

Bedlam over beds: We can no longer ignore our long-term-care crisis

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OPINION



Bedlam. That is the perfect descriptor of the state of long-term care in Canada today.

The bulge of aging baby boomers, combined with head-in-the-sand planning and a lack of investment in care homes has resulted in mind-boggling wait lists, crumbling infrastructure and catastrophic staffing shortages.

And it's only going to get worse.

A new report from the BC Care Providers Association, titled *Bedlam in B.C.'s Continuing Care Sector*, offers up a sobering summary of the current state of affairs.

For example:

- B.C. is 3,000 beds short of current demand, although officially there are 1,379 people on wait lists, 340 of whom are living in hospitals because there is nowhere else to go;
- The province needs to build about 45,000 new beds – 2,250 a

year – over the next 20 years (for context, it currently has 27,000);

- To staff those beds, 19,000 new health workers will be needed, including 13,000 personal support workers and 4,000 nurses;

- Yet, in the past two years, only one new facility has been approved in the province, with 120 beds.

The situation is as bad, or worse, in every other jurisdiction; B.C. is doing relatively well.

In Ontario, for example, the wait list for long-term care is a staggering 34,000 people.

In Nova Scotia, one-third of hospital beds are occupied by “alternate level of care” (ALC) patients who have been discharged but cannot find a spot in long-term care.

Nationwide, there are 7,550 ALC patients – the equivalent of 25 hospitals with 300 beds each – the No.1 driver of hallway medicine.

The Canadian Association of Long Term Care estimates that 42,000 new beds are needed by 2023. Yet, since 2005, the number of long-term-care homes in Cana-

da has actually diminished, and so have the number of beds.

Why?

Because it's a tough business – and, yes, it is a business. Forty-four per cent of homes are run by for-profit companies, 29 per cent are run by not-for-profits and 27 per cent are state-run.

You need to invest a lot in infrastructure, the regulatory regime can be suffocating and operating costs are significant, especially when you have to provide 24-hour nursing care.

The rules should be tough because these facilities are housing society's most vulnerable patients and emergencies such as fires can be horrifically deadly, but the regulations, which affect everything from staffing to retrofitting, eat away at the bottom line.

The clientele is increasingly elderly and frail. The average age is 85. Three in every five patients in long-term care now have dementia; one in four suffers from severe depression, and one in four live with chronic pain. Three in four need help with common activ-

ities of daily living such as toileting, bathing and eating. They need constant and intense care.

Long-term care is a \$70-billion-a-year business, but consumers – and government in particular – can be parsimonious in what they are willing to pay to care for individuals.

We have not prepared ourselves, individually or collectively, to pay the costs of care in our so-called golden years.

Far too many Canadians learn the hard way that long-term care is not only costly, but there isn't much government support.

While hospital care is “free” (meaning, covered by public-health insurance), most long-term care is paid out of pocket.

The norm now is that the entirety of your pension goes to paying long-term care, and you often deplete all your savings as well.

Of course, the solution to the growing challenge of caring for an aging population is not simply to build more beds and warehouse people. Ideally, people should be cared for in the community, so we need to invest in alternatives to

the cookie-cutter institutionalization. Home care, assisted living and campuses of care such as Schlegel Villages and dementia villages are some other options.

We also have to adapt society more broadly to allow healthy seniors to remain independent, with better public transit, more accessible buildings and greater investment in community buildings and parks.

Canadians are living longer and healthier than ever, and that's to be celebrated, not bemoaned. Even among senior-seniors, the rapidly growing 85-and-over demographic, 85 per cent are living independently. That means fewer than 15 per cent are in long-term care.

All the more reason to ensure that long-term care beds are used by those who most need them, and that they can be accessed promptly.

Instead of catastrophizing, let's get to work adapting society to its demography, a process that's decades overdue.

The bedlam here is all self-inflicted.