the National Policy on Aging. The Government of Grenada is committed to leading the advancement of the quality of life for older persons in these priority areas. These policy statements, strategic objectives and commitments have been identified through research and consultation, interviews with key stakeholders and older persons in the community, and shall express the priorities of the Government and the older persons of Grenada, Carriacou and Petite Martinique.

* + 1. **Older Persons Health and Well-Being**

**POLICY STATEMENT:**

Recognizing that overall health and well-being of older persons is impacted by their physical, emotional and mental health, and the ability to access supportive information, goods and services, and recognizing the differing needs of men and women, the Government will engage a multi-faceted approach to ensure aging is included as an essential component in national legislation and strategies on health, which will promote equitable access to quality health care that provides for the best possible physical, emotional mental health that science can make available and without regard to economic status, to ensure the improvement of health and quality of life for older persons.

**STRATEGIC OBJECTIVE:**

To provide all older persons in Grenada, Carriacou and Petite Martinique with quality and age-specific health care, ensuring that health and well-being issues of older persons are mainstreamed in pertinent policy and planning environments, thus enhancing their personal, social and productive lives. This policy recognizes that the full participation and contribution of older persons will be enhanced through adequate provisions for their health needs and quality of life through promotion of greater access to more affordable healthcare.

**POLICY COMMITMENTS:**

1. To increase the interface between health and social care through mandated coordination of care, in order to move towards closer cooperation and integration between the Ministry of Social Development, Housing and Community Empower and the Ministry of Health.
   1. Establish a team of representatives from both Ministries to coordinate efforts.
2. To provide for registration, training and deployment of appropriate social workers, healthcare specialists and other specialist functions in support of delivery of geriatric care and other programs.
3. To promote universal access to quality health care to older persons including medical subsidies and health insurance where appropriate.
   1. Investigate the feasibility of implementing a lasting supply of medications for older persons.
      1. Older persons report that these medications are not always available from the Government Pharmacy, resulting in them having to pay (out of pocket)
   2. Investigate possibility of a "Health Passport" that would provide comprehensive medical care to older persons who fall below the poverty line.
4. To recognize varying health status and needs within the population of older persons, including gender and age considerations, and facilitate differentiated strategies to address identified needs through appropriate health policies and programs.
   1. Train health professionals and ancillary staff on varying health needs for older persons.
5. To ensure access to adequate, appropriate and affordable medications for older persons, in particular those vulnerable through by socioeconomic circumstances, including lack of family support.
   1. Conduct cost-effective analysis for the provision of free medications and a lasting supply.
6. To promote a culture of well-being through health lifestyle choices and practices to reduce health risks within the population.
   1. Create public campaigns for promotion of physical and mental stimulation.
   2. Provide age and ability appropriate activities for older persons.
7. To create and maintain political and regulatory environments that enable full access to health services by older persons with disabilities.
   1. Create spaces within the health system to address the specific health needs of the disabled.
8. To create full restorative services for older persons who require institutional care.
   1. Provide improved services for older persons requiring institutional care.
9. To encourage and incentivize families who wish to provide care at home for their elderly relatives as an alternative to residential and nursing care at Homes for the Aged.
10. To provide for the provision of goods and services that support mobility for older persons.
11. To ensure supportive relationships within the healthcare system for independent living for older persons.
12. To provide effective mental health treatment and services, recognizing the need for support of mental stability for older persons.
    1. Employ mental health specialists in the service delivery framework for older persons.
13. To require etiquette training for **all staff involved in Geriatric Care.**
    1. Business Etiquette shall include:
       1. Professional behavior and standards for appearance and attitudes in a business environment
       2. Understanding different communication styles and how to adjust accordingly
       3. Develop ability to transform professional interactions into opportunities for growth and advancement within respective organizations
       4. Recognition of the critical link between business protocol and profit as a key to success
14. To expand training and certification opportunities in geriatrics and gerontology.
    1. Make provisions for proper training, frequency of retraining, and mandated required training.
    2. Increase access to ongoing training and refresher courses for all domiciliary and residential care workers.
15. To promote age-sensitive medical care and client sensitivity through the public and private health sectors.
    1. Investigate the feasibility of creating clinics exclusively for care for older persons.
16. To build capacity in the area of geriatric care through human resources, technological advances, institutional strengthening, and best practice approaches within public health and health care delivery.
17. To promote respect and dignity in, and facilitate the establishment of appropriate physical spaces, and resource allocation for end-of-life, hospice, and palliative care.
    1. Investigate spaces currently available for hospice and palliative care, such as Mother Theresa Home.
18. To promote and encourage responsible sexual and reproductive healthcare among older persons, through non-discriminatory provision of information, services, preventative care and treatment.
    1. Create safe-sex campaigns to educate older persons on healthy sex practices.
19. To provide adequate resources to combat sexually transmitted diseases and infections among the population of older persons and provide affordable treatment to all in need.
    1. Develop strategies for early diagnosis, treatment and support.
       1. HIV/AIDS and other STDs are likely to increase amongst older persons and sexual health should not be thought of as only the province of the young.
    2. Foster better culture around sexual health for older persons via sexual health campaigns.
20. To facilitate and encourage development and expansion of ambulatory services such as day care, outpatient services, medical rehabilitative services and nursing care for older persons.
    1. Evaluate the cost-effective analysis for expansion of ambulatory care.
21. To establish search and response systems for addressing health and well-being issues brought about by emerging and re-emerging diseases among older persons.
22. To promote and facilitate effect management of non-communicable diseases, particularly through health promotion and appropriate healthcare services.
    1. Create healthy lifestyle campaigns aimed at prevalent non-communicable diseases such as diabetes.
23. To promote investment in requisite health infrastructure and services, including recreational offerings, through public and private sector.
24. To promote and develop community-based capacities for interaction with older persons, including home care, respite care, physiotherapy and other services.
    1. Establish community led exercise in multiple convenient locations.
25. To strengthen overall health system capacity to care for older persons.
    1. Increase health promotion and preventative measures by supporting activities and training that empower older persons to take responsibility of their own health and well-being, promoting self-worth.
       1. **Older Persons, Disaster Preparedness, Physical Environment, Safety and Security**

**POLICY STATEMENT:**

Recognizing the right of all citizens to life and property, the Government is committed to the protection of older persons from violence and abuse, the provision of accessible and safe environments, proper accommodations for older persons in emergency situations, ensuring quick response to threats of safety and security, and the integration of older persons into policies and strategies on disaster management, infrastructure development, and the building of a safe environment.

**STRATEGIC OBJECTIVE:**

To provide supportive legislation and political frameworks that ensure the safety and security of older persons, to promote and facilitate the protection of older persons from all forms of abuse and violence, in their homes, communities, state care, and other living and working environments, and to promote disaster and emergency plans that treat older persons with equal importance during evacuation and recovery operations. This policy recognizes that abuse and violence can come in many forms and without the proper systems to identify and rectify these forms of abuse to older persons, silent abuse will occur to the detriment of the welfare and quality of life for all citizens.

**POLICY COMMITMENTS:**

1. To facilitate public awareness campaigns and programs aimed at the to educate all citizens on the importance of protection and safeguards for older persons.
   1. Create training programs to education all older persons on evacuation and disaster response procedures.
2. To establish as needed any supportive policies, standards, regulations or legislation to safeguard the protection of older persons.
   1. Engage all stakeholders in consultations on the issues of creating policy around disaster management.
3. To actively promote and support universal design for infrastructure and services, to improve accessibility by older persons and particularly those with disabilities.
4. To promote, and monitor adherence to, building codes and other related policies in support of physical accessibility in the public domain, ensuring that the built environment provides reasonable accommodation for older persons.
   1. Form an assessment team to evaluate all public buildings for disability accommodations.
5. To ensure through relevant agencies, the development and monitoring of disaster prevention, mitigation and response mechanisms in support of older persons and those with disabilities.
6. To promote the development of housing solutions and related systems that support the spectrum of independent, assisted and nursing care needs of older persons.
7. To assist the most vulnerable and indigent with shelter needs, through appropriate housing programs.
   1. Design a system to identify all vulnerable and indigent older persons with shelter needs.
8. To provide safe and accessible public transportation for older persons, including those with disabilities.
9. To encourage private sector investment in solutions for physical safety, safe environments, emergency response and other security provisions.
   1. Engage the private sector through established NGO and civil society body.
10. To ensure that recordkeeping in case management is appropriate, accurate, current and totally confidential.
    1. Create a standardized system of recordkeeping.
11. To ensure mechanisms exist to deter and prevent fraudulent persons from exploiting older persons.
    1. Reported crimes must be disaggregated by age and type of crime, to provide insight into the prevalence of crime committed against older persons.
       1. Institutions with capacity to collect age-disaggregated data include the Central Statistical Office, Ministry of Health, Ministry of Social Development, the Royal Grenada Police Force and the Parliamentary Office.
    2. Place checks and balances to ensure honesty in enforcement.
12. To provide access to appropriate community relief, rehabilitation, legal advice and emotional support following any disaster.
13. To advocate for the active involvement of older persons in planning for community and national risk management.
14. To creation of system to identify all older persons in each parish in the interest of implementing proper accommodations for evacuation.
    1. Targeting older persons to gather information about where they live, what disabilities they may have, and which accommodations are most critical for disaster response operations.

* + 1. **Older Persons, Income and Economic Security, Employment and Volunteerism**

**POLICY STATEMENT:**

Recognizing the importance of income and economic security as it pertains to access to affordable services and programs for older persons, the Government will undertake specific policy, legislative and programming interventions to achieve equitable access and equity in labor and employment, including: ensuring adherence to the principle of equal pay for work of equal value; creating opportunities for volunteerism for older persons trained in skilled industries; advancing the rights of workers in non-regulated sectors; and reviewing economic security provisions for older persons in formal and informal labor force, and unwaged workers in the home.

**STRATEGIC OBJECTIVE:**

To promote economic security in the interest of older persons, recognizing the importance of continuity in a steady flow of income which will afford equitable access to services for all older persons, to advocate for the equal treatment of older persons seeking employment and volunteer opportunities to continue their contributions to economic development and productivity according to training and skill level, to actively pursue policy and legislation that ends discrimination on the basis of age, mental health status, or disability status, and to promote retirement in health, honor and dignity.

**POLICY COMMITMENTS:**

1. To promote and ensure protection of older persons against loss of major assets by fraud, deceit, undue advantage, misrepresentation or other unlawful means.
   1. Prevent and respond to unlawful acts against older persons.
2. To facilitate active and productive aging by promoting equitable employment and labor policies and legislation, to support the labor market engagement of older persons, which shall be free from age-based discrimination.
   1. Must "Age proof" policies to reflect their future impact on older age, taking into account the livelihood development of older persons to combat age discrimination.
      1. No specific strategies are in place to help older persons remain working or to access the formal or informal labor market should they wish to continue work after retirement.
   2. Ensure representation from older persons on the Labor Advisory Board.
3. To encourage participation in economic livelihoods, even beyond typical retirement ages, in accordance with abilities and talents, and potential for further growth.
   1. Pursue opportunities for the continuation of older persons in the workforce beyond age of retirement.
      1. Economically speaking, this would effectively lower the dependence ratio of older persons and allow more payments into NIS.
      2. Recommend deep investigation of the feasibility of raising the retirement age.
      3. Policy must recognize the necessity of clearly stating that individuals currently employed by environmental agencies will not be displaced as a result of these inclusion programs and existing contracts for services will not be affected or interrupted.
4. To encourage and facilitate preparation for retirement through provision of, and support to retirement planning information and services.
   1. Collaborate with Grenada Association for Retire Persons which hosts pre-retirement workshops and expand on a larger scale to reach more older persons on the island.
5. To promote voluntary engagement in pension and insurance arrangements and other investments that can provide for retirement income.
   1. Request older persons to be considered as stakeholder group at NIS Actuary Review.
      1. Older persons require an adequate income in retirement in accordance with the Grenada standard of living.
6. To facilitate volunteer opportunities for older persons wishing to offer their services having had training, certification and experience in areas of interest and expertise.
   1. Create a clear routing system to incorporate older persons in the workforce and volunteerism.
      1. Elders are an economic resource who contribute to society through continuing participation in workforce and through transfer of skills.
   2. Investigate the retainment of persons trained in skilled positions which may be lacking on the island, e.g. health care providers, construction contractors, or agricultural specialists.
   3. Create an **Older Persons Community Service Employment Program**, which shall be an overarching program that will establish branches of programs offering opportunities for older persons' contributions to society.
      1. Leverage extensive local resources for the benefit of working older persons in order to operate under low administrative costs.
      2. Explore funding sources and investigate opportunities to lower administrative costs.
      3. Work with researchers in gerontology, workforce development and adult learning.
      4. Participants in the program may work full-time or part-time.
   4. Establish a network across the islands among local workforce development agencies, area agencies on aging, community action agencies, faith-based organizations, colleges and universities.
7. To encourage collaboration with and between organizations established by or on behalf of older persons in respect to social security and pensions.
8. To provide the regulatory environment to give oversight to state and non-state entities providing pensions, insurance and other financial support to older persons.
9. To investigate the feasibility of creating a non-contributory pension scheme specifically for older women who have stayed at home to raise a family and may not have worked consistently.
   1. Explore the possibility of merit-based pension credits, verified societal contributions, investments in the upbringing of youth.
10. To promote client-friendly access to social security services, professional services, and information.
11. To promote access by senior citizens to credit and other financial support to enhance livelihoods and business growth.
    1. Explore credit schemes utilized in the Caribbean and internationally.
12. To promote and facilitate improvements in financial literacy across the population of older persons.
13. To protect the most vulnerable older persons by addressing basic needs of food security and shelter through appropriate state programs and supportive programs from non-government entities.
    1. Create a link between vulnerable individuals identified by the government and non-governmental entities who can assist in address food security and shelter.
14. To promote, facilitate and encourage market-based opportunities in support of the economic livelihoods of older persons or their associations/organizations, including favorable access to tools of trade.
    1. Explore innovative pedagogical and other methods being used in the Caribbean and internationally to address access to the market for older persons.
15. To facilitate investment opportunities for older persons.

* + 1. **Older Persons, Culture, Intergenerational Transfers, Recreation and Social Inclusion**

**POLICY STATEMENT:**

Recognizing the role older persons have in communicating and transferring accumulated experience, wisdom, institutional and cultural memory, and a myriad of skills/abilities to younger generations, which can enhance the continuing contribution of older persons to national and cultural development, and recognizing the benefit of recreation and social inclusion for the promotion of stability in mental health, the Government will engage key institutions of socialization in the society, the home, school, community, faith-based organizations and the media in the process of aging sensitization, training and public awareness-raising to promote positive and non-discriminatory relations between older persons and the rest of the nation.

**STRATEGIC OBJECTIVE:**

To foster a society and culture based on beliefs, values and practices that enhance the appreciation for, and recognition of the value and worth of older persons to the economic, social and political sectors of society and the nation's development through active engagement, social inclusion, and intentional harnessing and utilization of skills and experiences of older persons. This policy seeks to bolster the opportunities for older persons to socialize amongst themselves and the rest of the society in the interest of promoting social cohesion among all age cohorts.

**POLICY COMMITMENTS:**

1. To promote and preserve freedom, independence, dignity, and the free exercise of individual initiative in planning and managing their own lives.
2. To facilitate the active participation of older persons in civic and social life through an inclusive policy and an enabling program environment.
3. To enkindle respect and appreciation of older persons throughout society by cultivating the socialization of children and the youth in regard to older persons through educational involvement and broader social programs for the preservation of cultural heritage and tradition.
   1. Implement school programs geared towards transfer of cultural knowledge, including teaching patois, cultural dances and drumming to the youth.
      1. Work with schools to help form relationships between youth and older persons, which can build a bridge across the generations. Potential programming could include school writing competitions that emphasize an admirable older adult. Additionally, the expansion of student volunteer programs such as Students with the Right Attitude to encourage youth to visit, accompany and engage with older persons. Volunteer activities could include storytelling, singing or accompanying older persons on errands. As an incentive, the students could receive points or academic credit for volunteer hours and receive a special recognition at graduation.
   2. Form informal mentorship programs to promote intergenerational activities.
4. To revitalize the family structure through promotional activities and programs highlighting the importance of family.
   1. Develop campaigns highlighting the importance of a close family structure.
5. To support and facilitate the active involvement of older persons in the transmission of positive values, culture, traditions and morals to the youth.
   1. Create structures in school system linking the youth to the elderly.
6. To establish facilities for recreational, cognitive and physical and stimulation for older persons.
   1. Build a senior recreational center on Grenada and Carriacou.
      1. Desk of Elderly can organize the most appropriate locations.
7. To promote and encourage the engagement of the Grenadian Diaspora of older persons in actively contributing to civic dialogue, philanthropy, social organization, investments and pertinent national discussions.
   1. Set up methods of outreach for the Grenadian Diaspora to be made aware of all initiatives being conducted for older persons.
8. To facilitate and support programs, services and organizations aimed at reintegration of returning residents.
   1. Create a pamphlet outlining routing systems to services for returning Grenadians.
9. To facilitate requisite training and sensitization of key stakeholders, family members and the public in regard to interactions with older persons.
10. To promote the participation of older persons in governance structures at local and national levels.
    1. Create a National Committee of Older Persons, which will be a grassroots development of forums for older persons in each Parish that will enhance communication, inclusiveness and accountability (Can provide representatives for the National Council on Aging to capture the community perspective, separate from the NGOs and other agencies).
11. To facilitate civic participation including the exercise of the right to vote in general and local elections or referendum.
12. To advocate for the creation of and greater access to recreational facilities for older persons.
13. To pursue meaningful activity and opportunities for education and training within the widest range of civic, cultural and recreational opportunities.
    1. To foster a culture of lifelong learning and facilitating the continuation of education through academic, vocational and recreational courses.

* + 1. **Older Persons, Transportation and Housing**

**POLICY STATEMENT:**

Recognizing the need for access to affordable housing options and transportation, the Government will undertake specific policy, legislative and programming interventions for the proper inclusion of older persons in planning and implementation of housing and transportation, and will engage the key institutions of housing development, infrastructure and transportation services in the process of building capacity for older persons to have equitable access to housing regardless of economic status, and transportation that is sensitive to accommodations required for user-friendly mobility.

**STRATEGIC OBJECTIVE:**

To promote sensitization of older persons and specifically those with disabilities in housing and transportation, recognizing special accommodations that will be necessary to ensure the continuity of housing safety and ability to use public transportation, increasing their equitable access to such services and facilitating the goal of inclusion for older persons in all areas of society. This policy recognizes that older persons needs will be better considered and incorporated into national and local development plans by directly including their input and perspectives into plans via stakeholder consultations with the public

**POLICY COMMITMENTS:**

1. To create availability of affordable, reliable, safe, senior-sensitive and accessible scheduled transportation for older persons.
   1. Requesting buses to reduce the volume of the music on buses when older persons are onboard.
   2. Provide a few reserved seats towards the front of the bus for older persons.
   3. Establish bus passes specifically for older persons.
   4. Establish a relationship with public or private agencies to provide a *Dial-a Ride Scheme.*
2. To provide transportation with special accommodations for older persons, specifically those with disabilities, to transport them to common spaces and public places such as markets and clinics, which are for the exclusive use of older persons.
   1. Incentivize the transportation system to integrate age sensitivity into their practices.
3. To improve the availability of housing that is affordable, safe and accessible for older persons.
4. To provide suitable housing, independently selected, designed and located with reference to special needs and available at costs which older citizens can afford.
5. To encourage families who wish to provide care at home for their elderly relatives as an alternative to institutional residential housing.
   1. Create incentives for families who provide care at home.
6. To encourage businesses to provide ramps outside of buildings to allow easier access for people with physical mobility challenges.
   1. Create a link between businesses that have yet to implement accommodations for the disabled and entities that build and install ramps.
7. To advocate for businesses to have a service desk on the first floor of buildings to decrease the need for older persons to have to take the stairs.
   1. Grenada Association for Retired Persons has already successfully advocated for the implementation at some banks on the island.
8. To encourage businesses to provide handrails along stairs to accommodate older persons, especially those with disabilities.
9. To advocate for creation of a Housing/Road/Building Infrastructure Committee with representation from key stakeholders in all government agencies, including older persons from each parish.
   1. Form a committee for each parish to advise housing, road, building and transportation accommodations for older persons.
   2. Employ advising by a financial analyst to reviewing funding options to help provide appropriate low-cost housing for the indigent and vulnerable older persons.

* + 1. **Older Persons, Social Support and Social Security**

**POLICY STATEMENT:**

Recognizing the need of all older persons for social security, and the strategic importance of social protection to the prevention and mitigation of risks of income security and poverty among older persons, the Government will ensure responsiveness in programs and initiatives to strengthen social protections, reduce poverty and encourage financial and private sector agencies to promote inclusive operations and programming for older persons.

**STRATEGIC OBJECTIVE:**

To promote the continuity of social welfare and supportive services for older persons through the establishment of public goods and services, retirement planning and preparation, and education and awareness of aging issues, recognizing vulnerability at various levels including susceptibility to crime and abuse. This policy advocates for policies and legislation that involve enabling the voice of older persons to be heard through representation of critical issues on a national scale, and the establishment of education campaigns and effective collaboration to ensure coordinated social assistance is both made readily available and easily accessible for all older persons, especially those who are vulnerable and at-risk.

**POLICY COMMITMENTS:**

1. To encourage and promote education and public awareness on aging issues.
   1. Development of radio and television messages, advertisements on social media.
2. To creation of publicly distributed booklets to older persons that address the "fear of aging", highlighting support and resources for persons as they age.
   1. Establish a booklet may list the agencies that support older persons, counseling and social support offered by the Desk of the Elderly, events and programs that encourage older persons throughout the year and highlight older persons in the community (similar to the senior newsletter but more comprehensive).
      1. Distribution can occur at multiple access points, such as local health centers, churches, Desk of the Elderly building, Fire and Police department offices, GARP welcome centers, and the Ministerial complex.
      2. Recognizing that older persons lack knowledge of existing programs that provide free counseling and social work support, increasing the awareness of such services is paramount.
3. To provide targeted social assistance to older persons identified as primary caregivers of children or persons with disabilities.
4. To facilitate support of caregivers of older persons in family and community settings.
5. To support the reintegration and unification of older persons and their families impacted by migration.
6. To close monitoring of all older persons receiving public assistance to ensure they meet eligibility for social services.
   1. Quarterly review of eligibility for persons receiving public assistance and removal of any persons who do not meet eligibility.
      1. Require adequate grace period between ineligibility and discontinuation of public assistance to ensure persons have reasonable time to acquire other accommodations.
7. To create and facilitate services available to the community which provide social assistance in a coordinated manner and which are readily available when needed.
8. To create mechanisms that employ checks and balances for public assistance to prevent overutilization of services by ineligible persons or staff who would otherwise allow ineligible persons to receive public assistance.
9. To establish mechanisms to ensure financial assistance given to older persons are received by them, used appropriately and accordingly, and unencumbered by the possibility of theft.
   1. Establish a credit card system for the disbursement and utilization of financial assistance, which can be linked to and utilized by only persons receiving the assistance or designated caregivers.
10. To ensure objective, transparent and accountable mechanisms are in place to identify older persons at risk of poverty and vulnerability.
    1. Create case-finding scheme to capture all older persons in need, ensuring that no older persons below the poverty line fail to get public assistance through effective monitoring systems.
11. To ensure allocation of appropriate resources, including human resources and budgets, to the care and protection of poor and/or vulnerable older persons in the care of the government.
12. To recognize and advance the importance of nutrition in the food security of older persons.
13. To ensure existence of necessary social security agreements to protect the rights of migrant older persons, in country of origin and destination.
14. To encourage the provision of appropriate pension schemes by **all** employers.

* + 1. **Older Persons and Gender Equality**

**POLICY STATEMENT:**

Recognizing the disproportionate effect that the aging process has on the economic situation of women, and recognizing the rights of every citizen to pursue a high quality of life unencumbered by gendered divisions in all facets of government legislation and regulation, the Government will undertake specific policy, legislative and programming interventions to achieve gender quality and equity in within the cultural and economic facets of life, as well as all other areas of life for older persons.

**STRATEGIC OBJECTIVE:**

To promote and strengthen the capacity for older men and women to experience equality, recognizing the equal value of contributions from both men and women, and advocate for equitable access to services and programs in all areas such as health and well-being, employment, income security, social support, social security, housing, education, training, economic and social development, and participation in the creation of legislative and institutional frameworks that support older persons.

**POLICY COMMITMENTS:**

1. To create integration into the pension scheme for women who have stayed at home to raise a family and as a result have not worked consistently.
   1. Consider pension credits for mothers who stay at home to rear children.
      1. Must recognize that pensions may be affected by gender inequalities, thus requiring a more equitable system.
2. To ensure there is a state pension for self-employed men and women in the agricultural sector.
   1. Investigate pension schemes currently used in other Eastern Caribbean States that may be applicable to Grenada.
3. To strengthen the capacity of older women to be financially stable.
   1. Older women are likely to have worked for lower wages, had more temporary contracts and to have had breaks in their economic participation through child bearing and child rearing. They are also less likely to have contributed into a pension scheme. Combined with greater longevity (longer life expectancy), older women are more likely to be in a disadvantageous position.
   2. The fragmentation of the family structure has led to an increase in female managed households which exacerbates the effects of child rearing on a single income. Thus, the cycle of poverty extends into older age.

* + 1. **Older Persons and Agriculture**

**POLICY STATEMENT:**

The Government is committed to promoting opportunities for the retention of older persons in agriculture, access to productive resources, opportunities for entrepreneurial development linking agriculture to agri-business, and facilitating the nation's goals of agricultural diversification, food-related cultural preservation, food security, economic growth, poverty reduction and sustainable development.

**STRATEGIC OBJECTIVE:**

To promote the inclusion of older persons in agriculture, recognizing their contribution to the national economy and productivity, increasing their equitable access to productive resources, creating entrepreneurial opportunities linking agriculture, and facilitating the nation's goals of agricultural diversification, food-related cultural preservation, food security, economic growth, poverty reduction and sustainable development via provision of opportunities for community service and employment.

**POLICY COMMITMENTS:**

1. To utilize that talents of older persons in projects of farming, agriculture, pollution prevention, abatement, and control.
   1. Create Senior Environmental Employment Program.
      1. Particularly relevant for agriculture and retainment of older farmers.
         1. Fosters collaborations with younger farmers.
      2. Older persons may offer technical assistance to environmental agencies.
         1. The ministry of agriculture is authorized to enter into cooperative agreements with individuals, non-governmental organizations, private nonprofit organizations to utilize the talents of older persons in Grenada, Carriacou and Petite Martinique in programs to provide technical assistance to national and local environmental and agricultural agencies for projects of farming, pollution prevention, abatement and control.
2. To undertake public awareness articulating that individuals currently employed by environmental agencies will not be displaced as a result of these inclusion programs and existing contracts for services will not be affected or interrupted.
3. To incentivize the retainment of younger farmers in collaboration with older persons.
   1. Explore opportunities to change financial ideation of "crop productions that yield quicker and higher returns."
   2. Tackle issue of younger farmers migrating overseas in search of employment to combat the issue of food production being left to an increasingly aging workforce.
4. To create payment schemes, subsidies and incentives that rectify the issue around farm acreage and minimum annual earnings required to be commercially viable.
5. To facilitate ease of access to Agricultural Loan Scheme to recognize the role older persons have in the rural economy.

* + 1. **Legislative Framework and Institutional Capacity for Implementing Policy, Monitoring, Reviewing and Evaluation**

**POLICY STATEMENT:**

Recognizing that the effectiveness of policy will depend on systematic and effective data collection to monitor and evaluate it, the Government will undertake a process of legislative review and reform to promote protection, inclusion and equality for older persons in national development, and put in place institutional structures, mechanisms and processes for implementing the National Aging Policy in an equitable manner based on evidence-based practices.

* The main Department through which policy and program implementation will be advised **should be** the National Council on Aging (International stakeholders such as HelpAge International, etc. will recognize the functionality of Grenada's Aging Policy via an operationally viable National Council for the Elderly). Through strengthened capacity at the national and parish levels, the Council will coordinate and track efforts by a broad range of stakeholders, including Government, private sector, community organizations, civil society groups, faith-based organizations and international partners to actualize the pertinent strategies and programs. The Council must remain strong and functional to further the agenda for Older Persons in Grenada.

**STRATEGIC OBJECTIVE:**

To ensure that the legislative framework and institutional provisions promote proper monitoring and evaluation of the implementation of the policy, and to establish institutional structures, mechanisms and processes for increasing collaboration among stakeholders and strengthening the capacity to continuously increase the quality of life for older persons in Grenada. This policy recognizes that monitoring and evaluation are underpinned by institutional and administrative processes and political will.

**POLICY COMMITMENTS:**

1. To provide for the continuous strengthening and expansion of the Desk of the Elder to maintain required staff persons running the Desk at all times, such that each position in the organogram is always filled and occupied by qualified persons.
   1. Review and upgrade the staffing of the Desk of the Elderly to ensure that it comprises the complement of skills and experience required to effectively undertake the responsibilities proposed above, including formal and professional development initiatives for the current staff. New positions shall be considered when the economic situation improves.
   2. Hiring of additional staff as needed when vacancies in positions are identified, or when caseloads exceed capacity for case workers to have reasonable depth of work and resolution of issues with their clients.
      1. Desk of Elderly requires more equitable distribution of caseloads among field supervisors and case workers, which shall decrease transportation costs and the number of clients to manage, while also increasing the depth of their work and ability to resolve issues with each client.
      2. Recommend splitting the mainland into four regions, consisting of the upper region (including Carriacou and Petite Martinique), the middle region, the lower region, and St. George's.
2. To re-establish and strengthen a geriatric unit.
   1. Ensure the continuity of agencies providing caregivers, training and support to the Geriatric unit of the Desk of the Elderly through collaborations.
3. To maintain an up-to-date website for the Ministry of Social Development, Housing and Community Empowerment.
4. To provide a repository of information and documentation (including social services, policies, strategic plans of action) to ensure information is readily and easily available to all, ensuring that all information is kept up-to-date within a month a newly disseminated materials.
   1. Creation of a directory/repository of documentation which provides information for access to public assistance and social services.
      1. Need the public to be more sufficiently aware of public services, ensuring information regarding access to services, especially medical care, is readily and easily available to all.
   2. Conduct monthly review of actions taken by invested stakeholders.
5. To ensure institutional quality control in the offering of training institutions, requiring registration and certification of caregivers and specialists, and a regulatory environment.
6. To create a structured and standardized research environment for the monitoring and evaluation of all parts of the National Aging Policy and Strategic Plan of Action.
   1. Designate a core team who will conduct annual reviews of all operational and institutional procedures driven by data collected through proper research methods.
   2. Track the outcomes, outputs and processes of the programs/services enumerated under the National Aging Policy and to inform operational decision-making, including project design.
7. To ensure the existence, maintenance and monitoring of standards for care and service delivery with respect to interactions with older persons.
   1. Update the Assessment Tool used for Geriatric Homes to be reflective of elements recognized as critical to the improvement of the quality of life for older persons.
   2. Establish a frequent and continuous monitoring schedule for assessing the status of the Geriatric Homes according to Grenada National Standards on Care and Protection of the Elderly.
8. To establish evidence-based systems for daily tracking and analysis of pertinent data on the population of older persons, and of project results to measure operational performance against targets and to make adjustments where necessary.
9. To facilitate, encourage and support continuous research on aging issues.
   1. Utilize proven research knowledge for the immediate benefit of older persons which shall sustain and improve health, happiness and quality of life.
10. To encourage and strengthen the integration of partnerships between government and non-governmental organizations, as well as international agencies in program implementation, addressing strategies under the policy and mobilizing resources.
    1. Amalgamate all interest groups including but not limited to non-governmental organizations, government agencies, shareholders, businesses, civil society, communities, and individuals.
    2. Mandate collaboration across invested groups and individuals in order to prevent the waste of resources and overlapping of stakeholders' efforts towards a similar goal.
    3. Consider placing restraints on the implementation of initiatives unless an associated group has been identified within a predetermined time frame of at least one month.
       1. Time frame must allow proper identification of potential collaborators, upon which if none can be found, the initiative may proceed.
11. To foster sustainable, balanced and inclusive engagement between all levels of the ministries.
    1. Plan a schedule for meetings between Planning Officers of each ministry.
12. To promote adherence to review of the social support system to ensure the system is accessible and effective with the minimum of administrative bureaucracy.
    1. Review the social support system on a biannual basis to ensure the system is accessible.
    2. Improve targeting to reach all eligible beneficiaries that have are overlooked.
13. To advocate for adherence to eligibility requirements for public assistance and ensure citizens who are ineligible for public assistance are not able to waste limited resources.
    1. Create a stricter system of reviewing clientele eligibility for public assistance.
    2. Ensure information regarding how to access public assistance is readily and easily available to all.

**Part 5.4 National Aging Plan of Action**

Policy Area: **Older Persons Health and Well-Being**

Policy Statement: Recognizing that overall health and well-being of older persons is impacted by their physical, emotional and mental health, and the ability to access supportive

information, goods and services, and recognizing the differing needs of men and women, the Government will engage a multi-faceted approach to ensure aging is included as an essential component in national legislation and strategies on health, which will promote equitable access to quality health care that provides for the best possible physical, emotional mental health that science can make available and without regard to economic status, to ensure the improvement of health and quality of life for older persons.

Strategic Objective: To provide all older persons in Grenada, Carriacou and Petite Martinique with quality and age-specific health care, ensuring that health and well-being issues of older

persons are mainstreamed in pertinent policy and planning environments, thus enhancing their personal, social and productive lives. This policy recognizes that the full participation and contribution of older persons will be enhanced through adequate provisions for their health needs and quality of life through promotion of greater access to more affordable healthcare.

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| **Policy Commitments** | **Activities** |
| * 1. To increase the interface between health and social care through mandated coordination of care, in order to move towards closer cooperation and integration between the Ministry of Social Development, Housing and Community Empower and the Ministry of Health. | * + Establish a team of representatives from both Ministries to coordinate efforts. |
| * 1. To provide for registration, training and deployment of appropriate social workers, healthcare specialists and other specialist functions in support of delivery of geriatric care and other programs. |  |
| * 1. To promote universal access to quality health care to older persons including medical subsidies and health insurance where appropriate. | * + Investigate the feasibility of implementing a lasting supply of medications for older persons.   + Investigate possibility of a "Health Passport" that would provide comprehensive medical care to older persons who fall below the poverty line. |
| * 1. To recognize varying health status and needs within the population of older persons, including gender and age considerations, and facilitate differentiated strategies to address identified needs through appropriate health policies and programs. | * + Train health professionals and ancillary staff on varying health needs for older persons. |
| * 1. To ensure access to adequate, appropriate and affordable medications for older persons, in particular those vulnerable through by socioeconomic circumstances, including lack of family support. | * + Conduct cost-effective analysis for the provision of free medications and a lasting supply. |
| * 1. To promote a culture of well-being through health lifestyle choices and practices to reduce health risks within the population. | * + Create public campaigns for promotion of physical and mental stimulation.   + Provide age and ability appropriate activities for older persons. |
| * 1. To create and maintain political and regulatory environments that enable full access to health services by older persons with disabilities. | * + Create spaces within the health system to address the specific health needs of the disabled. |
| * 1. To create full restorative services for older persons who require institutional care. | * + Provide improved services for older persons requiring institutional care. |
| * 1. To encourage and incentivize families who wish to provide care at home for their elderly relatives as an alternative to residential and nursing care at Homes for the Aged. |  |
| * 1. To provide for the provision of goods and services that support mobility for older persons. |  |
| * 1. To ensure supportive relationships within the healthcare system for independent living for older persons. |  |
| * 1. To provide effective mental health treatment and services, recognizing the need for support of mental stability for older persons. | * + Employ mental health specialists in the service delivery framework for older persons. |
| * 1. To require etiquette training for **all staff involved in Geriatric Care.** |  |
| * 1. To expand training and certification opportunities in geriatrics and gerontology. | * + Make provisions for proper training, frequency of retraining, and mandated required training.   + Increase access to ongoing training and refresher courses for all domiciliary and residential care workers. |
| * 1. To promote age-sensitive medical care and client sensitivity through the public and private health sectors. | * + Investigate the feasibility of creating clinics exclusively for care for older persons. |
| * 1. To build capacity in the area of geriatric care through human resources, technological advances, institutional strengthening, and best practice approaches within public health and health care delivery. |  |
| * 1. To promote respect and dignity in, and facilitate the establishment of appropriate physical spaces, and resource allocation for end-of-life, hospice, and palliative care. | * + Investigate spaces currently available for hospice and palliative care, such as Mother Theresa Home. |
| * 1. To promote and encourage responsible sexual and reproductive healthcare among older persons, through non-discriminatory provision of information, services, preventative care and treatment. | * + Create safe-sex campaigns to educate older persons on healthy sex practices. |
| * 1. To provide adequate resources to combat sexually transmitted diseases and infections among the population of older persons, and provide affordable treatment to all in need. | * + Develop strategies for early diagnosis, treatment and support.   + Foster better culture around sexual health for older persons via sexual health campaigns. |
| * 1. To facilitate and encourage development and expansion of ambulatory services such as day care, outpatient services, medical rehabilitative services and nursing care for older persons. | * + Evaluate the cost-effective analysis for expansion of ambulatory care. |
| * 1. To establish search and response systems for addressing health and well-being issues brought about by emerging and re-emerging diseases among older persons. |  |
| * 1. To promote and facilitate effect management of non-communicable diseases, particularly through health promotion and appropriate healthcare services. | * + Create healthy lifestyle campaigns aimed at prevalent non-communicable diseases such as diabetes. |
| * 1. To promote investment in requisite health infrastructure and services, including recreational offerings, through public and private sector. |  |
| * 1. To promote and develop community-based capacities for interaction with older persons, including home care, respite care, physiotherapy and other services. | * + Establish community led exercise in multiple convenient locations. |
| * 1. To strengthen overall health system capacity to care for older persons. | * + Increase health promotion and preventative measures by supporting activities and training that empower older persons to take responsibility of their own health and well-being, promoting self-worth. |

Policy Area: **Older Persons, Disaster Preparedness, Physical Environment, Safety and Security**

Policy Statement: Recognizing the right of all citizens to life and property, the Government is committed to the protection of older persons from violence and abuse, the provision of

accessible and safe environments, proper accommodations for older persons in emergency situations, ensuring quick response to threats of safety and security, and the integration of older persons into policies and strategies on disaster management, infrastructure development, and the building of a safe environment.

Strategic Objective: To provide supportive legislation and political frameworks that ensure the safety and security of older persons, to promote and facilitate the protection of older persons

from all forms of abuse and violence, in their homes, communities, state care, and other living and working environments, and to promote disaster and emergency plans that treat older persons with equal importance during evacuation and recovery operations. This policy recognizes that abuse and violence can come in many forms and without the proper systems to identify and rectify these forms of abuse to older persons, silent abuse will occur to the detriment of the welfare and quality of life for all citizens.

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| **Policy Commitments** | **Activities** |
| * 1. To facilitate public awareness campaigns and programs aimed at the to educate all citizens on the importance of protection and safeguards for older persons. | * + Create training programs to education all older persons on evacuation and disaster response procedures. |
| * 1. To establish as needed any supportive policies, standards, regulations or legislation to safeguard the protection of older persons. | * + Engage all stakeholders in consultations on the issues of creating policy around disaster management. |
| * 1. To actively promote and support universal design for infrastructure and services, to improve accessibility by older persons and particularly those with disabilities. |  |
| * 1. To promote, and monitor adherence to, building codes and other related policies in support of physical accessibility in the public domain, ensuring that the built environment provides reasonable accommodation for older persons. | * + Form an assessment team to evaluate all public buildings for disability accommodations. |
| * 1. To ensure through relevant agencies, the development and monitoring of disaster prevention, mitigation and response mechanisms in support of older persons and those with disabilities. |  |
| * 1. To promote the development of housing solutions and related systems that support the spectrum of independent, assisted and nursing care needs of older persons. |  |
| * 1. To assist the most vulnerable and indigent with shelter needs, through appropriate housing programs. | * + Design a system to identify all vulnerable and indigent older persons with shelter needs. |
| * 1. To provide safe and accessible public transportation for older persons, including those with disabilities. |  |
| * 1. To encourage private sector investment in solutions for physical safety, safe environments, emergency response and other security provisions. | * + Engage the private sector through established NGO and civil society body. |
| * 1. To ensure that recordkeeping in case management is appropriate, accurate, current and totally confidential. | * + Create a standardized system of recordkeeping. |
| * 1. To ensure mechanisms exist to deter and prevent fraudulent persons from exploiting older persons. | * + Reported crimes must be disaggregated by age and type of crime, to provide insight into the prevalence of crime committed against older persons.   + Place checks and balances to ensure honesty in enforcement. |
| * 1. To provide access to appropriate community relief, rehabilitation, legal advice and emotional support following any disaster. |  |
| * 1. To advocate for the active involvement of older persons in planning for community and national risk management. |  |
| * 1. To creation of system to identify all older persons in each parish in the interest of implementing proper accommodations for evacuation. | * + Targeting older persons to gather information about where they live, what disabilities they may have, and which accommodations are most critical for disaster response operations. |

Policy Area: **Older Persons, Income and Economic Security, Employment and Volunteerism**

Policy Statement: Recognizing the importance of income and economic security as it pertains to access to affordable services and programs for older persons, the Government will

undertake specific policy, legislative and programming interventions to achieve equitable access and equity in labor and employment, including: ensuring adherence to the principle of equal pay for work of equal value; creating opportunities for volunteerism for older persons trained in skilled industries; advancing the rights of workers in non-regulated sectors; and reviewing economic security provisions for older persons in formal and informal labor force, and unwaged workers in the home.

Strategic Objective: To promote economic security in the interest of older persons, recognizing the importance of continuity in a steady flow of income which will afford equitable access to

services for all older persons, to advocate for the equal treatment of older persons seeking employment and volunteer opportunities to continue their contributions to economic development and productivity according to training and skill level, to actively pursue policy and legislation that ends discrimination on the basis of age, mental health status, or disability status, and to promote retirement in health, honor and dignity.

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| **Policy Commitments** | **Activities** |
| * 1. To promote and ensure protection of older persons against loss of major assets by fraud, deceit, undue advantage, misrepresentation or other unlawful means. | * + Prevent and respond to unlawful acts against older persons. |
| * 1. To facilitate active and productive aging by promoting equitable employment and labor policies and legislation, to support the labor market engagement of older persons, which shall be free from age-based discrimination. | * + Must "Age proof" policies to reflect their future impact on older age, taking into account the livelihood development of older persons to combat age discrimination.   + Ensure representation from older persons on the Labor Advisory Board. |
| * 1. To encourage participation in economic livelihoods, even beyond typical retirement ages, in accordance with abilities and talents, and potential for further growth. | * + Pursue opportunities for the continuation of older persons in the workforce beyond age of retirement. |
| * 1. To encourage and facilitate preparation for retirement through provision of, and support to retirement planning information and services. | * + Collaborate with Grenada Association for Retire Persons which hosts pre-retirement workshops, and expand on a larger scale to reach more older persons on the island. |
| * 1. To promote voluntary engagement in pension and insurance arrangements and other investments that can provide for retirement income. | * + Request older persons to be considered as stakeholder group at NIS Actuary Review. |
| * 1. To facilitate volunteer opportunities for older persons wishing to offer their services having had training, certification and experience in areas of interest and expertise. | * + Create a clear routing system to incorporate older persons in the workforce and volunteerism.   + Investigate the retainment of persons trained in skilled positions which may be lacking on the island, e.g. health care providers, construction contractors, or agricultural specialists.   + Create an **Older Persons Community Service Employment Program**, which shall be an overarching program that will establish branches of programs offering opportunities for older persons' contributions to society.   + Establish a network across the islands among local workforce development agencies, area agencies on aging, community action agencies, faith-based organizations, colleges and universities. |
| * 1. To encourage collaboration with and between organizations established by or on behalf of older persons in respect to social security and pensions. |  |
| * 1. To provide the regulatory environment to give oversight to state and non-state entities providing pensions, insurance and other financial support to older persons. |  |
| * 1. To investigate the feasibility of creating a non-contributory pension scheme specifically for older women who have stayed at home to raise a family and may not have worked consistently. | * + Explore the possibility of merit-based pension credits, verified societal contributions, investments in the upbringing of youth. |
| * 1. To promote client-friendly access to social security services, professional services, and information. |  |
| * 1. To promote access by senior citizens to credit and other financial support to enhance livelihoods and business growth. | * + Explore credit schemes utilized in the Caribbean and internationally. |
| * 1. To promote and facilitate improvements in financial literacy across the population of older persons. |  |
| * 1. To protect the most vulnerable older persons by addressing basic needs of food security and shelter through appropriate state programs and supportive programs from non-government entities. | * + Create a link between vulnerable individuals identified by the government and non-governmental entities who can assist in address food security and shelter. |
| * 1. To promote, facilitate and encourage market-based opportunities in support of the economic livelihoods of older persons or their associations/organizations, including favorable access to tools of trade. | * + Explore innovative pedagogical and other methods being used in the Caribbean and internationally to address access to the market for older persons. |
| * 1. To facilitate investment opportunities for older persons. |  |

Policy Area: **Older Persons, Culture, Intergenerational Transfers, Recreation and Social Inclusion**

Policy Statement: Recognizing the role older persons have in communicating and transferring accumulated experience, wisdom, institutional and cultural memory, and varying skills abilities

to younger generations, which can enhance the continuing contribution of older persons to national and cultural development, and recognizing the benefit of recreation and social inclusion for the promotion of stability in mental health, the Government will engage key institutions of socialization in the society, the home, school, community, faith-based organizations and the media in the process of aging sensitization, training and public awareness-raising to promote positive and non-discriminatory relations between older persons and the rest of the nation.

Strategic Objective: To foster a society and culture based on beliefs, values and practices that enhance the appreciation for, and recognition of the value and worth of older persons to the

economic, social and political sectors of society and the nation's development through active engagement, social inclusion, and intentional harnessing and utilization of skills and experiences of older persons. This policy seeks to bolster the opportunities for older persons to socialize amongst themselves and the rest of the society in the interest of promoting social cohesion among all age cohorts.

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| **Policy Commitments** | **Activities** |
| * 1. To promote and preserve freedom, independence, dignity, and the free exercise of individual initiative in planning and managing their own lives. |  |
| * 1. To facilitate the active participation of older persons in civic and social life through an inclusive policy and an enabling program environment. |  |
| * 1. To enkindle respect and appreciation of older persons throughout society by cultivating the socialization of children and the youth in regard to older persons through educational involvement and broader social programs for the preservation of cultural heritage and tradition. | * + Implement school programs geared towards transfer of cultural knowledge, including teaching patois, cultural dances and drumming to the youth.   + Form informal mentorship programs to promote intergenerational activities. |
| * 1. To revitalize the family structure through promotional activities and programs highlighting the importance of family. | * + Develop campaigns highlighting the importance of a close family structure. |
| * 1. To support and facilitate the active involvement of older persons in the transmission of positive values, culture, traditions and morals to the youth. | * + Create structures in school system linking the youth to the elderly. |
| * 1. To establish facilities for recreational, cognitive and physical and stimulation for older persons. | * + Build a senior recreational center on Grenada and Carriacou. |
| * 1. To promote and encourage the engagement of the Grenadian Diaspora of older persons in actively contributing to civic dialogue, philanthropy, social organization, investments and pertinent national discussions. | * + Set up methods of outreach for the Grenadian Diaspora to be made aware of all initiatives being conducted for older persons. |
| * 1. To facilitate and support programs, services and organizations aimed at reintegration of returning residents. | * + Create a pamphlet outlining routing systems to services for returning Grenadians. |
| * 1. To facilitate requisite training and sensitization of key stakeholders, family members and the public in regard to interactions with older persons. |  |
| * 1. To promote the participation of older persons in governance structures at local and national levels. | * + Create a National Committee of Older Persons, which will be a grassroots development of forums for older persons in each Parish that will enhance communication, inclusiveness and accountability (Can provide representatives for the National Council on Aging to capture the community perspective, separate from the NGOs and other agencies). |
| * 1. To facilitate civic participation including the exercise of the right to vote in general and local elections or referendum. |  |
| * 1. To advocate for the creation of and greater access to recreational facilities for older persons. |  |
| * 1. To pursue meaningful activity and opportunities for education and training within the widest range of civic, cultural and recreational opportunities. | * + To foster a culture of lifelong learning and facilitating the continuation of education through academic, vocational and recreational courses. |

Policy Area: **Older Persons, Transportation and Housing**

Policy Statement: Recognizing the need for access to affordable housing options and transportation, the Government will undertake specific policy, legislative and programming

interventions for the proper inclusion of older persons in planning and implementation of housing and transportation, and will engage the key institutions of housing development, infrastructure and transportation services in the process of building capacity for older persons to have equitable access to housing regardless of economic status, and transportation that is sensitive to accommodations required for user-friendly mobility.

Strategic Objective: To promote sensitization of older persons and specifically those with disabilities in housing and transportation, recognizing special accommodations that will be

necessary to ensure the continuity of housing safety and ability to use public transportation, increasing their equitable access to such services and facilitating the goal of inclusion for older persons in all areas of society. This policy recognizes that older persons needs will be better considered and incorporated into national and local development plans by directly including their input and perspectives into plans via stakeholder consultations with the public

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| **Policy Commitments** | **Activities** |
| * 1. To create availability of affordable, reliable, safe, senior-sensitive and accessible scheduled transportation for older persons. | * + Requesting buses to reduce the volume of the music on buses when older persons are onboard.   + Provide a few reserved seats towards the front of the bus for older persons.   + Establish bus passes specifically for older persons.   + Establish a relationship with public or private agencies to provide a *Dial-a Ride Scheme.* |
| * 1. To provide transportation with special accommodations for older persons, specifically those with disabilities, to transport them to common spaces and public places such as markets and clinics, which are for the exclusive use of older persons. | * + Incentivize the transportation system to integrate age sensitivity into their practices. |
| * 1. To improve the availability of housing that is affordable, safe and accessible for older persons. |  |
| * 1. To provide suitable housing, independently selected, designed and located with reference to special needs and available at costs which older citizens can afford. |  |
| * 1. To encourage families who wish to provide care at home for their elderly relatives as an alternative to institutional residential housing. | * + Create incentives for families who provide care at home. |
| * 1. To encourage businesses to provide ramps outside of buildings to allow easier access for people with physical mobility challenges. | * + Create a link between businesses that have yet to implement accommodations for the disabled and entities that build and install ramps. |
| * 1. To advocate for businesses to have a service desk on the first floor of buildings to decrease the need for older persons to have to take the stairs. | * + Grenada Association for Retired Persons has already successfully advocated for the implementation at some banks on the island. |
| * 1. To encourage businesses to provide handrails along stairs to accommodate older persons, especially those with disabilities. |  |
| * 1. To advocate for creation of a Housing/Road/Building Infrastructure Committee with representation from key stakeholders in all government agencies, including older persons from each parish. | * + Form a committee for each parish to advise housing, road, building and transportation accommodations for older persons.   + Employ advising by a financial analyst to reviewing funding options to help provide appropriate low-cost housing for the indigent and vulnerable older persons. |

Policy Area: **Older Persons, Social Support and Social Security**

Policy Statement: Recognizing the need of all older persons for social security, and the strategic importance of social protection to the prevention and mitigation of risks of income security

and poverty among older persons, the Government will ensure responsiveness in programs and initiatives to strengthen social protections, reduce poverty and encourage financial and private sector agencies to promote inclusive operations and programming for older persons.

Strategic Objective: To promote the continuity of social welfare and supportive services for older persons through the establishment of public goods and services, retirement planning and

preparation, and education and awareness of aging issues, recognizing vulnerability at various levels including susceptibility to crime and abuse. This policy advocates for policies and legislation that involve enabling the voice of older persons to be heard through representation of critical issues on a national scale, and the establishment of education campaigns and effective collaboration to ensure coordinated social assistance is both made readily available and easily accessible for all older persons, especially those who are vulnerable and at-risk.

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| **Policy Commitments** | **Activities** |
| * 1. To encourage and promote education and public awareness on aging issues. | * + Development of radio and television messages, advertisements on social media. |
| * 1. To creation of publicly distributed booklets to older persons that address the "fear of aging", highlighting support and resources for persons as they age. | * + Establish a booklet may list the agencies that support older persons, counseling and social support offered by the Desk of the Elderly, events and programs that encourage older persons throughout the year, and highlight older persons in the community (similar to the senior newsletter but more comprehensive). |
| * 1. To provide targeted social assistance to older persons identified as primary caregivers of children or persons with disabilities. |  |
| * 1. To facilitate support of caregivers of older persons in family and community settings. |  |
| * 1. To support the reintegration and unification of older persons and their families impacted by migration. |  |
| * 1. To close monitoring of all older persons receiving public assistance to ensure they meet eligibility for social services. | * + Quarterly review of eligibility for persons receiving public assistance and removal of any persons who do not meet eligibility. |
| * 1. To create and facilitate services available to the community which provide social assistance in a coordinated manner and which are readily available when needed. |  |
| * 1. To create mechanisms that employ checks and balances for public assistance to prevent overutilization of services by ineligible persons or staff who would otherwise allow ineligible persons to receive public assistance. |  |
| * 1. To establish mechanisms to ensure financial assistance given to older persons are received by them, used appropriately and accordingly, and unencumbered by the possibility of theft. | * + Establish a credit card system for the disbursement and utilization of financial assistance, which can be linked to and utilized by only persons receiving the assistance or designated caregivers. |
| * 1. To ensure objective, transparent and accountable mechanisms are in place to identify older persons at risk of poverty and vulnerability. | * + Create case-finding scheme to capture all older persons in need, ensuring that no older persons below the poverty line fail to get public assistance through effective monitoring systems. |
| * 1. To ensure allocation of appropriate resources, including human resources and budgets, to the care and protection of poor and/or vulnerable older persons in the care of the government. |  |
| * 1. To recognize and advance the importance of nutrition in the food security of older persons. |  |
| * 1. To ensure existence of necessary social security agreements to protect the rights of migrant older persons, in country of origin and destination. |  |
| * 1. To encourage the provision of appropriate pension schemes by **all** employers. |  |

Policy Area: **Older Persons and Gender Equality**

Policy Statement: Recognizing the disproportionate effect that the aging process has on the economic situation of women, and recognizing the rights of every citizen to pursue a high

quality of life unencumbered by gendered divisions in all facets of government legislation and regulation, the Government will undertake specific policy, legislative and programming interventions to achieve gender quality and equity in within the cultural and economic facets of life, as well as all other areas of life for older persons.

Strategic Objective: To promote and strengthen the capacity for older men and women to experience equality, recognizing the equal value of contributions from both men and women, and

advocate for equitable access to services and programs in all areas such as health and well-being, employment, income security, social support, social security, housing, education, training, economic and social development, and participation in the creation of legislative and institutional frameworks that support older persons.

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| **Policy Commitments** | **Activities** |
| * 1. To create integration into the pension scheme for women who have stayed at home to raise a family and as a result have not worked consistently. | * + Consider pension credits for mothers who stay at home to rear children. |
| * 1. To ensure there is a state pension for self-employed men and women in the agricultural sector. | * + Investigate pension schemes currently used in other Eastern Caribbean States that may be applicable to Grenada. |
| * 1. To strengthen the capacity of older women to be financially stable. | * + Older women are likely to have worked for lower wages, had more temporary contracts and to have had breaks in their economic participation through child bearing and child rearing. They are also less likely to have contributed into a pension scheme. Combined with greater longevity (longer life expectancy), older women are more likely to be in a disadvantageous position.   + The fragmentation of the family structure has led to an increase in female managed households which exacerbates the effects of child rearing on a single income. Thus, the cycle of poverty extends into older age. |

Policy Area: **Older Persons and Agriculture**

Policy Statement: The Government is committed to promoting opportunities for the retention of older persons in agriculture, access to productive resources, opportunities for

entrepreneurial development linking agriculture to agri-business, and facilitating the nation's goals of agricultural diversification, food-related cultural preservation, food security, economic growth, poverty reduction and sustainable development.

Strategic Objective: To promote the inclusion of older persons in agriculture, recognizing their contribution to the national economy and productivity, increasing their equitable access to

productive resources, creating entrepreneurial opportunities linking agriculture, and facilitating the nation's goals of agricultural diversification, food-related cultural preservation, food security, economic growth, poverty reduction and sustainable development via provision of opportunities for community service and employment.

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| **Policy Commitments** | **Activities** |
| * 1. To utilize that talents of older persons in projects of farming, agriculture, pollution prevention, abatement, and control. | * + Create Senior Environmental Employment Program. |
| * 1. To undertake public awareness articulating that individuals currently employed by environmental agencies will not be displaced as a result of these inclusion programs and existing contracts for services will not be affected or interrupted. |  |
| * 1. To incentivize the retainment of younger farmers in collaboration with older persons. | * + Explore opportunities to change financial ideation of "crop productions that yield quicker and higher returns."   + Tackle issue of younger farmers migrating overseas in search of employment to combat the issue of food production being left to an increasingly aging workforce. |
| * 1. To create payment schemes, subsidies and incentives that rectify the issue around farm acreage and minimum annual earnings required to be commercially viable. |  |
| * 1. To facilitate ease of access to Agricultural Loan Scheme to recognize the role older persons have in the rural economy. |  |

Policy Area: **Legislative Framework and Institutional Capacity for Implementing Policy, Monitoring, Reviewing and Evaluation**

Policy Statement: Recognizing that the effectiveness of policy will depend on systematic and effective data collection to

monitor and evaluate it, the Government will undertake a process of legislative review and reform to promote protection, inclusion and equality for older persons in national development, and put in place institutional structures, mechanisms and processes for implementing the National Aging Policy in an equitable manner based on evidence-based practices.

Strategic Objective: To ensure that the legislative framework and institutional provisions promote proper monitoring and

evaluation of the implementation of the policy, and to establish institutional structures, mechanisms and processes for increasing collaboration among stakeholders and strengthening the capacity to continuously increase the quality of life for older persons in Grenada. This policy recognizes that monitoring and evaluation are underpinned by institutional and administrative processes and political will.

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| **Policy Commitments** | **Activities** |
| * 1. To provide for the continuous strengthening and expansion of the Desk of the Elder to maintain required staff persons running the Desk at all times, such that each position in the organogram is always filled and occupied by qualified persons. | * + Review and upgrade the staffing of the Desk of the Elderly to ensure that it comprises the complement of skills and experience required to effectively undertake the responsibilities proposed above, including formal and professional development initiatives for the current staff. New positions shall be considered when the economic situation improves.   + Hiring of additional staff as needed when vacancies in positions are identified, or when caseloads exceed capacity for case workers to have reasonable depth of work and resolution of issues with their clients   + Re-establish a geriatric unit |
| * 1. To re-establish and strengthen a geriatric unit | * + Ensure the continuity of agencies providing caregivers, training and support to the Geriatric unit of the Desk of the Elderly through collaborations |
| * 1. To maintain an up-to-date website for the Ministry of Social Development, Housing and Community Empowerment |  |
| * 1. To provide a repository of information and documentation (including social services, policies, strategic plans of action) to ensure information is readily and easily available to all, ensuring that all information is kept up-to-date within a month a newly disseminated materials | * + Creation of a directory/repository of documentation which provides information for access to public assistance and social services   + Conduct monthly review of actions taken by invested stakeholders |
| * 1. To ensure institutional quality control in the offering of training institutions, requiring registration and certification of caregivers and specialists, and a regulatory environment |  |
| * 1. To create a structured and standardized research environment for the monitoring and evaluation of all parts of the National Aging Policy and Strategic Plan of Action | * + Designate a core team who will conduct annual reviews of all operational and institutional procedures driven by data collected through proper research methods   + Track the outcomes, outputs and processes of the programs/services enumerated under the National Aging Policy and to inform operational decision-making, including project design |
| * 1. To ensure the existence, maintenance and monitoring of standards for care and service delivery with respect to interactions with older persons | * + Update the Assessment Tool used for Geriatric Homes to be reflective of elements recognized as critical to the improvement of the quality of life for older persons   + Establish a frequent and continuous monitoring schedule for assessing the status of the Geriatric Homes according to Grenada National Standards on Care and Protection of the Elderly |
| * 1. To establish evidence-based systems for daily tracking and analysis of pertinent data on the population of older persons, and of project results to measure operational performance against targets and to make adjustments where necessary |  |
| * 1. To facilitate, encourage and support continuous research on aging issues | * + Utilize proven research knowledge for the immediate benefit of older persons which shall sustain and improve health, happiness and quality of life |
| * 1. To encourage and strengthen the integration of partnerships between government and non-governmental organizations, as well as international agencies in program implementation, addressing strategies under the policy and mobilizing resources | * + Amalgamate all interest groups including but not limited to non-governmental organizations, government agencies, shareholders, businesses, civil society, communities, and individuals   + Mandate collaboration across invested groups and individuals in order to prevent the waste of resources and overlapping of stakeholders' efforts towards a similar goal   + Consider placing restraints on the implementation of initiatives unless an associated group has been identified within a predetermined time frame of at least one month |
| * 1. To foster sustainable, balanced and inclusive engagement between all levels of the ministries | * + Plan a schedule for meetings between Planning Officers of each ministry |
| * 1. To promote adherence to review of the social support system to ensure the system is accessible and effective with the minimum of administrative bureaucracy | * + Review the social support system on a biannual basis to ensure the system is accessible   + Improve targeting to reach all eligible beneficiaries that have are overlooked |
| * 1. To advocate for adherence to eligibility requirements for public assistance and ensure citizens who are ineligible for public assistance are not able to waste limited resources | * + Create a stricter system of reviewing clientele eligibility for public assistance   + Ensure information regarding how to access public assistance is readily and easily available to all |

***Section 6.0 Future Directions***

Going forward, it is recommended that the Ministry of Social Development, Housing and Community Empowerment consider the timeline by which these recommendations can be implemented and the financial implications of moving forward with short and long-term goals established by stakeholders. Involvement with the United Nations Convention of Older Persons and evaluation of the Universal Pension Scheme implemented by Trinidad and Tobago will particularly offer greatly utility in the development of policies, programs and strategies to tackle the abovementioned policy areas. Lastly, consulting other key stakeholders such as the Ministry of Health will be paramount to the full development of the National Policy on Aging.

***Section 7.0 Acknowledgements***

Meeting and dialoguing with older persons in the community and stakeholders in the public and private sectors, as well in civil society organizations, engaging with the Desk of the Elderly assessment team for the geriatric homes, and conducting research and evaluation in Grenada has enriched my learning experience and afforded me with wisdom and life-lessons that I will utilize for years to come, both within my professional and personal life. Engaging with older persons has always been of particular interest for myself. Working on creating recommendations to guide improvements in policy in the interest of older persons and their quality of life has given me a deeper level of respect and appreciation for a population that continues to have an abundance of knowledge and values to offer all those who are willing to receive it. This experience allowed me to apply classroom concepts in a real world, global, governmental environment and gain an understanding of how policy is created and implemented. With this experience, I am ever closer to reaching my goal of becoming a global public health professional. I would like to extend my most sincere gratitude to the Desk of the Elderly, the Grenada Association for Retired Persons and certainly the Ministry of Social Development, Housing and Community Empowerment, for collaboration and their continued partnership with the University of Michigan School of Public Health.

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**List of Agencies/Organizations/Individuals Consulted**

**Public Sector**

Government Ministries, Departments, Units, Program

* Ministry of Social Development, Housing, and Community Empowerment
  + Desk of the Elderly
  + Division of Social Services
* Ministry of Agriculture, Lands, Forestry and Fisheries
* Ministry of Carriacou and Petite Martinique
* Grenada Fire Department

Statutory Bodies

* Grenada Food and Nutrition Council
* Grenada Bureau of Standards

**Private Sector**

* Grenada Hotel and Tourism Association
* Sea Breeze Hotel

**Civil Society Organizations**

NGOs

* Extended Care through Hope and Optimism
* National Council on Aging
* Grenada National Organization for Women
* Grenada Association of Retired Persons
* Grenada Citizens Advice and Small Enterprise Agency (GRENCASE)

**Individuals**

* Mr. Samuel St. Bernard, Planning Officer for Ministry of Social Development, Housing, and Community Empowerment
* Mrs. Chrissie Worme-Charles, Chief Supervisor for Social Services, Ministry of Social Development, Housing, and Community Empowerment
* Ms. Jicinta Alexis, (Acting) Senior Program Officer, Gender Analyst, Ministry of Social Development, Housing, and Community Empowerment
* Mr. Milton Coy, Grenada Human Rights, Public Relations Officer for National Council on Aging
* Mr. Anthony Cadore, Extended Care through Hope and Optimism
* Mrs. Carol Vasquez, President of Grenada Association of Retired Persons
* Dr. Feisal Brahim, Executive member of Grenada Association of Retired Persons
* Ms. Lydia Thomas, Desk of the Elderly, Supervisor of Geriatric Services
* Ms. Marcia Jones, President of Elderly Missionary Support Group
* Ms. Jessy Douglas, Grenada Food and Nutrition Council
* Ms. Stephanie Simpson, Grenada Food and Nutrition Council
* Sgt. Thadius Hamilton, St. Georges' Fire Department
* Chad Harley, Fire Department
* Kyla Walker, Grenada Bureau of Standards
* Ms. Gloria Belfon, Grenada Council on Aging
* Ms. Nicki Pitt, Gender-Based Violence Response Officer
* Ms. Lotten Haagman, President of Grenada Hotel and Tourism Association
* Dr. Wendy Crawford, Gerontologist, Consultant for Ministry of Social Development, Housing and Community Empowerment
* Mr. Michael Church, Chief Agricultural Planning Officer for Ministry of Agriculture, Lands, Forestry and Fisheries
* Ms. Maria Davies, Executive Committee Member for Grenada Association of Retired Persons
* Mr. Randolph Harrison Fleary, Elder in Community, Cultural Icon for Carriacou
* Mr. Dexter Miller, Executive Officer for the Ministry of Carriacou and Petite Martinique
* Mr. Alwyn Enoe, Elder in Community, Famous Boat Builder on Petite Martinique
* Mrs. Gloria Phillips-Smith, Gerontologist
* Mr. Henry Stiell, Elder in Community, "Community Man-Jack of All Trades"-Multi-Disciplinary Role on Petite Martinique
* Ms. Christine David, Elder in Community, Teacher on Carriacou

***Annotated Bibliography***

1. *Belfon, Ms. Gloria, President of Grenada National Council on Aging.* Interviewed by author. 13 June 2018, Desk of the Elderly building. Advocated for the revitalization of the National Council of Aging, noting the importance of its viability in the interest of advancing policy and programs for older persons. Stated the necessity of publicizing services to all so those who need it most are aware of where and how to access them. Also noted past efforts to establish system for identifying elderly with disabilities in each parish in the interest of disaster preparedness and evacuation plans. Recommended environmental health standards for Home Assessment Tool be evaluated by fire department or more qualified environmental specialists, under safety issues.
2. *Cadore, Mr. Anthony, Caregiver, Volunteer for Extended Care through Hope and Optimism.* Interviewed by author. 12 June 2018, Ministry of Social Development, Housing and Community Empowerment building. Highlighted the deterioration of the family structure, contributing to the sentiments of older persons feeling "left to the wayside." Also noted the importance of proper and intensive training for caregiving of older persons, which is a "highly skilled position, a calling" and not a "lower level job."
3. *Brahim, Dr. Feisal, Executive Member, Consultant for Department of Health within Grenada Association of Retired Persons.* Interviewed by author. 1 June 2018, 7 June 2018, 8 June 2018, Desk of the Elderly building, Grenada Association for Retired Persons center. Described issues with culture as it relates to reluctance in reporting injustices and silent forms of abuse. Advocated for encouraging the public to adopt idea that "if one person speaks up, that's one more than zero." Key statement, "If you see something, say something." Also encouraged the need for families to recognize elder abuse is not an individual issue, but a family issue.
4. *Coy, Mr. Milton, Grenada Human Rights, Public Relations Officer for National Council on Aging.* Interviewed by author. 1 June 2018, Desk of the Elderly building. Advocated for implementing human rights into every aspect of support and policy for older persons. Also noted that older persons perspective is key to strengthening the capacity for supporting older persons, stating "nothing for us, without us."
5. *Vazquez, Mrs. Carol, President of Grenada Association for Retired Persons*. Interviewed by author. 14 May 2018, 1 June 2018, 7 June 2018, 8 June 2018, National Cricket Stadium, Desk of the Elderly building, Grenada Association for Retired Persons center. Expressed the need for GARP to be closely related to the Desk of the Elderly, such that activities/programs within GARP are collaborated with by the Desk. Stressed the need for the National Council on Aging to be functional in order to further the aging agenda. Advocated for the elimination of siloed approach by various stakeholders in the interest of supporting older persons. Also noted GARP's need for financial support and a permanent operating location.
6. *Jones, Ms. Marcia, President of Elderly Missionary Support Group.* Interviewed by author. 1 June 2018, Desk of the Elderly building. Described forms of elderly abuse that need addressing within the culture and in programming, including physical abuse and silent abuse. Advocated for creation of protocol to address abuse. Also noted cultural issue that seniors often will not call authorities on their family despite abuse.
7. *St. Bernard, Mr. Samuel, Planning Officer for Ministry of Social Development, Housing and Community Empowerment.* Interviewed by author. 22 May 2018, Ministry of Social Development, Housing and Community Empowerment building. Described potential for a national health scheme, financial feasibility, and modeling after public insurance models. Noted the need for government and committee approval and situational analyses for such an initiative. Also noted the need for government assistance in pharmaceuticals and although finances present a great gap, health needs must be prioritized over finances. Highlighted the benefits of collaboration across ministries for cohesive implementation of programs.
8. *Haagman, Ms. Lotten, President of Grenada Hotel and Tourism Association.* Interviewed by author. 14 May 2018, National Cricket Stadium. Highlighted the need for routing Grenadians returning to Grenada to available services. Suggested implementation of an Ombudsman to tackle human rights issues. Also highlighted the lack of encouragement and opportunities for involvement in the productivity of society for youth and older persons.
9. *Crawford, Dr. Wendy, Gerontologist, Consultant for Ministry of Social Development, Housing and Community Empowerment.* Interviewed by author. 14 May 2018, National Cricket Stadium. Highlighted the shifts in age cohorts which are leading to changes in population size of age groups, exacerbating issues within each population. Highlighted the need to prioritize enforcement of policies and for NGO involvement and input into what should go into policy.
10. *Church, Mr. Michael, Chief Agricultural Planning Officer for Ministry of Agriculture, Lands, Forestry and Fisheries.* Interviewed by author. 14 May 2018, National Cricket Stadium. Described issues around the lack of political will and arising conflicts and misunderstandings between civil society and government agencies. Highlighted how the diverse age range of the population and lack of supporting data makes it difficult for policy makers to create clear cut strategies for sustainable development. Also noted the need for an overarching system to support local businesses.
11. *Davies, Ms. Maria, Executive Committee Member for Grenada Association of Retired Persons.* Interviewed by author. 14 May 2018, National Cricket Stadium. Highlighted that many older persons rely on financial support from family abroad, and this expectation gives way to financial abuse of elderly. Also noted that older persons are not being seen as valuable resources.
12. *Fleary, Mr. Randolph Harrison, Elder in Community, Cultural Icon for Carriacou*. Interviewed by author. 10 May 2018, Mr. Fleary's home. Expressed sentiments that Carriacou is often "left out" from discourse in Grenada. Highlighted the need for teaching cultural practices and traditions in schools, for the youth to have more frequent visits to the elderly, and the necessity of cultural transfers between generations.
13. *Miller, Mr. Dexter, Executive Officer for the Ministry of Carriacou and Petite Martinique.* Interviewed by author. 11 May 2018, Outside Ministry Building. Highlighted the potential for cultural transfers from elderly to youth to foster greater respect for the elderly. Noted the top challenge for increasing quality of life for older persons is healthcare. Rated quality of life for older persons in Carriacou and Petite Martinique to be 7/10 and noted that if the community identifies one elder "down and out", the community will assist if they can. Recommended SEED public assistance to utilize funding within a "case by case" framework, increasing the funding to the residents of the homes. Encouraged SEED to consider all the facets of a person's lifestyle and services needed versus those provided to determine the correct amount of financial assistance to be given.
14. *Enoe, Mr. Alwyn, Elder in Community, Famous Boat Builder on Petite Martinique.* Interviewed by author. 11 May 2018, Mr. Enoe's home. Highlighted the lack of training and work opportunities, and space available for boat building and engaging the youth in the tradition, which is dying out. Recommended government involvement to provide space near beach to build boats and preserve the tradition.
15. *Stiell, Mr. Henry*, *Elder in Community, "Community Man-Jack of All Trades"-Multi-Disciplinary Role on Petite Martinique.* Interviewed by author. 11 May 2018, Mr. Stiell's home. Commended the improvement in training for teachers but noted the decrease in their commitment to the youth outside of education. Highlighted the duality of teachers' role as not only teachers but "parents after the parent has dropped off their child", requiring an investment in the welfare of the youth. Also highlighted the dilution of "togetherness in the community"
16. *Phillips-Smith, Mrs. Gloria, Gerontologist.* Interviewed by author. 11 May 2018, 30 May 2018, 6 June 2017, 8 June 2018, Community location in Carriacou, Desk of the Elderly building, Grenada Association for Retire Persons center, several Geriatric Homes for the Aged buildings. Highlighted the lack of standards for assessments, lack of standardized and mandatory training in gerontology for caregivers, and the lack of policy for the elderly. Recommended the National Council on Aging to be strengthened if issues facing the elderly are to be rectified, as well as evaluation of the cost for providing care services. Encouraged the government to partner with NGOs and other organizations, as it is unnecessary for the government to "foot the bill for the entirety of services", including services that are missing. Also highlighted the need for increasing the capacity of geriatric homes to meet standards, the need for the caregiving profession to be more accountable and professional.
17. *David, Ms. Christine, Elder in Community, Teacher on Carriacou.* Interviewed by author. 12 May 2018, Ms. David's home. Described past times in which the community was more willing to help each other, work together, share meals, and form a strong bond amongst people, fortified by socializing together. Encouraged starting at very young ages in the youth, as it relates to programs geared towards bridging connections between the youth and elderly through teaching opportunities. "If you show appreciation to your mother, your child will show appreciation to you." Also noted the need to address the homeless for which many have cognitive issues, and the beggars for which many homes but choose to beg.
18. *Thomas, Ms. Lydia, Supervisor of Geriatric Services for Desk of the Elderly.* Interviewed by author. 12 May 2018, 30 May 2018, 1 June 2018, 6 June 2018, 13 June 2018, Desk of the Elderly building, Community location in Carriacou, several Geriatric Homes for the Aged buildings. Advocated for an increase in the number of social workers for the Desk of the Elderly to allow greater depth of work and resolution for their clients. Highlighted the need for adequate staffing to accommodate and maintain everyday responsibilities of the Desk of the Elderly. Advocated for the hiring of additional staff to fill the vacancies of coordinator and chief supervisor positions. Also noted, without filling this positional "void," the Desk will not be able to function as envisioned.

***Appendix***

**Recommendations for Geriatric Homes**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| KFA/Strategic Objective | Activities | Recommendation | Notes | Timeline | Priority Level |
| **1.1 To provide a range of comprehensive quality services to the Elderly** | **1.1.1** Geriatric Funds and Donations Received | * Need to explore sources for funding and donations * Recognizing the difficulty of many residents in the Homes to pay their monthly fee and the strain it places on the functionality of the homes * Recognizing difficulty of Homes to purchase safety and cleaning supplies, geriatric supplies, food and cooking supplies * Recommend re-visiting ideas and opportunities for Homes to fundraise * Opportunity to involve residents in fundraising activities, utilize their skills and sell products/services to the public * Recommend seeking out local, regional and international agencies/organizations for the provision of resources (financial, human, material) for distribution to ALL Homes within the Geriatric Caregivers Program * Need to evaluate the cost and feasibility of providing care services at the Homes | * + Do NOT recommend increasing the cost of stay (2014 report from MoSD and DoE), as this will not address the root issue: inability of residents to pay   + Recommend continuation of Public Assistance for residents of Homes to increase ability to pay for Burial, purchase Medication, purchase daily needs/toiletries, water supply     - Must strengthen the capacity of older persons in Homes to pay the monthly fees and reduce the strain on Homes' ability to conduct daily business   + Recommend increasing the annual subvention given to Homes   + Special need for equipment and materials:     - Wheelchairs, walking canes, bed frames, mattresses, bedding (sheets, blankets), incontinent pads, dressings, ramps, night lights, etc.   + Current/Past sources:     - World Bank     - Basic Needs Trust Fund (BNTF)     - Canadian Red Cross (CRC)     - Caribbean Development Bank (CDB)     - Canadian International Development Agency (CIDA)     - Grenadian Diaspora in New York     - National Disaster Management Agency (NaDMA)     - St. George's University (SGU)     - Pan-American Health Organization (PAHO)   + Potential future sources:     - Age International, Subsidiary of HelpAge International global network- ECHO is the associated branch within Grenada     - Baxter International Foundation, philanthropic arm of Baxter International Inc.     - USAID       * Has no known partnerships with Grenada, opportunity to petition for the establishment a Grenadian sector/program     - World Food Program       * Has no known partnerships with Grenada, opportunity to petition for the establishment a Grenadian sector/program       * Offers cash and in-kind assistance     - Peace Corps     - National Insurance Scheme (NIS)     - Nurses and Midwives Council (GRENCASE constituent)     - Hills and Valley Pharmacy     - Caribbean Regional Communication Infrastructure Program (CARCIP)     - FASTCASH | Ongoing | Medium |
| **1.2 To ensure residents at Geriatric Homes have transportation** | **1.2.1** Identify transport vehicles for all Homes | * Recommend supplying each geriatric home with at least one dedicated bus or van for transportation of older persons to clinics, markets, recreational centers and other whereabouts | * + Must allow drivers training for bus or van for at least one caregiver | Long-term project | Low |
| **1.3 To ensure that the Geriatric Homes operate in accordance with the existing standards** | **1.3.1** Conduct regular supervisory visits to Geriatric Homes to ensure adherence to Standards | * Need to form a team that will always be present for the assessments of the Homes, ensuring consistency of assessments * Requires back-up plan if someone cannot be present * Recommend that this team facilitates enhanced communication between the multidisciplinary groups in the context of increasing the island's capacity to service older persons | * + Suggested Team:     - Gerontologist (or other person trained in geriatrics)     - Lay person/Older person in the community     - Matron of a Geriatric Home     - Registered Nurse     - Dietician     - Fire/Police Department representative     - Bureau of Standards representative     - Ministry of Health representative     - Ministry of Social Development representative     - Council on Aging representative     - Grenada Association of Retired Persons representative     - Counselor/Psychiatrist/Psychologist | 6 months (before next year's assessment is conducted) | Critical |
|  |  | * Need to mandate requirements for infrastructure and set up of buildings, for standardization and elimination/minimization of risk based on proper assessments | * + Mandates for infrastructure should include:     - Electrical Setup       * Electric breakers     - Gas Lines     - Layout/building blueprint       * Residents rooms,       * Bathrooms       * Nursing stations (where applicable       * Kitchen       * Corridors       * Laundry rooms       * Storage rooms       * Escape routes | Long-term project | Medium |
|  |  | * Need to distribute guidelines for Infection Control and Disaster Response Plan to all Homes | * + Must be approved by Ministry of Health and Fire/Police Department | 1 month | High |
|  | **1.3.3** Review existing standards. Consultation with matrons. Collaborate with Bureau of Standards | * Need to establish a categorical approach to homes to appropriately recognize the differences between them and the different types of standards they must be held to * The 2007 Standards set by the Grenada Bureau of Standards were either altered or had additions made to them. Some standards were omitted entirely. It is recommended to conduct a review of these original items. A recommendation is also made for the retainment of some of the original items and updating or elimination of some of the items currently being used on the Assessment Tool. * Need a reminder of the definitions for terms established in 2007 | * + The current assessment tool assesses all types of homes (general "Care Homes") according to standards that are not be applicable to all Homes   + Recommend specialization of the assessment tool for applicability to different types of homes     - Residential homes vs Nursing Homes   + Recommend a review of these original items   + Recommend retainment of some of the original items and updating or elimination of some of the current items on the Assessment Tool   + *Nursing Home* = a Unit which is designated, staffed and equipped for the accommodation of individuals not requiring hospital care but requiring long term nursing care and related medical services prescribed by or performed under the direction of persons licensed to provide such care or services in accordance with the laws of the state   + *Residential Home* = a facility which is designated, staffed and equipped for the care of individuals who are not in need of hospital care but who are in need of assistance with the everyday essential activities of living and some measure of nursing care in a protected environment   + *Homes* = both residential and nursing homes   + *Bedridden* = confined to bed because of inability to ambulate even with assistance to use a wheelchair, or to sit safely in a chair without personal assistance or mechanical restraint   + *Immobile* = the Elderly I unable to move freely because of ailments | 6-9 months (before next year's assessment is conducted) | Critical |
|  |  | * Section 1.0- Minimal Requirements for Nursing and Residential Homes | * + 1.1.2     - Recommend wording in the item to be updated stated, "flame-resistant sliding curtains" -as per recommendation from Fire Department   + 1.1.4     - Recommend this item retain the original wording (2007): "There shall be an adequate number of well-ventilated rooms maintained ready for occupancy by patients suspected of having a communicable disease or requiring special care: one (1) room for every twenty-five (25) patients"       * "special care" is ill-defined | 6-9 months | Medium |
|  |  | * Section 3.0- Employee Requirements | * + 3.1     - Recommend this item retain the original wording (2007): "All Nursing Homes shall have or be managed by a qualified nurse       * To recognize Homes that are not nursing homes       * Residential homes and Homes for the Aged are often not managed by a registered/qualified nurse   + 3.5     - Recommend updating this requirement to recognize that the infrastructure of the buildings may not allow this standard to be upheld by all Homes       * Some homes are utilizing storage rooms as Nursing stations, resulting in cluttered spaces, e.g. Top Hill Senior Citizens Home, *Carriacou*   + 3.6     - Recommend this item retain the original wording (2007): "The housekeeping, laundry, food service and maintenance staff shall not give direct patient care except in accordance with nursing services, policies and procedures."     - The precise definition of "Ancillary staff" is not known to most       * Must define ancillary staff to understand this standards applicability to the different Homes     - All staff must be trained in emergency training if this standard is to be upheld   + 3.7     - Recommend updating this requirement to recognize that the infrastructure of the buildings may not allow this standard to be upheld by all Homes       * Homes that have limited rooms may need to reduce the capacity for residents in order to meet this standard | 6-9 months | High |
|  |  | * Section 4.0- Safety Issues | * + 4.1     - Recommend making assessment of how dangerous materials are being disposed of | 6-9 months | High |
|  |  | * Section 5.1- Primary Health Care | * + 5.1.1     - Recognition that some Homes host residents who have their own private doctors and what implication this has on access to external primary health care services       * Currently, if residents have private doctors, they are ineligible for public primary health care   + 5.1.2     - Recognized through assessments that Homes are NOT receiving "free" general physician's attendance       * Assessment tool states "at the government's clinic" but this should be applied to clinical visits conducted at the Homes as well       * Needs clarification for if the residents must be present at the government clinic or if clinical visits at the Homes is free | 6-9 months | Medium |
|  |  | * Section 5.2- Environmental Health | * + Recommend this section to be evaluated by Fire Department or other environmental specialists who are more qualified to assess these standards, under safety issues (Section 4.0) | 6-9 months | Low |
|  |  | * Section 5.3- Medication at Home | * + 5.3.5     - Recommend a standard system/chart of recording for **all** types of Homes, including required medications for patients, when they shall be administered, who administered the medications and signatures of receipt for each individual patient     - Recommend this item retain its original wording + sample: "  |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Who Administered** | **To Whom** | **Name of Medication** | **Time** | **Date** | |  |  |  |  |  | | 1 month for distribution of standardized chart | Medium |
|  |  | * Section 5.4- Physical Exercise | * + 5.4.1     - Recognizing that physical exercise is paramount to the continuity of good health, must promote physical exercise for older persons in homes by requiring a designated time for exercise. Encouraging the caregivers is not enough; it must be required to ensure residents maintain physical and mental health, as elderly may lack the self-empowerment, strength, etc. to engage themselves     - An exercise program should be created for each individual resident, whether fully mobile, in wheelchair, or bedridden     - Professionals trained in geriatrics should hold the capacity to create physical programs for residents in their care, as well as a frequency for exercise, e.g. two times a week, etc.     - Clinician can also be requested to create an exercise program for residents during their visits to the Homes     - Source: Chang, C.-F., Lin, M.-H., Wang, J., Fan, J.-Y., Chou, L.-N., & Chen, M.-Y. (2013). The Relationship Between Geriatric Depression and Health-Promoting Behaviors Among Community-Dwelling Seniors. *Journal of Nursing Research*, *21*(2). Retrieved from <https://journals.lww.com/jnr-twna/Fulltext/2013/06000/The_Relationship_Between_Geriatric_Depression_and.3.aspx> | 6-9 months | Medium |
| **1.5 To expand and strengthen the Geriatric Caregivers Program by 40%** | **1.5.2** Recruitment of Staff | * Need registration and mandating employment contracts for retention of staff | * + In order to reduce the turnover rate of staff, recruitment and selection must strengthened and intensified for all staff     - Caregivers     - Cooks     - Nursing staff     - Grounds keeping   + Payment scheme (salaries vs hourly wage), transportation allowance, other fees must be explored to support the work of the staff | Ongoing | Medium |
|  | **1.5.3** Training of **all staff involved in Geriatric Care** in the area of Interpersonal Skills, social Life Skills, Occupational Therapy, etc. | * Need to establish a closer supervisory role with GRENCASE who is responsible for the caregivers provided to the Geriatric Caregivers Program * Training is lacking across all staff who interact daily with the residents of the Homes * Recommend the establishment a central repository for caregivers before they seek employment at the Homes * Need standardized and mandatory training for all levels of staff who interact with residents of the Homes | * + Training in areas of:     - Care of the elderly     - Changes affecting the body during ageing     - Diseases affecting the Elderly     - Mental health and Cognitive Impairments     - Emergency and Disaster/Evacuation Preparedness     - Nutrition     - Recordkeeping     - Medication       * Need standardized approach to giving medications at all Homes     - Work Ethics     - Professionalism and Interpersonal Skills       * Interacting with family/friends/special interest groups of the residents       * Recommend hosting a Business Etiquette Workshop with **all levels of staff at Geriatric Homes**   + Establish a standard vetting/interview scheme including:     - Medical/Physical fitness check     - Training certification     - Background check     - Literacy tests   + If a central repository for trained and registered caregivers cannot be created for the island, the assessment tool should include requirements for holding this skilled position     - Recommend developing a separate assessment tool for the qualifications of the caregivers OR include in the assessment tool for the Homes | 9-12 months | Critical |
| **1.6 To continue strengthening the collaboration with the staff of the Hospital, Primary Health Care Team and Geriatric Caregivers** | **1.6.1** Strengthen relationship with Geriatric Homes, Caregivers and PHC staff | * Need mandated frequency for clinician, pharmacist visits the Homes * Must adhere to provisions established in the policy * Recommend partnering with Hills and Valley Pharmacy * Hills and Valley Pharmacy sponsored a Business Etiquette Workshop with GRENCASE * Must not be affected by Homes that allow residents' healthcare needs to be addressed by their private doctors (i.e. St. Cecilia's Nursing Home) | * + Policy mandates free visits by doctor, but this is not being realized at all Homes   + Must clarify if the doctor visits to the Homes are free or residents' visits to the doctors' office is free     - If this is a requirement for all Homes, the cost should be standardized or free for all   + In reference to Section 5.1- Primary healthcare- they have to pay for the MD visits (should not be so)   + Pharmacist to make annual review of residents' medications | 6-9 months | Low |
| **1.7 Provide capacity building in Geriatric Care** | **1.7.1** Form a forum/workshop with Geriatric Homes | * Recommend hosting a recurring (monthly or quarterly basis) forum for all types of Homes, government (public), private, church-owned * Shall enhance coordination between the mainland and the sister isles of Carriacou and Petite Martinique * Establish an understanding of the difficulties experienced at each home in order to come up with solutions for particular problems, as well as standard approach to tackling common issues * Establish a team-based approach to providing geriatric care around the island * Establish an efficient means of communication between all Homes * Requiring the involvement of all Homes into any and all decisions or changes made concerning older persons at the Homes * Function of Geriatric Networking Group must be emphasized | * + Offers opportunity to bounce ideas off each other, understand methods that work for some and assess if any ideas can be applied elsewhere        * + Combine ideas together for common solutions            * + Necessary if all Homes are to be assessed by the same standards   + Must involve private, faith-based Homes, i.e. Missionaries of Charity          * + Must re-establish and fortify this group to create greater connections between all Homes and between the mainland, Carriacou and Petite Martinique | Ongoing | High |
|  | **1.7.2** Increase the validity of population estimate | * Need to combine data from multiple systems in order to capture the full number of older persons on the island * Current statistics are insufficiently representative of the actual population * Interrogate potential statistics systems | * + Older persons may ignore the national census and fail to fill it out      * + Central Statistics Office   + National Insurance Scheme   + Admissions to Hospitals, Assisted Care Facilities, Clinical visits to older persons' homes | 9-15 months (Ongoing) | Medium |

**List of Geriatric Homes/Nursing Homes**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Home/***Location* | **Contact #** | **Capacity** | **Ownership Type** | **Matron** | **Cost** | **Government Subvention (XCD)** |
| * 1. **Cadrona Home for the Aged**   *La Fillette, St. Andrew’s* | 442-7322 | 29 | Government Assisted | Mrs. V Persue | $600 | $198,000.00 |
| * 1. **Hill View Home for the Aged**   *Gouyave, St. John’s* | 444-8253/444-8317 | 40 | Government Assisted | Ms. Sonia Duncan | $650 (single)  $850 (shared) | $25,000.00 |
| * 1. **St. Martin’s Senior Citizen’s Home,**   *Crochu, St. Andrew’s* | 444-7352 | 50 | Government Assisted | Ms. Loraine Morain | $1000 | $53,332.00 |
| * 1. **FR. Hilarion Cheshire Home,**   *Mt. Rodney, St. Patrick’s* | 442-9214 | 29 | Government Assisted | Ms. Leah Orgais | $800 | $51,666.00 |
| * 1. **Charles Memorial Home,**   *Victoria, St. Mark’s* | 444-9389 | 33 | Government Assisted | Ms. Urslyn Charles | $1100(single)  $900(double)  $700(triple) | $24,000.00 |
| * 1. **Missionaries of Charity, Mother Theresa Home**   **for the Aged**,  *Pomme Rose, St. David’s* | 443-2515 | 15 | Private (Faith-based organization, Missionaries) | Sister Rosemary Mark | $0 |  |
| * 1. **St. Cecelia’s Nursing Home,**   *St. Paul’s, St. George’s* | 440-2749 | 9 | Private | Ms. Nova James (Matron) |  |  |
| * 1. **Chichester Home for the Aged**   *Springs, St. George’s* | 440-5302 | 25 | Private | Ms. Nadine Searles (Matron/Supervisor) | $1600 (Single) $1400 (Double) |  |
| * 1. **Richmond Home for the Aged**   *Richmond Hill, St. George’s* | 440-4868/440-2864 | 70 | Government Owned | Sister Paula Lessey | $0 |  |
| * 1. **Grand Anse Gardens Home**   *Calliste, St. George’s* | 444-4223  405-4223 | 22 | Government Assisted | Ms. Chrisma Sylvester | $1000 | $156,396.00 |
| * 1. **Top Hill Senior Citizens Home**   *Top Hill, Carriacou* | 443-8609 | 18 | Government Assisted | Ms. Audrianna McQiluary | $1000 |  |
| * 1. **Egbert's Elderly Care Home** (Meldrum)   *Carriacou* | 443-8989/418-7022 | 14 | Private | Kizzy Andrews | $1750 (Single) $2242 (Double) |  |

**Database of Agencies Serving Older Persons**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Type** | **Contact Person** | **Contact** | **Function** |
| Desk of the Elderly (DoE) | Government | Ms. Lydia Thomas |  | * + Organization Status: **Active** (operating understaffed)   + To increase awareness of and accessibility to services available to the Elderly, create and implement programs geared towards active aging and the preservation of our National Heritage in collaboration with stakeholders     - Supervise geriatric services       * Ensure the Homes for the Aged operate in accordance with acceptable standards       * Planning, organizing, coordinating and evaluating all activities of the Strategic Plan       * Liaison between all geriatric services, NGOs and others who offer geriatric services     - Emergency Assistance     - Celebration of the Month of the Elderly     - Centenarian Celebration and Documentation     - Reporting and Recording, Investigation and Assessment, Supervision, Administration     - Senior Newsletter     - Source and make cases for legislations relating to the Elderly     - Strengthen the administration and management of the activities of the Desk of the Elderly |
| Grenada Citizen Advise and Small Business Agency (GRENCASE) | NGO, non-profit | Mr. John Williams | 435-0175/440-6003  Email: grencase175@gmail.com | * + Organization Status: **Active**   + Geriatric Caregivers Program     - The Geriatric Caregivers Program is home-based designed to provide care to the vulnerable elderly people who are over 60 years of age, lives alone or have no family members who are willing to provide care to them.     - Mission: To promote and assist in the overall comfort of the marginalized elderly, by providing high quality geriatric care.     - Vision: An enhanced quality of life for the elderly in an environment that promotes equal opportunities for care.     - Objectives:       * To identify persons in need of the service       * To enhance the lives of elderly persons in Grenada who cannot afford paid help or has no one to care for them       * To strengthen the collaboration between the primary health care sector and the Geriatric Caregivers Program       * To improve the quality of service delivery by the Caregivers       * To improve the administration of the Program       * To improve the quality of life of the clients     - Duties:       * Creation of a client-ailment database       * Provision of individual diet plan for clients       * Organization of educational sessions on nutrition for the Elderly       * Provision of physical therapy and rehabilitation for the Elderly       * Souring of geriatric aids and supplies for the Elderly       * Provision of food and personal care hampers for clients       * Strengthening of collaboration between the primary health care sector and the geriatric caregiver       * Improvement of the quality of services delivered by caregivers     - Services of the program include:       * Grooming, Bathing, Incontinence care, Laundry, Meal preparation, Medication reminders, Errands, Caring for wounds     - Eligibility requirements:       * Must be indigent       * Must be living alone       * Must be 60+ years of age       * Some persons under 60 years may qualify due to certain illnesses     - Program Benefits:       * Companionship: Caregivers provide older persons with a familiar face, a meaningful human connection and conversation       * Personalized Care: Home care is flexible and adapts to what is best for each client       * Comfort: Older persons are able to stay in the place that is most comfortable to them       * Cost Effectiveness: Services are free       * Peace of Mind: Family and friends will be able to rest knowing that care is being given to their loved ones     - Roving Caregivers     - Developmental Program     - Nursing Program     - In-house programs: Basic Information Technology, Advanced Information Technology, Basic Sewing, Advanced Sewing, QuickBooks |
| Extended Care through Hope and Optimism (ECHO) | NGO | Anthony Cadore (Volunteer, Caregiver) | 444-8042 | * + Organization Status: **Dormant** (operating without supervision/under-supervised, has multiple vacancies in key positions)   + Launched in 1989, is a local branch of HelpAge International Global Network   + Commitment: To support and care for the marginalized, indigent elderly, especially those that live alone and are home-bound     - Objective: Umbrella body that will influence policy, advise and make recommendations that will improve the quality of life of older persons     - Frontrunner for geriatric care of the homebound, marginalized, and physically incapacitated, providing social/spiritual assistance   + Government gives subvention to ECHO   + Past activities include:     - Fundraising     - Visits to Geriatric Homes     - Collaborations with GRENLEC, social bank     - Shopping for food for elderly and making meals at their homes     - Directly routing public assistance monies for clients to markets to prevent abuse of finances     - Training in conjunction with Grenada Red Cross |
| Grenada Association for Retired Persons (GARP) | Non-profit, NGO | Ms. Carol Vazquez | 435-9857/417-1161 | * + Organization Status: **Active**   + Launched 7/15/2011   + To enhance the lives of older persons through delivery of high quality services and programs that meets the need of members whilst advocating for the well-being of all older persons     - To be the principal voice that promotes the independence, dignity and quality of life for older persons in Grenada, Carriacou and Petite Martinique   + Branch located in St. George's (walk-in center located on Kirani James Blvd.), Carriacou and St. Andrews   + Has website, Facebook page, and newsletter   + Membership fee: $100 XCD     - Galvanizes its own members for work and service     - Members consist of bankers, lawyers, doctors, human resource specialists, nurses, teachers, computer technicians, etc.     - To members, offers legal service: Once a month, lawyer is available for legal consultations, some services offered pro bono   + Health:     - Adopted Hills View Home in Gouyave     - Has relationship with SGU, in conjunction with Carriacou and Petite Martinique Action Committee Inc. (C-PAC) to offer Diabetic Clinic for seniors:       * Features Podiatrist/Surgeon, nurses, volunteer clinicians, student volunteers from SGU medical school       * All 3 branches operate as medical center for the public concerning diabetes       * Keeps records of medical concerns, patients' progression       * Offers wound care treatment     - Established a health community galvanizing retired MDs, nurses in Grenada     - Plans to pilot Home-Care program in St. Andrews for home care       * Proposed to Ministry of Health for assistance with medication and transportation   + Social:     - Book drives/Book exchange       * Also packs books to be taken to the prison     - Hosts an expo showcasing services available for seniors in Grenada       * Presents awards to seniors doing exceptional community work       * Features tables for companies offering services in Grenada         + Special foods companies, funeral agency, National Insurance Scheme, Ministry of Health, Ministry of Social Development     - Hosts coffee talks, education and social forum     - Lectures and Seminars for motivational speakers     - Organizes opportunities for physical exercise: Dancing, Chair exercises     - TAMCC: students working with GARP       * Tasks for students         + Accounting         + Recordkeeping         + Tech work       * Offers 20 credits       * 30-hour program       * 6 weeks       * Sensitization on aging         + Crossing age groups         + Students come back for volunteerism     - Organizes field trips in Grenada, such as to the beach, river experience, etc.     - Hosts "Best Kept Secret": takes 15-20 people on trip to Cuba around May     - Hosts movie nights on Friday       * $5 XCD entry fee     - Welcome center hosts "Once-and-Again" Thrift shop and yard sales ($30XCD sellers fee for a table)       * Clothes, electrical materials, household items   + Education/Classes:   + Spanish language classes   + Computer classes: all levels   + Smartphone classes   + Pre-retirement training in areas of finances, social involvement, physical health and exercises |
| Grenada Food & Nutrition Council (GFNC) | Government | Mrs. Jessy Douglas | 440-7046/440-2126 | * + Organization Status: **Active**   + Visit to all government-assisted homes for quarterly monitoring   + Conduct training in the following areas:     - Nutritional needs of elderly       * Understanding the proper nutrients needed and how to deliver them     - Proper food portioning and food preparation   + Conduct food demonstrations for cooks at the homes |
| Grenada Council on Aging | NGO | Ms. Gloria Belfon | 232-2267 or 417-6889 | * + Organization Status: **Dormant**   + To be an umbrella advocacy body for the promotion and fostering of a good quality of life of the elderly through the provision and coordination of community and health services, income generating projects and educational programs in collaboration with local and international agencies     - Identify the needs of the Elderly     - Protect the rights and address the concerns of the Elderly     - Promote public awareness of the needs of the Elderly through the media, seminars, conferences, workshops, etc.     - Recommend policies and programs to meet the needs of the Elderly     - Review and analyze the effectiveness of all services and policies related to the Elderly and recommend strategies to improve these     - Cooperate with, inform, promote advise and assist government agencies and community groups with regards to services and specific needs of the vulnerable Elderly     - Affiliate, cooperate and collaborate with appropriate regional and international organizations for the Elderly     - Promote and engage in fundraising activities and the mobilization of resource on behalf of the Council     - Recognize and document the contributions of the Elderly to national development     - Promote activities that create sustainable networks for the Elderly to combat social isolation   + To direct the implementation and monitoring of the policy on ageing, and secure the full participation of all agencies and organizations directly connected to different aspects of the lives of the Elderly     - Harness and coordinate various decentralized social programs dedicated to the Elderly into a comprehensive, integrative approach     - Ensure that all persons in Grenada 60 years and older will have equal opportunity to enjoy a high quality of life through focus on their health and well-being   + Past Activities:     - International Month of Elderly, Elder Abuse Day   + For June 15th, would host marches through town, have placards     - Partnered with police department on international days and awareness weeks for public awareness   + Convention for the Rights of Older Persons (United Nations)- host march to bring awareness for the convention   + Month of Elderly     - Used media appearances to bring public awareness     - Collaborated with TAMCC for the youth to interact with older persons, assisting in daily activities, help with chores, social interactions   + Activities at Richmond Home doing diabetic care, foot care   + Evening of entertainment, (Grenville and St. Georges) "Back in Time"     - Music band to entertain elderly, time of fun   + Talent shows, tea time at the youth center   + Chicangoina (disease) collaborated with infection control, awareness meetings in parishes are more prone to the case (Victoria, St. David): mosquito vectors   + Organize   + Strengthened council by organizing elder groups in parishes, collaborate with other groups for service   + Partnered with police department on international days and awareness weeks for public awareness |
| Geriatric Networking Group | NGO | Mrs. Loraine Morain |  | * + Organization Status: **Active**   + Collaborate and facilitate networking relationships between health professionals and geriatric homes in order to give inputs relating to geriatrics and gerontology so that the well-being and quality of lives of the residents and caregivers can be improved     - Support each other in developing management and leadership skills through communication and strategic planning to improve standards of geriatric care in the Homes     - Facilitate the flow of information between the geriatric homes |
| Grenada National Organization of Women (GNOW) | NGO | Ms. Laurice Pascall |  | * + Organization Status: **Active**   + Bipartisan, non-governmental entity that aims to advocate and improve gender rights for all citizens   + Aging Commission to advance rights for women of all ages     - In 2017, launched a national campaign on Dementia and Alzheimer's       * Increase awareness of these diseases as an aging health problem       * Educate the younger population about early onset of these diseases     - Created an assessment tool for elderly care to assess clients and their caregivers       * Mini-Mental State Examination (MMSE), also known as Folstein test, conducted in Grand Anse Gardens Home, Grand Bras Daycate Center for Adults and Charles Memorial Home       * Utilized to gauge knowledge of dementia and Alzheimer's among those working with older adults, to explore the need for education and resources to better care for residents |
| Grenada Red Cross Society (GRCRS) | NGO | Mr. Terry Charles | 440-1829/403-4824 |  |
| Grenada National Council of the Disabled (GNCD) | NGO |  | 440-0112 |  |
| Elderly Missionary Support Group | NGO | Ms. Marcia Jones | 437-1651/444-8414 |  |