



# **ACCOUNTABILITY REPORT**

2024-25

Seniors and Long-Term Care

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Accountability Report 2024–2025

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## Accountability Statement

The Accountability Report of the Department of Seniors and Long-Term Care for the year ended March 31, 2025, is prepared pursuant to the *Finance Act* and government policies and guidelines. The reporting of the Department of Seniors and Long-Term Care outcomes necessarily include estimates, judgments, and opinions by the Department of Senior and Long-Term Care management.

We acknowledge that this Accountability Report is the responsibility of Seniors and Long-Term Care 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 Department of Seniors and Long-Term Care 2024-25 Business Plan.

*Department of Seniors and Long-Term Care*

*Original Signed By*

Honourable Barbara Adams  
Minister of Seniors and Long-Term Care

*Original Signed By*

Lora MacEachern, K.C.  
Deputy Minister, Seniors and Long-Term Care

## Introduction

The Department of Seniors and Long-Term Care (SLTC) supports the social and economic well-being of older adults 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

### Long-Term Care Infrastructure

- The Department's Long-Term Care Infrastructure Renewal Plan supports current and anticipated needs using a balanced approach of replacement, renovation, and building additional rooms to ensure Nova Scotians have appropriate access to quality long-term care.
  - By March 2025, ground had been broken at 21 facilities, including Carefield Nursing Home in Dominion.
  - The new 48-bed Kiknu Long-Term Care Home in Eskasoni opened in April 2024. As the first long-term care home in a First Nations community in Nova Scotia, it offers culturally responsive care, including multilingual signage and several staff who are fluent in Mi'kmaw as well as English. Services are inclusive of all seniors, with specialized support for Mi'kmaw seniors from across Nova Scotia.
  - Work is ongoing and the requests for proposals are in development for the two new long-term care facilities in Westville, and Kings County.
  - In February 2024, 21 assisted living spaces were converted into nursing home rooms at Yarmouth Heights.
  - Mahone Nursing Home, a 96-bed replacement facility in Mahone Bay, was open to occupancy in July 2024; and
  - Originally slated to open in summer 2025, the first 72 residents moved into Moody Hall Long-Term Care Home in Bedford ahead of schedule in November 2024 with the opening of two wings.
  - Two long-term care facilities received funding to pilot an alternative to traditional call bell systems that allow residents to call for assistance from staff. The pilot used a wearable, wireless system, offering real-time location services and monitoring to improve quality related to safety, care and service.

### Long-Term Care (LTC)

- The Protected Envelope Policy continued in 2024-25, which demonstrates accountability and transparency that funding is spent by facilities on the intended purpose such as resident care and program support compensation, operating expenses and raw food as set out under SLTC funding policies. This requires facilities to provide financial statements for their Protected Envelope and returning any unspent protected funding to SLTC.
- Facilities received a 20% increase to food budgets, directly improving the quality of meals provided to long-term care residents.
- Long-term care facilities continue to work toward achieving staffing levels necessary to

provide an average of 4.1 hours of direct care per resident, per day. Quarterly reports were completed by all facilities in which they provided the total hours scheduled and worked by direct care staff (Registered Nurses, Licenced Practical Nurses and Continuing Care Assistants). As of March 31, 2025, 96% of LTC homes were signed on to provide 4.1 hours of care.

- Service agreements were renewed with 39 long-term care service providers, improving consistency, sustainability, financial accountability, and quality of care.
- Support continued for emergency preparedness to enhance emergency management practices in licensed long-term care facilities. In summer 2024, the Department worked with emergency management consultants to identify enhancements to emergency management protocols which are being piloted in a group of participating facilities.

### Home and Community Care

- All new clients moved to standardized direct funding program with streamlined eligibility criteria, and the Department continued to work with agencies and Nova Scotia Health to further reduce wait times for home support services.
- Client fees were removed from Home Oxygen Services and the Specialized Equipment Program. More than 1,900 Nova Scotians no longer pay fees to access these programs, improving affordability for needed services.
- The Department of Opportunities and Social Development and Seniors and Long-Term Care worked to address the recommendations of the *Human Rights Review and Remedy for the Findings of Systemic Discrimination Against Nova Scotians with Disabilities* including individualized funding supports and the joint Shared Services project.
- The Home Care Program provided over 600,000 frozen meals to clients authorized for meal preparation support in 2024-25, allowing home support agencies to redirect Continuing Care Assistant (CCA) hours to other priority services.
- A community nursing clinic was added in Sackville, bringing the provincial total to 9.

### Recruitment and Retention

- Ensuring **continuing care is a sector of choice** for staff is integral to the stability of the workforce. Work continued to ensure that a stable workforce is available now and into the future. Internal career progression opportunities are key to the retention of staff. In 2024-25 funding was made available for employers to provide living allowances or salary replacement for individuals while they studied to be a CCA. This allowed other employees, like facility support staff, to grow into CCA roles and be financially supported to do so.
- In 2024-25, the decision was made for Long-Term Care Assistants (LTCA) and infection control designate nurses to become permanent members of the care team in LTC. In 2024-25 there were 363.76 LTCA Full Time Employees (FTEs) and 47.75 infection control designate nurse FTEs funded in nursing homes and residential care facilities.
- In 2024-25, the Department continued to seek and implement innovative training approaches such as:
- Launching a new modernized CCA program that is 6 months long, getting graduates into the workforce 3-6 months faster than the former curriculum. This modernized program ensures students are ready to meet the changing needs of the continuing care sector. The new

curriculum was launched for all licensed educators in January 2025; 134 students enrolled between the launch and March 31, 2025.

- Continuing the CCA training grant which provides free tuition to CCA students. The goal of 2,000 free tuition students was met in March 2024, with ongoing demand. Another 749 students received free tuition in 2024-25 to meet ongoing demand and workforce vacancies. All students benefitting from free tuition sign a two-year return of service agreement, committing to work in continuing care in Nova Scotia.
- Optimizing clinical scopes of practice is an important part of providing high-quality care to residents/clients and supports career growth opportunities for the continuing care workforce. In 2024-25, a pilot program launched to support Registered Nurses (RN) employed in nursing homes and by the Victorian Order of Nursing (VON), to undergo additional education to receive the advanced practice certification needed to prescribe medications to continuing care clients, 13 RNs have graduated from the program with 12 currently prescribing. The program enrolled four RNs with more expected to start in fall 2025.
- In 2019, the Expert Panel on Long-term Care recommended that residential care facilities have access to Licensed Practical Nurses (LPNs) as a clinical resource to support clinical assessment and management of resident care including being able to provide wound care, for example. In 2024-25, the decision was made for these temporary resources, an additional 6.02 LPN FTEs, to become permanent.
- The CCA to Practical Nursing Bridging Program pilot expanded in 2024-25. There are now two cohorts of students participating. The program was open to CCAs currently working in continuing care who would work as an LPN in continuing care after graduation. This initiative is providing over 50 students with free tuition and books to complete the Licensed Practical Nursing program through the Nova Scotia Community College (NSCC). This approach creates a community of learners and retains LPNs in the sector through a 2-year return of service agreement.
- A recruitment and retention team operates at the Health Association Nova Scotia (HANS) to support the continuing care sector. This team has been in operation since 2022 and as of March 31, 2025, 401 individuals have been secured to work in the continuing care sector. There are 162 domestic hires who have already started working, while 239 are international recruits are in the immigration process or currently working in Nova Scotia.
- The Accelerated Practical Nursing program was announced and started in 2024/2025 which condensed the typical 2-year Practical Nursing program into 18 months. This program provided free tuition and books for a total of 29 students who have agreed to work in continuing care when they graduate.

### **Ageing Well in Community**

- Age Friendly Communities (AFC) Grants totalling \$505,667 were provided to support 41 community-based organizations with initiatives that help older adults age well at home and in their communities.
- The Department continued its partnership with NSCC, providing \$545,750 to the Centre for Rural Aging in Place (CORAH) to support its work in helping older adults access information, education, community connections, and essential services and resources.

- Since December 2023, \$4.2 million has been invested in the Community Aging in Place, Advancing Better Living for Elders (CAPABLE) pilot program. CAPABLE teams (which include a nurse, occupational therapist, and handyperson) work with individuals to increase their confidence, strength, and independence. In 2024-25, 170 clients enrolled in the program, and the program was expanded to more neighbourhoods, including Highfield Park, downtown Dartmouth, Burnside, Woodside, Albro Lake, Fairview, Armdale, south end Halifax, Rockingham, Sherwood Heights and Purcells Cove.
- The Department continues to support organizations with a provincial reach that align with our mandate such as the Alzheimer Society of Nova Scotia, Caregivers Nova Scotia and Aging Well NS to help older adults age well at home and in their communities.
- The Seniors' Care Grant continued in 2024-25 with over 38,000 applications approved. The income threshold for those eligible was increased from \$37,500 to \$45,100 to align with federal OAS/GIS increases. The program assists seniors with the cost of professional health services (i.e. physiotherapy, mental health supports), household expenses (i.e., snow removal, lawn care, telephone/internet), and home heating.

### **Workplace Safety**

- Injury rates continue to improve in the continuing care sector in 2024. The injury rate in home care declined 14.5% relative to 2023, from 5.84 injuries per 100 covered workers in 2023 to 4.99 in 2024. The injury rate for long-term care declined 11.8% in 2024 over 2023, from 4.08 injuries per 100 covered workers in 2023 to 3.6 in 2024.
- SLTC continues to support service providers to advance worker safety across the continuing care sector to deliver the Return to Work (RTW) program, Employee and Family Assistance Program (EFAP), the Home Lift Loan Program, and safety-related training and backfill wages for training.

## Financial Summary and Variance Explanation

### Departmental Expenses Summary

(\$ thousands)

<u>Programs and Services</u>	<u>2024-25 Estimate</u>	<u>2024-25 Actuals</u>	<u>2024-25 Variance</u>
General Administration	809	1,535	726
<b><u>Strategic Direction and Accountability</u></b>			
Corporate Support and Strategic Initiatives	2,102	1,891	(211)
Continuing Care	6,822	6,868	46
<b><u>Service Delivery and Supports</u></b>			
Client Services	5,805	6,301	496
Home Care	382,615	441,591	58,976
Long-term Care	964,557	972,922	8,365
<b>Total - Departmental Expenses</b>	<b><u>1,362,710</u></b>	<b><u>1,431,108</u></b>	<b><u>68,398</u></b>
<b>Additional Information:</b>			
Ordinary Revenues	27,707	29,828	2,121
Fees and Other Charges	---	---	---
Ordinary Recoveries	---	---	---
<b>Total: Revenue, Fees and Recoveries</b>	<b>27,707</b>	<b>29,828</b>	<b>2,121</b>
TCA Purchase Requirements	---	---	---
<b><u>Funded Staff (# of FTEs)</u></b>			
<b>Department Funded Staff</b>	<b>127.5</b>	<b>120.0</b>	<b>(7.5)</b>

### **Departmental Expenses Variance Explanation:**

Department of Seniors and Long-Term Care expenses were \$68.4 million or 5.0 per cent higher than estimate primarily due to \$42.8 million for increased participation in the Home Support Direct Funding Program, \$17.7 million for wound care, attendant care and other client specific expense claims, \$9.7 million for the renewal of LTC service agreements, \$9.7 million for utilization of the Red Cross Health Equipment Loan Program (HELP), \$4.8 million for Home Support nursing, supplies and drugs, \$4.4 million for NSH Healthcare bargaining unit compensation, \$3.2 million for the Caregiver Benefit program due to increased enrollment, \$2.6 million for the Seniors Care Grant, and \$2.0 million due to increased utilization of the Home Oxygen Program. These increases were partially offset by decreases of \$20.4 million due to delayed new facility openings and other facility-based savings and \$12.9 million for decrease utilization of travel nurse staff.

### **Revenue, Fees and Recoveries Variance Explanation:**

Ordinary Revenues were \$2.1 million over budget primarily due to the new Aging with Dignity federal agreement.

### **Provincial Funded Staff (FTEs) Variance Explanation:**

The Department is reporting a variance of 7.5 FTEs under budget due to temporary vacancies.

## 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 SLTC:

Information Required under Section 18 of the Act	Fiscal Year 2024-2025
The number of disclosures received	0
The number of findings of wrongdoing	0
Details of each wrongdoing	N/A
Recommendations and actions taken on each wrongdoing.	N/A