

# BCCPA 2025 Member Engagement

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## **Executive Summary**

The BC Care Providers Association (BCCPA) contracted Howegroup to conduct a membership survey. The survey was launched via direct link to an online survey platform on January 20, 2025, and remained open until February 14, 2025. It targeted operator and service provider and commercial members; associate members did not participate.

#### Operator and service provider member findings

The survey had a strong response rate and distribution across the sector. One hundred fifty-five (155) operator and service providers responded to the member survey; 61% reported providing long-term care, 38% assisted living, 35% independent living, 24% home health services, and 7% other services (noting respondents could select more than one option). Most respondents were executive directors (19%), general managers (19%), executive leadership (18%), or operators/owners (17%). Approximately one-third were not-for-profit, and two-thirds indicated for-profit. Half (52%) of respondents had locations in the Fraser Health Region, followed by Vancouver Coastal (35%), Vancouver Island (30%), Interior (21%), and the North (8%). When asked how long their organization/site had been a member of BCCPA, 9% said less than 1 year, 11% said 2-3 years, 19% said 4-9 years, 37% said 10+ years, and 24% were not sure.

Overall, operator and service provider members are satisfied with the association, which is commendable given the transition through the amalgamation with the BC Seniors Living Association (BCSLA). The majority of operator and service providers agree or strongly agree that BCCPA has a clear vision and strategy (78%), is a recognized voice for senior's living, wellness, and care in BC (88%), influences the provincial government on decisions that affect the sector (70%), does a good job serving and representing its members (78%), and is the go-to support when it comes to issues facing the sector (65%). When asked about overall satisfaction with their BCCPA membership, 88% of respondents felt satisfied or very satisfied, 8% were neutral, 2% were dissatisfied, and 2% were unsure. These findings are similar to those from 2021 and 2022. While overall satisfaction with BCCPA membership was rated highly across all service providers, home health indicated lower satisfaction than the others.

When asked about the likelihood of recommending the association to a colleague, on a scale of one to ten, operator and service providers (n=103) provided an average score of 8 for BCCPA (the same rating as in 2022 and 2021). Operator and service provider members gave the association a combined Net Promoter Score (a loyalty measurement) of 32.04, with assisted living rating the highest at 47.06 and home health the lowest at 29.63.

When asked to rate their satisfaction with the key BCCPA events, the order of preference is the annual conference (61% were satisfied with this event), Care to Chat (57%), networking events (57%), BC Care Awards (54%), Lunch and Webinars (53%), and the AGM (43%). These results have remained consistent year-over-year. Thirty-five percent of respondents would like BCCPA to host a second conference for independent living and private pay operators, 18% would not, and 47% aren't sure or would not find this applicable (noting the association has provided tailored content at the Annual Conference for private pay members since 2024).

Respondents rated their satisfaction with BCCPA programs and initiatives: EquipCare BC received high satisfaction ratings (68% were very satisfied or satisfied). While results year over year were consistent, the Energy Savings Program has shown an increase in satisfaction, while Route65.ca has shown variable satisfaction. Home health respondents indicated substantially lower satisfaction with all programs other than Route65.ca and higher satisfaction than other providers with Route65.ca.

Sixty-five percent of respondents indicated they have listings on the Route65.ca website. When asked about the value of Route65.ca to their organization, 13% of respondents with listings indicated that Route65.ca is very valuable, 55% said it is somewhat valuable, 19% said it is not valuable, and 14% were unsure. Only 8% of 120 respondents felt Route65.ca was very well promoted and well known, while 47% indicated promotion was 'okay.'

Of survey respondents who were Assurity certified, 94% think Assurity is very or somewhat valuable to their organization. The responses regarding the benefits of Assurity certification were generally lukewarm. Most noted that Assurity does not offer significant advantages unless actively promoted. Some mention using the certification in their marketing efforts but believe more could be done to raise public awareness. Of survey respondents designated with Seal of Approval (n=21), 95% think Seal of Approval is very or somewhat valuable to their organization, and only 5% do not. Independent living, assisted living, and home health providers (n=75) were asked for their agreement with BCCPA's proposal to continue using Assurity for home health and Seal of Approval for independent living and assisted living. Of the 75 respondents, half (51%) agreed or strongly agreed with this proposal.

While respondents rated all key communication channels as useful, the association e-newsletter (sector updates), targeted (direct) email communication from BCCPA, and the website were the most useful. These were followed by networking events and Tuesdays with Terry. While social media was seen as the least useful overall, LinkedIn continues to be the preferred social media channel, noting a decreasing trend in the usefulness of all social media channels over the years.

Respondents access the M365 portal monthly (26%) or a couple of times a year (34%). The remaining 34% have never used the portal. Of those who do access the M365 portal, the majority use it to register for events (84%) and access member-exclusive resources/documents (60%). The majority of those respondents using the M365 portal are satisfied/very satisfied with its ease of use (77%), visual appearance (68%), and value as a resource (80%).

The majority of respondents were satisfied with BCCPA's advocacy role in HHR issues, including labour shortages and agency staffing issues (68%), quality-of-life issues (67%), political legislative and policy events impacting the sector (62%) and environmental/climate events impacting the sector (57%). Respondents were less satisfied with BCCPA's advocacy role in seniors housing issues (e.g., RTA, municipal zoning, tax credits), the long-term care funding model review, and in-home health issues (e.g., municipal business licenses, surge contracts, tax credits, etc.).

Respondents were asked to select the top areas they think BCCPA should prioritize in its advocacy. In order of priority, they are staffing issues: lack of staff, lack of training, burnout/low morale (80%); adequate funding for the sector, including HPRD (73%); ageing infrastructure and lack of capital funding/support (60%).

Respondents were asked how important they think it is for BCCPA to prioritize a new job-matching initiative over the next 5 years, in which they would help connect employers with relevant organizations and resources to address recruitment and retention challenges. Just over half (54%) of respondents think this initiative is very important, 32% feel it is moderately important, and 10% do not think it is important.

The majority of respondents are satisfied or very satisfied with how well BCCPA represents their organizations' interests in:

- The Ministry of Health (73%), which is a slight decline compared to 2021/2022.
- The media (66%), which has fluctuated over time, likely due to the response to COVID.
- The Seniors Advocate (63%), which is an increase from previous years.

- Health Authorities (62%), which is similar to previous years.
- The general public (57%).

Only one-third (36%) of respondents are satisfied or very satisfied with how well BCCPA represents their organization's interests to unions/labour organizations.

#### Commercial member findings

Thirty-eight commercial members responded to the survey. Most respondents represented sales and marketing (42%), owners (21%), and executive leadership. Results were positive surrounding value for membership (72% strongly agree/agree), the benefit that BCCPA represents the entire seniors living, wellness and care sector (94% strongly agree/agree), and customer service (96% strongly agree/agree), with notable improvements regarding value for membership and sector representation from 2022 to the present. Overall, commercial members are satisfied with BCCPA (83% are very satisfied or satisfied). A Net Promoter Score of 46.43 indicates a strong, positive relationship with commercial members and suggests high customer satisfaction and loyalty.

Commercial members rated the annual conference, Care to Chat, and networking events of the highest importance. When asked if a second conference geared toward independent living and private pay operators would be desirable, nearly half (47%) reported yes, 19% said no, and the remaining one-third (34%) weren't sure or didn't find this applicable. Concerning benefits of membership, Commercial members most highly rated exhibiting at the annual conference (77%), and attending networking events (67%), followed by member directory access (53%). Most commercial members access M365 to register for events, access member-exclusive resources/documents and search the member directory. Overall, commercial members that use M365 find the portal valuable as a resource and find it visually appealing and easy to use.

#### Association name | all members

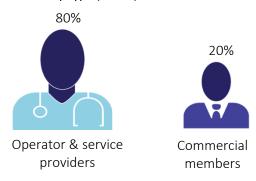
The amalgamation of BCSLA into BCCPA has sparked an interest in a new name for the organization. When asked whether BCCPA should keep the association name or consider a change, all members combined favoured keeping the existing name (49% agreed) or shifting to BC Seniors Living and Care Association (26%). Independent Living demonstrated lower levels of agreement with keeping the name as-is (28%) and similar numbers for support for BC Seniors Living and Care Association

## Introduction

The BC Care Providers Association (BCCPA) contracted Howegroup to conduct a survey of membership. The survey was designed in consultation with BCCPA staff and the Membership Services and Engagement Committee (MSEC) to provide comparison to previous iterations of the survey while reflecting changes in the organisation, most notably amalgamation with the BC Seniors Living Association (BCSLA). The survey was launched via direct link to an online survey platform on January 20, 2025, and remained open until February 14, 2025. As an incentive, respondents were given the opportunity to provide an email address to be entered for one free conference registration or one of 20 \$50 VISA gift cards. The survey targeted operator and service provider and commercial members; associate members did not participate in the survey.

A total of 193 members responded to the 2025 survey: 155 operator and service providers (80%) and 38 commercial members (20%) (Figure 1). Nine associate members (i.e. those who support/complement that of BCCPA in seniors care) and 10 non-BCCPA members started the survey but were redirected to an end-of-survey page. While the sample size increased this year the percentage of operator and service providers versus commercial members remains consistent with previous years. In 2022, there were 83 respondents (80% operator and service providers and 20% commercial) and in 2021 there were 131 respondents (79% operator and service providers and 21% commercial members.

Figure 1. Membership type (n=193)



#### Limitations

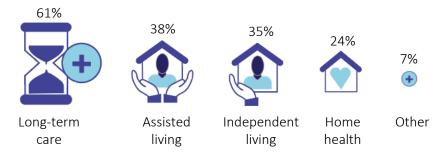
As some respondents indicated multiple service types (i.e., long-term care, assisted living,) it is not always possible to distinctly associate a response with a service type. As well, in some instances the sample size of home health providers as compared with other operators/providers is smaller, particularly when breaking down all response options by provider types (noted in the tables).

## **Operator and Service Provider Findings**

### About the respondents

One hundred fifty-five operator and service providers responded to the member survey. Members were asked to select all service types they provide; sixty-one percent reported providing long-term care (n=94), 38% assisted living (n=59), 35% independent living (n=55), 24% home health services (n=37), and 7% other services (n=11) (Figure 2). Services in the "other" category include end-of-life care, hospice care, community health care, rental housing, adult day programs, and aging in place living.

Figure 2. Services offered (n=155)



Most respondents (n=155) were executive directors (19%), general managers (19%), in executive leadership (C-Suite, VP, etc.) (18%), or operators/owners (17%). Additional respondents included directors of care (9%), directors of operations (6%), administrators (5%) those in sales and marketing (1%), and other (remaining 6%) (Figure 3). Roles in the "other" category include nurse managers, assistant directors of care, directors of programs, directors of finance, and site leaders. Approximately one third (30%) were not-for profit and 70% indicated for-profit (Figure 4).

Figure 3. Respondents' role (n=155)

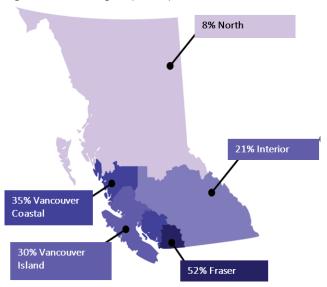


Figure 4. Not-for-profit status (n=155)



Fifty-two percent of respondents (n=155) had locations in the Fraser Health Region, followed by Vancouver Coastal (35%), Vancouver Island (30%), Interior (21%), and North (8%), noting respondents could select multiple regions (Figure 5).

Figure 5. Health region (n=155)



Nearly three quarters (72%) of organization are accredited (Figure 6). Of those, 74% were accredited with Accreditation Canada, 14% with CARF, 1% with both Accreditation Canada and CARF, and 11% said other. Other accreditation bodies included Assurity, Natural Health Practitioners of Canada, Imagine Canada, International Organization for Standardization (IOS), and Seal of Approval. Of those that reported not being accredited, two respondents indicated their organization is in the process of obtaining accreditation with CARF (Figure 7). See Table 1 for a breakdown of accreditation by service type.

Figure 6. Accredited operators/service providers (n=155)

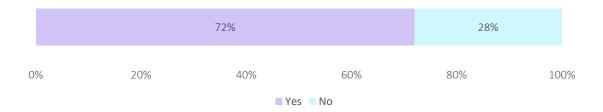


Figure 7. Accreditation body (n=111)

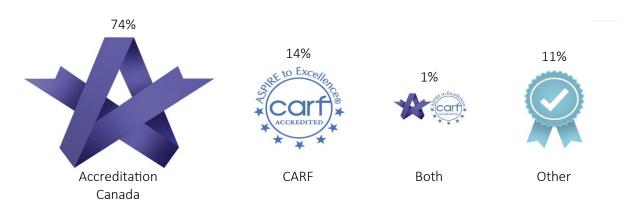


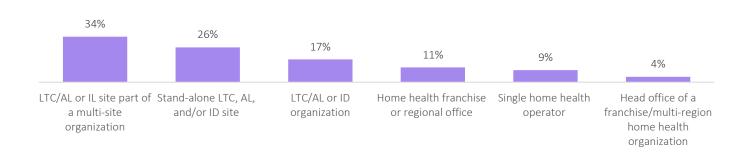
Table 1. Accreditation by service type (n=155)

			Accreditation		
Service type	Yes, with Accreditation Canada	Yes, with CARF	Yes, with Accreditation Canada and CARF	No	Other
Long-term care (n=94)	70%	10%	1%	1%	2%
Assisted living (n=59)	52%	17%	2%	22%	7%
Independent living (n=55)	55%	11%	2%	25%	7%
Home health (n=37)	38%	5%	0%	25%	22%
Other (n=11)	55%	0%	0%	4%	0%

One third (34%) were responding on behalf of a long-term care/assisted living or independent living site part of a multi-site organization; one quarter (26%) were representing a stand-alone long-term care, assisted living, and/or independent living site (including campus of care). Seventeen percent (17%) were responding on behalf of the head office of a long-term care/assisted living or independent living organization. The remaining respondents were representing a home health franchise or regional office (11%), a single home health operator (9%), or the head office of a franchise/multi-region home health organization (4%) (Figure 8).

Those responding on behalf of a long-term care/assisted living or independent living site part of a multi-site organization were asked how many sites their organization has, to which there were a range in responses from 2 to 160, with the most frequent answer being 40 sites. Those representing a head office of a long-term care/assisted living or independent living organization also had a large range of responses from 2 to 200 sites, with the most frequent answer being 5 sites.

Figure 8. Type of organization (n=155)



When asked how long their organization/site has been a member of BCCPA, 9% said less than 1 year, 11% said 2-3 years, 19% said 4-9 years, 37% said 10+ years, and 24% were not sure (n-154) (Figure 9). See Table 2 for a breakdown of BCCPA membership duration by service type.

Figure 9. BCCPA membership duration (n=154)



Table 2. BCCPA membership duration by service type (n=154)

		Duration of BCCPA membership											
Service type	Less than 1 year	2-3 years	4-9 years	10+ years	I don't know								
Long-term care													
(n=94)	1%	9%	17%	46%	28%								
Assisted living													
(n=58)	5%	10%	16%	43%	26%								
Independent living (n=54)	11%	9%	11%	37%	31%								
Home health													
(n=36)	17%	17%	22%	31%	14%								
Other (n=11)													
	18%	9%	9%	55%	9%								

### Overall value and satisfaction

The majority of operator and service providers agree or strongly agree that BCCPA has a clear vision and strategy (78%), is a recognized voice for senior's living, wellness, and care in BC (88%), influences the provincial government on decisions that affect the sector (70%), does a good job serving and representing its members (78%), and is the go-to support when it comes to issues facing the sector (65%). These findings are similar to those reported in 2022 and 2021 (Figure 10). The findings show consistent results year over year about having a clear strategy, being the recognized voice, influencing the provincial government, and serving and representing its members. There has been a slight decline in being the go-to for resources, and an increase in effectively advocating in my region.

Looking between service providers, home health respondents rated value by service type lower than all other groups (clear vision, recognized voice, influences government, serving members, advocating in my region, and go-to for support). See Table 3 for a breakdown of the members' opinions on the value of BCCPA by service type.

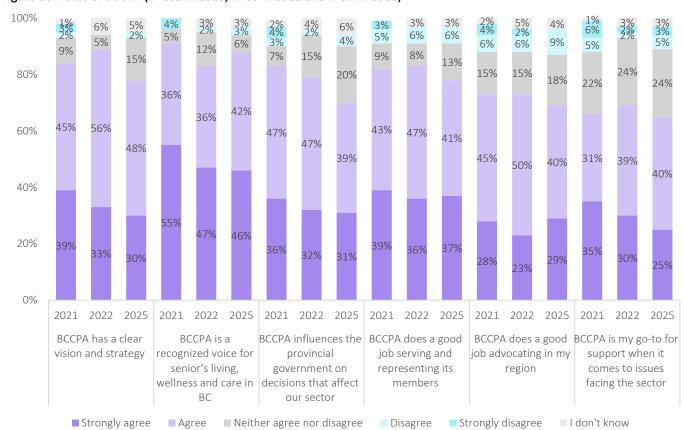


Figure 10. Value of BCCPA (n=102 in 2025, n=66 in 2022 and n=97 in 2021)

Table 3. Value of BCCPA by service type (n=102)

										BCC	PA influenc	es the provir	ncial	
					BCCPA is a recognized voice for					government on decisions that affect				
	ВССРА	has a cleai	r vision and s	trategy	senior's living, wellness and care in BC					out sector				
				N/A,				N/A,					N/A,	
				don't				don't					don't	
	Agree	Neutral	Disagree	know	Agree	Neutral	Disagree	know		Agree	Neutral	Disagree	know	
LTC														
(n=62)	87%	13%	0%	0%	87%	13%	0%	0%		82%	15%	2%	2%	
AL														
(n=34)	85%	15%	0%	0%	85%	15%	0%	0%		88%	9%	0%	3%	
IL														
(n=31)	84%	13%	3%	0%	84%	11%	4%	19%		80%	19%	0%	0%	
НН														
(n=27)	66%	11%	4%	19%%	73%	7%	7%	11%		48%	26%	11%	15%	
Other														
(n=9)	89%	11%	0%	0%	89%	0%	0%	11%		55%	22%	11%	11%	

		BCCPA does a good job serving and representing its members					BCCPA does a good job advocating in					BCCPA is my go-to for support when it				
	r	epresentin	g its membei	rs			my region					es to issues	facing the s	ector		
				N/A,					N/A,					N/A,		
				don't					don't					don't		
	Agree	Neutral	Disagree	know		Agree	Neutral	Disagree	know		Agree	Neutral	Disagree	know		
LTC																
(n=62)	90%	3%	7%	0%		82%	11%	5%	2%		73%	18%	7%	3%		
AL																
(n=34)	87%	9%	3%	0%		82%	6%	9%	3%		82%	12%	0%	33%		
IL																
(n=31)	83%	13%	3%	0%		80%	13%	3%	3%		77%	19%	3%	0%		
НН																
(n=27)	63%	19%	7%	11%		49%	26%	15%	11%		59%	26%	11%	4%		
Other																
(n=9)	66%	0%	22%	11%		78%	0%	11%	11%		89%	0%	11%	0%		

When operator and service members were asked if they felt they had an influence on the direction and priorities of BCCPA, 38% of respondents agreed or strongly agreed, 45% felt neutral, 10% disagreed or strongly disagreed, and 7% were unsure. Compared to previous years, this shows a decrease in a sense of influence; 64% and 63% of members agreed or strongly agreed that they felt they had influence in 2021 and 2022, respectively. The majority of members agree or strongly agree that BCCPA's position on issues related to the sector are aligned with their organization (69%). The majority also agree or strongly agree that BCPPA provides support to their organization in a way that is relevant to their needs (66%) and listens to the voices of their organization (65%). Eighty-two percent of members agree or strongly agree that BCCPA staff are accessible, and 84% agree or strongly agree that BCCPA is responsive (Figure 11). The findings demonstrate consistent results over the past three iterations of the survey.

Home health respondents had lower agreement than other service providers regarding their position on issues being aligned with their organization and BCCPA providing support in a way that is relevant. See Table 4 for a breakdown of the members' opinions on BCCPA by service type.

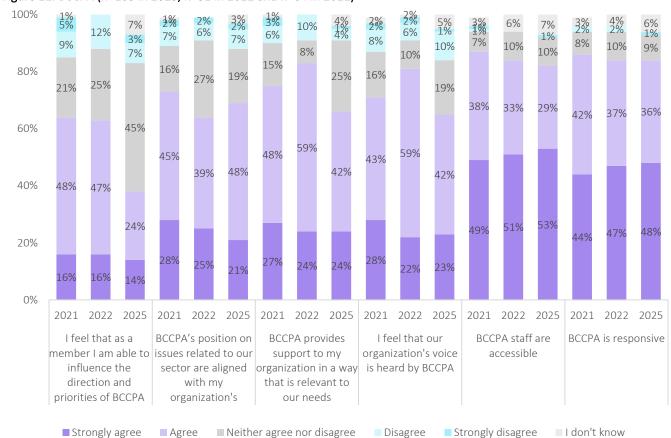


Figure 11. BCCPA (n=103 in 2025, n=51 in 2022 and n=64 in 2021)

Table 4. BCCPA by service type (n=103)

					I	BCCPA's position on issues related to our sector are aligned with my organization's					CCPA provides support to my nization in a way that is relevant to our needs			
Agree	Neutral	Disagree	N/A, don't know		Agree	Neutral	Disagree	N/A, don't know		Agree	Neutral	Disagree	N/A, don't know	
44%	27%	10%	2%		78%	14%	5%	4%		77%	19%	2%	3%	
46%	44%	3%	6%		79%	18%	0%	3%		82%	12%	3%	3%	
47%	41%	6%	6%		78%	19%	3%	0%		75%	22%	3%	0%	
41%	41%	12%	7%		56%	26%	14%	4%		52%	37%	7%	4%	
22%	33%	33%	11%		67%	11%	22%	0%		78%	22%	0%	0%	
	44% 46% 47% 41%	44% 27% 46% 44% 47% 41% 41% 41%	44%     27%     10%       46%     44%     3%       47%     41%     6%       41%     41%     12%	44%     27%     10%     2%       46%     44%     3%     6%       47%     41%     6%     6%       41%     41%     12%     7%	44%     27%     10%     2%       46%     44%     3%     6%       47%     41%     6%     6%       41%     41%     12%     7%	44%     27%     10%     2%     78%       46%     44%     3%     6%     79%       47%     41%     6%     6%     78%       41%     41%     12%     7%     56%	44%     27%     10%     2%     78%     14%       46%     44%     3%     6%     79%     18%       47%     41%     6%     6%     78%     19%       41%     41%     12%     7%     56%     26%	44%     27%     10%     2%     78%     14%     5%       46%     44%     3%     6%     79%     18%     0%       47%     41%     6%     6%     78%     19%     3%       41%     41%     12%     7%     56%     26%     14%	44%     27%     10%     2%     78%     14%     5%     4%       46%     44%     3%     6%     79%     18%     0%     3%       47%     41%     6%     6%     78%     19%     3%     0%       41%     41%     12%     7%     56%     26%     14%     4%	44%     27%     10%     2%     78%     14%     5%     4%       46%     44%     3%     6%     79%     18%     0%     3%       47%     41%     6%     6%     78%     19%     3%     0%       41%     41%     12%     7%     56%     26%     14%     4%	44%         27%         10%         2%         78%         14%         5%         4%         77%           46%         44%         3%         6%         79%         18%         0%         3%         82%           47%         41%         6%         6%         78%         19%         3%         0%         75%           41%         41%         12%         7%         56%         26%         14%         4%         52%	44%         27%         10%         2%         78%         14%         5%         4%         77%         19%           46%         44%         3%         6%         79%         18%         0%         3%         82%         12%           47%         41%         6%         6%         78%         19%         3%         0%         75%         22%           41%         41%         12%         7%         56%         26%         14%         4%         52%         37%	44%         27%         10%         2%         78%         14%         5%         4%         77%         19%         2%           46%         44%         3%         6%         79%         18%         0%         3%         82%         12%         3%           47%         41%         6%         6%         78%         19%         3%         0%         75%         22%         3%           41%         41%         12%         7%         56%         26%         14%         4%         52%         37%         7%	

	I feel that our organization's voice is												
		heard b	by BCCPA			В	CPPA staff	are accessib	le		BCCPA is	responsive	
				N/A,					N/A,				N/A,
				don't					don't				don't
	Agree	Neutral	Disagree	know		Agree	Neutral	Disagree	know	Agree	Neutral	Disagree	know
LTC													
(n=63)	77%	10%	8%	5%		88%	8%	0%	5%	90%	6%	0%	3%
AL													
(n=34)	82%	9%	6%	3%		88%	6%	0%	6%	85%	9%	0%	6%
IL													
(n=32)	75%	19%	6%	0%		85%	13%	0%	3%	84%	13%	0%	3%
НН													
(n=27)	52%	30%	11%	7%		85%	7%	4%	4%	89%	4%	4%	4%
Other													
(n=9)	55%	22%	22%	0%		89%	11%	0%	0%	89%	11%	0%	0%

When asked about the benefits and value of BCCPA, the majority of respondents agreed or strongly agreed that they receive good value for their BCCPA membership (76%) and that it is a benefit to their organization to have BCCPA representing the entire seniors living, wellness, and care sector (80%). This agreement is similar to the survey reports previous years with increased agreement in the benefit of representing the entire sector. Further, 85% of members agree or strongly agree that they are satisfied with the overall customer service support from member services (Figure 12). Between service providers, home health respondents had lower agreement with receiving good value, and it being benefit to their organization that BCCPA represents the entire sector. See Table 5 for a breakdown of the members' opinions on the benefits and value of BCCPA by service type.

Figure 12. Benefits and value (n=103 in 2025, n= 50 in 2022 an n=85 in 2021)

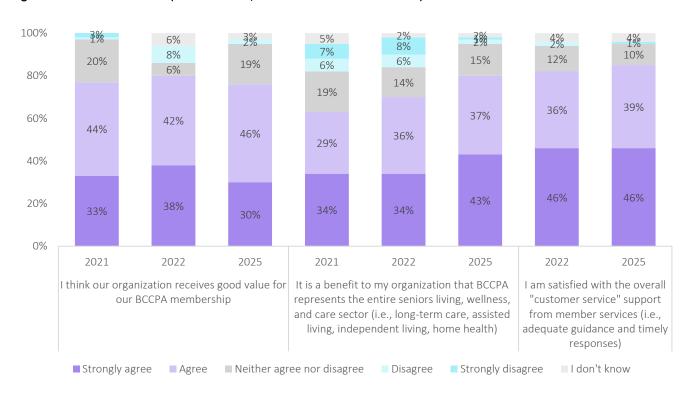


Table 5. Benefits and value (n=103)

		I think our organization receives good value for our BCCPA membership					It is a benefit to my organization that BCCPA represents the entire seniors living, wellness, and care sector					I am satisfied with the overall "customer service" support from member services			
				N/A, don't					N/A, don't					N/A, don't	
	Agree	Neutral	Disagree	know		Agree	Neutral	Disagree	know		Agree	Neutral	Disagree	know	
LTC (n=63)	84%	13%	2%	2%		84%	13%	2%	2%		92%	6%	0%	2%	
AL (n=34)	85%	9%	3%	3%		85%	9%	3%	3%		94%	3%	0%	3%	
IL (n=32)	75%	22%	3%	0%		75%	22%	3%	0%		84%	13%	0%	3%	
HH (n=27)	63%	30%	4%	4%		63%	30%	4%	4%		81%	11%	4%	4%	
Other (n=9)	66%	33%	0%	0%		66%	33%	0%	0%		100%	0%	0%	0%	

When asked about overall satisfaction with their BCCPA membership, 88% of respondents felt satisfied or very satisfied, 8% were neutral, 2% were dissatisfied, and 2% were unsure. These findings are similar to those recorded in 2021 and 2022 (Figure 13). While overall satisfaction with BCCPA membership was rated highly across all service providers, home health indicated lower satisfaction than the others. See Table 6 for a breakdown of overall satisfaction with BCCPA by service type.

Figure 13. Overall Satisfaction with BCCPA membership (n=103 in 2025, n=60 in 2022 and n=85 in 2021)

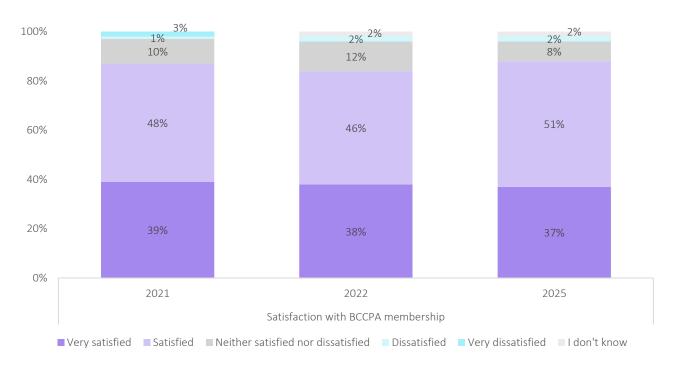


Table 6. Overall satisfaction with BCCPA membership by service type (n=103)

	Overall, how satisfied are you with your BCCPA membership?													
Service type	Satisfied	Neutral	Dissatisfied	I don't know										
Long-term care (n=63)	93%	5%	2%	0%										
Assisted living (n=34)	91%	6%	0%	3%										
Independent living (n=32)	91%	9%	0%	0%										
Home health (n=27)	81%	11%	4%	4%										
Other (n=9)	88%	0%	0%	11%										

When asked what actions BCCPA could take to improve their organizations' level of satisfaction with the Association, the following themes were noted:

**Balance:** Having a more balanced focus for all areas of care, rather than such a large emphasis on long-term care. In particular, members wish for more support and focus on:

- Home health
- Assisted and independent living
- Private businesses
- Northern health (more involvement with assisted living in rural communities)

#### Communication & events:

- Having more tailored communication
- Having roundtable events and annual conferences that are streamlined to specific care providers (e.g. independent living only) and/or roles (e.g. CEOS, Boards, governance, etc.)
- Including education on what frameworks optimize care outcomes at annual conferences
- Providing workshops/events in the interior (e.g. Kamloops)

#### **Advocacy** in the areas of:

- Funding
- More job opportunities and training programs
- The streamlining of credential recognition
- More input into government policy
- Non-profit issues specifically
- The Residential Tenancy Act

#### **Transparency -** providing more information regarding:

- The progress made on influencing government policy
- The actions, discussions, and next steps surrounding priorities
- The work being done in the senior sector to improve public perception

**Standardization:** Encouraging the Ministry of Health to complete and publish the Personal Assistant Guidelines for health authorities and crown corporations to follow

#### Funding:

- Continuing to spearhead the development of a fair funding formula
- Keeping membership fees reasonable
- Addressing wages in healthcare

"I would like to see more involvement with assisted living in Northern Health. I think that there is too much of a grey area when it comes to needing more help with timelines for residents." — General Manager, Assisted Living

"I know that BC Care Providers is working behind the scenes to influence government policy. The only issue is that you don't hear about the progress being made and what decisions BC Care Providers have influenced."

Executive Director, Long-term Care

"I love the health and safety resources you provide; they have helped us so much as we build our health and safety program to the level we want. Additional marketing opportunities would also be helpful."

- Director of Care, Home Health

Ninety-five percent (95%) of respondents feel that BCCPA is performing positively in its aspiration to be the premier association representing senior's living, wellness, and care. Five percent feel BCCPA is performing fair (Figure 14). While results across service providers was consistently positive, home health respondents gave a higher proportion of 'fair' ratings. See Table 7 for a breakdown of how respondents feel BCCPA is performing by service type.

When asked for any additional comments regarding how well BCCPA is performing in this aspiration, respondents indicated a great deal of appreciation for the team and advocacy work to keep the sector strong. There were a few comments around the need to better represent the entire sector.

"Thank you for continuing to support all long-term, independent, and assisted living homes. Your ongoing support and advocacy keep us going strong. You are an amazing team, and your dedication is truly appreciated!"

— Executive Director, Campus of Care

"BCCPA is not yet reflecting the IL/AL sector as a 'premier organization' but has strong roots and performance in care." — Executive Leadership, Campus of Care

Figure 14. How BCCPA is performing in its aspiration to be the premier association representing senior's living, wellness, and care (n=102)

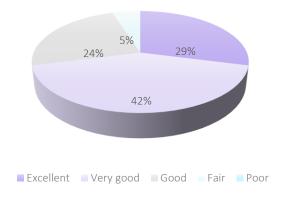


Table 7. How BCCPA is performing in its aspiration to be the premier association representing senior's living, wellness, and care by service type (n=102)

	How well is BCC	PA performing in epresenting sen	•	•	r association							
Service type Excellent Very good Good Fair Poor												
Long-term care (n=63)	32%	41%	24%	3%	0%							
Assisted living (n=34)	38%	38%	21%	3%	0%							
Independent living (n=32)	41%	35%	22%	3%	0%							
Home health (n=26)	42%	31%	15%	12%	0%							
Other (n=9)	22%	56%	22%	0%	0%							

#### Likelihood to recommend

When asked about the likelihood to recommend the association to a colleague, on a scale of one to ten, operator and service providers (n=103) provided an average score of 8 for BCCPA (same rating in 2022 and 2021).

#### Net Promoter Score

The Net Promoter Score (NPS) is a crucial metric for gauging overall customer satisfaction and loyalty. It is calculated by subtracting the percentage of detractors (those who rate their likelihood to recommend a service or product as 0-6) from the percentage of promoters (those who rate it 9-10). A positive NPS indicates a strong, positive relationship with stakeholders, while a negative score suggests areas needing improvement. Relational NPS may be deployed periodically (i.e., annually) to get a pulse on how members feel about the association, the health of member relationships, and as a benchmark for company success. Generally, NPS above 0 is 'good', above 20 is 'favourable', above 50 is 'excellent', and above 80 is 'world-class'.

Half (49%) of respondents were promoters of BCCPA, one third (35%) were passive and 17% were detractors, for an overall NPS score is with a NPS of 32 (Figure 15). See Table 8 for a breakdown of NPS by service type.

Figure 15. Net promoter score for the likelihood of recommending the association to a colleague (n=103)



Table 8. Net promoter score for the likelihood of recommending the association to a colleague by service type (n=103)

Service type	Net promoter score
Long-term care (n=63)	36.51
Assisted living (n=34)	47.06
Independent living (n=32)	46.88
Home health (n=27)	29.63
Long-term care, assisted living, & independent living (n=81)	34.57
Other (n=9)	33.33

#### **Events**

When asked to rate their satisfaction with the key BCCPA events, the order of preference is the annual conference (61% agreed or strongly agreed that they were satisfied with this event), Care to Chat (57%), networking events (57%), BC Care Awards (54%), Lunch and Webinars (53%), and the AGM (43%) (Figure 16). While there has been fairly consistent satisfaction with the annual conference (68% in 2021, 59% in 2022, 61% in 2025) there has been variation in the satisfaction with events over time:

- An increase in satisfaction with roundtables from 2022 (44%) to 2025 (57%)
- Slight decrease in satisfaction with Lunch and Learn Webinars: 73% in 2021, 59% in 2022, 53% in 2025
- A decrease in satisfaction with Care to Chat after 2021(73%); consistent from 2022 (58%) and 2025 (57%)
- Fluctuating satisfaction with BC Care Awards: 48% in 2021, 58% in 2022, and 54% in 2025
- Decrease in satisfaction with the AGM after 2021 (62%); consistent from 2022 (44%) and 2025 (43%)

Reflecting on satisfaction with events, long-term care and assisted living had consistent findings, with independent living being slightly lower. Home health respondents indicated lower satisfaction with all event types other than networking events. See Table 9 for a breakdown of how members rated their level of satisfaction with BCCPA events by service type. Figure 16a demonstrates the importance of events, which has remained fairly consistent over time.

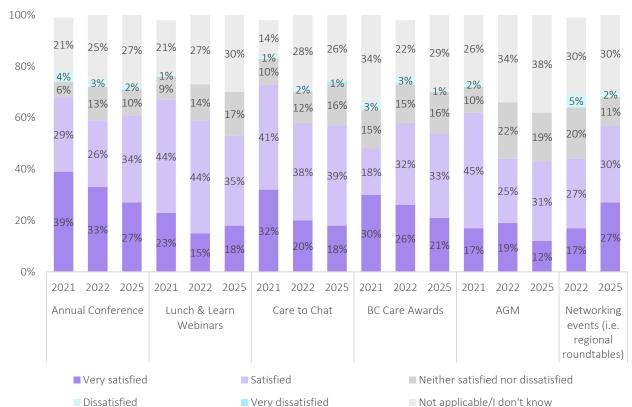


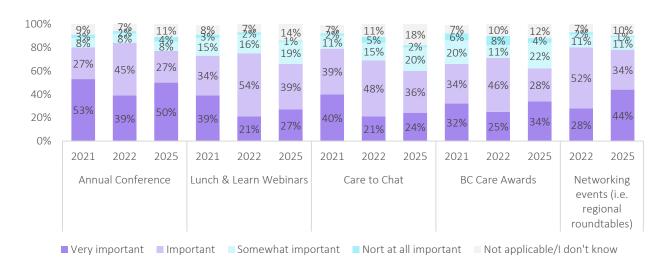
Figure 16. Satisfaction with events (n= 140 in 2025, n=60 in 2022 and n=97 in 2021)

Table 9. Satisfaction with events by service type (n=140)

r	,															
		Annual C	onference			į į	Lunch + led	ırn webinars			Care to Chat					
			Dis-	N/A, don't				Dis-	N/A, don't				Dis-	N/A, don't		
	Satisfied	Neutral	satisfied	know		Satisfied	Neutral	satisfied	know		Satisfied	Neutral	satisfied	know		
LTC																
(n=85)	71%	9%	0%	20%		61%	19%	0%	21%		72%	13%	1%	14%		
AL																
(n=52)	77%	8%	0%	15%		67%	17%	0%	15%		65%	15%	2%	17%		
IL																
(n=48)	67%	8%	2%	23%		61%	18%	0%	20%		67%	13%	2%	19%		
HH	400/	2001	20/	2.40/		0.70/	222/	00/	400/		070/	222/	00/	400/		
(n=35)	43%	20%	3%	34%		37%	23%	0%	40%		37%	23%	0%	40%		
Other	720/	00/	00/	00/		720/	4.00/	00/	00/		720/	4.00/	00/	00/		
(n=11)	72%	9%	0%	0%		72%	18%	0%	9%		72%	18%	0%	9%		
		20.0	<u> </u>				4					<b>A.</b>				
		BC Care	Awards				A	GM .				Network	ing events			
			Dia	N/A,				Dia	N/A,				Dia	N/A, don't		
	Satisfied	Neutral	Dis- satisfied	don't know		Satisfied	Neutral	Dis- satisfied	don't know		Satisfied	Neutral	Dis- satisfied	know		
LTC	Satisfied	Neutrai	Satisfied	KIIOW		Satisfied	Neutrai	Satisfied	KIIOW		Satisfied	Neutrai	Satisfied	KIIOW		
(n=85)	61%	15%	0%	24%		52%	16%	0%	31%		62%	12%	2%	23%		
AL																
(n=52)	70%	17%	0%	13%		57%	17%	0%	25%		58%	20%	2%	20%		
IL																
(n=48)	56%	17%	2%	25%		51%	21%	0%	27%		54%	2%	0%	25%		
НН																
(n=35)	34%	20%	3%	43%		31%	29%	0%	40%		62%	8%	0%	29%		
Other																
(n=11)	54%	27%	0%	18%		45%	27%	0%	27%		5%	27%	0%	18%		

The majority of respondents rated BCCPA's main events as being important (Figure 17). The results are consistent over the three iterations of the survey, with a decrease in the importance of Care to Chat (79% in 2021, 69% in 2022 and 60% in 2025).

Figure 17. Importance of events (n=139 in 2025, n=61 in 2022 and n=98 in 2021)



#### Second conference for independent living and private pay

One third (35%) of respondents would like BCCPA to host a second conference for independent living and private pay operators, 18% would not, and 47% aren't sure or would not find this applicable (Figure 18). See Table 10 for a breakdown by service type of the members' opinions on having a second conference (noting the association has provided tailored content for the private pay audience at the annual conference since 2024).

Figure 18. Desire for a second conference for independent living and private pay operators (n=140)

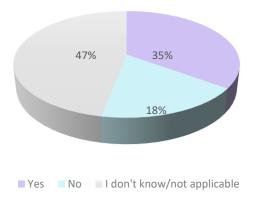


Table 10. Desire for a second conference for independent living and private pay operators (n=140)

	Desir	e for a second c	onference for
	independe	ent living and pri	vate pay operators
			I don't know/not
Service type	Yes	No	applicable
Long-term care			
(n=84)	21%	27%	51%
Assisted living			
(n=50)	28%	40%	32%
Independent			
living (n=48)	42%	40%	19%
Home health			
(n=35)	49%	9%	43%
Other (n=10)	30%	20%	50%

#### Reasons for wanting a second conference include:

- Wanting more tailored/relevant information that is specific to the issues faced by independent and private pay operators; consider extending the existing conference with a focus on private pay. Two respondents commented that there has been a gap for independent living operators since the amalgamation of BC Seniors Living Association (BCSLA) and BCCPA.
- Having the opportunity to collaborate and network: Time to discuss common issues, leading practices, share ideas, and create innovative solutions.

#### Reasons for not wanting a second conference include:

- It is more valuable to have a united, global, comprehensive view on the industry, rather than dividing the group.
- Time and resource intensive.
- Conferences are cost prohibitive.
- Preference for one conference with more specific breakout sessions and focused round tables.
- Some feel that there is no need and that the Annual Conference is comprehensive.

## Programs and initiatives

Respondents rated their satisfaction with BCCPA programs and initiatives. EquipCare BC received high satisfaction ratings (52% very satisfied, 16% satisfied), and the Energy Savings Program was rated lower than others (19% very satisfied and 26% satisfied). While results year over year were consistent, the Energy Savings Program has shown an increase in satisfaction while Route65.ca has shown variation in satisfaction (Figure 19). Home health respondents indicated a substantially lower satisfaction with all programs other than Route65.ca and indicated a higher satisfaction than other providers with Route65.ca. See Table 11 for a breakdown by service type of program satisfaction.

Figure 19. Satisfaction with programs (n=130 in 2025, n= 59 in 2022 and n=96 in 2021)

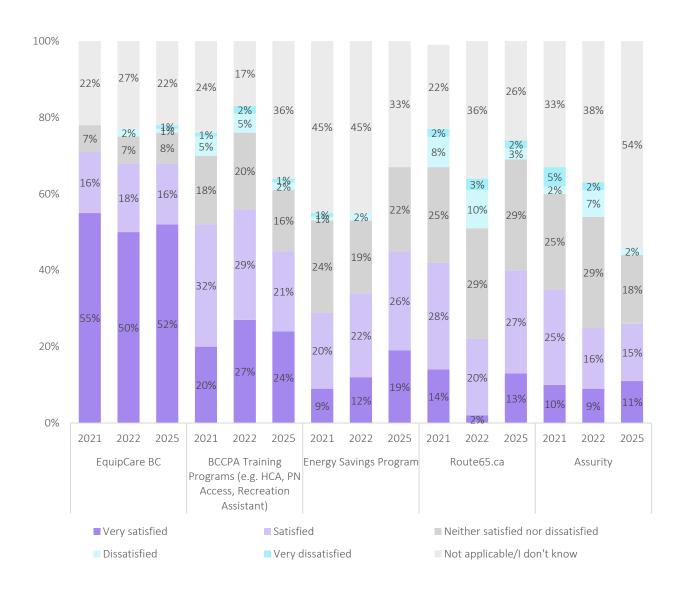


Table 11. Satisfaction with programs by service type (n=130)

40%

10%

EquipCare BC

(n=10)

20%

40%

				N/A, don't				N/A, don't			
	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied
LTC											
(n=81)	88%	5%	2%	5%	57%	20%	2%	21%	57%	26%	0%
AL											
(n=46)	89%	4%	2%	4%	58%	20%	2%	20%	59%	22%	0%
IL											
(n=45)	*72%	*7%	*2%	*20%	42%	20%	0%	38%	45%	23%	0%
HH											
(n=30)	*20%	*17%	0%	*63%	29%	10%	3%	58%	*17%	*17%	0%
Other											
(n=10)	80%	0%	0%	20%	40%	20%	10%	30%	70%	10%	0%
		Route	 :65.ca			Ass	urity				
		Route	265.ca	N/A, don't		Ass	curity	N/A, don't			
	Satisfied	Route Neutral	P65.ca  Dissatisfied	N/A, don't know	Satisfied	Ass Neutral	<i>curity</i> Dissatisfied	N/A, don't know			
LTC	Satisfied			don't	Satisfied			don't			
LTC (n=81)	Satisfied 33%			don't	Satisfied 22%			don't			
		Neutral	Dissatisfied	don't know		Neutral	Dissatisfied	don't know			
(n=81)		Neutral	Dissatisfied	don't know		Neutral	Dissatisfied	don't know 56%			
(n=81) AL	33%	Neutral	Dissatisfied 1%	don't know 28%	22%	Neutral	Dissatisfied 1%	don't know 56%			
(n=81) AL (n=46)	33%	Neutral	Dissatisfied 1%	don't know 28%	22%	Neutral	Dissatisfied 1%	don't know 56%			
(n=81) AL (n=46) IL	33%	Neutral 37% 35%	Dissatisfied 1% 0%	don't know 28% 20%	22%	Neutral 21% 26%	Dissatisfied 1% 2%	56% 39%			
(n=81) AL (n=46) IL (n=45)	33%	Neutral 37% 35%	Dissatisfied 1% 0%	don't know 28% 20%	22%	Neutral 21% 26%	Dissatisfied 1% 2%	56% 39%			

**BCCPA Training Programs** 

20%

70%

EquipCare BC continues to be the most important program offered by BCCPA. Much like ratings of satisfaction there are also varying levels of importance over time for the training programs, Energy Savings Program, Route65.ca, and Assurity (Figure 20). Compared to other service types, those in home health felt that EquipCare BC, training programs, and Energy Saving Programs were of less importance and Route65.ca and Assurity were of more importance. See Table 12 for a breakdown of program importance by service type.

Energy Savings Programs

N/A, don't

know

17%

20%

32%

\*67%

20%

<sup>\*</sup>Independent living and assisted living members are not eligible for EquipCare; home health is not eligible for the Energy Savings Program.

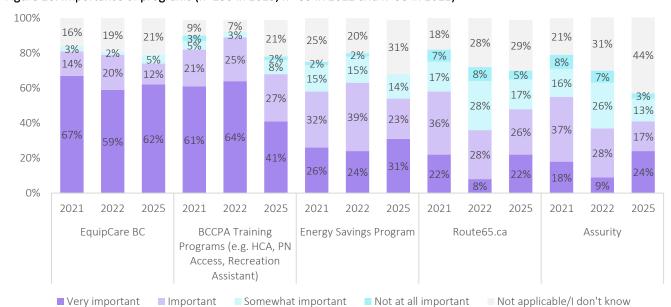


Figure 20. Importance of programs (n=130 in 2025, n= 59 in 2022 and n=95 in 2021)

While there is still a high level of importance expressed, there appears to be a decrease in perceived importance of BCCPA Training Programs as compared to 2022. Assisted living, home health and 'other' provided the lower ratings of importance. This, combined with a higher number of not applicable/I don't know in 2025 versus the previous year, may account for the lower importance overall.

Table 12. Importance of programs by service type (n=130)

		EquipCare B	С		ВССР	A Training Pro	grams		Enei	gy Savings Pro	grams	
	Very			N/A,	Very			N/A,	Very			N/A,
	important/			don't	important/			don't	important/			don't
	important	Somewhat	Not	know	important	Somewhat	Not	know	important	Somewhat	Not	know
LTC												
(n=81)	90%	5%	0%	5%	76%	7%	2%	14%	64%	19%	0%	17%
AL												
(n=46)	92%	4%	0%	4%	70%	13%	2%	15%	59%	22%	0%	20%
IL												
(n=45)	78%	4%	0%	18%	62%	9%	2%	27%	53%	20%	0%	27%
HH												
(n=30)	35%	6%	0%	58%	58%	10%	0%	32%	25%	13%	0%	61%
Other												
(n=10)	80%	0%	0%	20%	60%	10%	0%	30%	70%	10%	0%	20%
		Route65.ca				Assurity						
	Very			N/A,	Very			N/A,				
	important/			don't	important/			don't				
	important	Somewhat	Not	know	important	Somewhat	Not	know				
LTC												
(n=81)	40%%	17%	7%	36%	33%	11%	4%	52%				
AL								33%				
(n=46)	50%	24%	4%	22%	46%	20%	2%					
IL												
(n=45)	49%	20%	4%	27%	51%	16%	2%	31%				
HH												
(n=30)	67%	23%	3%	7%	58%	19%	3%	19%				
Other												
(n=10)	30%	20%	0%	50%	30%	0%	0%	70%				

When asked if there are other programs/services BBCPA should provide, the following were noted:

- Programs for home health; covering home healthcare in the Health Care Assistant (HCA) curriculum, highlighting the benefits of working in this sector
- HCA and Practical Nursing (PN) training opportunities in the Northeast Fraser area
- General instructions/assistance on how to use BCCPA services
- Resources related to providing the best care for clients
- Staff education on dementia and hospitality
- Working with WorkSafeBC in groups to learn about best practices and tools to help operators
- Programs to support operators advocating for more funds and resources to meet the needs of residents
- Making benchmarks and industry data analysts available
- Innovation think tanks
- Preferred vendor programs

#### Route65.ca

Sixty-five percent of respondents indicated that they have listings on the Route65.ca website, 7% did not, and 28% were unsure (Figure 21). See Table 13 for a breakdown by service type of who does and does not have listings.

Figure 21. Site listings on Route65.ca (n=122)

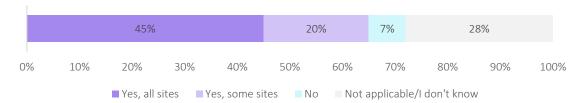


Table 13. Listings on Route65.ca by service type (n=122)

	Site listings on Route65.ca									
Service type	Yes (all sites)	Yes (some sites)	No	Not applicable/I don't know						
Long-term care (n=76)	47%	20%	4%	29%						
Assisted living (n=41)	54%	20%	7%	20%						
Independent living (n=41)	51%	24%	7%	17%						
Home health (n=29)	41%	24%	7%	28%						
Other (n=10)	30%	20%	0%	50%						

Of those that do have listings (n=80), the majority (65%) did not see an increase in occupancy or client referrals from the website; only 11% reported an increase and the remaining 24% were unsure (Figure 22). When asked about the value of Route65.ca to their organization, 13% of respondents with listings indicated Route65.ca is very valuable, 55% said somewhat valuable, 19% said not valuable, and 14% were unsure (Figure 23). See Tables 14 and 15 for a breakdown by service type of client referrals and Route65.ca value, respectively. Note there appears to be a discrepancy between reported <u>increased occupancy and referrals</u> from listings and the <u>value</u> of listings, suggesting that operators are not attributing occupancy and referrals directly to their listings on Route.65.

Figure 22. Increase in occupancy/client referrals from listing on Route65.ca (n=80)

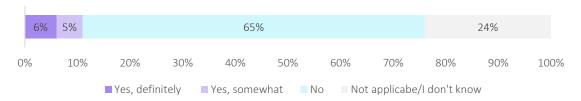


Figure 23. Value of Route65.ca for those with listings on the website (n=80)

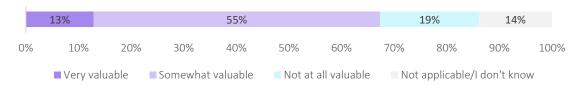


Table 14. Occupancies and Client referrals from listing on Route65.ca by service type (n=80)

	Have yo	u seen an incred	ised occupancy or clie	ent referrals from
		listii	ng on Route65.ca?	
	Yes,	Yes,		Not applicable/I
Service type	definitely	somewhat	No	don't know
Long-term care				33%
(n=51)	4%	4%	59%	
Assisted living				30%
(n=30)	3%	10%	57%	
Independent				29%
living (n=31)	3%	6%	61%	
Home health				16%
(n=19)	11%	0%	74%	
Other (n=80)	0%	0%	80%	20%

Table 15. Value of Route65.ca to the members' organizations by service type (n=80)

	ianization?			
Service type	Very	Somewhat	Not at all	Not applicable/I don't know
Long-term care (n=51)	8%	47%	24%	22%
Assisted living (n=30)	3%	60%	20%	17%
Independent living (n=31)	10%	61%	19%	10%
Home health (n=19)	16%	63%	11%	11%
Other (n=5)	0%	60%	20%	20%

Of those that indicated that the website added no value to their organization, few responses were given. One indicated Route65.ca is not valuable for independent living.

"Aggregators are fine for care availability but for independent living there is so much more to the process and we do not wish to post suite availability to be public in most cases."

— Executive Director, Campus of Care

When asked if there is anything Route65.ca can do to add value, the following was noted, surrounding awareness and promotion.

- Promote Assurity approved agencies to enhance credibility and improve ranking.
- Clarify the website's purpose and audience for better understanding.
- Consider changing the site name to clearly reflect its purpose, similar to "A Place for Mom."
- Increase public awareness about the website as many leads are still unaware of it.
- Enhance the promotion of private businesses and provide guidance on navigating public health care.
- Strengthen the online presence of the site; Launch a marketing campaign to raise public awareness of the site.
- Profile agencies to highlight their impact on the lives of seniors.

The majority of respondents (n=122) reported that the updated information on the Route65.ca website was very or somewhat valuable to the public. Only 1% did not think the information was valuable, and 19% were unsure. One respondent who did not find the information valuable commented that there was not enough

information and would like improved searchability. See Table 16 for a breakdown by service type of the extent to which members think information on the Route65.ca website is valuable to the public.

Table 16. Value of the information on the Route65.ca website by service type (n=122)

	To what extent do you find the website a valuable resource for the public?									
Service type	Very	Somewhat	Not at all	Not applicable/I don't know						
Long-term care (n=76)	27%	45%	1%	17%						
Assisted living (n=41)	39%	39%	0%	22%						
Independent living (n=41)	41%	37%	0%	22%						
Home health (n=29)	41%	34%	0%	24%						
Other (n=10)	10%	70%	0%	20%						

Only 8% of 120 respondents felt Route65.ca was well promoted and well known. Forty-seven percent thought promotion was ok and that there was some awareness. Twenty-eight percent indicated that Route65.ca is not well promoted and that there is very little awareness. The remaining 18% were unsure (Figure 24). Of all the service types, those in home health rated the promotion of Route65.ca the worst, with 46% feeling there is very little awareness. See Table 17 for a breakdown by service type of how well members think Route65.ca is promoted and known.

Figure 24. Promotion and awareness of Route65.ca (n=120)

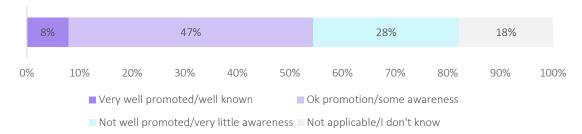


Table 17. Promotion and awareness of Route65.ca by service type (n=120)

		How well is Route65.ca promoted?									
Service type	Very well, Route65.ca is well known	Ok, there is some awareness	Not well, there is very little awareness	Not applicable/I don't know							
Long-term care (n=76)	9%	51%	20%	20%							
Assisted living (n=41)	7%	61%	20%	12%							
Independent living (n=40)	8%	63%	20%	10%							
Home health (n=28)	7%	36%	46%	11%							
Other (n=10)	0%	50%	30%	20%							

### **Assurity**

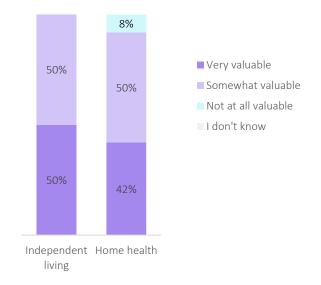
Only independent living and home health operators and providers (n=63) were asked about the Assurity program. One third (32%) were Assurity certified, half (51%) indicated that their organization is not certified and 17% were unsure. See Table 18 for a breakdown of Assurity certification by independent living and home health operators/providers.

Table 18. Assurity certification for respondents working in independent living and home health (n=63)

	Is your organization/any of your sites Assurity certified?								
Service type	Yes, our organization is certified	Yes, some of our sites are certified	No	l don't know					
Independent living (n=38)	16%	8%	53%	24%					
Home health (n=29)	41%	0%	48%	10%					

Of those that are Assurity certified (n=19), 94% think Assurity is very or somewhat valuable to their organization. Only 5% indicated that it is not valuable. See Figure 25 for a breakdown of the value of Assurity by independent living and home health providers.

Figure 25. Value of Assurity to independent living and home health organizations (n=19)



"We are a large multi-site operator and given our LTC sites are accredited this means we have a robust system of excellence for our IL/AL sites. In addition, we would not use this as a "marketing" initiative given our occupancy is predominately word of mouth."

- Owner / Operator of Long-term Care, Assisted Living, and Independent Living

"We operate under the same guidelines as our LTC site with policies and processes so feel that Accreditation

Standards are already met."

- Executive Director of Long-term Care, Assisted Living, and Independent Living

The responses regarding the benefits of Assurity certification were generally lukewarm. Most noted that Assurity does not offer significant advantages unless actively promoted. Some mention using the certification in their marketing efforts but believe more could be done to raise public awareness. Additionally, several respondents highlight that Accreditation Canada provides a more detailed standard, inferring that Assurity's impact is relatively minimal. One respondent acknowledged that Assurity adds a layer of operational credibility. A few respondents indicated their intention to become Assurity Certified but have not because of competing priorities.

"We use it in our marketing but feel again that there could be more marketing and promotion done to the general public on it, so people seek out operators who are Assurity certified." — General Manager of Home Health

"Have the seal of approval so didn't think we needed both."

– Director of Operations, Long-term Care and Independent Living

When asked what more Assurity could do for members, we heard it should enhance its promotion among members and educate the general public about its purpose. It is crucial to highlight the importance of being Assurity Approved to consumers, especially since many are still seeking elder care without considering safety or costs. Advocacy is needed to normalize the expense associated with custom private pay home support alongside government-subsidized support, likening it to other essential life costs such as housing and transportation. Educational initiatives for workers should be considered, however specific examples were not provided by the respondents.

### Seal of Approval

Only independent living and assisted living operators and providers (n=48) were asked about the Seal of Approval program. Forty-four percent (44%) had sites designated with Seal of Approval, 35% did not, and 21% were unsure. See Table 19 for a breakdown of Seal of Approval designations by independent living and assisted living operators/providers.

Table 19. Designation with Seal of Approval for respondents working in independent and assisted living (n=48)

	Are ar	Are any of your sites designated with Seal of Approval?									
Service type	Yes, all sites	Yes, some sites	No sites	I don't know							
Independent living (n=32)	34%	13%	41%	13%							
Assisted living (n=34)	21%	18%	38%	24%							

Of those that are designated with Seal of Approval (n=21), 95% think Seal of Approval is very or somewhat valuable to their organization and only 5% do not. See Figure 26 for a breakdown of the value of Seal of Approval by independent and assisted living operator/providers.

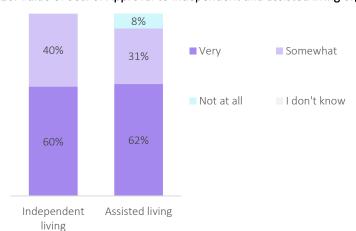


Figure 26. Value of Seal of Approval to independent and assisted living organizations (n=21)

#### Assurity or Seal of Approval?

Independent living, assisted living, and home health providers (n=75) were asked for their agreement with BCCPA's proposal to continue using Assurity for home health and Seal of Approval for independent living and assisted living. Of the 75 respondents, half (51%) agreed or strongly agreed with this proposal, one quarter (27%) felt neutral, 4% disagreed or strongly disagreed, and 19% were unsure. Table 20 demonstrates the level of agreement with this proposal broken down by service type.

Table 20. Assurity and Seal of Approval Programs for independent/assisted living and home health (n=75)

	Assurity Prog	To what extent do you agree with BCCPA continuing to use the Assurity Program for home health providers and the Seal of Approval Programs for independent/assisted living residences?									
Service type	Agree	Neutral	Disagree	I don't know							
Independent				8%							
living (n=36)	53%	33%	6%								
Assisted living				13%							
(n=38)	45%	37%	5%								
Home health				22%							
(n=28)	63%	11%	4%								

"There is a significant difference between home health and IL/AL and as such the accreditation programs should reflect that."

— Owner/operator, Campus of Care

"Think this is a good idea. Provides a quality assurance base for new or smaller organizations. Like the distinction between the two."

— Executive Leadership, Campus of Care

Those few who disagreed with the proposal felt that although both programs are worthwhile, it may be a better use of time and resources to simplify with one program. One respondent felt Seal of Approval was the stronger name and both programs should be merged into this.

### Communication

While all key communication channels were rated as useful, respondents found the association e-newsletter (sector updates), targeted (direct) email communication from BCCPA, and the website the most useful. These were followed by networking events and Tuesdays with Terry (Figure 27). While social media was seen as the least useful overall, LinkedIn continues to be the preferred social media channel, noting there has been a decreasing trend in usefulness of all social media channels over the years (Figure 28). Service providers demonstrated consistent satisfaction with BCCPA communication channels, with home health having higher satisfaction than the others with the association e-newsletter, targeted email, and Tuesdays with Terry. Table 21 demonstrates the level of usefulness broken down by service type.

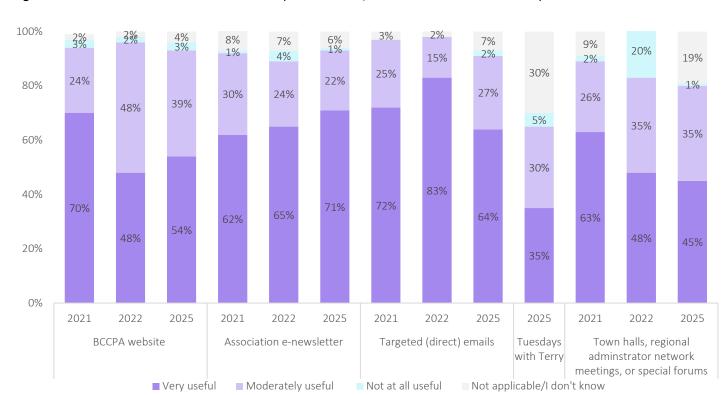


Figure 27. Usefulness of communication channels (n=115 in 2025, n= 54 in 2022 and n=90 in 2021)

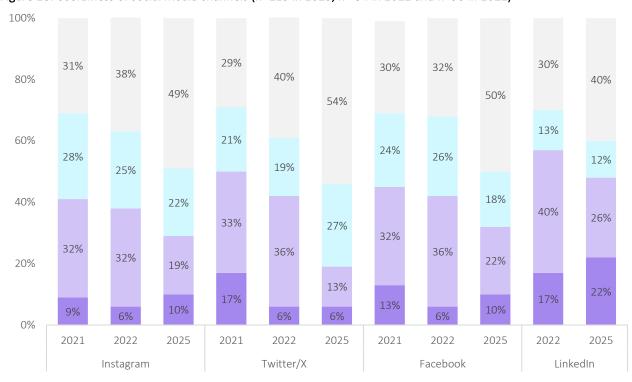


Figure 28. Usefulness of social media channels (n=115 in 2025, n= 54 in 2022 and n=90 in 2021)

Table 21. Usefulness of communication channels by service type (n=115)

■ Moderately useful

■ Very useful

		BCCPA we	bsite		Association e-newsletter					Targeted (direct) email			
			Not at	N/A,			Not	N/A,				Not	N/A,
	Very	Moderately	all	don't	Very	Moderately	at all	don't		Very	Moderately	at all	don't
	useful	useful	useful	know	useful	useful	useful	know		useful	useful	useful	know
LTC													
(n=72)	57%	36%	3%	4%	75%	18%	1%	6%		75%	18%	1%	6%
AL													
(n=38)	58%	42%	0%	0%	68%	29%	0%	3%		68%	29%	0%	3%
IL													
(n=36)	50%	47%	0%	3%	67%	25%	0%	8%		67%	25%	0%	8%
HH													
(n=28)	46%	43%	4%	7%	86%	11%	0%	4%		86%	11%	0%	4%
Other													
(n=10)	20%	70%	0%	10%	80%	20%	0%	0%		80%	20%	0%	0%

■ Not at all useful

■ Not applicable/I don't know

		Tuesdays wit	th Terry			Social media (FB, Insta, Twitter/X)					LinkedIn				
			Not at	N/A,				Not	N/A,				Not	N/A,	
	Very	Moderately	all	don't		Very	Moderately	at all	don't		Very	Moderately	at all	don't	
	useful	useful	useful	know		useful	useful	useful	know		useful	useful	useful	know	
LTC															
(n=72)	75%	18%	1%	6%		10%	16%	25%	49%		27%	24%	13%	37%	
AL															
(n=38)	68%	29%	0%	3%		6%	24%	26%	44%		24%	29%	18%	29%	
IL															
(n=36)	67%	25%	0%	8%		4%	24%	30%	41%		21%	30%	15%	33%	
HH															
(n=28)	86%	11%	0%	4%		11%	19%	13%	57%		21%	29%	7%	43%	
Other															
(n=10)	80%	80%	0%	0%		0%	10%	27%	63%		0%	50%	20%	30%	
	Town halls, regional administrator														

	Town halls, regional administrator											
	network meetings, or special forums											
			Not at	N/A,								
	Very	Moderately	all	don't								
	useful	useful	useful	know								
LTC												
(n=72)	49%	27%	0%	14%								
AL												
(n=38)	45%	39%	3%	13%								
IL												
(n=36)	44%	41%	0%	15%								
НН												
(n=28)	50%	14%	0%	36%								
Other												
(n=10)	40%	40%	0%	20%								

About a third of respondents think BCCPA is very effective in engaging with mainstream media (37%) and think it is moderately effective (36%); 4% do not think it is effective, and a quarter (25%) are unsure (Figure 29). Mainstream media here refers to radio/talk show interviews, television news appearances, opinion columns, radio advertising, media releases and advisories, etc. See Table 22 for a breakdown by service type of how effective respondents think BCCPA is in engaging with mainstream media. It is likely that the decreasing effectiveness of communicating through mainstream media reflects unusually high numbers in 2021 due to the response to COVID.

Figure 29. Effectiveness of communicating through mainstream media (n=112 in 2025, n=54 in 2022 and n=90 in 2021)

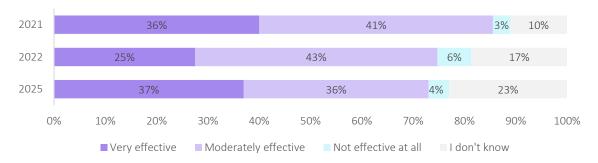


Table 22. Effectiveness of communicating through mainstream media by service type (n=112)

	How effectiv	e has BCCPA be	has BCCPA been in engaging with mainstream media?						
Service type	Very effective	Moderately effective	Not effective at all	I don't now					
Long-term care (n=71)	45%	35%	1%	18%					
Assisted living (n=36)	50%	39%	3%	8%					
Independent living (n=36)	44%	44%	3%	8%					
Home health (n=28)	29%	21%	14%	36%					
Other (n=10)	40%	40%	10%	10%					

Respondents rated satisfaction with aspects of communication consistently across elements, as well as over the three iterations of the survey. Respondents (n=114) were very satisfied (47%) or satisfied (40%) with the association keeping them informed; very satisfied (36%) or satisfied (46%) with the type of information provided; and very satisfied (51%) or satisfied (36%) with the timeliness of the information (Figure 30). The level of satisfaction was consistent across service provider type; Table 23 provides a breakdown of aspects of communication by service type.

Figure 30. Satisfaction with aspects of communication (n=114 in 2025, n=54 in 2022 and n=91 in 2021)

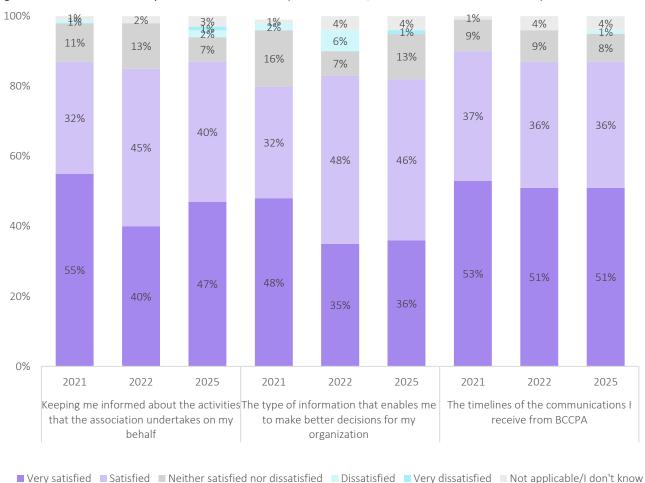
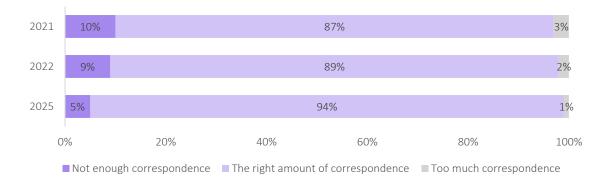


Table 23. Satisfaction with aspects of communication by service type (n=114)

	Keeping me informed about the activities					The type of information that enables me								
	that the association undertakes on my					to make better decisions for my					The timelines of the communications I			
	behalf					organization					receive from BCCPA			
				N/A,					N/A,					N/A,
	'		ļ	don't					don't					don't
	Satisfied	Neutral	Dissatisfied	know		Satisfied	Neutral	Dissatisfied	know		Satisfied	Neutral	Dissatisfied	know
LTC														
(n=71)	90%	6%	3%	1%		88%	11%	0%	1%		91%	4%	1%	3%
AL														
(n=38)	84%	8%	8%	0%		84%	13%	3%	0%		87%	11%	3%	0%
IL														
(n=36)	83%	6%	6%	6%		77%	17%	0%	6%		81%	11%	3%	6%
HH														
(n=28)	89%	7%	0%	4%		75%	14%	0%	11%		86%	7%	0%	7%
Other														
(n=10)	70%	10%	10%	10%		70%	20%	0%	10%		90%	10%	0%	0%

Members indicate that BCCPA is sending the right amount of information, increasingly so over the past few years. (Figure 31).

Figure 31. Level of communication (n=113 in 2025, n=54 in 2022, n=91 in 2021)



## Member portal: M365

The majority of respondents access the M365 portal monthly (26%) or a couple times a year (34%). The remaining 34% have never used the portal (Figure 32). See Table 24 for a breakdown by service type of how frequently members access the portal.

Figure 32. Frequency of use (n=113).

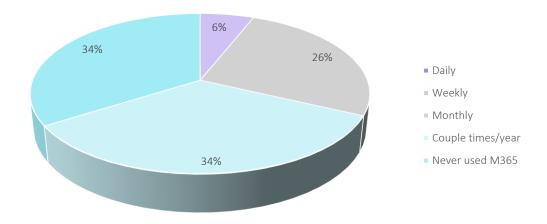


Table 24. Frequency of accessing the M365 member portal by service type (n=113)

	Н	ow frequent	ly do you access ti	he M365 member p	ortal?
				Couple times a	Never
Service type	Daily	Weekly	Monthly	year	
Long-term care					
(n=70)	0%	6%	30%	30%	34%
Assisted living				30%	32%
(n=37)	0%	5%	32%		
Independent				22%	36%
living (n=36)	0%	8%	33%		
Home health				57%	18%
(n=28)	0%	7%	18%		
Other (n=10)	0%	0%	30%	50%	20%

Of those that do access the M365 portal (n=74), the majority use it to register for events (84%) and access member-exclusive resources/documents (60%). Thirty-five percent of respondents use the portal to access workspaces/forums, including community bulletin boards, job postings, etc., and 28% use it to search the member directory (Figure 33). See Table 25 for a breakdown by service type of reasons for using the M365 portal.

Figure 33. Purposes of using the M365 portal (n=74)

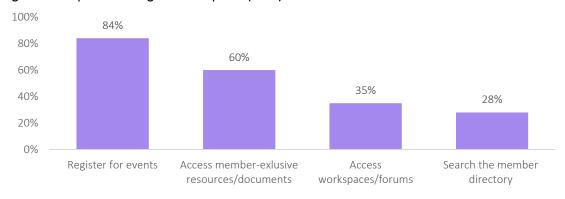


Table 25. Purposes of using the M365 member portal by service type (n=74)

	Why do you use M365?									
Service type	Register for events	Access member- exclusive resources/documents	Access workspaces/forums	Search the member directory						
Long-term care (n=45)	87%	58%	31%	27%						
Assisted living (n=24)	83%	46%	29%	46%						
Independent living (n=22)	86%	59%	36%	45%						
Home health (n=22)	82%	59%	23%	27%						
Other (n=7)	86%	57%	14%	0%						

Of those that do not access the M365 portal (n=38), half (50%) were not aware of the portal or its benefits, 45% had not found time to explore it, and 5% did not find it relevant or valuable to their needs (Figure 34). Those that did not find the portal relevant were all in long-term care. See Table 26 for a breakdown by service type of reasons for not using the M365 portal.

Figure 34. Reasons for not using the M365 portal (n=38)

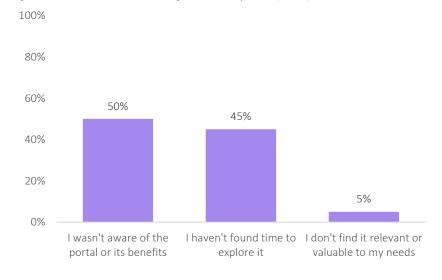


Table 26. Reasons for not using the M365 member portal by service type (n=38)

Table 20. Reasons re	Thot using the iv	Why do you use	M3652
		winy ac you asc	141303:
	I wasn't		
	aware of the	I haven't	I don't find it relevant
	portal or its	found time to	or valuable to my
Service type	benefits	explore it	needs
Long-term care			
(n=24)	54%	38%	8%
Assisted living			
(n=12)	67%	33%	0%
Independent			0%
living (n=13)	46%	54%	
Home health			0%
(n=5)	20%	80%	
Other (n=2)	100%	0%	0%

The majority of those respondents using the M365 portal are satisfied/very satisfied with its ease of use, visual appearance, and value as a resource (Figure 35). Noting the level of satisfaction was consistent across service provider type, see Table 27 for a breakdown of satisfaction by provider type.

Figure 35. M365 ease of use, visual appeal and value (n=74)

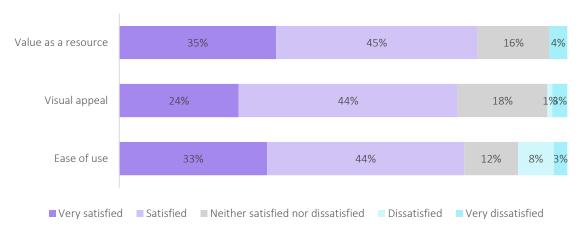


Table 27. Satisfaction with components of the M365 portal by service type (n=74)

		Ease	of use		Visual appeal				Value as a resource			
				N/A, don't				N/A, don't				N/A, don't
	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied	know
LTC												
(n=46)	76%	13%	9%	2%	81%	15%	2%	2%	79%	20%	0%	2%
AL												
(n=25)	76%	20%	4%	0%	80%	20%	0%	0%	80%	20%	0%	0%
IL												
(n=22)	70%	17%	9%	4%	73%	18%	5%	5%	78%	18%	0%	5%
HH												
(n=23)	73%	13%	9%	4%	69%	26%	0%	4%	69%	22%	0%	9%
Other												
(n=8)	0%	88%	13%	0%	88%	13%	0%	0%	63%	25%	0%	13%

Positive comments regarding M365 include:

- Meets expectations and does what it needs to do.
- Provides tailored resources that serve specific needs.

Areas for improvement include:

- System seems very dated and needs updating to be more user-friendly and modern.
- Continued difficulty logging in, making it an obstacle for more frequent use.

### Advocacy

The majority of respondents were satisfied with BCCPA's advocacy role in:

- HHR issues, including labour shortages and agency staffing issues (68%)
- Quality-of-life issues (i.e. person-centered care, dementia friendly communities, etc.) (67%)
- Political legislative and policy events impacting the sector (62%)
- Environmental/climate events impacting the sector (57%)

Respondents were less satisfied with BCCPA's advocacy role in seniors housing issues (i.e. RTA, municipal zoning, tax credits, etc.), the long-term care funding model review, and in home health issues (i.e. municipal business licenses, surge contracts, tax credits, etc.) (Figure 36). Note that there are no comparable data as previous iterations of the member engagement survey asked respondents about their awareness of BCCPA's role in specific advocacy areas. See Table 28 for a breakdown of satisfaction with BCCPA's advocacy roles by service type.



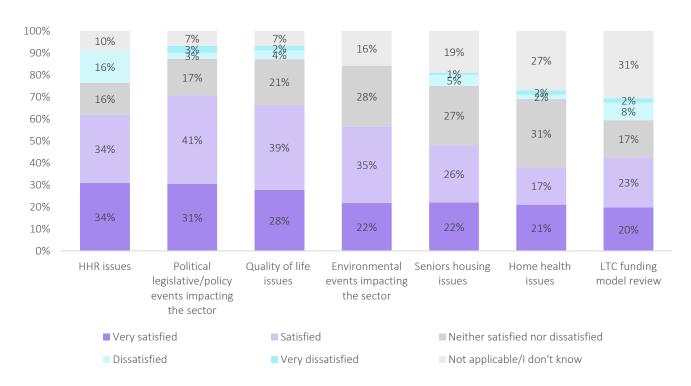


	Table 2	28. Satisfac	tion with BCCF	PA's advo	cad	cy role by se	ervice type	(n=108)						
	Satisfied   Neutral   Dissatisfied   kr					1.	TC funding	model review				s (i.e. person c dly communiti		
	Satisfied			N/A, don't know		Satisfied	Neutral	Dissatisfied	N/A, don't know	Satisfied	Neutral	Dissatisfied	N/A, don't know	
LTC (n=67)				5%		62%	15%	14%	9%	80%	10%	4%	4%	
AL (n=35)				9%		52%	14%	12%	23%	78%	11%	6%	6%	
IL (n=34)	73%	12%	6%	9%		42%	12%	18%	27%	66%	24%	3%	6%	
HH (n=28)	53%	25%	7%	14%		29%	11%	0%	61%	50%	32%	8%	11%	
Other (n=10)	60%	0%	2%	2%		50%	10%	20%	20%	60%	20%	0%	20%	
	Environm			acting		Political, legislative and policy events impacting the sector				Seniors housing issues (i.e. RTA, municipal zoning, tax credits, etc.)				
	Cariatian	Nantaal	Discobiation	N/A, don't		Catiafia d	Nissatural	D:+:f:I	N/A, don't	C - +: - f: l	Nicotock	Discotisfied	N/A, don't	
LTC (n=67)				know 9%		Satisfied 70%	Neutral 13%	Dissatisfied 4%	know 3%	Satisfied 55%	Neutral 25%	Dissatisfied 6%	know 13%	
AL (n=35)				9%		80%	11%	6%	3%	66%	17%	6%	11%	
IL (n=34)				9%		82%	12%	3%	3%	58%	26%	9%	6%	
HH (n=28)	39%	29%	0%	32%		54%	25%	7%	14%	30%	25%	4%	32%	
Other (n=10)	40%	40%	0%	20%		70%	10%	10%	10%	50%	40%	0%	10%	
		•	 .e. municipal b ntracts, tax cre											
	Satisfied	Noutral	Dissatisfied	N/A, don't										
LTC (n=67)	35%	Neutral 31%	0%	know 34%										
AL (n=35)	12%	21%	0%	38%										

(n=35)

IL (n=34)

HH (n=28)

Other (n=10) 42%

33%

46%

22%

21%

21%

29%

44%

0%

0%

14%

0%

38%

45%

11%

33%

Respondents were asked to select the top 5 areas they think BCCPA should prioritize in their advocacy. Areas in order of priority are as follows:

- 1. Staffing issues: lack of staff, lack of training, burnout/low morale (80%)
- 2. Adequate funding for the sector, including HPRD (73%)
- 3. Ageing infrastructure and lack of capital funding/support (60%)
- 4. Increasing number of residents/clients with behavioural needs (50%)
- 5. Increasing number of residents/clients with high acuity (47%)
- 6. Ageing in the right place (e.g. tax credits) (43%)
- 7. Public perception and negative media coverage of seniors care and living (42%)
- 8. Employment optimization for international educated nurses (30%)
- 9. Residential Tenancy Act impact on independent living business model (26%) (Figure 37)

The top two priority areas are consistent with findings from previous years.

The number one rated area to prioritize in advocacy for those in...

- Long-term care: staffing issues (87% of those in long-term care included this in their top 5)
- Assisted living: adequate funding for the sector (83%)
- Independent living: Residential Tenancy Act impact on independent living business model (71%)
- Home health: Ageing in the right place (75%)

See Table 29 for a breakdown of top 5 areas to prioritize for advocacy by service type.

Figure 37. Areas of priority for BCCPA advocacy (n=109)

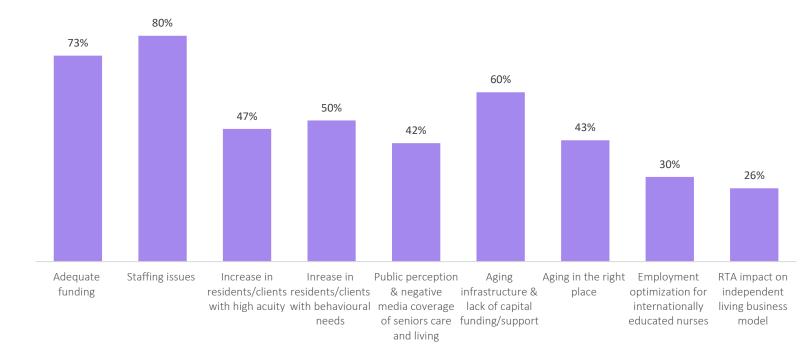


Table 29. Areas of priority for BCCPA advocacy by service type (n=109)

			Select the t	op 5 areas fo	or BCCPA to p	orioritize advo	сасу	
Service type	Staffing issues	Adequate funding for the sector	Ageing infrastructure and lack of capital support	Increasing number of clients with behaviour al needs	Increasing number of clients with high acuity	Ageing in the right place	Public perception and negative media coverage of seniors care and living	Residential Tenancy Act impact on independent living business model
Long-term care (n=68)	87%	82%	65%	63%	51%	31%	47%	25%
Assisted living (n=35)	71%	83%	71%	46%	54%	43%	37%	46%
Independent living (n=34)	62%	62%	59%	38%	41%	53%	56%	71%
Home health (n=28)	64%	64%	46%	21%	25%	75%	32%	14%
Other (n=10)	80%	80%	80%	50%	80%	50%	30%	20%

Additional priorities identified for the association surround addressing waitlists, innovation in the sector and quality improvement (i.e. accountability frameworks).

"We should be looking at continuing the wage levelling for staff and increasing staffing levels in long-term care. Placing an emphasis on ensuring that HPRD in private is equal to that of the funded sites. Putting an emphasis on increasing support staff such as recreation in order to give folks a better quality of life."

— Director of Care, Long-term care

"Influence of unions on the government/ how to deal with the wage leveling issues for sites not under the master collective agreements."

— Director of Operations, Long-term Care and Independent Living

# Policy and workforce development

Fifty-seven percent of operator and service providers (n=107) think it is very important that BCCPA publish papers and reports on policy issues (e.g. fiscal sustainability, staffing, levels, quality of care/life, etc.). Thirty-five percent of respondents think publishing is somewhat important, 5% do not think it is important, and 4% are unsure. In 2022, only 38% of respondents thought publishing was very important; in 2021, 69% thought publishing was very important (Figure 38). See Table 30 for a breakdown of how important members think publishing is by service type.

Figure 38. Importance of BCCPA publishing papers and reports on policy issues (n=107 in 2025, n=54 in 2022, n=91 in 2021)

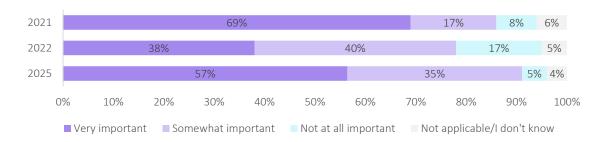


Table 30. Importance of BCCPA publishing papers and reports on policy issues by service type (n=107)

	How important is it for BCCPA to publish papers and reports on policy issues?									
	Very	Somewhat	Not at all	Not applicable/I						
Service type	important	important	important	don't know						
Long-term care				6%						
(n=67Z)	54%	36%	4%							
Assisted living				0%						
(n=35)	63%	31%	6%							
Independent living			6%	0%						
(n=34)	65%	29%								
Home health			4%	0%						
(n=27)	67%	30%								
Other (n=10)	60%	30%	0%	10%						

When asked which policy resources members would like to see more of, the top three policies were:

- 1. Recommendation reports (selected by 63% of respondents)
- 2. Briefing notes on specific issues (58%)
- 3. Toolkits (51%)

These are the same top three as in 2021 and 2022. Forty-two percent selected research papers in collaboration with universities, think tanks, etc. Forty percent wanted to see more frameworks, and 2% selected other (Figure 39). The top priority for those in long-term care, assisted living and independent living was consistently recommendation reports and the top priority for those in home health was briefing notes on specific issues (80%). See Table 31 for a breakdown of policy resources by service type.

Figure 39. Policy resources members would like to see more of (n=106, n=51 in 2022 and n=91 in 2021)

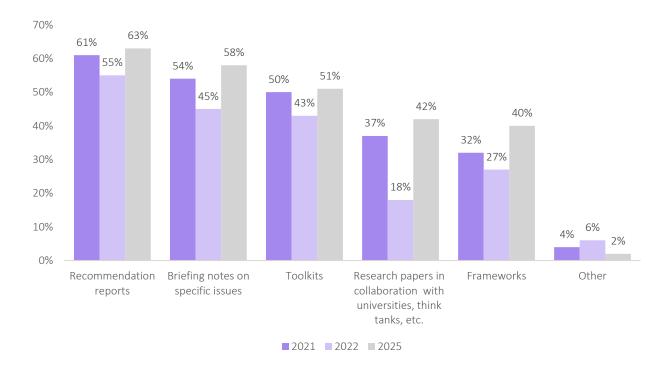


Table 31. Policy resources members would like to see more of by service type (n=106)

	How important is it for BCCPA to publish papers and reports on policy issues?										
Service type	Research papers in collaboration with universities, think tanks	Recommendation reports	Frameworks	Toolkits	Briefing notes on specific issues	Other					
Long-term care (n=66)	39%	67%	38%	48%	56%	3%					
Assisted living (n=35)	37%	69%	49%	51%	66%	3%					
Independent living (n=34)	44%	65%	38%	47%	62%	3%					
Home health (n=27)	52%	70%	37%	48%	81%	0%					
Other (n=10)	30%	70%	10%	30%	90%	10%					

With respect to the work on Health Human Resources (HHR), operator and service provider members report the top three priorities over the next year should be as follows (Figure 40):

- 1. Increased staffing levels and care hours (64%)
- 2. Expanded education seats for nurses and care aides (49%)
- 3. In-house training and education programs (38%)

The top priority within HHR for those in long-term care, assisted living, and independent living was increased staffing levels and care hours. The top priority for those in home health was expanded education seats for nurses and care aides (56%). See Table 32 for a breakdown by service type of the top HHR priorities over the next year.

Figure 40. Priorities within health human resources (operator and service provider members, n=107 in 2025, n=52 in 2022 and n=86 in 2021)

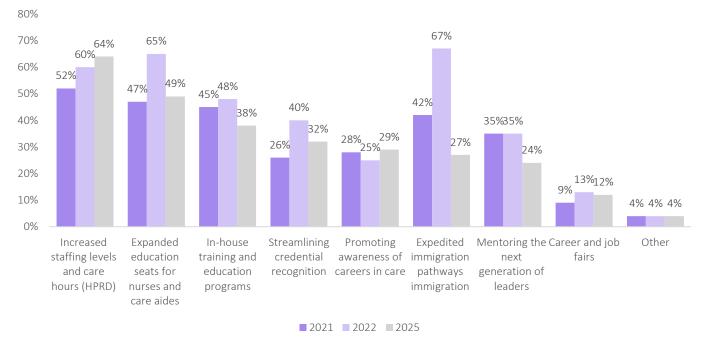


Table 32. Priorities within health human resources by service type (n=107)

	With resp	ect to the wor	k on Health Hu	ıman Resource	s, which areas	do you think sh	ould be priorit	ized over the r	ext year?
Service type	Increased staffing levels and care hours	Expanded education seats for nurses and care aides	In-house training and education programs	Streamline credential recognition	Promoting awareness of careers in care	Expedited immigration pathways immigration	Mentoring the next generation of leaders	Career and job fairs	Other
Long-term care (n=67)	84%	52%	34%	31%	25%	22%	25%	9%	6%
Assisted living (n=35)	74%	49%	37%	40%	29%	23%	23%	6%	6%
Independen t living (n=34)	56%	41%	35%	44%	24%	32%	24%	21%	6%
Home health (n=27)	30%	56%	37%	33%	33%	37%	22%	19%	0%
Other (n=10)	80%	60%	20%	0%	40%	40%	20%	10%	20%

Respondents were asked how important they think it is for BCCPA to prioritize a new job matching initiative over the next 5 years, in which they would help connect employers with relevant organizations and resources to address recruitment and retention challenges. Just over half (54%) of respondents think this initiative is very important, 32% feel it is moderately important, 10% do not think it is important, and 4% do not know (Figure 41). See Table 33 for a breakdown of how important respondents think this new initiative is by service type.

Figure 41. Importance of BCCPA prioritizing a new job matching initiative over the next five years (n=106)

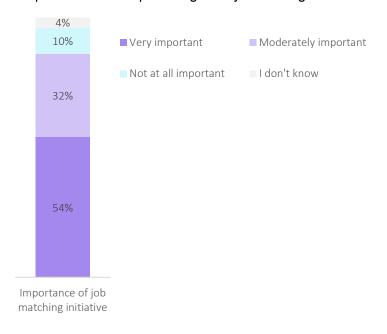


Table 33. Importance of BCCPA prioritizing a new job matching initiative over the next five years, by service type (n=106)

	How impo	ortant is it for BC	CPA to prioritize this	new job matching
			initiative?	
	Very	Moderately	Not at all	I don't know
Service type	important	important	important	
Long-term care				3%
(n=67)	57%	29%	12%	
Assisted living				6%
(n=35)	57%	29%	9%	
Independent living			15%	6%
(n-34)	47%	32%		
Home health			12%	4%
(n=26)	35%	50%		
Other (n=10)	50%	30%	20%	0%

"BCCPA should provide In-house educational supports to enable staff to train the trainers as staffing crisis makes it difficult to send staff and cover staff." — Executive Director, Long Term Care

"Advocate for a modernization of the provincial collective agreements. The language of these agreements is very outdated and some provisions are just no longer appropriate for today's employment environment."

— Executive Director, Long-term Care

"Focus on Leadership educational and funding recognition or there will be no Leaders going forward. They are a neglected resource and are nearing retirement age." — Administrator, Long-term Care

### Public affairs

The majority of respondents are satisfied or very satisfied with how well BCCPA represents their organizations' interests to:

- The Ministry of Health (73%), which is a slight decline compared to 2021/2022.
- The media (66%). The greatest satisfaction for representation to the media was seen in 2021 (77%), likely due to BCCPA's strong presence during COVID. but this is a slight increase since 2022 (62%).
- The Seniors Advocate (63%), which is an increase from previous years.
- Health Authorities (62%), which is similar to previous years.
- The general public (57%).

Only one third (36%) of respondents are satisfied or very satisfied with how well BCCPA represents their organization's interests to unions/labour organizations. However, this is a slight increase since 2021/2022 (30% and 34%, respectively). Forty-four percent of respondents are satisfied or very satisfied with BCCPA's representation to other organizations (i.e. Family Caregivers of BC). This is a slight increase since 2021/2022 (40% and 43%, respectively) (Figure 42). See Table 34 for a breakdown of satisfaction with BCCPA's representation of organizations' interests by service type.

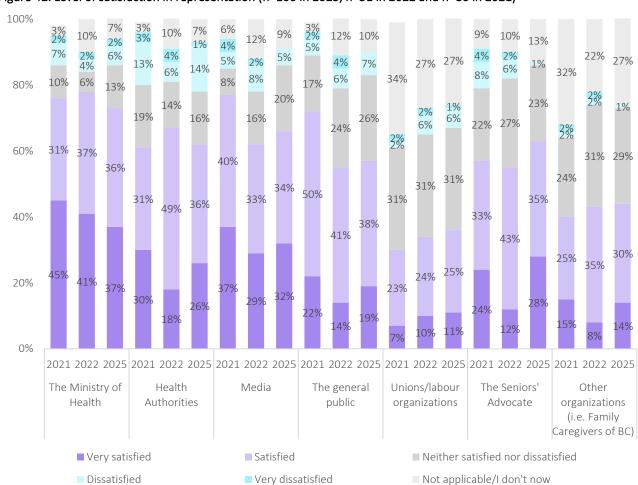


Figure 42. Level of satisfaction in representation (n=106 in 2025, n=51 in 2022 and n=86 in 2021)

Table 34. Level of satisfaction in representation by service type (n=106)

		The Ministi	ry of Health			Health A	luthorities			d		
				N/A, don't				N/A, don't				N/A, don't
	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied	know
LTC												
(n=66)	80%	8%	7%	6%	73%	14%	9%	5%	72%	17%	3%	8%
AL												
(n=34)	91%	3%	6%	0%	82%	6%	12%	0%	88%	9%	0%	3%
IL												
(n=33)	79%	15%	3%	3%	72%	18%	6%	3%	84%	12%	0%	3%
HH												
(n=27)	55%	22%	11%	11%	37%	19%	30%	15%	48%	26%	11%	15%
Other												
(n=9)	55%	0%	33%	11%	55%	0%	33%	11%	55%	11%	22%	11%

		The gene	eral public		Ur	nions/labou	r organization	s		The Senior	rs' Advocate	
				N/A,				N/A,				N/A,
				don't				don't				don't
	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied	know	Satisfied	Neutral	Dissatisfied	know
LTC												
(n=66)	65%	24%	5%	6%	41%	34%	7%	18%	70%	20%	2%	9%
AL												
(n=34)	70%	18%	6%	6%	56%	29%	6%	9%	82%	9%	3%	6%
IL												
(n=33)	66%	21%	6%	6%	39%	39%	6%	16%	72%	15%	3%	9%
НН						Ī						
(n=27)	44%	33%	15%	19%	18%	19%	7%	56%	45%	33%	0%	22%
Other												
(n=9)	56%	11%	22%	11%	44%	11%	34%	11%	78%	11%	0%	11%
	Other orgo	nizations (	i.e. Family Car	egivers				<u> </u>				
		of:	BC)									
				N/A,								
				1 1								

	Other organizations (i.e. Family Caregivers of BC)								
	UJ BC/								
				N/A,					
				don't					
	Satisfied	Neutral	Dissatisfied	know					
LTC									
(n=66)	49%	28%	2%	22%					
AL									
(n=34)	68%	15%	3%	15%					
IL									
(n=33)	53%	16%	3%	28%					
НН									
(n=27)	30%	33%	0%	37%					
Other									
(n=9)	55%	22%	11%	11%					

# **Commercial Member Findings**

## About the respondents

Thirty-eight commercial members responded to the survey. The majority of respondents represented sales and marketing (42%), owners (21%), and executive leadership (C-Suite, VP, etc.) (16%). (Figure 43). There is a fairly even distribution of length of time being a BCCPA member (Figure 44).

Figure 43. Role (n=38)

Sales and Marketing
Owner

Executive leadership: C-Suite, VP, etc.
Other
Executive Director
Director of Operations
General Manager

42%

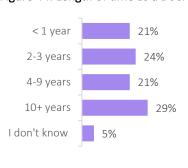
42%

42%

53%

60%

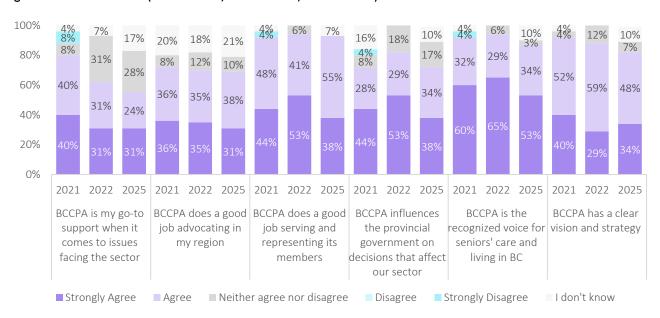
Figure 44. Length of time as a BCCPA member (n=38)



### Overall value and satisfaction

The majority of commercial members continue to agree that BCCPA is the go-to support when it comes to issues facing the sector, does a good job advocating in the region, does a good job serving and representing members, influences the provincial government on decisions that affect the sector, is the recognized voice for seniors' care and living in BC and has a clear vision and strategy (Figure 45). No respondents disagreed with the value statements in 2025. Considering year over year comparisons, there was some decrease in agreement with BCCPA as go-to for support (80% agreement in 2021, 62% in 2022, and 55% in 2025).

Figure 45. Value of BCCPA (n=38 in 2025, n=17 in 2022, n=24 in 2021)



Perceptions surrounding value for membership, it being a benefit that BCCPA represents the entire seniors living, wellness and care sector, and customer service from BCCPA are positive, with notable improvements particularly regarding value for membership and sector representation from 2022 to the present (Figure 46)

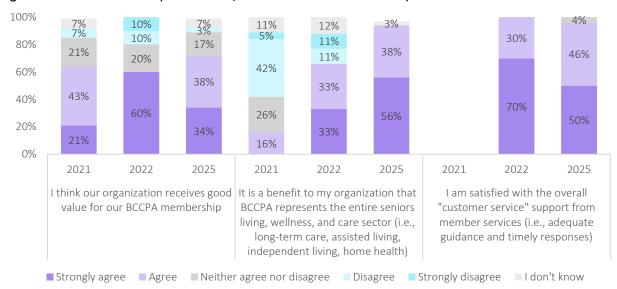


Figure 46. Benefits and value (n=29 in 2025, n=10 in 2022 and n=19 in 2021)

Commercial members indicated marked improvements in accessibility and responsiveness of staff from 2022 to the present as well as perceptions regarding BCCPA's position on issues related to the sector being aligned with their company's and that BCCPA provides support to commercial members in a way that was relevant to their needs. While the majority of commercial members are satisfied that they are able to influence the direction and priorities of BCCPA and feel their company's voice is heard by BCCPA, many were neutral in their ratings (Figure 47).

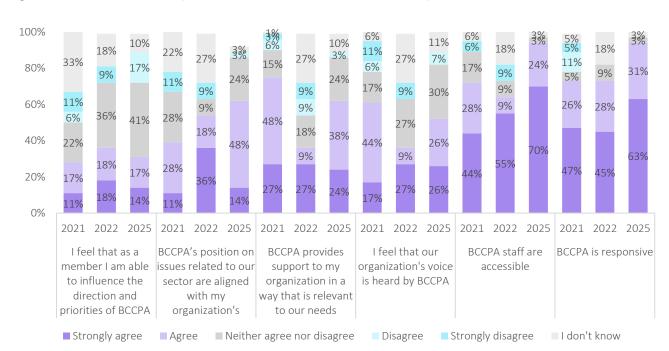


Figure 47. BCCPA BC Outcomes (n=29 in 2025, n=11 in 2022 and n=19 in 2021)

When asked how well BCCPA is performing overall in its aspiration to be the premier association representing senior's living, wellness and care, all commercial members provided a positive rating (Figure 48). When asked how BCCPA could improve, the only comments surrounded lower membership fees for start-ups and/or small commercial businesses. Overall, commercial members are very satisfied or satisfied with BCCPA (Figure 49).

Figure 48. Rating of BCCPA's overall performance in its aspiration to be the premier association representing senior's living, wellness and care (n=29)

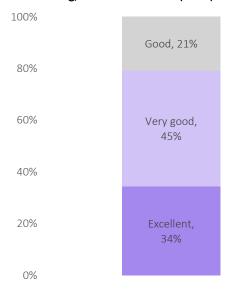
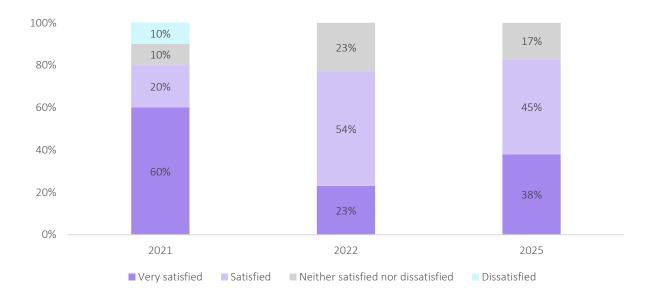


Figure 49. Overall satisfaction with BCCPA (n=29 for 2025, n=10 for 2022, n=18 for 2021)



### Likelihood of recommending BCCPA

When asked about the likelihood to recommend the association to a colleague, on a scale of one to ten, commercial members provided an average score of 9 for BCCPA (compared with average rating of 8 in 2021).

#### Net Promoter Score

Survey respondents were asked for the likelihood of recommending BCCPA to a colleague and analyzed as a net promoter score (NPS). A NPS of 46.43 (Figure 50) indicates a strong, positive relationship with stakeholders and suggests a high level of overall customer satisfaction and loyalty. This score reflects a significant majority of promoters who are likely to recommend the service or product, contrasted with a relatively low percentage of detractors. Such a positive NPS implies that the initiatives and programs in place are resonating well with commercial members.

Figure 50. Net Promoter Score, commercial members (n=32)



### **Events**

Commercial members rated the annual conference, Care to Chat, and networking events of highest importance (Figure 51). The importance of Care to Chat and the BC Care Awards saw the most significant increase in importance from 2022 to 2025.

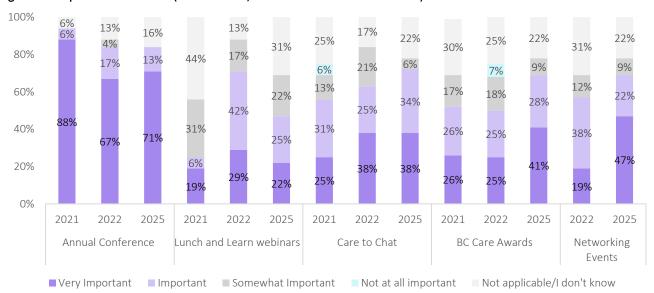


Figure 51. Importance of events (n=32 in 2025, n=16 in 2022 and n=24 in 2021)

Commercial members remained most satisfied with the annual conference and Care to Chat, followed closely by the BC Care Awards and networking events. The lunch and learn webinars and AGM have a significant proportion of commercial members who were neutral in their responses (Figure 52).

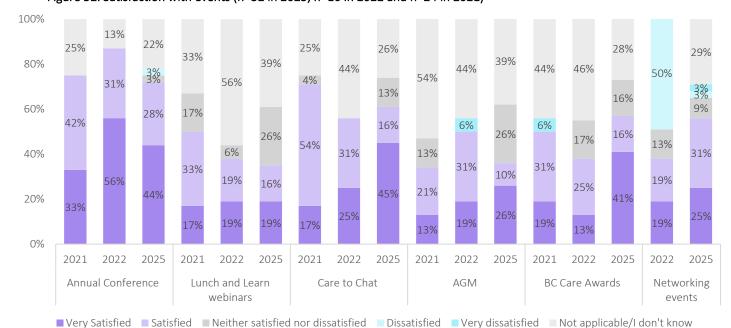


Figure 52. Satisfaction with events (n=32 in 2025, n=16 in 2022 and n=24 in 2021)

While commercial members overall are satisfied with the annual conference a few commented on the cost, particularly for smaller companies, and the desire for more face time with delegates.

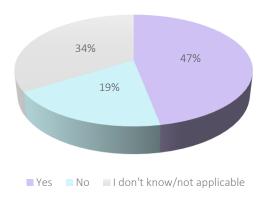
"I wish that for small start up companies like ours that has just two employees, there was a special rate to attend conferences or set up a booth. We can't afford to attend any of your conferences because they are so expensive.

— Commercial member

"Some representation for the 'little guy' suppliers when deciding priorities would be appreciated. — Commercial member

When asked if a second conference geared toward independent living and private pay operators would be desirable, nearly half (47%) reported yes, 19% said no and the remaining one third (34%) weren't sure or didn't find this applicable (Figure 53) Those who are in favour of a second conference mention the value of gaining additional information and networking and note that there are specific vendors for this sector specifically. Those who are not in favour of a second conference commented on the value of being in a shared space with multiple facets of health care/home health together,

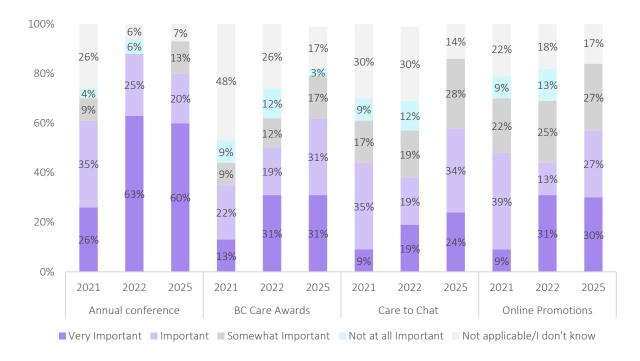
Figure 53. Desire for a second conference (n=32)



# Sponsorship

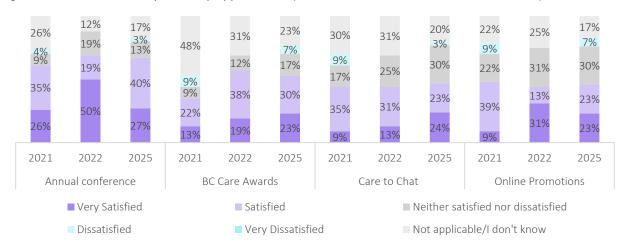
Commercial members continue to report high importance for the annual conference. This year shows a marked improvement in impotrance of the BC Care Awards and Care to Chat as well as online promotions (Figure 54).

Figure 54. Importance of sponsorship opportunities (n=30 in 2025, n=16 in 2022 and n=23 in 2021)



Aligned with the importance of sponsorship opportunities, commercial members continue to report the highest satisfaction with the annual conference followed by the BC Care Awards and Care to Chat as well as online promotions (Figure 55).

Figure 55. Satisfaction with sponsorship opportunities (n=30 in 2025, n=16 in 2022 and n=23 in 2021)



Generally, comments were favorable regarding the rate of return for sponsorship opportunities; BCCPA is comparable to similar organizations across the country. Commercial members recommended more diverse options to allow smaller companies to showcase their brand (e.g. lanyards, tote bags). With respect to the annual conference, one respondent mentioned time with attendees seems to be getting shorter and another recommended it should not conflict with the national IPAC meeting.

"The overall cost of the sponsorship, in relation to the return on investment, has been favorable. When compared to other sponsorships, this one offered a higher level of value for the financial investment."

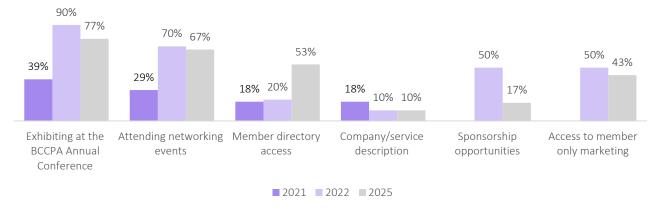
— Commercial member

"As a startup, most of the sponsorship and/or exhibiting opportunities at events are beyond our reach as they are far too expensive for us." — Commercial member

# Benefits of membership

Commercial members most highly rated exhibiting at the annual conference and attending networking events, followed by member directory access (Figure 56).

Figure 56. Benefits of membership (n= 30 for 2025, n=10 for 2022 and n=18 for 2021)



### Communication

While all key channels were rated as useful, commercial members found sector updates and targeted (direct) email communication from BCCPA the most useful (Figure 57).

100% 6% 8% 8% 10% 16% 15% 8% 29% 32% 29% 8% 80% 23% 38% 16% 37% 15% 29% 39% 45% 60% 21% 35% 23% 40% 69% 61% 15% 58% 56% 52% 20% 35% 0% 2021 2022 2025 2021 2022 2025 2021 2022 2025 2021 2022 2025 Targeted (direct) emails Town halls, regional Association e-newsletters BCCPA website administrator network (Sector Updates) meetings or special forums ■ Moderately Useful ■ Not at all Useful ■ Not Applicable/I don't know ■ Verv Useful

Figure 57. Usefulness of communication channels (n=31 for 2025, n=13 for 2022 and n=19 for 2021)

LinkedIn is hands down the most effective social media avenue for BCCPA. While Facebook utility remains consistent, Twitter/X and Instagram have decreased. With the exception of LinkedIn, about a third of all commercial members find social media from BCCPA not at all useful (Figure 58).

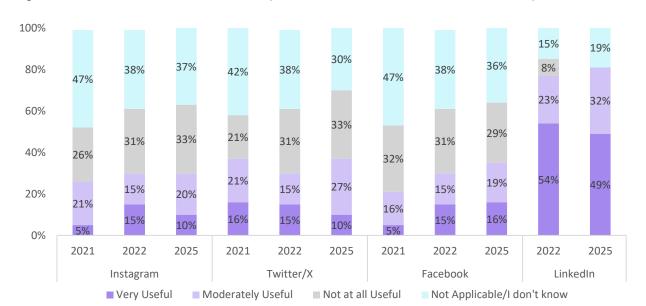


Figure 58. Usefulness of social media channels (n=31 for 2025, n=13 for 2022 and n=19 for 2021)

Commercial members were satisfied with how well BCCPA kept them informed about activities that the association undertakes on their behalf, the timeliness of communication, and the type of information that enables members to make better decisions for their organization (Figure 59).

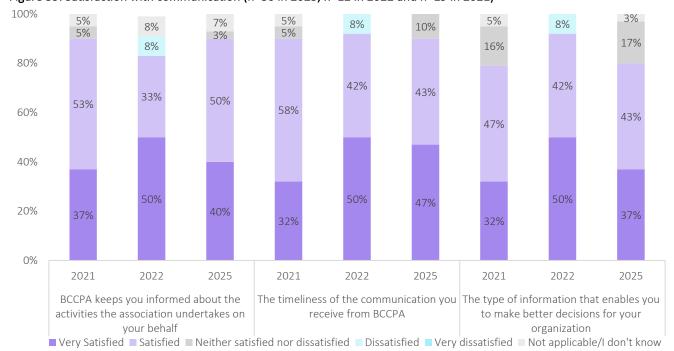


Figure 59. Satisfaction with communication (n=30 in 2025, n=12 in 2022 and n=19 in 2021)

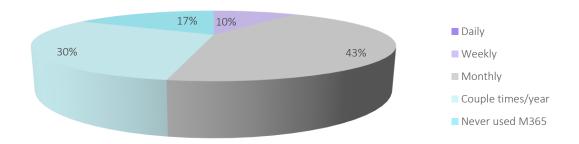
The majority (87%) of commercial members felt they receive the right amount of communication from BCCPA, with just 13% looking for more information.

When asked how effective BCCPA is at engaging with mainstream media it was a fairly even distribution of those who felt BCCPA is very effective (32%), moderately effective (29%) and not knowing (35%). Just 3% feel BCCPA is not effective an engaging with mainstream media.

### M365

The majority of commercial members access M365 on a monthly basis or a couple of times a year (Figure 60).

Figure 60. Frequency of use (n=30)



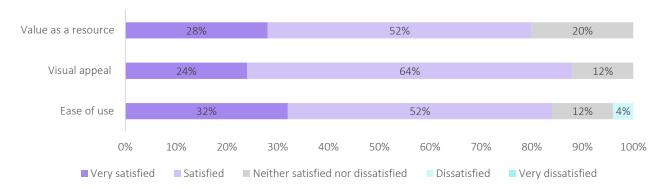
The majority of commercial members access M365 to register for events, access member-exclusive resources/documents and search the member directory. Just 10% access M365 to access workspaces and forums, including community bulletin boards, job postings, etc. (Figure 61). Reasons for not using M365 include not being aware of the portal or its benefits (n=4) or not having had time to explore the portal (n=1).

Figure 61. Reasons for accessing M365 (n=25)



Overall, commercial members that use M365 find the portal valuable as a resources, find it visually appealing and easy to use (Figure 62).

Figure 62. M365 ease of use, visual appeal and value (n=25)



Suggestions for improvement from two commercial members surround the following comments:

- "The portal membership structure does not work for my organization, as "contacts" cannot be associated with more than one email address."
- The search feature doesn't seem to let me find what I'm looking for if I lose my direct link, I can never seem to find the information again. The way it's organized is confusing."

# Association Name | All Members

The amalgamation of BCSLA into BCCPA has sparked an interest in a new name for the organization. While BCCPA has high recognizability and credibility with the public, government, and media, it may not reflect the breadth of the organization. When asked whether BCCPA should keep the association name or consider a change, members favoured keeping the name or considering a shift to BC Seniors Living and Care Association (Figure 63).

Figure 63. Association name (n=135)

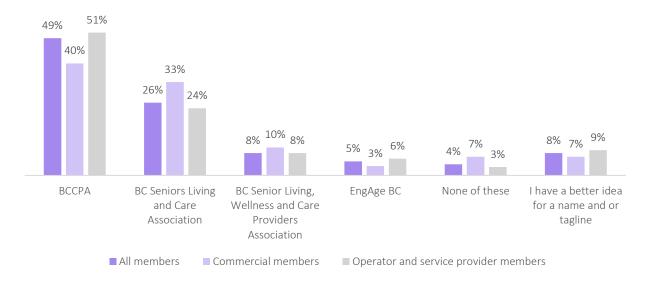


Table 35: Association name (n=135)

	Which option would you choose for our Association name?							
		BC Senior						
		Living,	BC Seniors					
		Wellness and	Living and			I have a better		
Service type	ВССРА	Care Providers Association	Care Association	EngAge BC	None of these	idea for a name and/or tagline		
Long-term care								
(n=65)	58%	0%	23%	5%	3%	11%		
Assisted living								
(n=34)	44%	9%	24%	6%	6%	12%		
Independent								
living (n=32)	28%	13%	28%	0%	6%	25%		
Home health								
(n=27)	56%	4%	26%	7%	4%	4%		
Other (n=9)	56%	0%	33%	0%	11%	0%		
Commercial								
members (n=30)	40%	10%	33%	3%	7%	7%		

Other ideas brought forward for a name for the association include the following:

- BC Care and Seniors Living Association (2 mentions, one noted this name 'keeps care at the front, which protects the existing brand awareness and goodwill')
- BC Senior Holistic Health Association
- BC Senior Living and Care Providers Association
- BC Senior Provider Association ("Drop 'care' as Independent Living needs to support seniors with a spectrum of all services. Care gives the value 'I need help'."
- BC Seniors Care Association
- BC Seniors Care Collective
- BC Seniors Living and Care Providers Association
- BC Seniors NOW
- Elderlife BC
- Senior Living and Care Association of BC