

Long-term Care for Seniors: Some Best Practices and Public Policy in Nova Scotia: Summary of a panel discussion held at the 50th Annual Conference of Atlantic Economics Association

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Saint Mary's University hosted this conference on October 25-27, 2024. The specific focus of this conference was on the promises and challenges posed by the demographic changes taking place in Canada. There has been an uneven aging of population across Canadian regions, with Atlantic Canada's population aging at the fastest rate. Population aging creates some new economic challenges as well as new opportunities. The long-term care service for seniors is one such example.

Organized by Dr. Ather Akbari, Chair of *ARGEIAD*, a plenary session focused on some best practices and public policy relating to long-term care for seniors in Nova Scotia. The panel was moderated by Patrick Brannon of the Atlantic Economic Council. Participants included Benjamin Nycum from Nycum Associates, Andrew Holland from Grandview Manor, and Paula Langille from the Government of Nova Scotia.



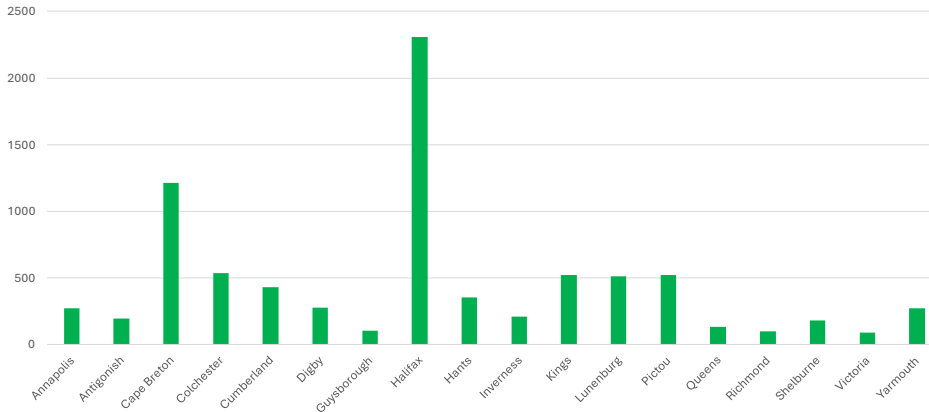
The discussion explored significant themes around long-term care (LTC) for seniors. The conversation highlighted community welfare, economic benefits, and challenges in care delivery, offering insights into best practices and public policy directions for LTC.

Community Welfare and Economic Impacts of LTC

The panel opened by highlighting the importance of long-term care (LTC) in supporting seniors' needs and ensuring effective transitions from hospitals to LTC facilities. Nova Scotia has an aging population, which intensifies the demand for effective long-term care solutions. As of October 2024, Halifax has the highest number of current LTC beds in the province. The discussion explored significant themes around long-term care (LTC)

for seniors, emphasizing community welfare, economic benefits, and challenges in care delivery.

Current LTC Beds by County (Oct 2024)



LTCs in NS are independently owned and operated but receive funding from provincial government to address the health care needs of residents. A major consideration for LTC is their long-term expense forecasting, especially given that each facility is built to last for around 50 years. This involves understanding the impact of co-morbidities such as dementia, which affects both care needs and cost management. The panel emphasized the importance of future planning to ensure care remains sustainable for an aging population.

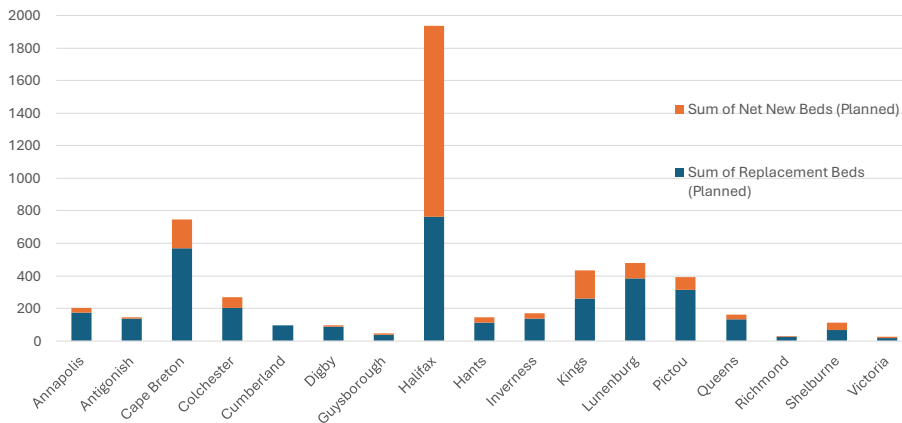
LTC facilities are looking for ways to integrate community connections within their structure. Amenities like hairdressing centers, smoking rooms, cannabis rooms, and family-stay accommodations are examples which could reduce the institutional feel and make LTC centers more like homes. This approach can help improve residents' quality of life.

Economic Revamping Through LTC Development



LTC was also seen as an economic driver in the community. The panel pointed out that the construction and maintenance of these facilities provide jobs for local workers and contractors, from the foundation stage through to the finalization of the structures. This not only supports local employment but also boosts the economy through higher property and income taxes paid by those involved in the sector.

LTC Infrastructure Plan by County



The panel stressed that LTC could significantly contribute to economic revamping by fostering local business engagement. When LTC workers have higher incomes, they become valuable tax contributors, further supporting local economies. Local contractors and suppliers working with LTC facilities also benefit, creating a cycle that strengthens both community and economic health.

Home Care Preferences and Challenges in Dementia Care

Many seniors prefer to stay at home when given the choice, a trend that has influenced public policy. The government has expanded community engagement programs like the Caregiver Benefit Program, which offers financial support to families. This shift is helping to enable more seniors to remain at home.

However, the growing prevalence of dementia and other cognitive impairments presents unique challenges to both home care and LTC. As dementia becomes more common, LTC facilities need to adjust their models to meet the specific needs of these residents, including specialized cognitive care programs. The staff at LTC facilities must be trained to manage the cognitive and behavioral complexities associated with dementia, making care delivery more labor-intensive and costly.

The panel emphasized the importance of customizing LTC services to fit the individual needs of seniors, rather than enforcing a one-size-fits-all model. This involves creating more personalized care environments that feel like home while also meeting medical and emotional needs.

Cost Management in LTC Operations

Another central theme of the discussion was managing the costs of running LTC facilities. While the cost to run LTC units is similar across many operations, the staffing needs differ based on the cognitive impairments of residents. In facilities with fewer dementia patients, staff hours can be more evenly distributed, making operations smoother and more cost-effective.

In contrast, LTC units with a higher number of residents who have very severe cognitive decline may need increased staff resources. Staff in these units often require more hours to provide specialized care, leading to increased operational costs. Yet, the panel remained optimistic that LTC institutions can adapt to these challenges by creating flexible models of care and staffing that respond to the varying levels of need among residents.

In summary, the discussion highlighted how long-term care institutions must evolve both in terms of their economic role and their care models to meet the growing demands of an aging population. The need for cost management, community integration, and staff training in specialized care, was identified as critical for the future of LTC.