Annual report: New challenges, New opportunities
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For the second time, I am writing this letter in the midst of the COVID-19 pandemic. It has been a long road for all of us, and I am hopeful we are in the final stretch of this challenging time. I hope you and your family members are safe and healthy.

The pandemic will leave lasting impacts on everyone, but especially older adults and most heavily on those living in long-term care. This reality fueled us to continue our work with a new urgency and enthusiasm, and in some cases to change course to respond to these pressing needs.

This report summarizes how we met the challenges of COVID-19 and found opportunities to fulfill our mission and enhance care and quality of life for older adults. We supported crucial orientation for rapid new hires in long-term care, we focused research on outbreak prevention, and we brought on new initiatives to support those living with dementia. I'd like to highlight that we did not tackle these new challenges on our own, we stayed true to our collaborative spirit and joined forces with many partners to amplify efforts.

A bright light for the RIA in 2020 was the completion of our unique-in-the-world infrastructure: a purpose-built hub for collaboration and a vibrant community that integrates senior living with research, education, and community services. The RIA building grew by three floors and the retirement home welcomed its first residents, our neighbours.

However, the pandemic has required our innovation hub to remain mostly closed. While the work continued and even accelerated, almost entirely remotely, this was not what we planned or hoped for. We are ready to welcome our researchers, partners and community back in the months ahead.
This hub for innovation is and will continue to be a key element that sets the RIA apart. It means enhanced collaboration and enhanced capacity to drive innovation in aging. It would not be possible without the Schlegel family. On behalf of the RIA, we extend our sincere gratitude for their vision and commitment to enhancing the journey of aging.

As many of you know I am retiring in June 2021, which is fast approaching as I write this letter. I feel privileged and honoured for the opportunity to lead and support an awesome team of researchers and knowledge mobilizers. I am thankful for being part of rapid growth across the RIA, increasing our capacity for greater impact.

In the last five years, RIA grew from supporting eight researchers to today supporting 14, from a staff team of 12 to a team of over 30 that not only supports research, but also leads knowledge mobilization projects in key areas such as dementia and workforce development. Research is moving more rapidly and more effectively into practice as a result.

While gratitude and fulfillment are at the top of the list of emotions I feel, I am also sad to be stepping back from daily interactions with committed and passionate people who are individually and collectively making a difference in the lives of older adults. I will miss everyone, and the important work, very much, but I am buoyed by the certainty that our work and impact will continue and grow under the able leadership of the next executive director, Dr. Tina Mah, the stellar research and staff team, and the strong infrastructure that comprises the RIA.

If there is one good thing coming from this difficult year of 2020, it is that the world’s attention is finally focused on the inequities of being an older adult, driving an urgency and will for change like never before. We took this into consideration in the development of our strategic plan for 2021-2023. We will redouble our efforts to restore confidence in the services and systems that older adults rely on. We will lead, advise and support initiatives that inspire innovation and collaboration to transform organizations and systems, and empower individuals to embrace a culture of senior living where everyone thrives.

Thank you to our partners and donors. Our work together has never been more important. Let’s continue to make the future bright.

Josie d’Avernas
Executive Director
Schlegel-UW Research Institute for Aging
"When the RIA began in 2005, the vision was to create a hub for innovation in aging; a place where researchers, educators, health care professionals, and older adults could come together to solve real world problems."

- Ronald Schlegel
As Josie has noted, 2020 was a time of turmoil and challenging for all of us. We saw the immense effect this pandemic has had on those who live and work in senior living. But as I write this, I can see the light as vaccination roll-out picks up speed across the country. I am hopeful that the months ahead will bring brighter days.

When the RIA began in 2005, the vision was to create a hub for innovation in aging; a place where researchers, educators, health care professionals, and older adults could come together to solve real world problems.

This past year has exemplified how the RIA brings people together to rally around a shared challenge and put the needs of those we serve first. The RIA is nimble, we can and will respond to emerging needs and we have the networks and partnerships in place to bring the best people to the table. Ultimately, we find the solutions that truly work.

You will read about how we adapted and addressed the needs of this new virtual world throughout this report. The team ensured our most popular educational offerings could be accessed online. We continue to explore how new technologies, and using existing technologies in new ways, can support “smart homes” where older adults can live independently. Our researchers are setting the groundwork to understand COVID-19 vaccination in long-term care - a study that will likely be the largest of its kind worldwide.

I would also like to highlight the RIA’s leadership in supporting those living with dementia. This year, the RIA was awarded two national projects that will advance research, improve our understanding of dementia and its progression, and share learnings and resources to help inform dementia policy and practice in Canada.

I am truly humbled to see the growth of the RIA over the past 15 years, and its ability to rise to the challenge and make a difference in the lives of older adults this past year.

It would not be possible without our partners and our donors. My sincere thanks to each of you.

Ronald Schlegel
Director and Chair
Schlegel-UW Research Institute for Aging
The Schlegel-UW Research Institute for Aging (RIA) is a charitable, non-profit organization that enhances the quality of life and care of older adults through partnerships in research, education and practice.

Our goal is to change the way we age in Canada and around the world. We are leaders in aging research and innovation tackling some of the biggest issues facing our aging population.

Our unique approach to innovation bridges the gap between research and impact. Research questions are shaped by the realities and needs of older adults, care partners, health professionals, educators and industry. Then we work together to use what we’ve learned and develop resources, programs, education and training to influence practice and policy.

Ultimately, we drive innovation. We find solutions that truly work and share them to benefit older adults everywhere.

The RIA is a product of the philanthropic spirit and vision of Ronald Schlegel and the Schlegel family, who founded the organization in 2005. We have core partnerships with the University of Waterloo, Conestoga College and Schlegel Villages, and we collaborate with many other academic institutions and organizations. Additional partners include the Centre for Family Medicine Family Health Team, Conrad Grebel University College, GeriMedRisk, McMaster University, Sheridan College and University of Guelph. The RIA’s annual operating budget of over $11M is supported by contracts, grants and generous donors.
2020 Impact stats

$18.3M Grant Funding Awarded¹

$8.75M Government Funding²

43 New Grants Awarded

154 Research Publications

100 Presentations Given In Person and Virtually

100,678 Website Page Views

96 Students Trained

692 New Followers on Social

Access to COVID-19 Orientation Materials through the Ontario CLRI

17,284 Page Views

14,215 Downloads

Linda Lee, Schlegel Research Chair in Primary Care for Elders — The Change Foundation Future Innovator Award: The MINT Memory Clinic

Heather Keller, Schlegel Research Chair in Nutrition and Aging — Marie Taylor Award for Excellence in Long Term Care, Seniors Nutrition and Dietetic Practice, Dietitians of Canada, Gerontology Network

George Shaker, RIA Research Scientist — NASA Tech Briefs Honorable Mention, Top 5 Medical Devices Award

Lora Giangregorio and Carrie McAiney, Schlegel Research Chairs — Outstanding Achievement Award in Faculty of Health, University of Waterloo

¹Represents new grants received by Schlegel Chairs and Specialists held at various academic institutions.
²Funds held at the RIA from government sources for research and knowledge mobilization.
Our people

Researchers

The RIA has 14 researchers who offer expertise in key areas related to aging and older adults - geriatric medicine, nutrition, falls prevention, technology, dizziness, dementia, spirituality, arts and workforce development.

The Schlegel Chairs and Specialists listed below are leaders in their field and collaborate with RIA research scientists (22 and counting) and researchers from around the world.

Schlegel Research Chairs

Jennifer Boger, Schlegel Research Chair in Technology for Independent Living

Boger creates innovative technology with and for older adults and care partners to support their needs.

Lora Giangregorio, Schlegel Research Chair in Mobility and Aging

Giangregorio investigates ways of increasing safe and effective physical activity in older adults.

Dr. George Heckman, Schlegel Research Chair in Geriatric Medicine

Dr. Heckman develops and assesses novel primary care and long-term care processes to improve outcomes for frail older adults.

Richard Hughson, Schlegel Research Chair in Vascular Aging and Brain Health

Hughson tests ways to improve brain blood flow to reduce the risk of falls and cognitive decline in older adults.

Heather Keller, Schlegel Research Chair in Nutrition and Aging

Keller researches how food and the experience of mealtimes enhances the health and quality of life of older adults.

Dr. Linda Lee, Schlegel Research Chair in Primary Care for Elders

Dr. Lee improves access to specialized care for persons living with dementia and their care partners.

* Jennifer Boger ended her chair term at the close of 2020 to relocate with her family. She will continue to collaborate with the RIA as a research scientist.
Meaningful health care change takes time, without the dedicated support of this Chair position with the RIA, this work over the past decade would have been impossible. I am thrilled to see this research being applied in practice and benefiting some of our most vulnerable citizens.

- Heather Keller
Board of directors

The Board of Directors meets quarterly to provide strategic oversight, set priorities, and identify opportunities for the RIA.

These are the members of the Board of Directors during the 2020 calendar year.

President:
Ronald P. Schlegel, Founder

Members:
- Veronique Boscart, Executive Dean, School of Health and Life Sciences, CIHR/Schlegel Industrial Research Chair for Colleges in Seniors Care, Director, Canadian Institute for Seniors Care, Conestoga College Institute of Technology and Advanced Learning
- Paul Brown, Chief Operating Officer, Schlegel Villages
- Roy Cameron, Executive Director, Homewood Research Institute
- Josie d’Avernas, Executive Director, Schlegel-UW Research Institute for Aging
- Barbara Fennessy, Vice-President of Applied Research, Conestoga College Institute of Technology and Advanced Learning
- Paul Fieguth, Professor and Associate Dean, Faculty of Engineering, University of Waterloo
- Richard Hughson, Schlegel Research Chair in Vascular Aging and Brain Health, Professor, Applied Health Sciences, University of Waterloo
- Dr. Joe Lee, Chair and Lead Physician, The Centre for Family Medicine
- Lili Liu, Dean, Faculty of Applied Health Sciences, University of Waterloo
- John Milloy, Community Representative
- James Schlegel, President and CEO, R-B-J Schlegel Holdings Inc.

The RIA board and staff team continue to grow.
• Dr. Tom Stewart, Community Representative
• Elizabeth Witmer, Community Representative

In 2021, the RIA welcomed board members Geoff Fernie (Senior Scientist, University Health Network, Toronto Rehabilitation Institute), Steven Mock (Associate Professor, University of Waterloo), Dr. Cathy Morris (Community Representative), and Dr. Samir Sinha (Director of Geriatrics, Sinai Health System).

Staff

The RIA staff team supports operations and a network of researchers, educators and practitioners. These are the members of the RIA core staff team during the 2020 calendar year, in alphabetical order:

• AJ Adams, Communications Officer, Ontario CLRI
• Emma Bender, Program Assistant
• Susan Brown, Director of Research Coordination and Research-Practice Integration
• Nisreen Castillo, Administrative Assistant
• Tammy Cumming, Director of Strategic Projects
• Josie d’Avernas, Executive Director
• Elaine DeVries, Education Manager
• Hilary Dunn-Ridgeway, Director of Communications
• Kyla English Leis, Project Officer
• Noel Gruber, Communications Manager, Ontario CLRI
• Gert Hartmann, Director of Business Development and Community Partnerships
• Holly Hebner, Project Coordinator
• Nathan Honsberger, Project Officer
• Danielle Krisman, Project Manager, Dementia Knowledge Hub
• Emily Lambe, Project Officer
• Sian Lockwood, Project Officer
• Amy Matharu, Assistant Research Coordinator
• Scott Mitchell, Knowledge Broker
• Frances Morton-Chang, Director of Dementia Programs
• Natalie Phillips, Project Officer
• Tracy Riley, Office Manager
• Liz Snyder, Interim Director of Communications
• Paul St. Pierre, Accountant
• Michelle Stillman, Senior Director of Operations
• Barb Sutcliffe, Senior Manager of Sales and Marketing
• Lyra Taylor, Communications Assistant, Ontario CLRI
• Alie Teetzel-Edmondstone, Communications and Engagement Officer
• Audra Thompson-Haile, Project Manager
• Vanessa Vucea-Tirabassi, Project Officer, Dementia Surveillance Project
• Kate Wilson, Office Manager
• Dominique Williams, Education Manager
• Neb Zachariah, Project Manager, Supporting Inclusion through Intergenerational Partnerships
• Dana Zummach, Evaluation Coordinator, Supporting Inclusion through Intergenerational Partnerships

We welcomed Shilpi Majumder (Project Manager), Andy MacKenzie (Project Officer), Kristie Kimmet (Engagement Manager), Allie Serota (Project Officer) and Tina Mah (Executive Director) to the RIA team in early 2021, and the team continues to grow.
Online orientation prepares rapid new hires for long-term care

The COVID-19 pandemic put unprecedented pressure on staffing in long-term care (LTC) causing widespread shortages. Homes across the province had to bring on new team members, many new to the sector. The Ontario Centres for Learning, Research and Innovation in Long-Term Care (CLRI) at the RIA curated and mobilized crucial resources to support rapid hire orientation and ensure new team members were ready to support residents.

We worked collaboratively with sector partners to understand what those new to LTC needed to know. We identified existing resources and developed new ones to ensure the key topics were addressed. The Ontario CLRI at Baycrest Health Sciences and the Ontario CLRI at Bruyère Research Institute, and other organizations across the sector, including Behavioural Supports Ontario, Ontario Long Term Care Association, Ontario Association of Residents Councils and Family Councils Ontario, supported this initiative to provide homes the training support they needed.

The resources were made available online allowing individuals to tailor to their own information needs. Topics covered include a general overview of LTC and COVID-19, proper use of personal protective equipment, and how to communicate with residents and families, to name a few.
Resources from the RIA were also featured providing guidance on how best to support people living with dementia.

The orientation materials have been hugely appreciated and extensively used. The site launched in April 2020 and has been viewed over 17,000 times and resource downloads surpassed 14,000. Feedback from LTC homes has been very positive, reporting that they rely on this orientation to supplement their own in-house training.

While the purpose of these resources was to address an immediate need during the COVID-19 crisis, the Ontario CLRI team plans to continue and expand the resources available. New e-courses are launching soon that cover infection prevention and control, a much needed topic during the pandemic and as LTC homes begin to return to a new normal.

To access the orientation materials, visit www.clri-ltc.ca/orientation.

Spiritual care providing hope during pandemic and beyond

Spiritual care is an important part of life in long-term care (LTC) homes. Spiritual care providers can support well-being, promote resilience and provide opportunities for religious practice and rituals. Jane Kuepfer, Schlegel Specialist in Spirituality and Aging, wanted to better understand how this type of care is provided across Ontario.

Initially, Kuepfer’s research wasn’t about the effects of COVID-19 on spiritual care, but she was able to capture many perspectives on the challenges and realities of the pandemic. Spiritual care providers found their roles had to become more flexible. Many providers were initially sent away from their homes to stop infection spread, then asked to return when homes realized that their services were essential for residents.

Several spiritual care providers reported moving to a one-to-one model where they provided individualized care, connecting residents virtually.
with their spiritual resources like families or faith communities, creating displays and motivational materials to boost morale, recording services, and providing spiritual resources to team members, who often felt overwhelmed during the restrictions and changes.

Pandemic or no, an overwhelming number of providers reported that what matters most in spiritual care is simply presence. It’s about taking time to pay attention, to get to know a person deeply, and connect at the level of meaning — to support love, hope, peace and joy in life, through whatever spiritual resources are meaningful for that particular resident.

Despite the importance of spiritual care, this study found that only 49% of the 177 homes surveyed employ anyone with skills and training in spiritual care.

Kuepfer hopes that the findings from this study will help to influence policy and practice in LTC. Her recommendations from completing this work include more consistent employment of spiritual care providers in every LTC home, specific training for spiritual care in LTC and more online resources to support this work.

Dupuis found that the role of recreation workers had changed dramatically, and there were many challenges to overcome. 55% of respondents said their job satisfaction decreased during the pandemic, and many responses shared that team members were losing hope. One participant stated “[It has been] ...challenging and desperate. [It] is the only way I can describe it. It’s still satisfying but it just has required a real digging down deep to make a difference.”

Many respondents shared how they could see the changes in residents when recreation was halted, then returned. Another respondent shared: “We are so important. When we were unable to run activities residents became depressed and isolated. When activities began again you can see how much happier the residents are.”

The need for updated technology to allow residents to connect with family, more staffing and better pay and recognition of the importance of the recreation team’s role were cited as some of the changes that could help support team members. Dupuis hopes that this research will highlight where the gaps in senior living recreation are and just how important recreation is for residents and families.

Highlighting the importance of recreation during the pandemic

Many senior living team members faced challenges in their roles during the pandemic. Kate Dupuis, Schlegel Innovation Leader in Arts and Aging, wanted to understand the specific challenges that recreation team members faced as they adjusted to a new normal. She developed a survey and collected data from almost 400 individuals who support recreation in long-term care (LTC), retirement and community organizations across the country.

Recreation is the heart and soul of our LTC home.

- Recreation team member in long-term care
Using data to prevent outbreaks and inform policy

When the COVID-19 pandemic hit, there were many uncertainties that came with it. Long-term care (LTC) homes in Ontario were especially vulnerable to the pandemic, but what wasn’t clear was which factors contributed most to outbreaks. Schlegel Chair in Clinical Epidemiology and Aging Andrew Costa wanted to respond quickly and provide information to support LTC homes.

Costa, along with a team of researchers, took the data that was available about outbreaks and LTC alongside large LTC data sets. The study looked at data from all 623 LTC homes in Ontario from March 29, 2020 to May 20, 2020. They compared these data sets to try and find possible contributing factors to a COVID-19 outbreak. By using data that was already available, they were able to quickly respond and understand how to help prevent an outbreak.

They found that while there were many contributing factors, the age of the home, inadequate staffing levels, team members working at multiple LTC homes and the spread of COVID-19 in the community were some of the biggest factors when predicting an outbreak. Preventing spread in the community, prevents spread in LTC. Policy makers were able to use these findings to inform current protective measures and also longer term strategies to keep older adults in senior living safe.

Learn more about Costa’s latest COVID-19 study in LTC on page 31.
Improving fitness and nutrition, even during lockdown

Over 75% of Canadian adults aged 18 and older are not meeting physical activity guidelines. This number increases to 88% when looking at adults aged 65 and over. Restrictions put in place by the COVID-19 pandemic increased the potential for physical inactivity, malnutrition, and social isolation in older adults. Schlegel Research Chairs Lora Giangregorio and Heather Keller adapted MoveStrong, an 8-week exercise and nutrition education program, to be delivered to older adults in their homes through telephone or electronic device.

MoveStrong at Home was launched in October 2020. As part of Phase 1, the team recruited nine older adults from Ontario communities to participate. Over the eight weeks, each participant received a one-on-one tailored exercise program delivered via web conference or telephone and booklet. The exercise program focused on building strength and balance. Participants also received nutrition education, focused on encouraging adequate protein intake. After completing the program, many participants reported benefits including increased strength and balance, improved gait and mobility and greater levels of energy. The team hopes to apply for funding in future to do more research to scale up and evaluate programs like MoveStrong.
Going virtual: ensuring access to education during COVID-19

For many across Canada and around the world, COVID-19 required us to isolate and do whatever we could to minimize contact with others. Much of the RIA’s educational offerings were designed for in-person, interactive learning. With this new demand, we knew we had to adapt our most popular education to be delivered virtually.

While we had been thinking about different ways to offer our education to ensure it was easily available to whoever needed it, COVID-19 pushed us to adapt quickly and switch to virtual delivery. We worked in partnership with Conestoga College to transition the Leadership in Senior Living program to a fully online e-course where learners could still interact with their peers and join live discussions.

The Excellence in Resident-Centred Care (ERCC) course for team members in long-term care was also adapted to virtual delivery. The course typically follows a train-the-trainer model, but this approach wasn’t possible with pandemic restrictions. Now, team members can join a 7-hour virtual workshop. Both ERCC and the Leadership in Senior Living program were co-developed by Conestoga College and the RIA.

LIVING the Dementia Journey (LDJ), another hallmark RIA education program, also went virtual. In addition to our popular training for team members in senior living, we created an e-course for youth. The online program delivers the same great content to help people understand dementia and learn strategies to support and communicate with individuals living with it. The LDJ e-course for youth is launching in 2021 through the RIA’s Supporting Inclusion through Intergenerational Partnerships (SIIP) program, funded by the Government of Canada’s New Horizons for Seniors Program.
New initiatives:
Advancing the national dementia strategy

Advancing the national dementia strategy

In 2019, the Public Health Agency of Canada announced the launch of Canada’s first national dementia strategy, a milestone in our country’s efforts to help people affected by dementia and address the impact of dementia on social and health care systems.

Carrie McAiney, Schlegel Research Chair in Dementia with the RIA and University of Waterloo, was part of a national panel of experts that informed the development of the strategy.

The strategy focuses on advancing prevention and treatment for dementia, as well as improving quality of life for people living with dementia, care partners, and families. The latter has been the focus of the RIA’s Murray Alzheimer Research and Education Program (MAREP) for over 20 years. Building on this work, the RIA was awarded $2M in federal funding to lead two national projects as the dementia strategy is put into action.
Leading the dementia knowledge hub

The Public Health Agency of Canada (PHAC) launched an initiative in 2018 called the Dementia Community Investment (DCI). The DCI funds community-based projects across the country aimed at enhancing the well-being of people living with dementia.

To support and connect all of these projects, PHAC has also funded a Knowledge Hub to facilitate collaboration and optimize impact. The RIA was selected to lead the Hub.

The RIA team is working closely with McAiney and RIA research scientist, Laura Middleton at the University of Waterloo. They are collaborating with other experts across Canada to support all DCI projects by helping to build capacity in areas such as intervention research, evaluation and the engagement of persons living with dementia, as well as identify gaps for consideration in future funding opportunities. The Knowledge Hub also examines and shares lessons learned across the country to help inform dementia policy and practice in Canada.

Leading the dementia surveillance program

The RIA was also selected to lead a major project to enhance Canada’s dementia data system.

Known as the Enhanced Dementia Surveillance Program, this initiative aims to expand the type of data collected across the country. This information drives dementia policy and practice improvements. The project is also funded by PHAC.

McAiney and Dr. George Heckman, Schlegel Research Chair in Geriatric Medicine, are co-leads for this initiative.

“We are pleased that this is a priority for Canada and are proud to lead this effort,” says Heckman.

“There is increasing variability in how dementia presents and progresses. We need to learn more about the factors that influence people’s experience of dementia and how this experience changes over time. If we create a more comprehensive model of our understanding of dementia, we can improve care and prevention strategies, and can better plan for the future.”

Research leaders from eight provinces are collaborating to examine Canada’s current data system and develop recommendations to enhance the existing system. An enhanced dementia data system can enable policy makers, planners, researchers and others to monitor a comprehensive list of factors, including lifestyle, income, race/ethnicity, and other health conditions.

A common element across all of these initiatives is the engagement of people with lived experience with dementia. McAiney provided early leadership and guidance in building this approach into Canada’s strategy. “If we want this work to be meaningful to people living with dementia, we must integrate their voices into everything we do,” says McAiney.

“We will benefit as a country by including the invaluable insights of people with lived experience as policies and practices are built out. By working in this way, we’ll optimize the relevance and impact of our efforts and investments.”

These important new initiatives are a prime example of how the RIA drives collaborative research to co-design solutions that solve real-world problems and enhance quality of life and care for older adults across the country.
Our impact

Intergenerational programs bringing the community together

Supporting individuals living with dementia in the community can sometimes be a challenge for community organizations. The RIA is making a difference in Waterloo Region through the Supporting Inclusion through Intergenerational Partnerships program (SIIP). In 2020, the project provided $1.3M in funding to four new initiatives to bring high school and university aged young adults and seniors living with dementia together in a variety of innovative programs.

For older adults living with dementia, building relationships with young people have been found to support health and well-being. Older adults can provide valuable learning opportunities for youth and children, sharing wisdom and possibly guiding youth into careers with a focus on aging. Both groups benefit from intergenerational partnerships and these connections help to break down stigma and reduce ageism.

The four funded projects all take a unique approach to bringing seniors and youth together. To ensure the safety of all participants during the pandemic, each project is ensuring programming can be offered virtually.
The projects include:

- **Support through the generations, African Family Revival Organization in partnership with Family and Children's Services of Waterloo Region:** Youth are paired with an isolated senior in the New Canadian/Black/African Origin community by an Intercultural System Navigator. Pairs participate in cultural activities such as music, singing, food and oral traditions.

- **The Virtual Village, Fairview Mennonite Homes and Parkwood Mennonite Home in partnership with Wilfrid Laurier University-Community & Workplace Partnerships:** Student facilitators from Wilfrid Laurier University are being hired for virtual placements to provide programming and social interaction for isolated residents.

- **Taking Interest in People, Conestoga College in partnership with Eastwood Collegiate Institute:** This educational, self-directed virtual course is for youth and older adults to come together for guided group activities. Each session includes activities such as storytelling, demonstration of a skill, sharing of experiences, and guided activities to support meaningful social interactions.

- **Sharing our voices, Alzheimer Society Waterloo Wellington in partnership with The Waterloo Public Library and YMCA of Three Rivers:** High school students and older adults living with dementia engage in recreational activities together, collaborate to create an art piece and participate in a storytelling film sharing their voices, experiences and history.

SIIP, which is funded through the Government of Canada's New Horizons for Seniors Program, will work with these community organizations over the next three years to support their programs and measure the collective impact of the projects. SIIP is also connecting with other organizations in the Region to create a community focused on supporting older adults living with dementia and their care partners.

You can learn more about SIIP at [www.intergenerationalpartnerships.ca](http://www.intergenerationalpartnerships.ca).

Funded by the Government of Canada’s New Horizons for Seniors Program

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**Supporting person-centred language in long-term care**

The words we use matter. How we speak with and about people is key to challenging ageism. As we work to change the culture of aging and create communities where everyone, at any age, thrives, the Ontario Centres for Learning, Research and Innovation in Long-Term Care (CLRI) at the RIA have brought awareness to the power of language.

Behavioural Supports Ontario (BSO) and the Ontario CLRI have been working with an expert panel since 2017 to bring attention to person-centred language. The work highlights the stigma surrounding certain words often used in long-term care (LTC). For example, using the term “facility” paints a very different picture than describing LTC as a resident’s “home”.

A variety of resources were launched in 2020, including the free Person-Centred Language e-Courses for those working in LTC homes. The online education equips LTC team members and leaders with practical knowledge of how to use person-centred language. Since the launch in February 2020, over 1,950 people have completed the education. The e-courses were co-
developed by BSO and the Ontario CLRI at the RIA in collaboration with the Division of e-Learning Innovation at McMaster University.

Building on this initiative, the Ontario CLRI, BSO, and Family Councils Ontario (FCO) also encouraged the Canadian Press, who provide national recommendations on language use to journalism, public relations, and communication sectors, to adopt person-centred language. The intense media coverage during the first and subsequent waves of the pandemic highlighted that journalists are often not using person-centred language when describing LTC homes. In future, the Canadian Press will recommend using terms like “home”, “resident”, and “person living with dementia”. Having media outlets across the country use respectful and life-affirming language when reporting on LTC is a huge win for the culture change movement.

To learn more about person-centred language, visit www.clri-ltc.ca/pcl.

Working together for better dementia resources

The Murray Alzheimer Research and Education Program (MAREP) has a long history of partnering with people living with dementia and care partners to ensure that their voices are heard and reflected in resources and educational programs. MAREP joined the RIA in 2018 where it continues this great work.

A valuable resource that reflects this process of authentic partnership is the By Us For Us (BUFU) Guide series. The guides are designed by people living with dementia for people living with dementia and aim to provide tips and strategies to help people living with dementia and care partners enhance their well-being and manage daily life. Guide development began over 15 years ago by founder Brenda Hounam and a group of other talented and passionate people living with dementia, with MAREP providing support.
The guides underwent a refresh in 2020 where each guide was reviewed by a dedicated team, including the original founder to ensure that these valuable resources have up-to-date information about dementia. The text size used in the guides was also increased to ensure the information is easier to read for all audiences.

After all these years, the BUFU Guides remain a highly accessed resource. A new guide is currently being developed and will be released in 2021. These guides are an example of the critical role that people with lived experience play in MAREP’s research and education activities.

**To learn more and access the BUFU Guides, visit:** [www.the-ria.ca/bufu](http://www.the-ria.ca/bufu).

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### Changing nutrition care across Canada and around the world

Schlegel Research Chair Heather Keller is a global leader in nutrition and aging, and her work has changed the way hospitals around the world think about and use food for recovery.

Keller and her team developed the Integrated Nutrition Pathway for Acute Care (INPAC) that provides guidance for hospitals to quickly screen patients and determine their nutritional status at admission. Those that are found to be at risk have additional assessments. This process ensures no one who is malnourished goes undiagnosed, and those that need specialized support from a registered dietitian receive it.

Better nutrition care is happening in hospitals across Canada because of this work. The success of this new approach is also gaining international recognition. Organizations in the United States and Australia have begun using similar pathways to improve nutrition, and ultimately overall health, for their patients.

“Meaningful health care change takes time,” says Keller. “Without the dedicated support of this Chair position with the RIA, this work over the past decade would have been impossible. I am thrilled to see this research being applied in practice and benefiting some of our most vulnerable citizens.”

Keller’s national and global impact on nutrition screening and care will continue to grow as her work continues. Malnutrition Prevention, Detection and Treatment Standards for Hospitals will be released in 2021 by the Health Standards Organization. Her success is a prime example of how the RIA drives cutting-edge research and innovation to solve real-world problems and enhance quality of life and care for older adults everywhere.
RIA building expansion purpose-built for innovation

The Centre of Excellence for Innovation in Aging is a purpose-built hub for collaboration and a vibrant community that integrates senior living with research, education, and community services. It is located on the north campus of the University of Waterloo and home to the RIA. In 2020, the Centre opened up three additional floors in the RIA building and began welcoming residents to Schlegel Villages’ newly constructed 10-story retirement home.

With phase two complete and filling quickly, over 400 older adults will call the Centre home when move-in is complete across the continuum of senior living. The RIA building has nine state of the art research labs, classrooms and training spaces, a Living Classroom in partnership with Conestoga College, a medical clinic, adult day programs and a growing number of other community services.

While the COVID-19 pandemic has paused many Centre projects and activities, we recognize how valuable this space is. The infrastructure, unique-in-the-world, allows the RIA to foster collaboration, bringing researchers, health care providers, students, older adults and community members together. It is these partnerships that drive innovation, ensuring research addresses real-world problems and the solutions developed truly work for those who need them.

The Centre and the impact it has already had and will continue to have is made possible because of our donors. The Schlegel family has committed over 50% of the total construction costs of the RIA building (a total of over $9M). Their vision and commitment to enhancing quality of life as we age, and the countless other donors and organizations who have supported the campaign, are the reason the Centre stands tall today. There is still $614,000 left to raise. Every dollar will help make this dream a reality.

To learn more or to make a donation, contact Gert Hartmann at gert.hartmann@the-ria.ca
The RIA would like to thank our Construction Partners for their support of phase two of the Centre of Excellence and helping us make a difference in the lives of older adults today and for generations to come.

Dordan Mechanical Inc.
Kieswetter Excavating Inc.
AKS Interior Systems
Cornerstone Architecture
Alder
EBS Geostructural Inc.
Delta Elevator
JVH Masonry Ltd
Kitchener Glass
K-W Ornamental Iron Works Limited
Superior Caulking
MNE Engineering Inc.
Brody Enterprises Inc.
Corner Point Stucco
Knell’s Door and Hardware
ProAble Hardware Specialties Inc.
Voll’s Contract Flooring
Wrights Landscape Services Inc.
Doka Formwork
Iso Matrixx Building Products Limited
Peikko
Golden Triangle Welding Limited
Oxford Builders Supplies
AGF
Our donors

RIA sincerely thanks our valued donors who have generously given in support of our mission. Listed below are the donors whose gifts were received from January to December 2020.

Visionary
Dr. Ronald and Barbara Schlegel and Family

Founding Partners
University of Waterloo
Conestoga College Institute of Technology and Advanced Learning

Leader: 1,000,000 +
McMaster University

Innovator: $500,000 - 999,999
Remedy’s Specialty Pharmacy
Cowan Foundation

Builder: $100,000 – 499,999
Jobson Family Foundation
Stephen Menich and Mary Ellen Cullen

Accelerator: $25,000 – 99,999
Delta Elevator

Mobilizer: $10,000 – 24,999
EBS Geostructural Inc.
Josie and Francis d’Avernas
Rob Schlegel
Kerry Townson

Friend: $1,000 – 9,999
Andrew Costa
Lindsay and Ruth Duffield
Esther E. Gascho
Lora Giangregorio
Peter F. Hannam
Richard and Nadia Hughson
Right Honourable David Johnston
Jane and JD Kuepfer
K. Jane Laman
Brent Landers
Robyn Landers and Susan Bergey
Robert McCauley
John Milloy
James Muir
Dr. Robert and Jean Ann Norman
M. Lynne Parkin
Dr. Allen G Power
Marlene Raasok
Pauline and Werner Schmidt
Jacqueline Sharratt
Peter G. and Judy Smith
Douglas and Ruth Wagner
Elizabeth Witmer
Our sincere thanks to the friends and family who donated in memory of the following individuals:

Lydia Andriotis
Janette Bicknell
David Kent
Donald Millar
Elizabeth Muir
Michael Sharratt
Joyce and Don Townson
## Summarized Statement of Financial Position as of December 31, 2020

<table>
<thead>
<tr>
<th>Assets</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash</td>
<td>$3,840,481</td>
<td>$1,589,614</td>
</tr>
<tr>
<td>Cash - endowment</td>
<td>-</td>
<td>209,874</td>
</tr>
<tr>
<td>Short-term investments (Note 3)</td>
<td>501,372</td>
<td>-</td>
</tr>
<tr>
<td>Short-term investments - endowment (Note 3)</td>
<td>209,874</td>
<td>-</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>230,915</td>
<td>83,864</td>
</tr>
<tr>
<td>Government remittances recoverable</td>
<td>1,119</td>
<td>56,824</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>197,236</td>
<td>232,379</td>
</tr>
<tr>
<td><strong>Total Current</strong></td>
<td>$4,980,997</td>
<td>$2,172,555</td>
</tr>
<tr>
<td><strong>Capital assets (Note 4)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Research facility deposit (Note 11)</td>
<td>7,235,039</td>
<td>7,235,039</td>
</tr>
<tr>
<td><strong>Total Capital assets</strong></td>
<td>7,590,395</td>
<td>7,603,131</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$12,571,392</td>
<td>$9,775,686</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued liabilities</td>
<td>$706,419</td>
<td>$197,146</td>
</tr>
<tr>
<td>Amount repayable to Ministry of Health (Note 8)</td>
<td>1,659,374</td>
<td>-</td>
</tr>
<tr>
<td>Deferred revenue (Note 5)</td>
<td>557,749</td>
<td>708,086</td>
</tr>
<tr>
<td><strong>Total Current</strong></td>
<td>$2,923,542</td>
<td>$905,232</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fund balances</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Fund</td>
<td>1,113,338</td>
<td>857,074</td>
</tr>
<tr>
<td>Restricted Fund</td>
<td>262,631</td>
<td>324,534</td>
</tr>
<tr>
<td>Restricted Ministry Fund</td>
<td>251,335</td>
<td>105,959</td>
</tr>
<tr>
<td>MAREP Endowment Fund</td>
<td>209,874</td>
<td>209,874</td>
</tr>
<tr>
<td>Capital Fund (Note 6)</td>
<td>6,891,817</td>
<td>6,886,297</td>
</tr>
<tr>
<td>Restricted Geri-Med Risk</td>
<td>630,746</td>
<td>390,186</td>
</tr>
<tr>
<td>Federal Fund</td>
<td>288,109</td>
<td>96,530</td>
</tr>
<tr>
<td><strong>Total Fund balances</strong></td>
<td>9,647,850</td>
<td>8,870,454</td>
</tr>
</tbody>
</table>

**Total Liabilities:** $12,571,392

**Total Liabilities:** $9,775,686
## Summarized Statement of Operations for the Year Ended December 31, 2020

<table>
<thead>
<tr>
<th>Revenue</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research</td>
<td>$ 9,339,734</td>
<td>$ 4,352,270</td>
</tr>
<tr>
<td>Donations</td>
<td>1,304,501</td>
<td>1,809,988</td>
</tr>
<tr>
<td>Rental</td>
<td>211,882</td>
<td>221,715</td>
</tr>
<tr>
<td>Conference and training</td>
<td>74,157</td>
<td>215,076</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>17,512</td>
<td>56,332</td>
</tr>
<tr>
<td>Interest</td>
<td>13,112</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Revenue</strong></td>
<td><strong>10,960,898</strong></td>
<td><strong>6,655,381</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultant and research fees</td>
<td>3,523,975</td>
<td>2,873,009</td>
</tr>
<tr>
<td>Wages and benefits</td>
<td>2,627,870</td>
<td>1,795,929</td>
</tr>
<tr>
<td>Program</td>
<td>2,069,748</td>
<td>1,507,766</td>
</tr>
<tr>
<td>Rent and utilities (Note 7)</td>
<td>128,890</td>
<td>112,780</td>
</tr>
<tr>
<td>Office</td>
<td>111,477</td>
<td>134,133</td>
</tr>
<tr>
<td>Janitorial (Note 7)</td>
<td>98,843</td>
<td>83,361</td>
</tr>
<tr>
<td>Amortization</td>
<td>94,217</td>
<td>97,286</td>
</tr>
<tr>
<td>Legal and audit</td>
<td>74,644</td>
<td>53,389</td>
</tr>
<tr>
<td>Travel</td>
<td>27,318</td>
<td>92,287</td>
</tr>
<tr>
<td>Professional development</td>
<td>24,689</td>
<td>19,395</td>
</tr>
<tr>
<td>Insurance</td>
<td>21,786</td>
<td>10,039</td>
</tr>
<tr>
<td>Conventions and catering</td>
<td>8,685</td>
<td>15,951</td>
</tr>
<tr>
<td>Bank charges and interest</td>
<td>3,956</td>
<td>(218)</td>
</tr>
<tr>
<td>Advertising</td>
<td>3,383</td>
<td>2,352</td>
</tr>
<tr>
<td>Sponsorships</td>
<td>2,000</td>
<td>16,401</td>
</tr>
<tr>
<td>Overhead allocation</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>8,821,481</strong></td>
<td><strong>6,813,860</strong></td>
</tr>
</tbody>
</table>

**Net revenue (expense) before the following**

<table>
<thead>
<tr>
<th></th>
<th>2020</th>
<th>2019</th>
</tr>
</thead>
<tbody>
<tr>
<td>Funding to Repaid to Ministry (Note 8)</td>
<td>2,139,417</td>
<td>(158,479)</td>
</tr>
<tr>
<td>Government assistance (Note 12)</td>
<td>1,659,374</td>
<td>1,011,141</td>
</tr>
<tr>
<td>(297,353)</td>
<td></td>
<td>-</td>
</tr>
<tr>
<td><strong>Net revenue (expense) for the year</strong></td>
<td><strong>$ 777,396</strong></td>
<td><strong>$(1,169,620)</strong></td>
</tr>
</tbody>
</table>
Using sensors to support healthy aging

RIA research scientists are looking into new ways that technology can support healthy aging for older adults, both at home and in medical settings.

Research Scientists Plinio Morita and Jen Boger work as investigators of the Program to Accelerate Technologies for Homecare (PATH) project. As a growing partnership between Universities of Toronto, Alberta and Ottawa and industry partner SmartOne Solutions, this work involves developing and deploying new ways for sensors and networks to support older adults living in the community to stay in their own homes longer. The goal is to create systems to support health, leisure, and well-being that complement each person’s needs and are able to adapt to changes over time.

George Shaker, another Research Scientist, is using sensors to keep long-term care and hospital residents healthy with tools that measure vital signs and activity levels remotely. Shaker and his team have successfully developed radar systems to measure breathing rate, heart rate, and body temperature that do not require residents to wear any sort of monitoring devices. These remote monitors can reduce costs for care organizations, providing a high-tech, cost effective way to monitor health.
Improving care with virtual education in long-term care

In 2021, Ontario’s long-term care homes will have access to high-quality virtual education on person-centred care. The Ontario Centres for Learning, Research and Innovation in Long-Term Care (CLRI) at the RIA has received $4M to once again offer training through the Personal Support Worker Education Fund for Long-Term Care (the Fund). The training is funded by the Ontario Ministry of Long-Term Care.

The Fund provides financial support to long-term care homes for their team members to participate in skill-building education and adopt person-centred models of care, a priority identified in recommendations from the Ontario Long-Term Care COVID-19 Commission. The Fund will support tuition and backfill for the virtual delivery of the Excellence in Resident-Centred Care (ERCC) course. ERCC provides team members with practical skills in person-centred care and includes a focus on infection control. It was co-developed by Conestoga College and the RIA.

This will mark the 4th year the Fund has been available to Ontario LTC homes and has supported training of more than 15,000 personal support workers in 303 long-term care homes across the province since 2017.

Understanding COVID-19 vaccines to prevent future outbreaks

Schlegel Research Chair in Clinical Epidemiology Andrew Costa is working to understand how COVID-19 vaccines can protect residents and team members and prevent outbreaks in long-term care (LTC). Over the course of a year, Costa and his team will work with over 2,000 residents, team members and visitors of LTC homes in Ontario, with several Schlegel Villages taking part in the project.

The study is funded by the Government of Canada’s COVID-19 Immunity Task Force, and is currently amongst the largest studies of vaccines in LTC in the world. The team will test vaccinated participants several times throughout the study by collecting a simple spit sample, in addition to occasional blood work, and use the results to see how well vaccines are working. By gaining an understanding of how residents’ immunity has responded to being vaccinated the research will provide the best evidence on COVID-19 in LTC. The findings will be used to improve vaccination strategies in the future, hopefully keeping homes out of an outbreak and all those who live, work and visit LTC safe.
Walk with Me: changing the culture of aging in Canada

The RIA continues to lead the Canadian culture change movement. One of our key accomplishments to drive culture change in Canada is co-hosting the Walk with Me conference with our Albertan partners, CapitalCare.

Walk with Me brings older adults, health care professionals, researchers, educators and policy makers together to challenge ageism and learn with and from each other. Our 4th conference was scheduled for April 2021, but as 2020 unfolded we made the difficult decision to postpone until May 26-27, 2022, in hopes we could gather together safely.

As we count down to the 2022 conference in Calgary, we are hosting a virtual event series, “Rethinking Senior Living”, to share practical solutions to common challenges so that all older adults can live fully. Our conference planning committees are gearing up to release the call for sessions and announce some very exciting keynotes in 2021.

We hope you’ll join the movement as we change the culture of aging together.

To learn more about the conference and virtual event series, visit www.the-ria.ca/walkwithme.
We will benefit as a country by including the invaluable insights of people with lived experience as policies and practices are built out. By working in this way, we’ll optimize the relevance and impact of our efforts and investments.

- Carrie McAiney, Schlegel Research Chair in Dementia