Nursing homes are community assets.

Once again, there is discussion that nursing homes could reduce hospital overcrowding if moved from Social Development to under the heath authority's umbrella.

And as we've said before, that's simply not the case.

Changing which government department that the nursing homes are affiliated with will neither create more beds nor recruit the available workforce for nursing home bed expansion. For people and their families waiting to access a nursing home bed, there would be no demonstrable impact.

This recurring suggestion demonstrates a fundamental misunderstanding of our purpose. Nursing homes are just that: homes. Where people choose to live their best life in spite of challenges associated with a disease process or physical disability. Nursing homes are an interesting cross road between. As such, we're more appropriately an extension of Social Development's Home First strategy than a division of acute care.

We recognize and understand the alternate level of care (ALC) patient crisis. It's happening in hospitals in New Brunswick, and across Canada. And it's further complicated by challenges associated with the recruitment and retention of health-care professionals, both at home and across the country.

In addition to acting as Executive Director of the NB Association for Nursing Homes, I am also currently President of the Canadian Association for Long Term Care. In that role, I have the privilege of observing the different ways in which long term care is governed in other parts of the country. I can tell you that while there may be different models, the outcome is the same. Unfortunately, there is not yet a sure-fire way in which to address our common challenges.

It's a shame that policy-makers and administrators have spent time modelling the move without first consulting us, the experts. The questions we would respectfully ask include:

- Will this create an efficiency that improves financial outcomes? Nursing homes are private
 corporations that are responsible for providing care that is subsidized by the government.
 Nursing Homes enjoy support from volunteers, benefit from donations and fundraising and
 have many collective business programs, such as group procurement, to enable their
 operation on very limited budgets.
- How will the move ensure we're able to transition ALC patients faster? Regardless of how fast we are able to complete assessments as part of the process to access long term care, the number of available beds and the number of staff to support the beds remains the same. Everyone still has to wait for a bed to become available. There are approximately 100 vacant beds in nursing homes around the province everyday as part of the normal turnover transition process of admission, which must be done within 48 hours of a bed becoming available. However, due to recruitment and retention challenges, there are beds that have been

temporally closed in four communities until the staffing is available before admitting new residents. This is actively being worked on and is the same challenge that the Regional Health Authorities are faced with.

• All nursing homes in New Brunswick are private corporations, and not third parties of government. The property rights of nursing homes have been legally recognized by the Government of New Brunswick. Nursing homes were started by community organizations, clubs, and churches, and we are distinct community institutions which are constitutionally protected. Government cannot assume management and control over a private corporation. Has it been considered how will they fold in?

This raises many unanswered questions for the system overall, especially how will this better serve people in need of long term care services? There are process improvements that needed, but faster assessments will not free up the system, only improve process. Much that has been commented on to date has focused on the needs of the system, but how do we become person-centred in our collective efforts? How will seniors waiting in the community be able to access nursing home beds? If the RHAs control the admission process, will all seniors have to be first hospitalized to access a nursing home bed? Does this not defeat the purpose and discourage seniors from staying home first?

The ALC crisis is a symptom, not a root cause, of system-wide issues that needs to start at the community level. Nursing homes are community based, and as such have a powerful potential to support seniors to successful age in their communities, and support informal caregivers who are critically important. There are many viable programming options that can be implemented and we can champion these efforts.

As the association that represents New Brunswick's 68 long-term care homes and their 4,700 residents, we have valuable experience and insights to share. We want to work with government, the health authorities or any other stakeholder because we need to do better collectively. There is no silver bullet that can fix this, or anyone group. It is going to take all of us working together in a cohesive strategy. Let's continue to talk about what we might do to improve the partnership between nursing homes and the acute care system for the benefit of all New Brunswickers.