An Overview of Residential Long Term Care in New Brunswick, Nova Scotia, and Prince Edward Island

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Introduction

This document provides an overview of residential long term care in the provinces of Nova Scotia, New Brunswick and Prince Edward Island. It was prepared as part of the *Advice Seeking Networks in Long Term Care* project (2014-2017), Atlantic Canada site, to assist with the analysis and interpretation of findings from the surveys and interviews with seniors leaders in the long term care sectors in these respective provinces. Information on the long term care systems reflects the situation as of 2014-15, the time of the study's data collection.

Background

The formal structure of Canada's long term care sector is complex and varies across provinces and territories. This is largely attributed to the lack of federal jurisdiction for this care setting, unlike care provided in a hospital or other acute care setting. This document speaks to the landscape of residential long-term care in Canada's Maritime provinces and factors that may contribute to the organization and advice-seeking behavior within the respective provincial longterm care systems.

Located on the eastern coast of Canada, the Maritimes consist of three provinces: New Brunswick, Nova Scotia, and Prince Edward Island. While the Maritime provinces are often considered as a collective entity, the organization and delivery of long-care term services falls under provincial jurisdiction, leading to differences across each system. The organization of these provincial care delivery systems are of particular interest due to the high proportion of older adults in this region. In New Brunswick, Nova Scotia, and Prince Edward Island, 18.6%, 18.4% and 18.0% of the total provincial population, respectively, were aged 65 and older, compared to a national percentage of 15.7% (see Table 1).

	Total	65 years and older	% of population 65
			and older
Canada	35,544,564	5,589,292	15.7%
New Brunswick	743,865	138,467	18.6%
Nova Scotia	943,294	173,210	18.4%
Prince Edward Island	145,832	26,243	18.0%

Table 1 – Estimates	of population, h	v age group	for July 1, 2014
Laure 1 Loundates	or population, c	Jy age group	101 July 1, 2017

Columns 2 and 3 from Statistics Canada CANSIM -51-0001

The Maritime provinces are a distinct region in Canada for a number of reasons including size, with respect to geography and population. For example, in 2014, the total population for this region was 1,832,991 or 5.16% of Canada and the total collective land mass was 130,448 km², or 1.45% of Canada's total land mass. The geography of the Maritime provinces is primarily described as rural.

Beyond its population and geographic distinctiveness, within the region there are differences with respect to the organization and delivery of long term care services in terms of legislative framework and models of accountability, owner-operator model, geographic proximity of homes, and presence/role of professional associations. These are outlined briefly below.

Legislation

While all three long-term care systems provide access to publicly funded nursing home beds, the ministry responsible for setting and monitoring standards and regulations differs (Health Association Nova Scotia, 2012). In both Nova Scotia and Prince Edward Island, these responsibilities lie within the health portfolio, while in New Brunswick it is within the social development ministry (Health PEI, 2016; New Brunswick Association of Nursing Homes Inc., 2014; Nova Scotia Health and Wellness, 2013).

In New Brunswick, the Department of Social Development is responsible for licensing and monitoring services pursuant to the *Nursing Home Act*. The Department has 8 administrative regions. Nursing homes are inspected by Regional Liaison Officers employed by the Department of Social Development (Government of New Brunswick, 2017a)

In Nova Scotia, the Department of Health and Wellness is responsible for licensing and monitoring nursing homes pursuant to the *Homes for Special Care Act*. In 2014, there were 9 health districts, where responsibility for assessment, intake, and inspection occured (Nova Scotia Health and Wellness, 2013).

In Prince Edward Island, the *Community Care Facilities and Nursing Home Act* is the legislation governing nursing homes. The Act is administered by the Minister of Health & Wellness. The Act establishes a corporate body known as the Community Care and Facilities Nursing Homes Board which is responsible for licensing and monitoring privately owned facilities. Inspections of these facilities are conducted by Department of Health and Wellness staff pursuant to the Community Care Facility and Nursing Home Act. PEI Health, the sole Health authority, delivers nursing home care through the Manors and contracts the private licensed nursing homes for additional beds. (PEI Department of Health, 2009b).

Ownership

Legislative frameworks as identified above are also responsible for the ownership/operator model within each province.

In New Brunswick, most nursing homes are independently owned, private corporations formed under the province's Companies Act (New Brunswick Association of Nursing Homes Inc., 2014). This is a requirement of the *Nursing Home Act*. These nursing homes are run by a board of directors and operate under a non-profit designation (Government of New Brunswick, 2017b). There are 62 non-profit facilities and 3 for profit facilities in the province (New Brunswick Association of Nursing Homes Inc., 2014).

Nova Scotia has a mixed model approach to ownership that sees nursing homes owned and operated by publicly funded health institutions (such as health districts/authorities), as well as privately owned nursing homes, both in the for profit and non-profit sectors.

In Prince Edward Island, there are 9 facilities (known as "Manors") owned and operated by PEI Health, the health authority, and 10 other facilities that are privately owned and operated.

Key Associations

Each province has key associations whose work is to connect people within the sector and enhance the long-term sector.

In New Brunswick, the New Brunswick Association of Nursing Homes (NBANH) is a membership based association with a long standing presence in New Brunswick. In addition to advocating for long-term care, it is a conduit for education and networking in the sector. The Association Francophone des Établissements de Soins Spéciaux du NB provides support and opportunities within the French-speaking facilities across New Brunswick.

In Nova Scotia, there are several key organizations that support the long-term sector. The Health Association of Nova Scotia, a membership based association, through its policy, planning and decisions support team, supports the Continuing Care Council which functions as a key advocate entity on long term care matters. The Community Governed Nursing Home Society, formed in 2011, support and promotes connections amongst the non-profit homes in Nova Scotia.

In Prince Edward Island the Nursing Home Association of Prince Edward Island connects the privately owned facilities.

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