



Feasibility of Memory Care Neighbourhoods

Executive Summary

April 2026





Contents

Feasibility of Memory Care Neighbourhoods	1
Executive Summary	1
Introduction	3
Evolution of Dementia Care Approaches	3
Residential Care Models and Environmental Restriction.....	4
Role of the Physical Environment.....	5
International Care Models	6
Feasibility of Open Dementia Neighbourhoods	7
Key Implications	8
Conclusion	8

Introduction

The growing prevalence of dementia in Canada presents significant challenges for long-term care systems, families, and policymakers. As of 2025, an estimated 771,939 Canadians are living with dementia, with projections exceeding 1.7 million by 2050. This rapid increase will place substantial pressure on health care systems, particularly long-term care environments where many people living with dementia (PLWD) eventually reside.

Dementia is a progressive condition characterized by cognitive, behavioural, and physical changes that require increasingly complex care. Individuals living with dementia frequently experience multiple chronic conditions, including cardiovascular disease, diabetes, and musculoskeletal disorders, which compound care complexity and increase vulnerability to adverse outcomes. These clinical realities are further shaped by social determinants of health such as income, education, and access to care, contributing to disparities in disease progression and outcomes.

The economic impact of dementia is substantial. In 2020, the total annual cost of dementia in Canada was estimated at \$40.1 billion, with more than half attributed to informal caregiving. As demand for long-term care continues to grow, there is increasing urgency to identify care models that are both sustainable and responsive to the needs of PLWD.

Evolution of Dementia Care

Approaches

Historically, dementia care in long-term care settings has been guided by biomedical, task-oriented models emphasizing safety, efficiency, and risk reduction. These approaches have often resulted in highly structured, institutional environments with limited flexibility and autonomy for residents.

In contrast, contemporary care approaches have shifted toward person-centred and relationship-centred frameworks that prioritize dignity, autonomy, meaningful engagement, and quality of life. Emerging concepts such as *thriving* highlight the importance of environmental, social, and relational factors in shaping resident well-being. Thriving extends beyond traditional measures of quality of life by emphasizing how individuals experience, adapt to, and find meaning within their living environments.

This shift in care philosophy has prompted increased attention to the role of the physical environment in supporting independence, reducing behavioural symptoms, and enhancing overall well-being.

Residential Care Models and Environmental Restriction

Residential dementia care environments can be understood along a continuum of environmental restriction:

Table 1. Types of Dementia Care Neighbourhoods

Neighbourhood Type	Description
Closed Neighbourhoods	Relies on locked doors and controlled access to prevent residents from leaving independently. While effective for immediate risk management, these environments may limit autonomy and contribute to agitation, distress, and reduce quality of life.
Semi-Open Neighbourhoods	Allows freedom of movement within the unit while maintaining secured perimeters. These models have been associated with improvements in

	behavioural symptoms and perceived quality of life.
Open Neighbourhoods	Minimizes or eliminates physical barriers to movement, emphasizing autonomy, dignity, and participation in daily life.

Increasingly, research suggests that behaviours traditionally labelled as ‘wandering’ are better understood as ‘walking with a purpose’, reflecting meaningful attempts to engage in activity, relieve stress, or maintain control. Supporting such behaviours requires environments that facilitate safe movement and effective wayfinding rather than restricting mobility.

Role of the Physical Environment

The design of long-term care environments plays a critical role in supporting less restrictive models of care. Evidence demonstrates that well-designed environments can improve wayfinding and orientation, reduce agitation, anxiety, and behavioural symptoms, support independence in activities of daily living, enhance social interaction and engagement.

Key design strategies include:

- Clear sightlines and intuitive layouts
- Continuous walking paths and accessible outdoor spaces
- Use of familiar, home-like design elements
- Wayfinding supports such as visual cues and personalized markers
- Sensory considerations, including lighting, noise reduction, and colour contrast

In open or less restrictive environments, design serves as a primary mechanism for managing risk, replacing reliance on locked doors with environmental supports that guide behaviour and promote safety.

International Care Models

International examples demonstrate a range of approaches to balancing safety and autonomy in dementia care:

Table 2. International Dementia Care Approaches

Country	Approach
Canada	Beginning to adopt innovative models, such as Providence Living at The Views in British Columbia, which incorporates small-scale living, open movement, and relational care approaches. Implementation remains inconsistent across provinces.
The Netherlands & Sweden	Emphasizes small-scale, homelike environments and demonstrate higher tolerance for autonomy-related risk. Models such as dementia villages and green care farms support meaningful daily activities and community integration.
Australia	Adopted a structured reform approach through programs such as the Specialist Dementia Care Program, combining environmental redesign with formal behavioural support frameworks.
Japan	Utilizes small, community-based group homes that prioritize normalization, routine, and close relationships, offering a highly localized and relational model of care.

These examples highlight that successful implementation of less restrictive environments depends not only on design, but also on cultural values, policy frameworks, and system-level support.

Feasibility of Open Dementia Neighbourhoods

Transitioning to open dementia neighbourhoods is feasible but requires more than physical redesign. Key considerations include:

Organizational Readiness

- Strong leadership commitment to person-centred and least-restrictive care
- Alignment of policies, procedures, and care practices
- Staff engagement and cultural transformation

Regulatory and Policy Context

- Canadian regulations generally do not mandate locked units but require demonstration of resident safety
- Perceived liability and risk aversion may limit adoption despite policy flexibility

Workforce Capacity

- Staff must be trained in dementia-responsive communication, dynamic risk assessment, and de-escalation
- Higher levels of relational engagement are required compared to task-based care models

Environmental Design

- Open models require thoughtful design, including visibility, accessibility, and outdoor integration
- Smaller-scale neighbourhoods and clear spatial organization support supervision without restriction

Overall, feasibility is shaped by the interaction of organizational culture, policy interpretation, workforce readiness, and environmental design.

Key Implications

- **Quality of Life**
 - Open and less restrictive environments are associated with improved well-being, autonomy, and engagement for PLWD.
- **Care Delivery**
 - Transitioning to open models requires a shift from risk containment to relational, person-centred care practices.
- **System Sustainability**
 - Innovative care models may support more efficient use of resource by reducing behavioural symptoms and reliance on pharmacological interventions
- **Policy and Practice**
 - Greater clarity and support at the policy level may facilitate adoptions of less restrictive care environments across jurisdictions.

Conclusion

As the prevalence of dementia continues to rise, long-term care systems must evolve to better support the complex needs to individuals living with dementia. Open dementia neighbourhoods represent a promising approach that aligns with contemporary care philosophies emphasizing autonomy, dignity, and meaningful engagement. While challenges related to regulation, risk management, and workforce capacity remain, international evidence suggests that these models are both feasible and beneficial when supported by appropriate organizational and environmental conditions. Moving forward, integrating design, care practices, and policy frameworks will be essential to advancing dementia care in Canada.