



# Thinking About Aging in Place: Introducing Nursing Home Without Walls

*BCCPA Conference – 28 May 2024*

**Suzanne Dupuis-Blanchard, RN PhD FRSC FCAN**

*Professor – School of Nursing  
Research Chair in Population Aging  
Director – Centre on Aging*

Université de Moncton – Moncton, NB



Public Health  
Agency of Canada

Agence de la santé  
publique du Canada

# During this deep dive session...

- Learn about **Nursing Home Without Walls (NHWW)**
  - Program philosophy, scope, structure
  - Offerings (services and support)
  - Program management and operations
  - Impact evaluation



A hand holding a paper house with a heart cutout, symbolizing aging in place. The background is a warm, golden sunset over a cityscape.

# Aging in Place in Canada

- 100 % of Canadians 65+ plan to live in their own home as long as possible (NIA, 2020)
- **92 % of older adults** over the age of 65 years live in the community (Stats Can, 2018)



# Aging in Place (2005-present)

## Strategies for Aging in Place: The Experience of Language-Minority Seniors With Loss of Independence

Suzanne Dupuis-Blanchard<sup>1</sup>, Odette N. Gould<sup>2</sup>,  
Caroline Gibbons<sup>1</sup>, Majella Simard<sup>1</sup>, Sophie Ethier<sup>3</sup>,  
and Lita Villalon<sup>1</sup>

### Abstract

For healthy and independent older adults, aging in place can be seen as identical to any other adult living at home. Little is known about how frail seniors, particularly those who speak a minority language, manage the challenges of aging in place. The present qualitative descriptive study explores the strategies that Canadian French-speaking seniors have put in place to counter their loss of independence and promote their ability to stay in their home. Semistructured individual interviews were conducted with 39 older adults and transcribed, followed by content analysis to identify common themes related to study objectives. Six themes emerged in response to strategies described for aging in place. Findings reveal the limited extent to which language issues were perceived as a barrier by participants. In conclusion, the results of this study provide us with fruitful insights to guide community nursing practice, future research, and public policy.

Article

### Hoping for the Best or Planning for the Future: Decision Making and Future Care Needs

Odette N. Gould<sup>1</sup>, Suzanne Dupuis-Blanchard<sup>2</sup>,  
Lita Villalon<sup>1</sup>, Majella Simard<sup>1</sup>,  
and Sophie Ethier<sup>3</sup>

### Abstract

Research has shown that relatively few older adults make plans for future care needs. In this study, we explore the thinking processes involved in planning or failing to plan for the future. Interviews were carried out with 39 older adults (M age = 81 years) who were experiencing disability and illness but who lived in their own home. Guiding questions for the interview focused on present living circumstances, but for the present qualitative analysis, all references to the future, and to future residence changes, were extracted. This approach allowed us to observe how older adults spontaneously address issues of future planning when not constrained to do so. Results supported the use of a positivity bias, as well as a risk-averse decision-making style. These older adults seemed to be prioritizing present emotional well-being by avoiding thoughts of future risks and thereby eschewing proactive coping.

### RECHERCHE QUALITATIVE

## La perception des aînés francophones en situation minoritaire face aux défis et aux enjeux liés au maintien à domicile en milieu urbain néo-brunswickois

Suzanne M. Dupuis-Blanchard, Ph.D.<sup>1</sup>, Majella Simard, Ph.D.<sup>2</sup>, Odette N. Gould, Ph.D.<sup>3</sup>, Lita Villalon, Ph.D.<sup>4</sup>

### RÉSUMÉ

**OBJECTIF** : Explorer les besoins et le degré de satisfaction des aînés francophones en situation sociolinguistique minoritaire au sein d'une communauté urbaine concernant la problématique du maintien à domicile.

**MÉTHODE** : Une étude de cas de type ethnographique fut réalisée dans une communauté urbaine du Nouveau-Brunswick entre octobre 2010 et juin 2011. Nous avons effectué des entretiens individuelles avec les responsables d'organismes communautaires (n=4) et des groupes de discussion avec des personnes âgées francophones demeurant en contexte sociolinguistique minoritaire (n=19).

**RÉSULTATS** : Les aînés francophones minoritaires nous ont exprimé leur volonté de vieillir chez eux. En revanche, le manque de services et de soutien communautaire par les aînés francophones représentait un obstacle au maintien à domicile. En dépit de ces lacunes, les responsables d'organismes communautaires ne prévoient pas modifier leurs services en vue de favoriser l'amélioration de la qualité de vie des aînés.

**CONCLUSION** : Le maintien à domicile pour les aînés francophones en milieu minoritaire requiert des actions concertées issues de la famille, de la communauté et de l'État. Selon la Charte d'Osaka, le logement constitue une condition préalable à la santé. De plus, le logement, les réseaux sociaux sont des déterminants de la santé. Par conséquent, l'élaboration et la mise en œuvre d'une politique publique à destination des personnes âgées et, de surcroît, en situation minoritaire nous apparaissent un enjeu fondamental dans un contexte de vieillissement démographique.

**MOTS CLÉS** : vieillissement, services de soutien à domicile, logement, indépendance, groupes minoritaires

The translation of the Abstract appears at the end of this article.

Reçu en santé publique 2013/10/08 (suppl 1) 571-574

For Journals & Press in English  
Volume 10, Number 3, 2012

### ORIGINAL RESEARCH

© Sordil and Springer Nature Switzerland AG 2021

## IMPACT OF SOCIAL FRAILTY ON RELOCATION OF OLDER ADULTS

S. DUPUIS-BLANCHARD<sup>1</sup>, C. BIGONNESSE<sup>1</sup>, M.K. ANDREW<sup>2</sup>, O. GOULD<sup>3</sup>, D. MAILLET<sup>4</sup>

<sup>1</sup> Université de Moncton, Moncton, Canada; <sup>2</sup> Dalhousie University, Halifax, Canada; <sup>3</sup> Mount Allison University, Sackville, Canada; <sup>4</sup> Corresponding author: Suzanne Dupuis-Blanchard, School of Nursing, Université de Moncton, 19 Avenue Maillet Ave., Moncton, NB E1A 2E9, Canada. Email: s.dupuis-blanchard@umoncton.ca, telephone: (506)858-4673, Fax: (506)858-4017

**Abstract:** Background: The relationship between frailty and variables such as housing are the least included in complex and demanding for older adults with a loss of independence but little is known about what makes older adults relocate to congregated housing designated for older adults, let alone in combination with social frailty, and how they navigate this transition. Objectives: This mixed method descriptive study aims to understand the housing continuum community. Design: Semi-structured individual interviews including sociodemographic data and the PRISMA-7 Frailty Scale were conducted with recently relocated older adults. Setting: A newly opened French-speaking housing continuum community in Eastern Canada that offers luxury apartments for independent and highly educated. Measurements: Content analysis of the transcribed recorded interviews and descriptive statistical analyses to examine relationships between the frailty PRISMA-7 scale, answers to additional questions and the demographic data. Results: There was not a significant difference in the scores for socialization or relocation nor between prior help and current help; however, there was a significant negative relationship between help and socialization before and after relocation. Three main themes included: improved help and pull factors and post relocation. Conclusions: The results indicate that several social factors and pull factors were experienced social frailty. Participants were at the crossover vulnerable to experiencing additional deficits which would potentially have led to higher frailty scaled.

SGS SOUTHERN GERONTOLOGICAL SOCIETY  
Journal of Applied Gerontology  
1-18  
© The Author(s) 2015  
Reprints and permissions:  
sagepub.com/journalsPermissions.nav  
DOI: 10.1177/0734914815591213  
jag.sagepub.com  
SAGE

## Naviguer le maintien à domicile en communautés de langue officielle en situation minoritaire rurales: enjeux et pistes de solutions

Suzanne Dupuis-Blanchard, Ph. D.  
Professeure titulaire, École de science infirmière  
Directrice — Centre d'études du vieillissement  
Université de Moncton

Julie Caissie, Ph. D.  
Professeure adjointe, École des sciences des aliments, de nutrition et  
d'études familiales  
Université de Moncton

### Résumé

Le vieillissement de la population dans les provinces de l'Atlantique est une réalité courante en plus d'une composition géographique rurale et la présence de communautés de langue officielle en situation minoritaire (CLOSM). Les objectifs de cette étude descriptive qualitative étaient de 1) comprendre les services utilisés pour le maintien à domicile, et 2) déterminer les services nécessitant une amélioration pour l'accès en français. Vingt-six (n=26) personnes âgées ont participé à cette étude en région rurale de l'île du Prince Édouard. Les résultats témoignent des difficultés d'accès aux services pour le maintien à domicile tout en offrant des pistes de solutions pour l'améliorer.

### Articles

## The Significance of Social Engagement in Relocated Older Adults

Suzanne Dupuis-Blanchard  
University of Moncton, Moncton, New Brunswick, Canada  
Anne Neufeld  
Vicki R. Strang  
University of Alberta, Edmonton, Alberta, Canada

Social networks and social support are recognized as important determinants of health. Relocation is a common transition in older adults' lives that can disrupt existing social networks and challenge seniors to reconstitute these feeling connected. Social engagement is a required component of the process of reconstituting social relationships and of social engagement in relocated residents of a senior-designed apartment building. Data generation included four types of relationships for provision of feelings of security, casual interactions, opportunity to be supportive, and friendship. The findings of this research provide a better understanding of the relationships seniors developed in a new community as a result of the process of social engagement.

**Keywords:** aging; attachment/bonding; ethnography; focused; health; determinants of; nursing; community; older people; relationships

## Maintien à domicile : capacité d'offre de services communautaires actuels et futurs au Nouveau-Brunswick

Danielle Thériault B.A. (psychologie), MGSS et Suzanne Dupuis-Blanchard BScInf, MN,  
Ph. D.

Volume 63, numéro 2, 2017

URI : [id.erudit.org/iderudit/1046505ar](http://id.erudit.org/iderudit/1046505ar)  
DOI : [10.7202/1046505ar](https://doi.org/10.7202/1046505ar)

[Aller au sommaire du numéro](#)

Éditeur(s)

École de service social de l'Université Laval

## Vieillir en santé en situation minoritaire linguistique au Canada : enjeux, défis et mobilisation collective

Suzanne Dupuis-Blanchard<sup>1</sup>, Lita Villalon<sup>2</sup> et  
Hubert Tote Alimezelli<sup>3</sup>

**Résumé:** Au Canada, la santé des francophones et des anglophones vivant en milieu linguistique minoritaire est un sujet d'intérêt pour plusieurs chercheurs et organismes communautaires. Cet article s'inspire d'un symposium sur le thème concernant le vieillissement en santé en situation minoritaire linguistique lors du 4<sup>e</sup> Colloque international des programmes locaux et régionaux en santé en situation minoritaire linguistique le soir l'identification des facteurs associés à la santé perçue, le maintien à domicile et le dépitage de la malnutrition. Les résultats décrivent 1) les déterminants de la santé perçue tels que les services de santé, la vitalité de la communauté minoritaire et l'éducation; 2) le peu de changements aux services de maintien à domicile en dépit du vieillissement de la population; et 3) la haute prévalence de la malnutrition chez les aînés au Nouveau-Brunswick. Enfin, nous suggérons l'élaboration et l'implantation d'une politique publique du vieillissement au Canada afin d'assurer des services de qualité tout au long du continuum de santé. (Global Health Promotion, 2014; 21 Suppl. 1: 70-75).

**Mots clés :** vieillissement, minorité, maintien à domicile, nutrition, politique publique, programmes locaux et régionaux de santé

Qualitative Health Research  
Volume 19 Number 9  
September 2009 1148-1155  
© 2009 The Author(s)  
10.1177/1049731509343956  
<http://qhr.sagepub.com>

### Résumé de l'article

La présente étude comporte trois objectifs : 1) déterminer l'état actuel des services offerts pour le maintien à domicile; 2) explorer la nature de la planification des services futurs pour le maintien à domicile; et 3) exposer les défis relatifs aux services et les moyens qui s'offrent aux organismes pour que les services répondent le plus efficacement possible aux besoins des personnes âgées francophones. De type séquentiel exploratoire mixte, cette étude a permis de recueillir des données qualitatives pour bénéficier des résultats quantitatifs. Quarante-neuf questionnaires ont été distribués, 11 ont été remplis et 11 entretiens ont été réalisés. Huit thèmes communs ont été dégagés en lien avec les objectifs. Huit thèmes communs ont été dégagés en lien avec les objectifs, thèmes qui montrent une préoccupation pour la viabilité des services communautaires en maintien à domicile.

# Research Results Overview

## Services received

- Housekeeping
- Lawn cutting/snow removal

## Service providers

- Family ++
- Private sector (paid personally)

# Services needed but not received



Groceries / Meals



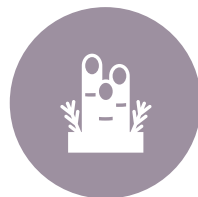
Social  
contacts/outings



Transportation



Information on  
programs, services,  
activities



Outdoor  
maintenance (plant  
flowers, paint fence)



'Presence' at night –  
feeling of security



*Why Nursing Home Without Walls?*





About **1** in **10**  
newly admitted  
long-term care  
residents potentially  
could have been

**cared  
for at  
home**



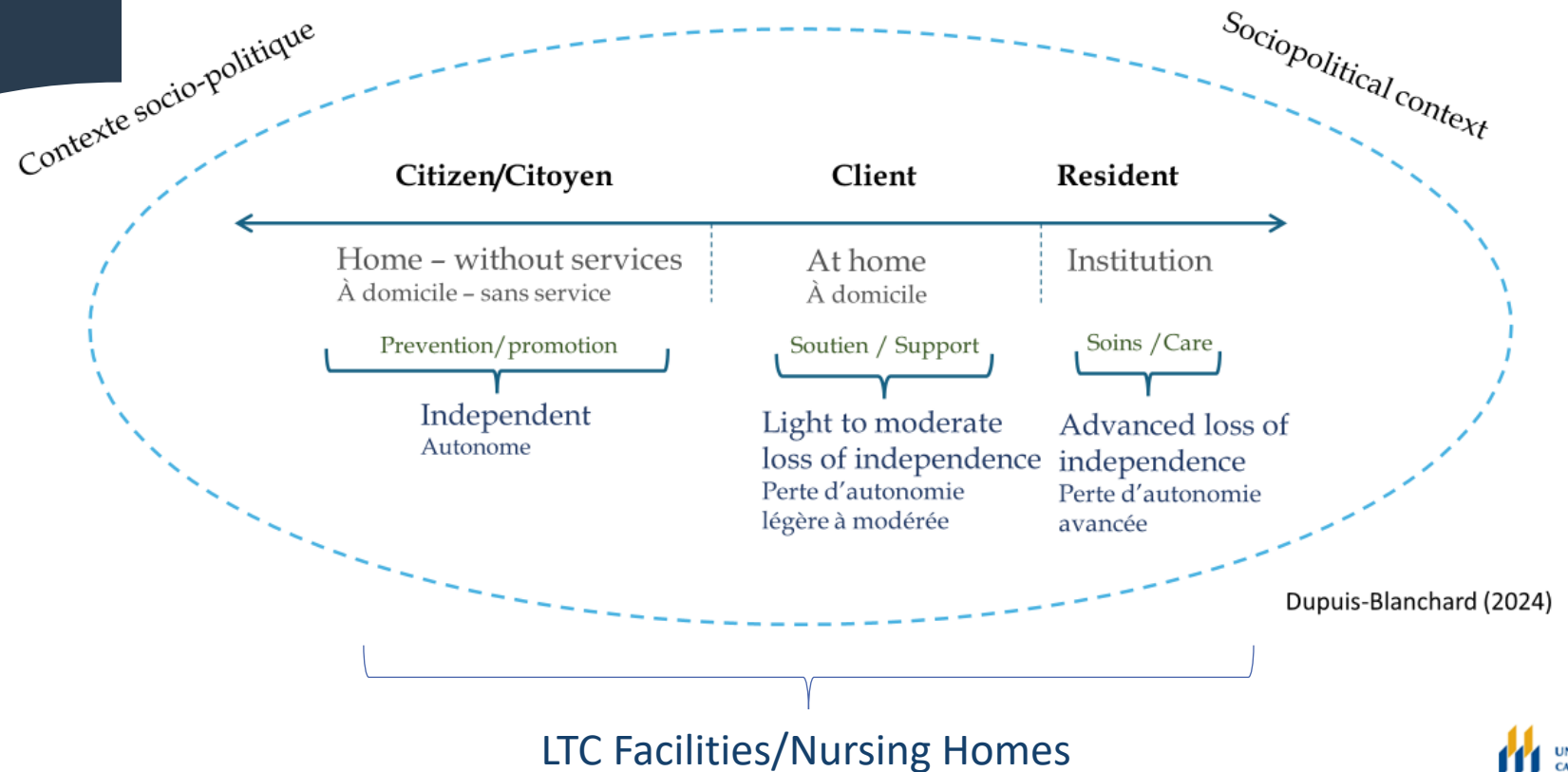
(Source: CIHI, 2022)



May 2016...

NBANH AGM

## Autonomy Continuum Model



# Mixed- methods study

(Dupuis-Blanchard & Gould, 2017)

## Nursing Homes Without Walls for Aging in Place\*

Suzanne Dupuis-Blanchard<sup>1</sup> and Odette N. Gould<sup>2</sup>

---

### RÉSUMÉ

Étant donné l'urgence de trouver des solutions innovantes et efficaces pour la prestation de services communautaires favorisant le «vieillir chez soi», il est nécessaire d'identifier de nouvelles solutions mettant à profit les infrastructures existantes. Dans la présente étude séquentielle à méthode mixte, nous avons exploré le rôle que les centres d'hébergement pour personnes âgées pourraient jouer dans l'offre de services destinés à une population cible non traditionnelle, soit les aînés avec pertes d'autonomie vivant dans la communauté. Quarante-deux (n=42) centres d'hébergement pour personnes âgées du Nouveau-Brunswick ont complété un sondage en ligne et 10 de ces établissements ont accepté d'accorder des entretiens. Les résultats montrent que 100 % des participants sont d'avis que les centres d'hébergement pourraient offrir des services aux personnes âgées dans la communauté afin de favoriser le vieillir chez soi. Les résultats suggèrent que les centres d'hébergement peuvent apporter des solutions efficaces et innovantes en ce sens.

### ABSTRACT

Given the urgency of finding cost-effective and innovative solutions to providing community services for aging in place, novel solutions that take advantage of existing infrastructure are clearly needed. In this sequential mixed-method study, we chose to explore the role that nursing homes could play in offering services to a non-traditional target population, namely seniors with loss of independence living in the community. Forty-two (n = 42) nursing homes in the province of New Brunswick completed an online survey, and 10 agreed to participate in face-to-face interviews. Results show that 100 per cent of participants agreed that nursing homes could offer services to seniors in their communities for aging in place. Results suggest that nursing homes are cost-effective, innovative solutions for aging in place.

---

<sup>1</sup> School of Nursing – Université de Moncton, Moncton, New Brunswick

<sup>2</sup> Department of Psychology, Mount Allison University, Sackville, New Brunswick

\* We are grateful for the collaboration with the New Brunswick Association of Nursing Homes.

Manuscript received: / manuscrit reçu : 29/09/17

Manuscript accepted: / manuscrit accepté : 08/02/18

**Mots-clés:** vieillissement, vieillir chez soi, centres d'hébergement pour personnes âgées, établissements de soins longue durée, communauté, innovation

**Keywords:** aging, aging in place, nursing homes, long-term care facilities, community, innovation

La correspondance et les demandes de tirés-à-part doivent être adressées à : / Correspondence and requests for offprints should be sent to:

Suzanne Dupuis-Blanchard  
School of Nursing – Université de Moncton  
18 Antonine Maillet Ave  
Moncton, NB E1A 3E9  
<suzanne.dupuis-blanchard@umoncton.ca>

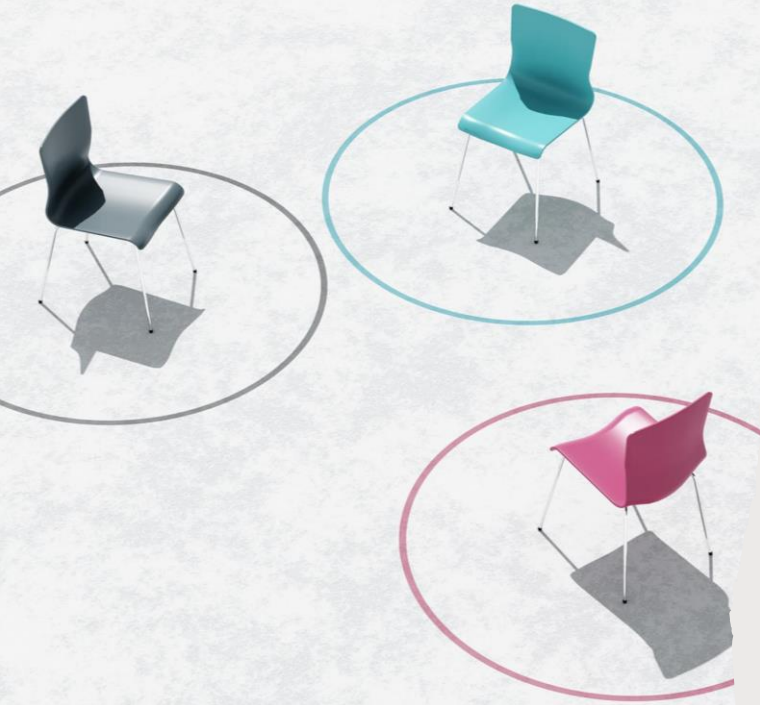
---

# ABCD Approach (Tamarack Institute; Russell, 2022)

## Townhall Meeting

3 questions (12-15 min each)

- What services/care can the nursing home offer to the local community to help older adults stay in their home?
- What short and medium term actions should be implemented to address the needs identified in question #1?
- Who can support the nursing home in its plan to provide services/care in the community related to the actions identified in question #2? You can name organizations, businesses, individuals, ...



# APPLYING ABCD IN NHWW

MARCH 19, 2024

1 RESOURCES

2 METHODS

3 FUNCTIONS

4 EVALUATION



PARTICIPANTS ARE THE KEY

NO ROLE IS TOO SMALL

KEEP CONNECTIONS

LOCATE ASSETS IN COMMUNITY & BUILD FROM THERE

ASSET BASED COMMUNITY DEVELOPMENT

STORIES + DATA

EVERYONE HAS SOMETHING TO CONTRIBUTE

ASK

INVITE

NEED CONNECTION FOR SUSTAINABLE DEVELOPMENT

CITIZENS ARE THE CORE

STRENGTH FROM COMMUNITY ACTIONS

MAKE DECISIONS FROM LISTENING

WHAT WOULD YOU CHANGE TO A DIFFERENT QUADRANT?

TO MEDICAL

FOR CHARITY

OLD IDEAS CAN STILL WORK

FOOTCARE DENTAL EYE

DIABETES

TAKE AWAY DRIVERS LICENSE

TRANSPORTATION VOLUNTEERS?

ENTERTAINMENT

MEALS ON WHEELS

WHAT DO YOU WANT

PRESENTATIONS

OFFER SERVICES DIFFERENT SO PEOPLE ARE MORE INVOLVED

ADULT PROTECTION

WITH SOCIAL

BY EMPOWER

HOW DO WE

PLANNING AND DELIVERY

TAP INTO OUR YOUTH

INFORMED TRAUMA CULTURAL SAFETY

AVOID OVERSTEPPING

NUTRITION

NAVIGATION SERVICES

HAIRCARE

STEERING COMMITTEE WITH SENIORS

LUNCH & LEARNS

TAP INTO LEADERSHIP SKILLS

PROVIDE PURPOSE

VOLUNTEER TO HOST ACTIVITIES

BUDDY UP

EMOTIONAL

MENTAL

SPIRITUAL

PHYSICAL

WHAT I'M HEARING FROM YOU IS...



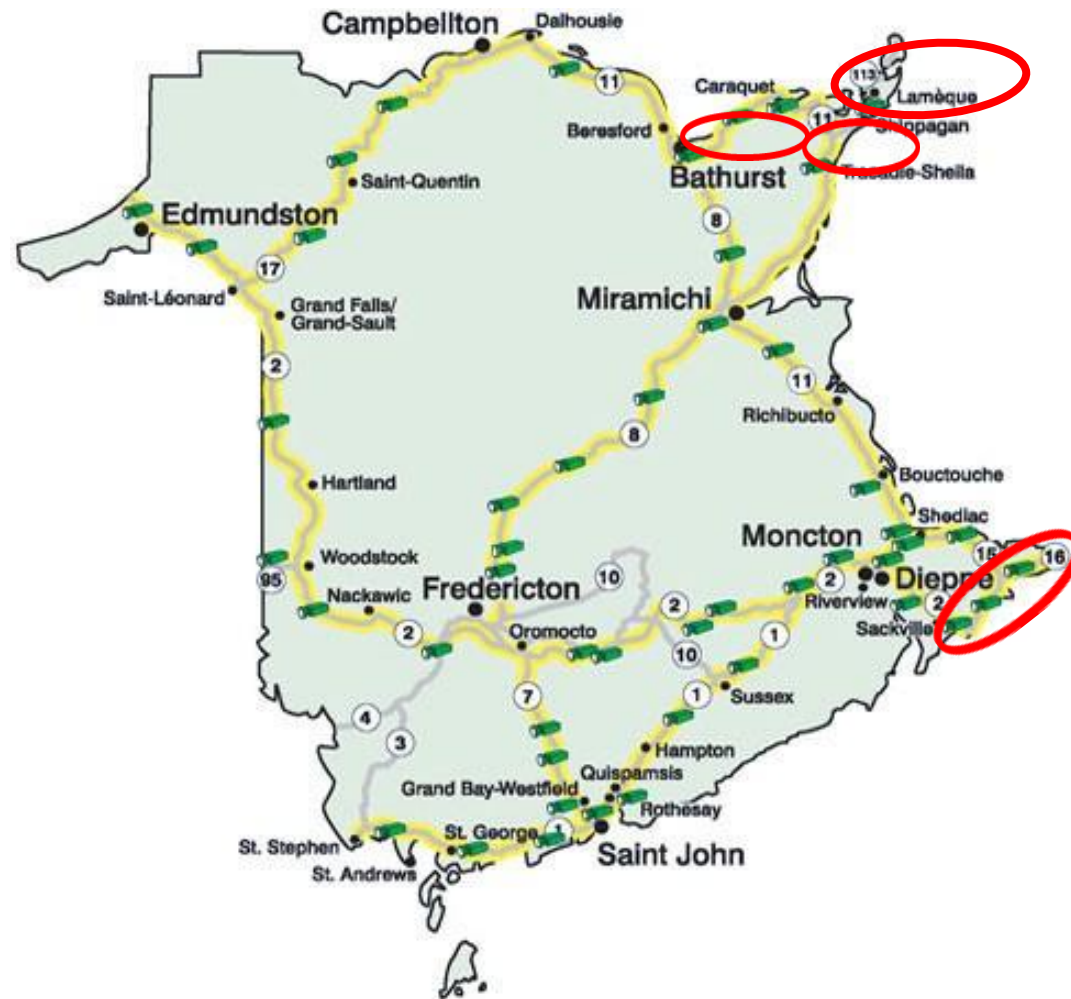
EXERCISE PROGRAM



Identifying the Priority Needs – ABCD Approach



# NHWW – Pilot project in NB (2019-2023)



Information, services and activities for aging in place

Maintien à domicile :  
Information, services et activités



# Nursing Home Without Walls

## Goal

- To ensure that older adults and their caregivers living in rural NB can **age in place with access to appropriate supports**

## Objectives

- Older adults and their families have **access to appropriate information and services** related to aging in place
- **Social health** initiatives to counter social isolation and loneliness
- **Knowledge** on health-related issues important to aging in place and healthy aging
- Empower **local communities** to respond to the needs of an aging population

- ❖ Flexible model
- ❖ Based on local needs
- ❖ No duplication of services

### Navigating/Accompaniment

- **General information**
- **Individualized information**
  - Empower to pursue access
- **\*Accompaniment to access services** (most in demand)
  - Assistance with calls, forms, follow ups
  - Continued support

### Social Health Initiatives

- **Group activities**
- **Friendly visits/calls**
- **Intergenerational activities with local schools, university**
- **Caregiver respite with volunteer visitor program**
- **Community radio for health info**

### Interactive Community-Nursing Home

- **Older adults visit to NH**
  - Personal care
  - Socialization
  - Meal + meals to go
- **Staff visits older adults at home**
  - Friendly visit
  - Socialization
  - Transportation
- **Navigation to services**
  - Information

### Supportive Services

- **Services for AiP**
  - Friendly visits/calls
  - Foot care
  - Home maintenance
  - Social activities
- **Transportation**
  - Groceries
  - Medical appointments
  - Social outing



Age-Friendly Communities



**Goals**

- Access to supports and services to age in place
- Social health initiatives to counter social isolation and loneliness
- Knowledge on healthy aging
- Encourage local community to become an AFC

**1**

### NAVIGATING AGING IN PLACE

<p><b>General information</b></p> <ul style="list-style-type: none"> <li>• Promote GNB initiatives and NGO services</li> </ul>	<p><b>Individualized information</b></p> <ul style="list-style-type: none"> <li>• Home visit or call to understand need(s) and align services</li> <li>• Guide to appropriate services</li> <li>• Empower o.a. to pursue access process</li> </ul>	<p><b>**Accompagnement to access services</b></p> <ul style="list-style-type: none"> <li>• Providing info + assistance with calls, forms, follow ups +</li> <li>• Continued support: needs complex + lack of social support</li> </ul>
--	--	--

### Social Health Initiatives

**Counter social isolation**

- Group activities (phys act, luncheons, health promotion act.)
- Friendly visit/calls
- Intergenerational act.
- Caregiver respite
- Community radio
- Transportation

**2**

### INTERACTIVE COMMUNITY NURSING HOME

<p><b>Older adult visit to NH</b></p> <ul style="list-style-type: none"> <li>• Personal care (bathing)</li> <li>• Socialization</li> <li>• Meal + meal(s) to go</li> </ul>	<p><b>Staff visits older adult</b></p> <ul style="list-style-type: none"> <li>• Personal care</li> <li>• Socialization</li> <li>• Organize meds</li> <li>• Friendly visit/call</li> </ul>	<p><b>Navigation to services</b></p> <ul style="list-style-type: none"> <li>• Information</li> <li>• Help with forms</li> <li>• Support to family</li> </ul> <p><b>Transportation</b></p> <ul style="list-style-type: none"> <li>• NH mini-bus</li> <li>• Outings in community/activities</li> <li>• Groceries</li> <li>• Medical appointments</li> </ul>
--	---	---

**3**

### SUPPORTIVE SERVICES

<p><b>Services offered</b></p> <ul style="list-style-type: none"> <li>• Foot care</li> <li>• Friendly visits/calls</li> <li>• Housekeeping/maintenance</li> <li>• Social activities</li> </ul>	<p><b>Transportation</b></p> <ul style="list-style-type: none"> <li>• Groceries</li> <li>• Medical appt</li> <li>• Social outing</li> </ul>	<p><b>Visit to NH</b></p> <ul style="list-style-type: none"> <li>• Bathing</li> <li>• Laundry</li> <li>• Socialization</li> </ul>
--	---	---

↕ Age-friendly communities ↕

- Flexible model that can be adapted to any community
- Based on local needs
- No duplication

- High level of satisfaction on the part of users, employees, NH and community

- 65% + of users are at risk of frailty
- 3 or more chronic conditions

- Multiple collaborators
- Addresses gap in access to services and provides important AiP support



# NHWW Core Elements

1

**Person-centred**: Directly serves older adults and families who are living in the community based on their identified health and social needs

2

**Collaborative**: Leverage the knowledge, infrastructure and resources of a nursing home and people and organizations within the community

3

**Flexible**: Address challenges related to aging in place, such as social isolation and access to services

# CIHI Gold Standards for Aging in Place Programs (CIHI, 2022)



SYSTEM NAVIGATION



LOW COST



PERSON CENTRED,  
FLEXIBLE



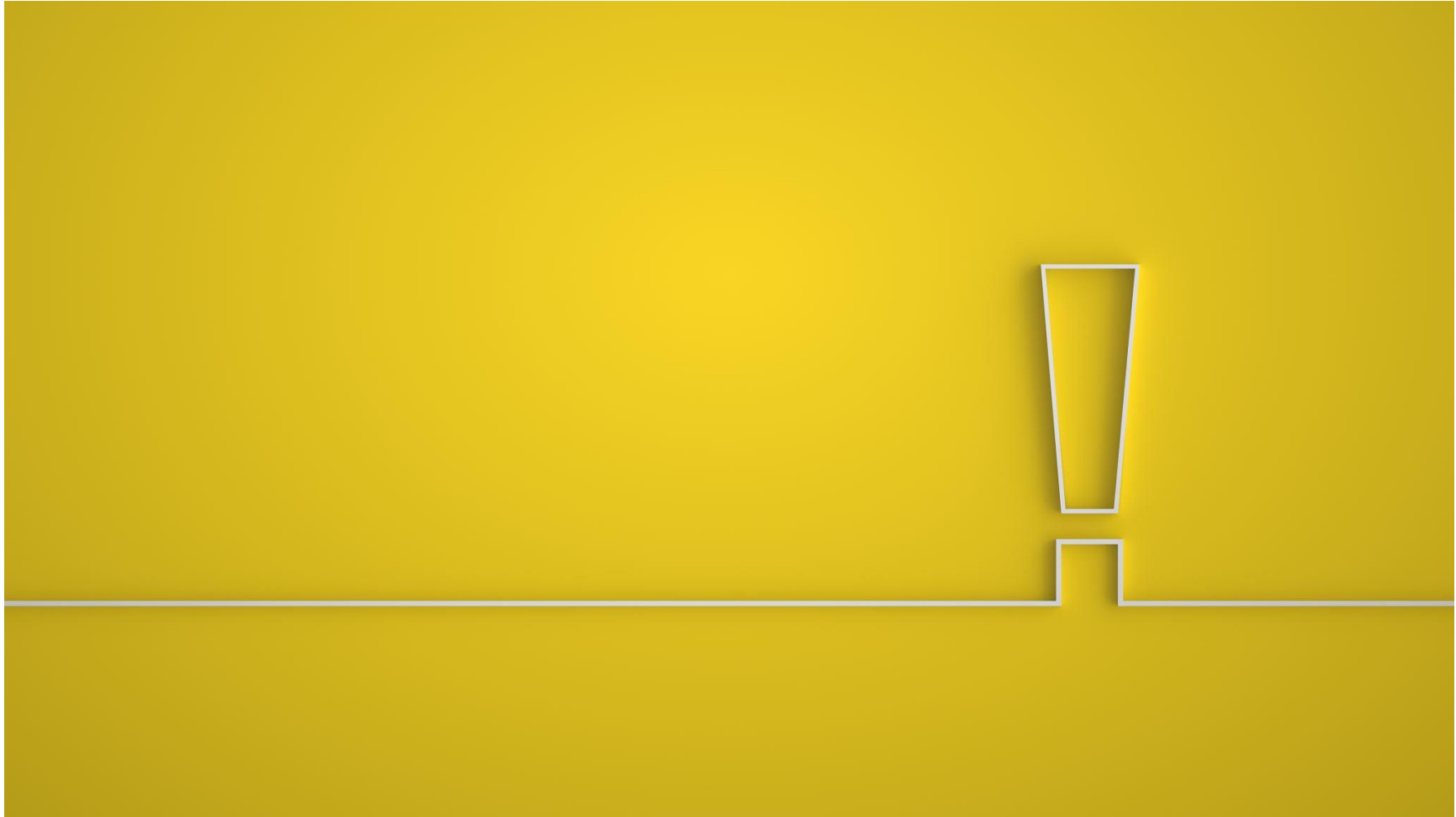
ACCESS TO NON  
MEDICAL SERVICES



DELAYING OR  
PREVENTION LTC  
ADMISSION + ED VISITS



Could your LTC facility  
implement NHWW for the  
local community?



**Impact of NHWW**



# Who participated in the NHWW pilot? (2019-2023)

- **Participants = 397**
  - 42 % in their 70s
  - 29 % in their 80s
  - 63.5 % female
  - 55 % had a high school diploma
  - 45 % income of \$25 000 or less

## Frailty (PRISMA-7 Scale)

- **Stable frailty score**
  - Time 1: 2.98
  - Time 2: 3.11

## Aging in Place Survey

- 📊 Increased level of **social interaction** and outings
- 🗨️ Easier to **receive information** about services and receive the services
- 📊 Greater **feelings of security**
- 📊 **More resources** for aging in place
- 👤 97.9 % would **recommend NHWW** to a friend or family member



- **Satisfaction** with NHWW
  - 98.9 % satisfaction
- Services help **remain at home**
- **Feel connected** to the community
  - Neighbourhood Cohesion Scale: statistically significant differences in connectedness
- NHWW addressed **social isolation and loneliness**
  - Loneliness Scale: decrease in loneliness
- 28 % of participants **avoided going to the ED** for a non-urgent matter



## Who left the project (2019-2023)?

- 63 participants
- Were older
- Higher chronic conditions (COPD, stroke, dementia)
- Had received the most help at home
- Higher frailty scale (mean of 4.05)
- 41 % had been admitted to hospital in the last year



A glowing lightbulb is centered in the image, with the text "Sustainability???" written inside it in white. The lightbulb is set against a background of dense green leaves. A horizontal white line is drawn below the text.

Sustainability???





Program Delivery  
Cost

Operations

Knowledge  
Mobilization (KM)

## Stabilizing Health Care: An Urgent Call to Action



### Support Seniors to Age in Place

New Brunswick seniors value their independence, yet in recent years, more seniors are admitted to hospital beds, away from their homes and loved ones. Currently, almost one in three hospital beds are occupied by seniors who could be experiencing a better quality of life and receiving services tailored for their stage of life and specific needs. The average stay in a nursing home is three years in New Brunswick, double the national average. Within 10 years, over 28 per cent of New Brunswick's population will be over age 65, double the national average. Action must be taken now to improve services and supports to seniors both in their homes and in the community.

This action plan will place priority on making it easier for seniors to access social services, primary care providers, the Extra-Mural Program and community support organizations, giving seniors rapid access to the health and social supports they need to live as independently as possible for as long as possible – regardless of their residence. These initiatives are in addition to existing programs that are currently supporting seniors to age in place.

#### IN THE NEXT 24 MONTHS NEW BRUNSWICKERS WILL SEE:

##### FISCAL

- Q3 2021-22** Eleven special care home sites will partner with the Extra-Mural Program to provide enhanced clinical services to seniors in their homes, including use of technology for routine follow ups so that seniors don't have to leave their home when not necessary.
- Q1 2022-23** Long-term care staff will join the discharge teams in at least 10 hospitals to ensure that seniors are being transitioned back to their homes with appropriate plans for their ongoing care.  
  
Tablets will be provided to special care homes (currently in use in nursing homes) to connect seniors with loved ones and address loneliness.
- Q3 2022-23** An additional 10 special care homes will partner with the Extra-Mural Program to provide enhanced clinical services.
- Q1 2023-24** A further additional 10 special care homes will partner with the Extra-Mural Program to provide enhanced clinical services.  
  
Nursing homes that currently provide support to seniors in the community will be supported to increase the type as well as level of services they provide, helping to combat social isolation and ensuring seniors understand what supports and services are available to them.  
  
Building upon the original pilot project of four nursing homes participating in the Nursing Homes Without Walls project, eight new service locations in rural New Brunswick will begin to provide additional services and supports to seniors.
- Q3 2023-24** An additional eight service locations in rural New Brunswick will offer services and supports to seniors based on the Nursing Homes Without Walls concept.

Nov, 2021

BUDGET 2022-2023

## Building on Success

This budget reflects strategic investments in key priority areas of health care, education, and social services.

This is a budget that New Brunswickers can afford and one that they deserve.

GNB.CA/FINANCE



### Health care

- **\$3.2 billion** into health care this year
- **6.4% increase in health care spending.** This is the largest increase since 2008-2009



### Housing

#### Property tax rates

- **50% reduction** in non-owner occupied properties
- **15% reduction** for other residential properties, like nursing homes
- **15% reduction** for non-residential properties

#### Rent cap

- **3.8%** retroactive to January 2022



### Education

- **\$110 million** invested in early learning and childcare sector
- **Approximately \$500 million** over the next five years



### Vulnerable populations

- **\$38.6 million** to increase wages for a variety of home and community support services



### Income tax

- **\$40 million** in personal income tax relief to more than 400,000 taxpayers



Healthcare  
Excellence  
Canada



UNIVERSITÉ DE MONCTON  
EDMUNDSTON MONCTON SHIPPAGAN



Excellence  
en santé  
Canada



## Promising Practices: Nursing Home Without Walls (NHWW)

### News Release

Social Development

## Nursing Homes Without Walls program reaches milestone of 20 locations

03 April 2024

FREDERICTON (GNB) – The Nursing Homes Without Walls program has expanded to 20 locations around the province.

The program started recently at York Care Centre in Fredericton, Shannex in Moncton, White Rapids Manor in Fredericton Junction, and the Church of St. John and St. Stephen Home in Saint John. River View Manor in Bath joined the network in December.

"It has been an honour to watch the Nursing Homes Without Walls program expand to more and more sites across the province these past few months," said Kathy Bockus, minister responsible for seniors. "Innovative programs like this one will play an integral role in ensuring seniors are able to age with dignity and in comfort at home."

A partnership with Healthcare Excellence Canada and the Université de Moncton's Research Centre on Aging has supported the program's implementation and expansion.

"I am proud to see so many nursing homes have joined the Nursing Homes Without Walls program," said Suzanne Dupuis-Blanchard, the research centre's director. "It makes me happy that it has grown so much since the pilot project and continues to support those who want to age at home."

The program provides improved access to health and social services for older adults living in the community. It began as a pilot project in 2019 and later expanded through the [provincial health plan](#). The health plan included an initial target of 20 locations for the network.

Services offered through the program could include:

- Navigating and accessing other programs and services.
- Friendly check-in calls and in-person social visits.
- Transportation using a nursing home's minibus.
- Use of a nursing home's bath facilities and specialized equipment.

More information on the program [is available online](#). Specific questions may be directed by email to [NHWW-FSSM@gnb.ca](mailto:NHWW-FSSM@gnb.ca).

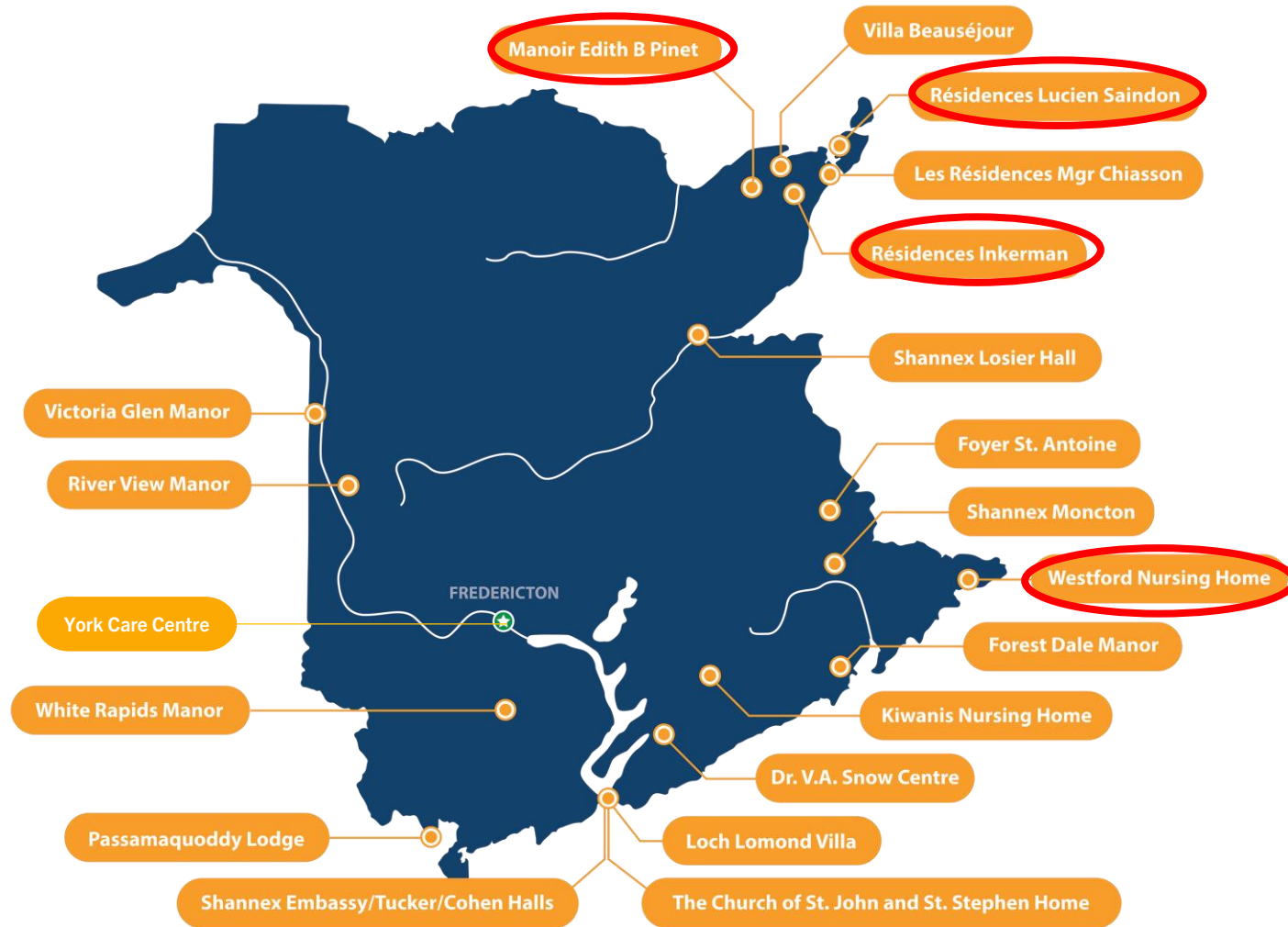


March 19, 2024

[Video](#)

# 20 NHWW (March 2024)

+ 10 new sites (2024-2025)

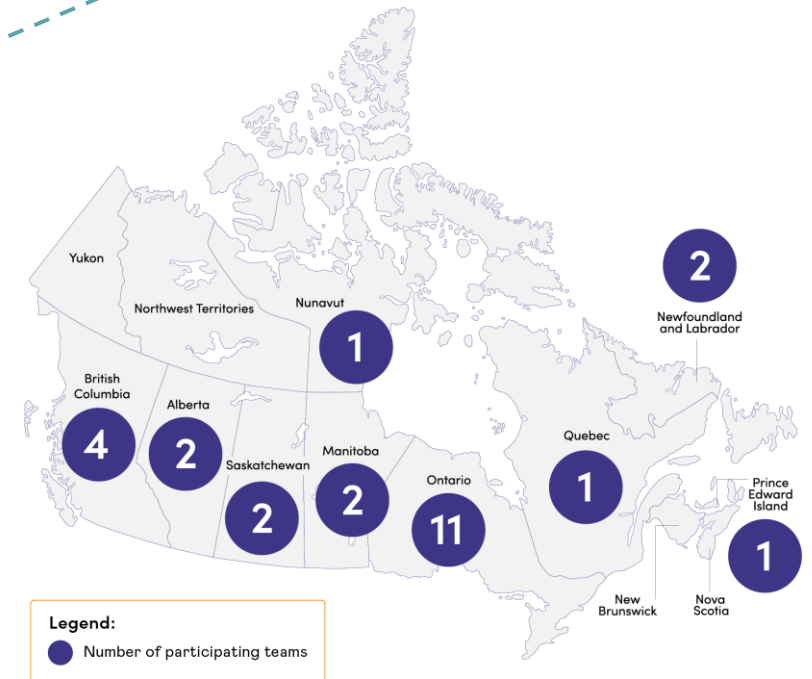




# National Interest



 **Healthcare Excellence**  
Canada  
Enabling Aging in Place





# Quotes from participants...

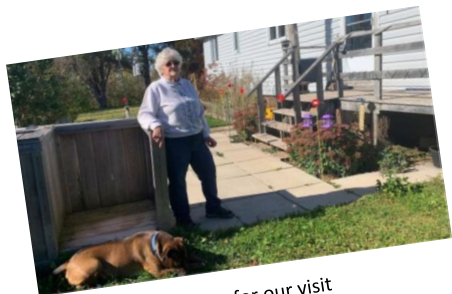
The daughter of a new client sent us an email: *"Thank you so much for your visit today. We would have never found all of these programs, services and possibilities on our own."*

Quote from a senior who NHWW was able to help get into an apartment: *"I am so happy, can't stop crying, there is no way I could spend another winter in that home. NHWW has literally saved my life, and I can not thank you enough...thank you so very much".*

*"I'm very happy with NHWW. I mostly appreciate the bath I get regularly because I need help and can't get one at home."*

*"Thanks to your help, my mother can now benefit from services we didn't even know existed in our community and province. Otherwise, she would have needed to relocate."*

*"Going to the nursing home once a week has made it possible for my mother to continue to live in her house. She goes for a bath, talks to people, has lunch, and comes home with more food. She is no longer the same person. Thank you."*



Waiting for our visit



Minibus outing

*“NHWW sees the possibilities  
when seniors see the barriers”*

---







# Acknowledgements

Financial contribution from



## Students

Alisson Haché-Chiasson  
Mathilde Thériault  
Danica Maillet  
Chelsey Cormier  
Kyle Wells

## Other personnel (HQP)

Danielle Thériault



# Thank you / Merci

Suzanne Dupuis-Blanchard, RN PhD FRSC FCAN  
Université de Moncton

[suzanne.dupuis-blanchard@umoncton.ca](mailto:suzanne.dupuis-blanchard@umoncton.ca)