

## ASSOCIATION OF DALHOUSIE RETIREES AND PENSIONERS

### THE NEWSLETTER

VOLUME 6, NUMBER 1, MARCH 2007

Welcome to the first issue of our Newsletter for 2007! The Board has provided you with a large number of issues. The Board meets once a month on your behalf, guided by our President, Philip Welch.

### UPCOMING EVENTS

#### "Changes in Broadcasting since 1948"

Guest Speaker: Dr. Don Tremaine, former Co-host of CBC's Information Morning  
2:30 p.m., Wednesday, March 14<sup>th</sup>, Great Hall, Dalhousie University Club  
Feel free to bring guests.

#### Annual General Meeting and Election of Officers

2:30 p.m., Thursday, April 26<sup>th</sup>, Lord Dalhousie Room, Henry Hicks Building  
Please note: the Nomination Form for the Election of Officers and Directors for 2007-2008, is at the back of the Newsletter and in front of the Minutes of the December 13, 2006 Meeting.)  
Day parking tickets for ADRP Members for these two events are available from the Security Office, McCain Building.

### MEMBERS IN THE NEWS

ADRP member, Dr. Denis Stairs of Halifax, was inducted as an Officer in the Order of Canada by Governor General, Michaëlle Jean, at a ceremony at Rideau Hall in Ottawa, in January. The Professor Emeritus at Dalhousie University was cited as being one of Canada's pre-eminent authorities in Political Science and International Affairs.

In recognition of Dr. Norman Horrocks, a Dalhousie-Horrocks Leadership Lecture and Scholarship Endowment Fund has been established. It is in recognition of his leadership in the School of Information Management for so many years and to his contributions both nationally and internationally.

## 2007 MEMBERSHIP DUES

If you have not already paid your dues for 2007, please forward a cheque (made payable to the ADRP) in the amount of \$20.00 to Blanche Potter, Membership Chair, 2823 Fuller Terrace, Halifax, NS, B3K 3V8 or to the ADRP Office, Room 2831, Life Sciences Building, Dalhousie University, Halifax, NS, B3H 4J1. If you are uncertain whether or not you have paid your dues, please contact Blanche Potter at (902)454-5554 or at [tcrighton@eastlink.ca](mailto:tcrighton@eastlink.ca)

### **Communications Committee – Caring and Sharing Sub-Committee Report** – submitted by Barbara Prime-Walker and Carol Smillie

#### *Holiday Project – December 2007- 14 members contacted.*

Four individuals in the Halifax Regional Municipality received home visits early in December, to deliver potted Amaryllis plants, on behalf of the membership. Festive food treats were sent to another. Greeting cards were posted to nine members living in Nova Scotia or other Canadian provinces.

#### *Greeting Cards – 3*

To date in 2007, one sympathy card and two thinking of you cards have been sent. We continue to solicit your co-operation in identifying anyone whom we may have forgotten. Keeping in touch with members is an important part of our mandate.

### **President's Report – J. Philip Welch**

I am pleased to report to you that since the last Newsletter and the General Meeting of December 2006, we have made significant progress in pursuing our mission to facilitate the dissemination of important information to Retirees, and to represent their interests within the University. It will also be clear, however, that much remains to be done.

We believe that the principal concerns of retirees are with regard to the maintenance and preservation of both their financial and physical health.

As you are well aware, the financial health of Dalhousie pensioners has been compromised by an indexation shortfall in the value of their pensions, amounting to almost 7% over the past four years, despite a large surplus in the Retirees Trust Fund (RTF) amounting to more than three times the amount needed to provide full catch-up indexation. Thus a four-year Dalhousie pensioner receiving a Dalhousie pension of \$28,000/year is now almost \$2,000 short of meeting a cost of living increase, while the RTF sits on a surplus of \$30 million.

In November of 2004, the University administration successfully persuaded the RTF trustees that this RTF surplus should be combined with the deficit in the employees pension fund (PTF), thus making the RTF surplus “disappear”. The net result—no catch-up indexation, but a saving to the University operating budget of up to \$1 million per year. ADRP protests against this wheeling and dealing by the administration were disregarded. And the ADRP representative on the RTF trustees was removed. As I told you in my last report, we submitted our detailed concerns to the Superintendent of Pensions of Nova Scotia, who is charged with ensuring that all Pension Plans in the province are properly administered. She has now provided us with her official interpretation, namely that the RTF surplus is indeed a SURPLUS, and cannot be made to ‘disappear’ in this manner. I have asked her to forward this interpretation to the University administration and to the RTF trustees, for their further consideration. Some optimism among Dalhousie pensioners is now appropriate.

We can also record some financial success in reducing the ADRP expenditures on your behalf. When the ADRP was founded in 2001, the University kindly agreed to provide us with a small windowless office, but insisted that we take out private insurance against the possibility of injury to those using it. This has amounted to over \$800/year, and our queries whether this might be included and covered by the University’s overall insurance were to no avail. Last year, however, we carried out some research on the national scene, and discovered that there are a total of 13 Canadian universities providing some office accommodation for their retiree associations, but only one—Dalhousie—demanded a private insurance policy of this nature from their Retiree Association. We brought this information to the attention of the Dalhousie University administration. After some internal discussion, they decided that separate insurance coverage by the ADRP was not really necessary after all, and the insurance requirement has now been waived.

We have also had some success with regard to the University’s provision of information on pension deposits and deductions to pensioners. Late in 2006, the University announced that the provision of such information in a paper format would be discontinued as of 1 January 2007. We protested this move, since not all pensioners have computer access or expertise to obtain this information, and many rely on the information from the deposit slips for their tax return. The initial University response was that they could not make a special provision for pensioners. Later, the administration relented, and Dalhousie pensioners should now have received an administration memo (12 January 2007) indicating that direct deposit information for pensioners will continue to be provided and mailed to you.

On another financial matter, we have tried to remind members on several previous occasions of the existence of a \$5,000 paid up death benefit policy (tax free) provided to all who retired in 1998 or earlier. Despite these efforts, we became aware that some spouses of deceased retirees were not aware of this provision, and had not claimed on this policy. We have now written individually to all spouses of deceased ADRP members known to us. Several were unaware of this benefit, and we have assisted those who were unaware of this provision to claim the \$5,000.

Finally, we are continuing to fight the battle regarding benefits to retirees under the Dalhousie Medavie Blue Cross Plan, despite the University's continued denial to allow the ADRP any voice on the Employee Benefits Committee. We have identified several items on the University's blue summary sheet regarding this Plan, most notably the absence of any mention of the potential coverage for nursing home care (see review of this Plan by Mary Simms, elsewhere in this newsletter). At the time of writing, this has not yet been resolved, however, I am hopeful that we will be able to retain some nursing home insurance coverage. I must also acknowledge the help and support we have received from the DFA in this matter, without which we might have already lost some of the Dalhousie Blue Cross benefits.

### **ADRP Questionnaire Results**

*Response Rate:* As of February 2007, there had been 137 replies to the 310 questionnaires mailed in September 2006, to ADRP members resident in Canada. That 44.2% response rate is notably high for a questionnaire that asked for personal financial information. Furthermore, 129 of the 137 (94.2%) wrote their names on the questionnaire, indicating a high level of trust in ADRP's confidentiality standard. Less than a handful of responders expressed concern over the request for personal financial information.

*Continuing Activity:* 113 responders (82.5%) said they are involved in volunteer or other community activities; eight of them paid, 62 unpaid, 43 both paid and unpaid. Teaching was quoted by many and, sometimes in remote parts of the world. Equally common was providing assistance in hospitals, nursing homes, at food banks, and in poison control centres. Working with Habitat for Humanity, Meals on Wheels, Citizen Patrol, Smoking Cessation Programmes, volunteer driving, and writing letters to the editor also engage our members. Many serve on numerous boards and committees, such as fund-raising committees, and the Red Cross – often as Chair. Of course some continue to write, carry on research and exercise their profession as in music, sport and the law. The post-retirement curricula vitae of ADRP members are impressive and humbling. Any society would be proud and gratified to have such people in its midst.

*Charitable Donations:* 134 responders (97.8%) make payments to charities or similar agencies. That is way beyond the 25% of 2005 Canadian income tax filers who claimed charitable donations (according to Statistics Canada Daily Report, November 23, 2006). Of course to reduce tax paid, only one of a couple filing income tax forms is likely to claim charitable donations. Nevertheless, ADRP's 97.8% is still markedly more than even 2 x 25%.

*Charitable Amounts:* The average charitable contribution made by the 128 who reported amounts was about \$2250 ( ± \$300 for probability 0.95). This is almost twice as much as the average of those Canadian tax payers who claimed donations for 2005 (\$7.9 billion from 5.8 million claimants gives an average of \$1,362). The ADRP median (mid-point) donation was in the range of \$1001-\$5000; probably around \$1500 compared to the national median of \$240. The notable differences between the arithmetic average amounts and the median amounts, for both the ADRP members and Canadian tax payers generally, indicate that the distribution of amounts donated is positively skewed – a small proportion of people donated rather large amounts.

*Dalhousie Donations:* 71 of these generous ADRP donors report donations to Dalhousie University, and these average about \$580 ( $\pm$  \$180 for probability of 0.95) in a typical year. 21 of those 71 have made an occasional contribution to Dalhousie that is about ten times larger than their usual, ranging into the tens of thousands of dollars.

*Dalhousie Bequests:* 14 responders (10.2%) have made bequests to Dalhousie University and a further 27 (19.7%) are considering such bequests, for a total of 41. The average bequest made or being considered, as reported by 32 of the 41, is about \$31000 ( $\pm$  \$20000 for probability of 0.95). That average yields a total bequest (or potential) well over \$1000000 ( $\pm$  \$20000 for probability 0.95). That average yields a total bequest (or potential) well over \$1000000. Presumably there is more bequest money possible from ADRP responders who did not complete this section of the questionnaire; not to mention ADRP members who did not return the questionnaire, and from Dalhousie retirees who have not chosen to join the ADRP.

*Reservations about Dalhousie Donations:* The above good news for Dal has to be qualified by the remarks some responders wrote on their questionnaire. Some of these were:

There wasn't a specific question here re the matter of our general treatment by the Administration and how that affects our 'charitable intentions'. It certainly has a major effect on my thinking: I want to see improvement before I will increase giving.

I am really annoyed that we aren't getting appropriate indexing in our pensions and this may very well affect my decision to leave money to Dal. There are lots of other options.

Retirees could and would contribute to the University if we had the funds to do so. It is very hard to make ends meet on a low pension.

If my pension indexation increased to where it should be, I would give (donate) some more to Dalhousie. At present, I can't afford any more.

Because of the excellent education that I received at Dalhousie, I would gladly contribute to future student/departamental resources. As a result, however, of the Administration's efforts...currently to block pension indexation (which for many staff members, especially women, exacerbates at or near poverty-level incomes), I do not make contributions to Dal annually.

*An ADRP Scholarship/Bursary:* 78 responders said the idea for such a fund should be pursued. 30 said it should not. 65 said they might be interested in contributing to such a fund, 49 by donation, 11 by bequest, and 5 by re-allocation of already planned giving. This is a topic worth following up.

*How's the ADRP Doing?:* 92 (67.2%) responders commented on how well the ADRP is working. Almost all of these were positive, even laudatory. Examples are:

ADRP is working hard and doing well. We need to work hard to get our pension indexes increased.

You're doing a great job. I'd like to see something done regarding improved indexation on the retirees' pensions.

Doing well. Please emphasize going after catch-up indexing.

Pressure should be exerted by ADRP to lower tuition fees. Education should be available to all those who can benefit.

Retirees' experience and expertise is valued by all in the community except Dalhousie itself.

I value the work of the Association & find it provides helpful contact & info with various Dal & other resources. The work of members actively contributing time, expertise & energy is IMPRESSIVE, to say the least.

Thanks to all the members who took the time to complete the ADRP Questionnaire. The results confirmed the high opinion I have of our members. Your suggestions are being pursued. It has been an honour to serve you in this way.

Bob Rodger, Treasurer  
Philip Welch, President

**Review of the Presentation by the Nova Scotia Department of Health on January 10, 2007 – “All You Wanted to Know about Long-Term Care but were Afraid to Ask”**

ADRP President, Philip Welch, introduced Ms. Annette Fougere, Supervisor, Intake and Placement in Long-term Facilities, and Ms. Cheryl Purcell-Cotnam, Manager, Eligibility Review Unit, Department of Health, Province of Nova Scotia. He stated that the ADRP interest in long-term continuing care has increased. It was noted that no claim regarding nursing-home care had ever been made on our Blue Cross benefits. This is because no one knew the provision existed due to insufficient information on the 'blue sheet' supplied by Dalhousie University. The provision is still in our contract.

Ms. Fougere deals with policy and people and invited us to visit the DOH website. The Department offers two levels of assistance: residential and home-based. Licensed nursing homes offer staffing, nursing services and have sprinkler systems for fire protection. Care buildings, established independently, are licensed by the DOH. Approximately 66 long-term facilities are now licensed in Nova Scotia. Unlicensed care homes exist but do not come under the jurisdiction of the DOH. DOH Continuing Care Services apply not only to seniors but also to accident or cognitive impairment cases.

*Home Care Services.* Referrals for assistance can be made by hospital staff, a physician, a potential client, family or an interested individual. A referral form is completed and an individual assessment is carried out, based on Canada Revenue Agency Income Tax Notice of Assessment, line 236. Ms. Fougere stressed that the Department attempts to provide assistance so people can remain independent as long as possible. Provision of Home Care Services includes home support services (general cleaning, laundry, assistance with meals), and subsidized home oxygen program, respite services for family (40 hours a month) and a 28 day per year respite bed. For Home Care Services, there are no fees for nursing services, but a sliding scale for home support services and home oxygen services. At present, fees for home support range from \$0 to \$600/month, based upon income.

*Long-term Care Placement.* Support for approximately 6600 Nova Scotians includes placement in licensed nursing homes, licensed residential care facilities, or community based options (such as for service for up to 3 clients or those for interim standard placement). Placement priorities have three classifications: (1) adult protection clients, (2) an applicant returning home to their long-term facility, those requiring a different level of care at the long-term care facility, an applicant whose family member is a resident at the long-term care facility, those requiring peritoneal dialysis and (3) all other applicants. Long-

term care in a residential facility does not include nursing care. Palliative care is offered in home care and long-term care.

*The Long-term Care Facility Placement Policy.* An applicant is offered the first available bed within 100 kilometers of where the applicant wishes to live and which suits their care needs. Those on the waiting list for care placement are offered the first available bed anywhere in the Province in this order of priority: clients who require immediate placement, medically discharged clients in hospital waiting for placement, residents in Department of Health facilities that can no longer safely meet the resident's care needs, and where the services of another facility are required. Applicants may refuse any offer of placement but, if they do, they are removed from the wait list and must reapply. If a hospitalized applicant refuses an offer, the hospital can currently charge the patient up to \$205/day. However, a placement may be deferred without penalty.

*Long-term Care Standard Daily Accommodation Costs.* Effective November 1, 2006, costs per day for room and board are as follows:

- Nursing home - \$75.50
- Residential care facility - \$49.00
- Community-based option - \$46.00
- Respite charge in long-term care - \$28.70

Reduced accommodation charges are based on income information which is reassessed annually. Couple assessed income, based on the Income Tax Notice of Assessment, is divided in half, providing half for the spouse in the community and half for the client. The spouse in the community retains the minimum of \$15045, provided the couple's combined income equals at least \$15045. Single/widowed applicants' assessed income is calculated in the Notice of Assessment, line 236 (net income) minus line 435 (taxes payable). The applicant retains the maximum of either 15% of this amount or \$2556 per year. The remainder of the assessed income is used to pay the daily accommodation costs. It was pointed out that some long-term care rooms are shared accommodations. However, the newer facilities provide private rooms.

Attention was brought to the "Enduring Power of Attorney" and the audience was strongly encouraged to consider this option when compiling a Will.

Also mentioned was the Canada Revenue Agency ruling regarding long-term care medical costs. The Agency allows \$75.50 as a medical cost this year as long as one presents a receipt. This is for nursing home care, not for residential care.

*Long-term Care Private Medical Insurance.* If clients have private insurance for long-term care, their charge would be the standard accommodation charge. If the client agrees to pay the standard charge, no financial assessment is necessary.

*Wait Times.* Presently, there is a 1 – 1 ½ year wait to obtain a long-term care bed. The Department of Health ten-year plan is to increase the number of beds by 800 to 1300. The Department plans to post its wait times on the Web. There is some government support to encourage potential providers to make new bed sites available

Anyone considering long-term Provincial care and require further information should contact Annette Fougere at 902-625-4236, or e-mail [fougeream@gov.ns.ca](mailto:fougeream@gov.ns.ca).

Mary Simms  
Member-at-Large

### **Voluntary Major Medical Insurance – Blue Sheet from Dalhousie University Regarding Blue Cross Coverage**

The Blue Cross Contract that was examined is the major contract that applies to all Dalhousie University personnel. Retirees are not covered for dental, pharmacy or travel. As retirees, our Employee Eligibility is designated as “Retired employees on pension”.

*Hospital Benefits in Canada.* This item on the blue sheet supplied by Dalhousie University, as it applies to retirees, is misleading. The key seems to be in the Blue Cross definition of the word “hospital”. In the Main Contract S-205 Appendix D – Covered Benefits, Section 2.0 – Definitions: Hospital, the list of exclusions defining a hospital is taken from the Main Contract as follows: “Hospital means an institution licensed and operating under any federal or provincial health or insurance act, with facilities to provide active in-patient treatment and care. The term ‘hospital’, as used in this policy, **shall not include a rehabilitation hospital, mental institution, rest home, nursing home, convalescent home, health spa or hotel, a place for custodial care, a home for the aged or an institution used primarily for treatment of a specific illness or disease**”.

It seems that Blue Cross coverage applies to treatment in a “general hospital” portion of the hospital complex only. For instance, if a patient is admitted to the QEII complex, that person is covered by Blue Cross so long as he/she remains in the general hospital section of the complex. If transferred to the Rehab, The Abby Lane, or the Brain Foundation for example, the patient is no longer covered by Blue Cross. In the above paragraph under exclusions, the definition states: **“an institution used primarily for treatment of a specific illness or disease”**. The patient may be transported to another building but even if there is a section within the same building that caters to a specific illness, the exclusion applies. We need to know if Palliative Care is covered.

*Page S-3.05 – 3.10 General Exclusions.* The following are benefit **exclusions** under this contract:

**(b) charges for rest cures, convalescent care, custodial care, rehabilitation services in a hospital for the chronically ill or a chronic care unit of a general hospital, or charges incurred by the Participant when, in the opinion of Blue Cross, proper treatment should be in a chronic care unit or institution for the chronically ill.**

The Main Contract indicates that there is some assistance for environmental illness, allergies, cessation of smoking (one time only up to \$200), alternative medicine and some prescriptions not covered by the Province. This assistance is unknown to retirees because it is not included in the Blue Sheet. Also omitted is the provision for financial assistance to defray nursing home care expenses, if required.



It is important that the information sheet/pamphlet should warn that before, or as soon as possible after any medical service is undertaken, **everything should be cleared with Blue Cross** and that each patient, upon hospital admission and when any change in service within a hospital complex is suggested, he/she should be accompanied by an advocate and have everything cleared with Blue Cross. It is unclear what the procedure is in an emergency situation or if the patient is incoherent or unconscious.

Much seems to hinge on prior agreement and contract definitions and the need for both is understood. However, the policy holders are entitled to an explicit package based on expanded information from the Blue Cross Main Contract.

Mary Simms  
Member-at-Large

And finally, this Newsletter provides you with a great amount of information on several subjects which are of great importance to all ADRP pensioners. This is one of the biggest Newsletters we have compiled and we hope you find it interesting and informative. We intend to get to you again in June. Happy Spring to all of you!

Emerson A. Moffitt, Editor  
Janice Scott, Associate Editor

The Editorial Board, under the ultimate direction of the ADRP Board, takes responsibility for the contents of the Newsletter. Signed contributions will take the form of short articles and letters to the Editor. These will represent the opinions of the author and need not represent the views of the ADRP. Anonymous material will not be considered for publication. The Editorial Board retains the right to edit or reject contributed material and to elicit similar and opposing views surrounding any issue raised.

**NOMINATION FORM FOR THE ELECTION OF OFFICERS AND DIRECTORS FOR 2007-2008.**

Name of Nominee \_\_\_\_\_

Name of Nominator \_\_\_\_\_

Position for which Nomination is made \_\_\_\_\_

Short Biography (optional) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

We, the above Nominee and Nominator, are Members of the ADRP and have paid the membership fee for 2007.

Signature of Nominee \_\_\_\_\_

Signature of Nominator \_\_\_\_\_

The elected officers and directors are President, Vice-Presidents, Secretary, Treasurer, Members-at-Large, Chairpersons of Standing Committees, (Benefits, Communications, Complaints, Liaison, Membership and Social).

Nominations, through the Nominating Committee, may be made for any of the above positions by Friday, March 30, 2007, either by surface mail to Bill Charles, Chairperson, ADRP Nominating Committee, ADRP Office, Room 2831, Life Sciences Building, Dalhousie University, Halifax, NS, B3H 4J1, or by Fax to (902)494-8341, or e-mail to ADRP@dal.ca. In the case of e-mailed nominations, a signed Nomination Form must be in the hands of the Committee Chairperson before the AGM begins on Thursday, April 26<sup>th</sup>, 2007.

Nominations may also be made prior to the commencement of the AGM.

**Association of Dalhousie Retirees and Pensioners  
General Meeting, Dec. 13, 2006**

DRAFT MINUTES

Location: Lord Dalhousie Room, Henry Hicks Building (former A&A)

Time: 2:30 pm

Members present: 37 members signed the attendance sheet

**1. Welcome**

At 2:35 pm, Vice-President and Secretary *pro tem*, Colin Stuttard, called the meeting to order. He advised the members that President Welch was currently meeting with Michael Roughneen (Dalhousie's Assistant VP, Personnel Services) and would be delayed for a few minutes but had asked that the meeting proceed without him. Members agreed that Mr. Stuttard would chair the meeting until President Welch arrived. On behalf of President Welch and the ADRP Board, Mr. Stuttard welcomed all members present.

**2. Approval of Agenda**

The agenda was approved as circulated.

- 3. Minutes of AGM, April 27, 2006**, were approved as circulated with minor amendments to be communicated by Mr. Stuttard. There was no business arising from the minutes, and members agreed to defer the next agenda item, President's Report, until Mr. Welch had arrived.

**4. Treasurer's Report**

Blanche Potter noted that Treasurer Bob Rodger was away down south, but had submitted his written report, which had been circulated with the agenda. Ms. Potter was prepared to respond to comments or questions regarding the Treasurer's report. Alan Andrews commented that if the Treasurer's "nest-egg" were to be insufficient to protect members' rights, then some increase in dues would be needed. However, he conceded that this was a hypothetical situation. Ms. Potter thanked Mr. Andrews for his observation.

## 5. **President's Report**

After apologizing for his delayed arrival, President Welch called for a minute of silence in memory of three deceased members: Leonard Kasdan, Ronald St John MacDonald, and James MacKinnon. He then referred to various aspects of his written report, which had been circulated previously in the autumn edition of the ADRP Newsletter. He noted that he was still awaiting a response from the University's senior administration regarding an ADRP nominee to the trustees of the Retirees Trust Fund, and was seeking a remedy for the pension indexation deficit.

Regarding future ADRP events, President Welch advertised a meeting, to be held on January 10, 2007, at which several speakers from the NS Department of Health would discuss the question of nursing home care. Invitees would include Mr. Michael Roughneen and a representative of Medavie Blue Cross. A subsequent meeting to discuss income tax concerns was being planned, but no date had yet been set. President Welch hoped that the Blue Cross problem regarding nursing home coverage could be remedied, and believed that employee groups, especially the Dalhousie Faculty Association (DFA), would have an interest in the outcome.

Finally, President Welch reported that responses to the recent ADRP questionnaire indicated that members were "a generous bunch" in comparison to Canadians in general. Of the latter, only one in five claimed charitable donations on their income tax returns and on average they donated \$250 per year, whereas 90% of ADRP responders were annual donors, with the median in the \$500-\$1000 range. Several had made donations to Dalhousie of more than \$1000. Some responders felt under-appreciated by the University.

## 6. **Committee Reports**

- a. **Benefits:** Before President Welch had arrived, Om Kamra reminded members that the estates of Dalhousie employees who had retired before 1998 were entitled to receive a life insurance of \$5000. He also noted that the existing Blue Cross coverage of nursing home expenses (to an annual maximum of \$28,000) was in jeopardy. It was not included on the "Blue Sheet" summary of benefits and, perhaps for that reason, no one ever seemed to have claimed it. Therefore, University Benefits Committee (UBC) may be inclined to delete this benefit. Unfortunately, the ADRP was not represented on the UBC, despite repeated lobbying to be given a voice on this important committee. A solution might lie in collective bargaining by employee groups on behalf of their retirees. Mr. Kamra observed that Blue Cross information for retirees could be found on the Internet.

Mary Simms raised the question of Blue Cross coverage for semi-private hospital care, and noted that this coverage extended only to **general treatment** areas of the hospital system. It did not apply to specialized areas such as rehabilitation. David Lewis commented that NS Teachers Union retirees' health benefits were paid at the set rate for nursing home care. Bill Charles wondered why the ADRP had no representative on the UBC, and Mr. Kamra responded "Yes" to Alan Andrews' query: "The [Dalhousie] Board of Governors makes the rules?" Mr. Andrews suggested a petition to the Board of Governors would be an appropriate action.

- b. **Communications:** Barbara Prime Walker described the Caring and Sharing subcommittee's Christmas Project in which potted plants (*Amaryllis*) were to be distributed to four members, food to one, and cards sent to nine.

## 7. **Complaints:** Gil Winham had received no complaints.

8. **Liaison:** In the absence of Alasdair Sinclair, Colin Stuttard reported that the committee was monitoring the glacial (pre-global warming) progress being made at several NS universities towards the formation of Retiree Associations, but none had yet actually materialised. In the meantime, Mr. Stuttard was liaising quite closely with the DFA as its Members prepared for collective bargaining to begin in the spring.
  
9. **Membership:** Blanche Potter reported that there were now 278 members after 10 had been deleted from the list because of prolonged non-payment of dues. She noted that members did not always pay dues at the prescribed time each year, and new members may join at any time. So the list was somewhat fluid.

In response to a question from Mr. Andrews regarding the ratio of NS/non-NS resident members, Ms. Potter estimated that perhaps 70% were maritime residents. Mr. Andrews was interested in locating ADRP members in Montreal, and wondered whether there could be reciprocal arrangements with other university retirees' associations. President Welch said he would investigate.

With respect to payment of dues, Ms. Potter clarified that past members who wished to rejoin the Association were never required to pay any back dues. President Welch added that a polite request for past dues might be reasonable, given the valuable information that the ADRP supplied to members, such as the Death Benefit insurance.

10. **Pension Committee:** Paul Huber referred to his report in the autumn Newsletter, and noted that the rolling three-year average rate of return on Pension Fund investments on June 30, 2006 was more than sufficient to give full current inflation indexation of about 2.5% for most pensions on January 1, 2007. Also, next year's prospects were favourable – the first quarter of the current financial year (July 1 –September 30) showed an increase of 7%, so next June's 3-yr rolling average will probably be adequate to allow full current indexation in January, 2008.

Bill Charles asked whether this indexation meant that the Board of Governors was relenting in its position, given that the Pension Plan in total still showed a slight deficit. Mr. Huber's answer was "No." Any catch-up payments to reduce the cumulative 6.8% indexation shortfall for longer-term pensioners depended on discretionary indexation being recommended by the trustees. Bryan Mason (VP Finance and Administration) was insisting that all Pension Plan funds – PTF and RTF combined – must be in surplus before discretionary indexation could be implemented. Mr. Huber could not speculate as to when this would be, although he expected that next June 30 would see the total pension funds in surplus. However, he did not know

whether the trustees would see fit to approve extra indexation; he had seen discouraging indications from trustees in the past two years.

David Lewis mused that the Treasurer's hint of a possible need for funds to protect members' interests might be connected with the issue of pension indexation. Mr. Huber suggested that retirees, disgruntled at the absence of catch-up indexation, might be less inclined to donate to Dalhousie.

- g. Social Committee:** Sid Sodhi reported that some 10 to 40 members attended various social events since the last general meeting, and a smaller gathering in the Earl of Dalhousie pub followed most events. Future events being arranged included the nursing home discussion on January 10; a session on taxes in February; and possible sessions on alternative health measures in March, and post-secondary education in April or May.

## 11. Other Business

- a. CURAC:** Since Alasdair Sinclair was not present, President Welch reminded members that the next annual meeting of CURAC would be held in Windsor, Ontario, on May 24 and 25, 2007. He noted that CURAC was a useful body, characterized by its members' enthusiasm for helping their former employers, although this was rather blunted at Dalhousie because of the pension situation. However, the ADRP questionnaire had shown some support for the possibility of an ADRP scholarship fund. CURAC contacts had provided information about facilities enjoyed by retirees' associations, and their costs, at other Canadian universities: thirteen associations had university office space at no cost, whereas the ADRP was paying more than \$800 annually in insurance costs to use a very small, windowless "office" in the LSC. Pointing out this contrast might spur the Dalhousie Administration to change its policy. Mr. Kamra hoped it would not result in CURAC members being charged for space at other universities. Mr. Welch noted that some universities also make contributions to retirees' health care costs, but their administrators are not always fully aware of these arrangements.

Mr. Huber recalled that ADRP's insurance payments were made directly to the insurer, not to Dalhousie; and that Dalhousie, together with a group of other universities, is a self-insurer. He wondered whether universities not requiring their retiree associations to pay for insurance were also members of the self-insuring group. Mr. Welch did not have the answer to that question.

Mr. Sodhi wondered how relations between the ADRP and the University administration could be improved in future. Mr. Welch planned to invite the new VP External, Floyd Dykeman, to an ADRP Board meeting where members would be able to express their concerns, and remind him of possible deleterious effects on bequests and donations from pensioners.

- b. Seniors' College of Nova Scotia:** Blanche Potter referred to the draft proposal included with the agenda of this meeting, and to the report of the UPEI experience given by Ivan Dowling at the CURAC conference held at Dalhousie last spring. She believed that the ADRP had the potential to establish a seniors' college in Nova Scotia. The college would have to be self-sufficient, and classes would be for interest, not for credit. Sid Sodhi already had an informal agreement for free accommodation with ample parking for people to attend classes at Sobey's in Clayton Park every Thursday, if needed, throughout 2007. And the store would provide free tea and coffee. He added that the PEI model had begun with 20 – 30 members paying a single annual fee of \$125 which entitled them to attend any number of the classes being offered. The PEI college began in Charlottetown and had now spread to Summerside and elsewhere, with a membership of about 400.

President Welch asked that anyone interested in giving a class please contact Sid Sodhi, Blanche Potter, or Bob Rodger. He also suggested that this subcommittee needed to talk with people at Mount St. Vincent and others at Dalhousie regarding classes for seniors. John Farley offered a self-described cynical comment that a great community need was for ESL

classes. President Welch responded that ESL and adult literacy instructors needed special skills. Mr. Farley said those could be learned. Ms Potter agreed that the community had some specific needs, but retirees had much to offer and much to learn.

President Welch concluded the meeting with a final **point of information**: As of January 2007, Dalhousie's Personnel Services would no longer issue paper notices of direct deposits, and the occasional information previously disseminated with these notices, such as notifications of changes to Blue Cross programs, would then be available only via the internet (or direct contact with Medavie Blue Cross). Mr. Kamra again emphasised that personal information was available at Dalhousie's "My Dal" web portal, which gave confidential access by using Dal ID numbers and passwords.

Mr. Stuttard moved adjournment at 15:55 h