



**2022 – 23 Senior Living
Winter Weather and
Holiday Guide**

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Introduction

As winter weather begins and we prepare for the holiday season, for freezing temperatures, snowfall and ice emergencies, seniors are particularly vulnerable to Mother Nature's frosty and frigid fury.

Unlike in the lyrics of "Let It Snow," where the weather is frightful but the fire is so delightful, those living in a senior living community tend to be on the go during this time of year for travel, family visits and social gatherings.

This guide is intended to provide information for seniors and senior living operators about the risks unique to winter weather and the holiday season. As we emerge from the era of COVID-19, many seniors want to travel — to catch up on missed holiday visits and social gatherings.

Traditionally, the holiday season is hyped as the most wonderful time of the year; it also is packed with risks: safety, environmental, physical and psychosocial — all challenges for seniors.

Addressing the complexities of residents' needs, this guide outlines risk mitigation concepts for independent living, assisted living and memory care — they all have risks that must be considered, especially during this time of year.

We hope that senior living operators share this guide with residents, family and team members to better identify and mitigate the risks associated with the holiday season and winter weather. The hope is that this guide will help those in senior living settings stay safe, merry and bright throughout the winter and holiday season.

Independent living guide

In preparing our seniors for the winter months, holiday travel plans, and festivities it is essential to educate residents and families and senior living associates to the risk associated with winter weather and the holiday season.

10 Safety tips and considerations during the holidays and winter months for independent living residents

Common risk for independent living residents brought on by winter weather:



1. Power outages



6. Isolation



2. Severe driving conditions



7. Falls



3. Driving accidents



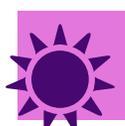
8. Seasonal flu, influenza and COVID-19



4. Snow removal



9. Fires



5. Staying warm



10. Carbon monoxide



1. Power outages

Independent living residents must stay connected.

In the event of an emergency, make sure residents can call for help, even if the power goes out and the community has a method for a daily wellness check. Encourage residents to:

- Keep their cell phones charged
- If appropriate, wear their emergency alert device
- Ensure that the landline phone is on the hook
- Have a home **winter emergency kit** on hand

Ice and snowstorms can keep residents stuck indoors for several days in a row. The resident should have at least a three-day food and water supply, a battery-operated weather radio, one week's supply of medications, and blankets and warm clothing that can be used during power outage.

Cell phone or emergency call system.

Provide residents with a means to quickly call you or 911 for help. Both a cell phone and an emergency call system can make that easier.

Keep kitchens stocked

Residents living independently in a senior living setting should stock their kitchens with at least one week's worth of food and water. There should also be an abundance of non-perishable food that does not require any cooking or refrigeration, in the event of a power loss.

Stock medications

Residents should stock their medicine cabinets with physician-approved cold medicines and analgesics, and an adequate supply of prescriptions before a storm hits.



2. Severe driving conditions

Avoid unnecessary driving during severe winter weather conditions.

Seniors' reflexes and processing speed may decline with age. When the snow is falling it is more difficult to keep focus while **driving**. When it's icy, it's harder for them to react and regain control when their car slides on icy roads.

Residents should be encouraged to schedule deliveries of groceries, prescription medications and pharmacy items, and even order in a dinner or two from the community's dining service, and to stock up on leisure activities, such as games and movies.

If a resident has their own personal vehicle, they should be encouraged to have their vehicle maintained for safety and checked out for tire condition (winter tires can make a big difference to road safety during the winter months), antifreeze, wiper fluid and wiper blades, heater/defroster, and battery life.



3. Driving accidents

Don't drive during snowy or icy conditions.

Driving accidents. Residents should be encouraged to stay off the roads until it stops snowing and their community and local county areas have had a chance to plow and lay down some salt and sand.

Transportation alternatives. Encourage residents to use alternate forms of transportation on snowy or icy days. From local bus services to Uber, there are a variety of options to meet their needs.

Consumer Reports recognizes the usefulness of a winter car emergency kit. Vehicle emergency kit can include food, water, blankets, a cell phone and car charger flashlights. It is best to keep items such as warm clothing in an easy-to-access location in their vehicle.



4. Snow removal

Clear driveways and walkways.

Residents should be discouraged from shoveling heavy snow because this can be a risk for back injuries and overexertion to the heart and lungs. Snow removal can increase a resident's heart rate and blood pressure and result in slip-and-fall injuries.

Senior living communities have services to keep driveways and walkways cleaned; an icy walkway or driveway is a big risk for falling. If residents are concerned with a driveway or walkway, they should contact their community leadership to clear them.



5. Staying warm with appropriate winter clothing

Older adults lose body heat at a much higher rate than do young people. Hypothermia sets in gradually, and residents can often be unaware of it happening.

With poorer blood circulation (and many seniors taking blood thinners), seniors are particularly susceptible to frost bite and hypothermia in cold weather. Residents should be reminded of the importance of wearing good outdoor winter clothing. Heavy coats, layered clothing, hats and mittens are a must, as are boots with non-skid treads.

To avoid hypothermia, residents should:

- Be aware of the indoor (room, apartment, home) temperature
- Keep the thermostat set to at least 68 degrees
- Dress in layers around the house
- Wear thick socks and slippers
- Drink alcohol in moderation, as alcohol consumption causes loss of body heat
- Sleep in pajamas or sweatpants



6. Isolation

Daily check-ins and wellness checks.

During winter weather and extreme cold, many residents avoid going out. Most senior living communities conduct a daily wellness check to make sure residents have everything they need, including food, medications, heat and hot water. It is important that seniors are compliant with the wellness checks so community associates know they are well and are not in need of any services.

Community associates can assist by:

- Visiting to make sure residents are doing well, aren't feeling isolated or depressed and are setting the heat properly.
- Scheduling virtual activities, such as card games and board games.
- Coordinating a daily check-in time with resident's friend or family member; even consider some senior-friendly video calling technology.
- Working with local authorities and collaborating with the Senior Registry Program.
 - Some communities have programs in place to allow seniors and their caregivers to register an older adult's name and address, noting that they live alone; it makes first responders aware of their situation.
- Discussing respite care service options.
 - Residents should take advantage of a respite care program at the assisted living community if they require more assistance and cannot travel with family during the winter months and holiday season.



7. Falls

Wear non-skid soles and/or snow and ice traction cleats.

Older adults are more likely to fall in the winter (or at any time of the year) than are younger people and are also at greater risk if they do fall.

Residents should consider wearing traction cleats over their boots or shoes with good foot protection and traction abilities. Nonskid soles offer some traction

for winter conditions and will give the resident more confidence to go about their day in the winter months.

Falls are especially dangerous among the elderly.

Residents may experience complications due to falls, such as breaks in elbows, sprained wrists, torn shoulders, twisted ankles and head injuries. Falls are the top risk factor for individuals 65 and older. Every 11 seconds, someone 65 and older falls in the U.S. Every 19 minutes an older adult **dies from a fall**.

Residents:

Winter fall-prevention tips

- Ensure that proper snow and ice removal occurs on any walkways.
- Meet with your medical provider to obtain a fall risk assessment and have your feet and eyes checked.
- Wear appropriate eyeglasses.
- Ensure properly fitting clothes.
- Don't go out if you don't have to.
- Slow down and give extra time.
- Review your medicines; be aware of any side effects that could contribute to falls.
- Engage in daily exercise that will strengthen your muscles and improve balance.
- Carry a cell phone even if it is a simple trip to the community's mailbox or dining area.
- Remove obstacles or objects that could contribute to falls in your home or apartment, such as rugs, furniture, and objects on the floor.
- Do not wear socks on slippery floors.
- Ensure your footwear has good traction and grip.
- Use handrails in the bathroom, hallways and when entering and exiting your home.
- Be aware of pet toys and locations.

Tips to avoid slips

- Avoid **slippery surfaces** — take a route around obvious hazards.
- Concentrate on the path ahead, taking your time and proceeding slowly.
- Wear appropriate slip-resistant footwear — shoes or boots with waffled, ridged or heavily textured soles.
- Use handrails when provided and three points of contact when entering or exiting vehicles.
- Beware of changes in walking surfaces, avoiding steps or curbs with ice on them.
- Clean your shoes when entering a building — caked ice and snow can cause you to slip and can also create a slippery, wet floor for others.
- Avoid carrying items while talking on the phone.
- Walk slowly, deliberately and as flat-footed as possible.

If you slip

- Try to roll with the fall if you fall forward.
- Sit down if you begin to fall backward.
- When a falling person relaxes, an injury is less severe than when he/she tenses. Fighting a fall on ice can cause twisting or bending injuries, which may worsen the bump the fall would have otherwise produced.



8. Seasonal flu and influenza and vitamin D deficiency

Up to 90% of seasonal flu-related deaths happen to people who are 65 and older. The winter is the most common time for the flu to hit North America. According to the CDC, the most effective way for older adults to protect themselves from the flu and its complications (such as pneumonia) is to get an updated vaccine before each flu season, as recommended by your doctor.

The CDC recommends COVID-19 vaccines and boosters for residents of long-term care facilities and for older adults with underlying medical conditions and pneumococcal vaccinations for adults 65 or older, or adults 19 through 64 years of age with certain medical conditions. Vaccines aid in the prevention of illness and protect residents in senior living communities from the spread of infection brought on by invasive outbreaks. Residents should consult their physicians on vaccination needs.

Older adults spend more time indoors during the winter months, which can lead to a vitamin D deficiency, putting them at risk for osteoporosis and many other diseases. Residents should consult with their physicians about a vitamin D supplement or a wintertime diet that may include milk, orange juice, cheese, egg yolks, grains and seafood.



9. Fires

Many fires start in the winter months because of electric space heaters. The senior living community will have restrictions on the use of electric space heaters and/or wood stoves.

Residents must be made aware of the restrictions and the community's policy on the use of space heaters or wood stoves or other heating devices in the community. A best practice is to avoid candles because sparks from candles can cause a fire.

Environmental service leaders should conduct a winter environmental residential audit to be sure that the resident's living space is without risk of fire hazards.

If residents are living in an independent living home on the community campus, a furnace and chimney should be checked and cleaned by a qualified professional every year.



10. Carbon monoxide poisoning

Check in with environmental services leaders about a carbon monoxide alarm.

The risk of carbon monoxide poisoning increases in the winter, because of an increased use of gas fireplaces, furnaces, generators and other heating devices. Environmental service leaders should conduct an annual winter apartment or home assessment and furnace inspection to be sure there are no present carbon monoxide poisoning risks.

The community should work with the local emergency authorities to determine if there is a need for residents to place carbon monoxide detectors in their independent living areas, bedroom or heating areas.

Community associates can assist by:

- Including residents in the emergency operations plan
- Discussing emergency planning and supply management for winter weather
- Providing a schedule and process for wellness checks
- Providing information on community grounds snow and ice removal
- Developing a communication system to alert residents to inclement weather, road conditions and community emergency operations plans



Assisted living guide

Assisted living operations can be challenging. Finding a balance of providing a safe environment and a homelike ambiance during the winter months and holidays can often expose the community to specific risks related to inclement weather, resident holiday celebrations and gatherings, and changes in a resident's mood or overall health.

Common risks for assisted living residents brought on by winter weather and the holiday season are:



1. Falls



4. Poor mental health



2. Loneliness/
isolation



5. Staying warm/
hypothermia



3. Influenza

5 Safety tips

and considerations
during the holidays and
winter months for assistant
living residents



1. Falls

Slip-and-fall accidents are the most common injuries for assisted living residents.

Accumulation of snow or ice around the community property can easily result in a resident injury. If residents are walking to different locations within the assisted living community, staff members must give special attention to ensuring that hallways and walkways are dry and safe for passage. Other considerations for winter fall prevention are:

- Proper removal of snow and ice on walkways before the resident leaves the community
- Resident fall risk assessments used to determine resident safety needs and fall-prevention interventions
- Properly fitting clothes
- Education of residents on calling for assistance when needed
- Readily available eyeglasses for residents
- Routine environmental rounds to identify such risks as room lighting, water spills, room clutter etc.
- Encouraging resident and family to stay at community and avoid going out if winter conditions exist
- Urging residents to slow down and give extra time for daily tasks
- Review of your residents' medications, being alert for medications that may cause dizziness or falls.
- Encouragement of residents to engage in daily exercise or a therapy program that will strengthen their muscles and improve balance
- In the resident's room, removal of obstacles or objects that could contribute to falls, such as furniture and objects on the floor
- Urging residents to not wear socks on slippery floors
- Ensuring footwear has good traction and fit well
- Encouraging use of handrails in the bathroom, hallways and when entering and exiting their rooms
- Regular screening of residents for changes in condition, balance and coordination; seeking a rehabilitation program when necessary

With the holiday season in mind, associates should consult with the community safety director and environmental service team members to be certain decorations are approved and do not pose any type of environmental hazard. Conduct environmental rounds to be sure that no decoration will add a risk of falling, tripping, or electrical hazard.



2. Loneliness and isolation

More than one in three older residents in assisted living communities suffer from loneliness that leads to adverse health outcomes. Unfortunately, residents in assisted living often experience loneliness during the winter months due to the weather or because of mobility issues and health concerns that interfere with family visits or holiday gatherings. Social isolation was associated with about a 50% increase risk of dementia and other serious medical conditions.

Community associates can assist by:

- Making communication a priority. Check in daily with residents. Consider activities that engage residents instead of simply entertaining them.
- Engaging the resident in a daily communication plan. Daily rounds provide the resident with information on community events and activities.
- Encouraging and facilitating social activities. Listen to the resident and family members to determine what activities the resident enjoys and are meaningful.
- Periodically calling upon a healthcare practitioner to assess residents who appear depressed or withdrawn and residents who are displaying changes in behavior.
- Providing a support group or a resident peer group. Allow residents to actively engage in their own psychological and psychosocial care, giving them a sense of control over their own lives and activities that brings them personal quality and purpose. This can spur additional activity groups, such as a volunteer committee or emotional and meaningful social engagement, that are developed in collaboration with other residents, tapping those residents as sources of peer support.
- Introducing new and old or familiar activities, such as gardening, crafting, holiday cooking and cookie decorating, gift wrapping, pet therapy, karaoke Christmas Carol night, Christmas movie night, Christmas decorating and book clubs — all good indoor activities during the winter months and holiday season.
- Recognizing that a one-size-fits-all approach for activities will not be effective, so it is important that the community plans for social activities where the residents can feel meaningfully engaged.



3. Seasonal flu (influenza)

Influenza can be introduced to residents in assisted living communities by newly admitted residents, healthcare personnel and visitors. The senior living community must recognize and enforce infection-control measures, including surveillance measures for associates, family and other visitors, especially during the winter months when influenza outbreaks tend to occur.

Preventing influenza, COVID-19 and other infectious outbreaks requires a multi-faceted approach that includes:

- **Vaccines and COVID boosters.** The CDC recommends that residents receive the [influenza vaccine](#) annually. In most flu seasons, the vaccine becomes available to long-term care facilities beginning in September, and should be offered by the end of October, though later vaccination is still warranted if that deadline is missed.
- **Antiviral treatments.** The CDC recommends that [long-term care facility](#) residents who have confirmed or suspected influenza receive antiviral treatment immediately, even before a confirmed lab test, because antiviral treatment works best when started within the first two days of symptoms.
- **Antiviral chemoprophylaxis.** If an outbreak is occurring, residents on units or wards with influenza cases who may have been exposed to the virus should begin antiviral preventive treatment, known as chemoprophylaxis, whether they received the [flu vaccine](#) earlier or not.
- **Surveillance and testing.** If a flu outbreak occurs in the community, staff are encouraged to check on residents often to look for [flu symptoms](#), such as fever, cough, chills and body aches. Lab testing is recommended for any resident who has flu symptoms, especially when two residents or more develop respiratory illness within 72 hours of each other.
- **Infection control and prevention.** Senior living communities are required to follow state guidance on infection prevention and control. Many states mandate an infection control preventionist and have strict enforcement guidelines for associate education and training, handwashing, reporting of infections and surveillance activities.

The CDC provides guidance on vaccination for residents and healthcare personnel of [long-term care facilities](#) that provide healthcare and other guidance on [influenza and seasonal flu/COVID-19](#).

Community associates can assist by:

- Providing resident information on vaccines and CDC recommendations
- Offering vaccine clinics for seasonal flu and COVID-19
- Posting signage on hand hygiene and the prevention of the spread of virus
- Screening residents upon admission for vaccine history
- Providing residents, associates and family regular education and training on infection control



4. Poor mental health

Because the winter months are so cold and the days shorter, it is not uncommon for residents to develop [seasonal affective disorder](#) (SAD). Fall and winter SAD can trigger mood changes and some of the following symptoms:

- Thoughts of not wanting to live anymore
- Feeling guilty, worthless and hopeless
- Feeling weak and drained of energy
- Oversleeping and not feeling like waking up
- Uninterested in the things they previously loved
- Feeling sad or down almost daily
- Increased food cravings and overeating, leading to weight gain

Community associates can assist by:

If associates are noticing a change in resident behaviors, they should alert the wellness nurse or healthcare practitioner at your community to arrange a medical checkup for the resident

The care practitioner is trained to identify SAD and offer suggestions for lifestyle and treatment options. SAD can be treated without medications by simple changes in the assisted living environment, such as:

- Daily walks in the outdoors weather permitting or within the assisted living campus
- Letting in as much light as possible by opening blinds and curtains
- Regular exercise even if it is indoors
- Participation in social activities when it is not possible to go outdoors
- A healthy diet; vitamin deficiencies are sometimes an underlying component in depression
- Spruce up the indoor environment with winter plants; opt for brighter clothing selections, and add more color in resident room decor to distract from the dullness outside



5. Staying warm/hypothermia

Recognizing the importance of staying warm and the danger of hypothermia

According to the National Institute on

Aging, **hypothermia** is what happens when your body temperature gets very low. For an older person, a body temperature of 95°F or lower can cause many health problems, such as a **heart attack**, **kidney problems**, **liver damage**, or worse.

Older adults lose body heat at a much higher rate than young people. Hypothermia sets in very gradually, and residents can often be unaware of what's happening.

To avoid hypothermia:

- Be aware of the room or apartment temperature
- Keep the thermostat set to at least 68 degrees
- Residents should dress in layers around their rooms
- Residents should wear thick socks and slippers
- Residents should be encouraged to drink alcohol in moderation, as alcohol consumption causes loss of body heat
- Residents should be encouraged to sleep in pajamas or sweatpants
- Ensure the resident has appropriate bed linens
- Ensure the resident has appropriate winter clothing and shoes
- Make daily resident room rounds to be sure the resident is comfortable
- If residents are leaving the community for holiday outings, ensure they have appropriate clothing and footwear and are wearing a waterproof jacket or coat if it is snowy

Early signs of hypothermia:

- Cold feet and hands
- Puffy or swollen face
- Pale skin
- Shivering (in some cases the person with hypothermia does not shiver)
- Slower than normal speech or slurring words
- Acting sleepy
- Being angry or confused

Later signs of hypothermia:

- Moving slowly, trouble walking, or being clumsy
- Stiff and jerky arm or leg movements
- Slow heartbeat
- Slow, shallow breathing
- Blacking out or losing consciousness

If the residents have been outdoors or on an outing during the winter months and are complaining of being cold and exhibiting **signs of hypothermia**:

- Contact 911 immediately.
- Try to move the person to a warmer place.
- Wrap the person in a warm blanket, towels, or coats — whatever is handy; even your own body warmth will help.
- Give the person something warm to drink, but avoid drinks with alcohol or caffeine, such as regular coffee.
- Do not rub the person's legs or arms.
- Do not try to warm the person in a bath.
- Do not use a heating pad.

Elopement

Elopement presents unique challenges to residents, associates and the assisted living community. In freezing temperatures, a confused resident leaving the community is at risk of serious, or even fatal, outcomes. Prolonged exposure to cold can result in **frostbite and hypothermia**. If a resident becomes lost in a winter storm after leaving the community, they could suffer severe or life threatening consequences. Winter-related tragedies can be mitigated through a proactive approach to elopement risks.

Community associates can assist by:

- Conducting elopement risk assessments and adding risk interventions into the resident service plan
- Conducting routine rounds and resident check in
- Conducting practice elopement drills
- Ensuring that door alarms are in working order
- Ensuring video security systems are in place
- Ensuring Exit doors are locked when applicable
- Educating family members to resident exit seeking, and reporting of resident's desires to leave the community

Memory care guide

The winter months and holiday season can be very stressful for residents with Alzheimer's or other dementia diseases. Not only are changes in routines and schedules a factor for residents, but care givers and family members may experience feelings of loss as their loved one may not be the same as in prior holidays, and activities they once enjoyed are no longer relevant or make no sense, especially when traditions like decorating, baking or cooking become too complicated or unfamiliar.

Suggestions for family and resident holiday survival:

- Keep expectations in line with the resident's prognosis.
- Understand that in the early stages of dementia or memory loss, the residents are easier to manage, and a resident can communicate; however, as the disease progresses, activities and gatherings may cause the resident to become anxious or agitated.
- Plan a family lunch or brunch early in the day. Often residents with dementia or Alzheimer's become agitated or confused in the evening, a condition known as **sundowning**.
- Meet in a quiet setting to reduce over stimulation and resident confusion.
- Plan a small gathering or have visitors or family members arrive a few at a time to not overwhelm the resident.
- Keep visitations simple: go for walks and attempt to conform to the resident's schedule as much as possible.
- Residents with dementia or Alzheimer's should be monitored for their food consumption, avoid too many sweets and alcohol, because overeating and alcohol consumption may worsen symptoms.

Plan activities that require repetitive tasks, such as:

- Stringing garlands of popcorn or berries
- Linking paper chains
- Making wreaths
- Wrapping presents

Community associates can assist by:

- Communicating residents' routines and schedule requirements
- Assisting in setting realistic expectations for resident care and prognosis
- Including family members in communicating community holiday events
- Reporting changes in behavior and an increase in resident wandering or exit seeking

- Creating photo albums
- Baking cookies
- Writing and addressing greeting cards
- Listening to holiday music
- Singing holiday songs

If you plan a trip that requires the resident to travel away from the memory care or assisted living community, consider using a **checklist** of items necessary for traveling.

- Pack any medication(s) your loved one is taking and be sure to bring enough doses.
- Pack a change of clothes (or a few) in case of incontinence issues, spills, etc.
- Ask a friend or another relative to come along to provide assistance.
- Schedule extra bathroom stops along the way to your destination.
- Schedule extra rest breaks.
- Travel during the day rather than in the evening.
- Do your best to avoid unfamiliar or busy places that might upset, confuse or frustrate your loved one.

If a resident is in assisted living or memory care, it may be easier on the resident and family to bring the celebration or holiday party to the community. Family members should coordinate holiday gatherings with the community executive director and consult with the wellness nurse on resident needs and schedules to keep on track with resident's daily routines and schedule needs.



Conclusion

The winter weather and holiday season expose senior living community residents with various risk and challenges. This guide is intended to address risk where we have noted claim activity and have anecdotal experience from working extensively with senior living organizations.

The goal is to help operators keep residents safe and provide mitigation techniques, educate residents, family and associates of common risk exposure noted during the winter months and holiday season.

As the holidays may usher in festive gatherings and the weather may be turning to a bitter cold, we hope that all may find a healthy balance to keeping safe and warm during this most magical time of the year.

For more information please contact:

Rhonda DeMeno

Director Clinical Risk Services
Senior Living Center of Excellence
+1 312 288 7704
WTW
rhonda.demen@wtwco.com

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