

Accountability Report 2022–23

Seniors & Long-term Care



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Accountability Statement

The Accountability Report of the *Department of Seniors and Long-term Care* (DSLTC) for the year ended March 31, 2023, is prepared pursuant to the *Finance Act* and government policies and guidelines. These authorities require the reporting of outcomes against the Department of Seniors and Long-term Care for the fiscal year just ended. The reporting of the DSLTC outcomes necessarily include estimates, judgments and opinions by DSLTC management.

We acknowledge that this Accountability Report is the responsibility of DSLTC management. The report is, to the extent possible, a complete and accurate representation of outcomes relative to the goals and priorities set out in the DSLTC 2022-2023 Business Plans.

Original signed by Minister

Honourable Barbara Adams, Minister

Original signed by Deputy Minister

Paul LaFleche, Deputy Minister

Introduction

The Department of Seniors and Long-term Care supports the social and economic wellbeing of older adults across the ageing continuum and is mandated with improving the quality of care for those accessing continuing care services, including long-term care and home care.

The priorities reported on below showcase the department's commitment to supporting those who are accessing continuing care services to age as well as possible in their homes and communities.

Measuring Performance

Renovate and build over 2,500 new single-bed rooms over three years.

- The addition of approximately 600 more single long-term care rooms was announced in January 2023.
- These builds are among 34 new and replacement facilities planned across the province, all of which are expected to open by 2027.
- Collectively, these builds will add about 1,200 new long-term care rooms and replace another 2,300 rooms.

Seek federal government funding for at least an additional 1,000 new private rooms on top of the 2,500 for a total of 3,500 new single-bed rooms.

• As a first step, Nova Scotia focused on negotiations with the federal government on the Canada Health Transfer. Subsequently, bilateral agreements will explore funding for long-term care.

Ensure that no couple, who is able to be together, will be separated in long-term care.

- The Life Partners in Long-term Care Act took effect March 1, 2021.
- As of March 29, 2023, there have been over 130 people reunited with their partner under the act.

Require, as one of the first priorities, NSHA officials to engage with representatives of all long-term care properties for data including how many single rooms exist to inform a plan.

• In partnership with Nova Scotia Health (NSH) and service providers, an accurate bed inventory has been created. Investments in a new bed placement system will enable better integration of client admissions within the inventory of new and existing beds.

Establish, by the end of the first year of the department's mandate, a plan for the expansion and renovation of existing properties as well as the development of new accommodations.

• The Province has taken action on this commitment through the Long-term Care

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Renewal Plan to build or renovate 34 long-term care facilities across the province and expand capacity by 800 rooms in Central Zone.

• Facility Condition Assessments of existing facilities began in late 2021-22 and continued into 2022-23. This work is complete.

Require that funding for resident care programs and food be done through a system of flow-through envelopes.

• As of November 2022, all Nursing Homes and Residential Care Facilities are funded through a system of flow through envelopes. This ensures that funding intended for direct health care services is used only for this purpose.

Amend the *Homes for Special Care Act* to ensure that every long-term care facility must maintain staff care levels of combined Registered Nurses (RN), Licensed Practical Nurses (LPN) and Continuing Care Assistants (CCA) sufficient to satisfy at least 4.1 hours of care per resident.

- Over \$25 million was available in 2022-23 to help increase the standard of care to at least 4.1 hours of care per resident in nursing homes for those facilities who were ready to implement. Half of all nursing homes in Nova Scotia were delivering 4.1 hours of direct care staffing to individuals by the end of the fiscal year, with the remainder well on their way through active recruitment.
- The province is on target for all facilities to reach an average of 4.1 hours of care per a resident by winter 2024.

Reinstate the CCA training grant that was cancelled in 2013.

• The CCA training grant was reinstated, providing free tuition to CCA students. Over 1,000 students were enrolled in CCA programs across the province, exceeding targets for 2022-23.

Make the CCA registry mandatory.

• The mandatory CCA Registry was implemented in 2022/23 providing valuable information to support ongoing workforce planning efforts. As of August 2022, 8,214 CCAs were registered.

Establish a Seniors' Care Grant for help with household services.

- The Seniors' Care Grant continued in 2022-23 and was expanded to provide \$500/year to assist seniors with the cost of professional health services as well as household expenses (i.e., snow removal, lawn care, telephone/internet, physiotherapy, mental health supports).
- In 2022-23 two, one-time payments of \$250 were made available to support seniors with the increased cost of home heating and to aid with clean-up following Hurricane Fiona.
- Over 40,000 applications were approved for both the Seniors Care Grant and

Seniors and Long-term Care 2022-2023 Accountability Report support following Hurricane Fiona, and over 31,000 home heating grants were approved.

Other Areas of Focus

Recruitment and Retention of CCAs

Healthcare teams continue to work hard in challenging circumstances. In an effort to enhance recruitment and retention of CCAs, the following efforts have been implemented:

- an innovative 'work and learn' program where students can learn, while gaining experience and earning money. In 2022-23, over 600 students took programs in this way;
- all fees and tuition are being covered through the Recognition of Prior Learning Program, for those who have some experience or education as a CCA so that they can become a Certified CCA in NS;
- a thank you bonus for some current employees, like CCAs, in the Nova Scotia publicly funded health sector;
- an incentive bonus to encourage nursing staff who have left permanent jobs in the Nova Scotia publicly funded health sector to return (this bonus closed on March 31, 2023); and
- a retention bonus to encourage current nurses in the publicly funded health sector to sign a return of service in 2024.

Nurse Practitioners in Long-term Care and Community

The Province invested \$2.5 million to increase the number of Nurse Practitioners (NPs) working in Long-term Care facilities. NSH was funded to hire 13 FTE NPs to provide muchneeded support to long-term care facilities across the province. These NPs work in multiple long-term care facilities, and also serve people in the surrounding community who do not have a family doctor or access to a NPs.

As of March 31, 2023, recruitment has resulted in 10.2 out of the 13.2 Nurse Practitioner FTEs being filled or 79% completed. Recruitment efforts are ongoing for these positions.

Primary Care Coverage in Long-term Care

In 2022-23 the Province invested \$2.9M, supporting NSH to design a model for providing consistent, effective primary care services to ensure 24/7 primary care coverage in Long-term Care facilities. A new primary care coverage model is being designed with the expectation of implementation next year. The model is being designed to:

- strengthen/improve consistency in routine primary care and urgent care coverage for LTC,
- leverage technology and call groups to cover primary care needs for LTC residents, and
- address need for potential long-term care specific remuneration for primary care providers.

Workplace Safety Initiatives

The Home Care Lift Program has been implemented, which is provided through the Red Cross, and supports employees by providing the proper lift equipment to safely handle and mobilize clients in their homes, thereby also supporting clients to remain in their homes longer.

The Employee and Family Assistance Program (EFAP) continues to support the psychological health and safety of sector employees.

Safety Training Initiatives have been provided through AWARE-NS and offer employees access to education and training to build their knowledge and keep themselves, and others, safe in the workplace.

The Stay-at-Work/Return-to-Work (RTW) program provides direct access to healthcare resources to promote recovery and reduce the amount of time an injured/ill employee is away from the workplace. Continuing care providers could opt to continue to deliver their own internal return to work program, subject to meeting the RTW program requirements, or participate in the program delivered by a third-party provider. The contract for the third-party provider was awarded to Dallas Mercer Consulting.

Citing recent investments in workforce safety for long-term care and home care, the Workers' Compensation Board reported improvements in injury rates and the time it takes for workers to return to work in both these sectors. In 2022, injury rates decreased by 15% in long-term care and 8% in home care, year over year.

Technology and Innovation

Long-term care homes in Nova Scotia completed the transition to a standardized resident assessment tool. This online care management tool will support care planning, data collection and allow for broader reporting to the Canadian Institute of Health Information in future years.

Pathways, the recently implemented long-term care bed placement platform, has enabled increased efficiency of the long-term care bed capacity that exists within the province. Since March 2022, the number of vacant beds has decreased by half, and the number of closed beds has decreased by 80%.

Financial Summary and Variance Explanation

Departmental Expenses Summary (\$ thousands)				
Programs and Services	2022- 2023 Estimate	2022- 2023 Actuals	2022- 2023 Variance	
General Administration	1,087	1,958	871	
Strategic Direction and Accountability				
Corporate Support and Strategic Initiatives	1,164	1,084	(80)	
Continuing Care	5,942	5,543	(399)	
<u>Service Delivery and Supports</u> Client Services Home Care	5,309 349,683	5,819 378,333	510 28,650	
Long-term Care Seniors Initiatives	841,085 	977,234 3	136,149 3	
Total - Departmental Expenses	1,204,270	1,369,974	165,704	
Additional Information:				
Ordinary Revenues	11,692	16,581	4,889	
Fees and Other Charges Ordinary Recoveries	613		(613)	
Total: Revenue, Fees and Recoveries	12,305	16,581	4,276	
TCA Purchase Requirements	182		(182)	
<u>Funded Staff (# of FTEs)</u> Department Funded Staff	119.5	105.1	14.4	
Departmental Expenses Variance Explanation:				

TCA Purchase Requirements Variance Explanation:

Provincial Funded Staff (FTEs) Variance Explanation:

*Instructions: Please note - variance explanations should be for material differences only.

Public Interest Disclosure of Wrongdoing Act

The *Public Interest Disclosure of Wrongdoing Act* was proclaimed into law on December 20, 2011.

The Act provides for government employees to be able to come forward if they reasonably believe that a wrongdoing has been committed or is about to be committed and they are acting in good faith.

The Act also protects employees who do disclose from reprisals, by enabling them to lay a complaint of reprisal with the Labor Board.

A wrongdoing for the purposes of the Act is:

- a) a contravention of provincial or federal laws or regulations;
- b) a misuse or gross mismanagement of public funds or assets;
- c) an act or omission that creates an imminent risk of a substantial and specific danger to the life, health or safety of persons or the environment; or,
- d) directing or counselling someone to commit a wrongdoing.

The following is a summary of disclosures received by DSLTC:

Information Required under Section 18 of the Act	Fiscal Year 2022-2023
The number of disclosures received	No disclosures were received by
	the Department in 2022-2023
The number of findings of wrongdoing	0
Details of each wrongdoing	N/A
Recommendations and actions taken on each	N/A
wrongdoing.	