

Summary of Research Proposal/Résumé de la proposition de recherche

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Across Canada, long-term care providers, funded both publicly and privately, are responding to the care needs of an aging population while operating with aging building, staff challenges and fiscal constraints. In Nova Scotia, the continuing care sector has been experiencing significant changes as the Province's Department of Health moves forward with its 10-year strategy to enhance and expand its continuing care system. Changes include innovative physical designs (e.g., home-like features and settings instead of hospital-like wards), an emphasis on resident-centered, individualized care with particular attention to persons with dementia, and an emphasis on staff scope of practice. These system-level and institutional-level innovations will result in nursing home staff providing care differently to older Nova Scotians. However, despite the shift in models of care and increasing support from funders, such innovations have not been thoroughly assessed. To implement changes without thoroughly understanding their impact can have serious consequences, including less than optimal delivery of care to older Nova Scotians and their families, and an inefficient use of organizational time and funds.

It is important to explore and understand the advantages and disadvantages of innovations currently under way. In particular, to what extent and in what ways do differences in the nursing home model of care impact resident quality of life? The central objectives of the project are to assess the impact of policy changes on resident quality of life, and to integrate the resident perspective with that of the family and the staff. The project's multi-disciplinary, multi-sectoral team of researchers and key industry leaders will examine the experiences of facilities employing different models of care on resident quality of life from the perspectives of resident, family members, and staff. The use of these multiple methods (e.g., survey, focus group, personal interview, case study) across the three sample groups, within different models of care will enable the team to analyze the results in such a way as to examine the unique experience of each group in different models of care while highlighting the connections among the sample groups. A key benefit of this study and its methodology will be the assessment of key elements that comprise the model of care (staffing model, and physical design), to examine their individual and combined effects on the quality of life of the resident. The study will also add to the literature by examining the impact of different models of care directly from the perspective of the resident, family and staff.

A final objective of the study is to facilitate the dissemination of knowledge and application of research to strengthen continuing care sectors throughout Canada. Through the ongoing contribution of decision makers from the sector, knowledge integration and effective knowledge translation are key components of the study's design. The evidence generated by this project will inform the development of resident-centered care environments. This information will also provide the continuing care sector in Nova Scotia and elsewhere with the necessary information to justify, and to advocate for, supportive programs, policies, and services.