The Provincial Health Plan
2013-2018
A Blueprint for Sustainability
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The Provincial Health Plan 2013-2018
Premier’s Message

New Brunswickers receive excellent health-care services provided by capable, compassionate health professionals. *Rebuilding Health Care Together: The Provincial Health Plan 2013-2018* is a five-year plan to preserve and protect New Brunswick’s health-care system by strengthening the services delivered in our communities and making our facilities more effective, more innovative and better integrated.

Our government’s vision for health care is rooted in our core belief that all New Brunswickers need and deserve access to quality health-care services in their language of choice. This begins with robust primary health-care services – including access to a family doctor – that are supported by a network of safe, efficient, and effective hospitals providing services that are both financially and clinically sustainable.

This plan could not have been developed without first talking to New Brunswickers and understanding their views. We are proud that New Brunswickers were formally consulted --for the first time in history – in the development of the provincial health plan. These consultations have in turn given us a historic opportunity to rebuild our health-care system.

New Brunswickers have told us they are ready to play their part in improving health outcomes by making better lifestyle choices – by eating healthier and exercising more frequently. They also recognize that change is necessary if we are to protect our universal health-care system.

As Premier, I recognize that each and every New Brunswicker cares passionately about our health-care system and has an important role to play. I want to partner with New Brunswickers to rebuild health care in our province to make it strong enough to meet patient needs today and resilient enough to adapt to the priorities of future generations.

*Rebuilding Health Care Together: The Provincial Health Plan 2013-2018* is the foundation of our efforts to achieve better individual health outcomes and meaningful, sustainable reform in our health-care system for a better quality of life for all New Brunswickers.

*Premier David Alward*
The Provincial Health Plan 2013-2018
Minister’s Message

It’s my pleasure to present Rebuilding Health Care Together: The Provincial Health Plan 2013-2018.

This plan envisions a healthy province, supported by a sustainable, world-class health-care system -- a system that New Brunswickers can count on to be there when they need it, for generations to come.

We need a patient-focused, better integrated health-care system that supports an enhanced quality of life for all New Brunswickers.

This new system must provide improved access to primary and mental health care, and encourage better prevention and management of chronic disease.

It must provide services that are sustainable, safe and of the highest quality, with enough patient volume to ensure their financial viability and the ability of our health professionals to maintain clinical expertise.


This document is also about taking action and includes a list of key initiatives that New Brunswick’s health partners will undertake in support of the plan.

This list will be reviewed and updated annually. Benchmarks will be established. Progress will be measured. Milestones will be celebrated.

The plan was developed in light of the thousands of comments we received from the public during a consultation tour as well as the detailed submissions we received from our province’s physicians, nurses, pharmacists and patients.

This plan combines the many health-care initiatives our government has undertaken and brings them together as part of an overall vision that will address the province’s health-care challenges, support New Brunswickers in rebuilding their personal health and design a system that will sustain everyone for generations to come.

This process also made one thing very evident: New Brunswickers understand the reality that our health-care system is at a crossroads and decisions need to be made. They told us very clearly that they don't want more money spent on health care. They want us to use the dollars they are providing more efficiently and more effectively. The new provincial health plan also supports this objective.

The consultation process was just the beginning of New Brunswickers’ role in the provincial health plan. The time has come for us, as New Brunswickers, to take responsibility for our own personal health and work together to address the province’s health-care challenges.

Our goal is a healthy population, supported by an effective, efficient, affordable health-care system. This plan is a blueprint for making historic change, for introducing a sustainable health-care system which will meet today’s needs, and tomorrow's.

Hugh J. Flemming, Q.C. Minister of Health
Introduction: The Plan and Its Purpose

The provincial health plan provides New Brunswick’s health partners and stakeholders with a blueprint for the delivery of health services. It is used to manage existing health-care services and resources, develop new programs and policies, and make financial decisions.

*Rebuilding Health Care Together: The Provincial Health Plan 2013-2018* is a made-in-New Brunswick guide to a sustainable health-care system. It supports the New Brunswick government’s strategic vision of a stronger economy and an enhanced quality of life while living within our means. It is based upon seven principles:

- **Access:** The ability of patients or clients to obtain the right care or service at the right place and the right time, based on respective needs, in the official language of their choice;
- **Appropriate Range of Services:** The care or service provided is relevant to the patients’ or clients’ needs and based on established standards;
- **Effective:** The care, service, intervention or action achieves the desired results;
- **Efficient:** Achieving the desired results with the most cost-effective use of resources;
- **Equitable:** Aiming for equitable care and services for all;
- **Safe:** Potential risks of an intervention or the environment are avoided or minimized;
- **Clinically Sustainable:** Programs include at least four or five providers, with sufficient volume to maintain clinical expertise.

Throughout the consultation process, system stakeholders and New Brunswickers said transparency and accountability were key to the success of the plan. A high-level overview of strategic objectives was not good enough.

A blueprint for action has been developed along with a list of key initiatives that will be updated and reported upon annually so that every New Brunswicker can follow its progress.
New Brunswick’s Role in Canadian Health Care

Like all Canadians, New Brunswickers cherish our country’s publicly funded health-care system. The Canada Health Act reflects these values, upholding the principle of “reasonable, barrier-free access to health services.”

The Canada Health Act is federal legislation that ensures every Canadian citizen has access to a reasonably comparable level of services. However, it is the New Brunswick government’s role to deliver these services to New Brunswickers.

Universal access to quality health-care services is a laudable goal that New Brunswick will continue to achieve. This is a major challenge that can and must be met through innovation and principled decision-making.

The provincial government is largely responsible for funding the health-care services provided to New Brunswickers. Federal health transfers account for only 20 per cent of the cost of New Brunswick’s health-care system, which totaled $3.1 billion in 2012.

This leaves New Brunswickers with 80 per cent of the costs of the province’s most expensive and rapidly growing program. The province’s health-care budget has soared since 2004, when overall spending was $2.4 billion. Between 2004 and 2011, per person spending on health care increased 53 per cent in New Brunswick compared to 42 per cent nationally.

Many New Brunswickers told us in consultations that the province is simply living beyond its means. Increases in health-care spending are far outpacing the province’s ability to afford them and demand is likely to increase in years to come. They also told us that simply throwing money on the table is not a solution.

Improving the health of New Brunswickers involves more than hospitals and equipment. The right investments, supported by evidence, must be made in the right places. The right care must be delivered by the most appropriate health provider.
Health Care and Population Health: A Report Card

Health renewal is an absolute priority. New Brunswickers clearly understand that the health-care system in New Brunswick (and the rest of Canada) is under financial pressure that is not likely to ease as the population ages. They want a system that is safe, sustainable, efficient and effective.

Change should not occur without first evaluating what the system does well and where it can do better.

N.B.’s Health Professionals Provide First-Rate Care

New Brunswick’s health-care services are of high quality and delivered by about 20,000 health professionals, mostly doctors, nurses and other allied health professionals.

In an emergency or serious illness, New Brunswick’s health-care system surrounds a seriously ill patient with the life-saving care that they need. Research surveys consistently show that New Brunswickers are satisfied with their quality of care. New Brunswickers generally like and respect their caregivers and feel they have received good care once they are in the system.

Access Problems

Getting access to timely care for more routine problems or preventative check-ups, however, is a regular frustration for New Brunswickers. In 2011, the New Brunswick Health Council (NBHC) surveyed New Brunswick residents and found that while 93 per cent of citizens have a family doctor, only 30 per cent can get an appointment on the same or next day. New Brunswickers may wait months to see a specialist or to have a diagnostic procedure.

And yet, New Brunswick’s health human resource staffing levels are generally higher than the Canadian average. For example the Canadian Institute for Health Information (CIHI) reported in 2011 that New Brunswick had 113 general or family physicians per 100,000 people while the Canadian average was 106 per 100,000.

Population Health Challenges

New Brunswickers have been investing heavily in acute care, advanced technology and health human resources, but the evidence suggests we could do a better job of looking after our personal health.
In fact the health-care system only has a 10 per cent impact on a person’s overall health.¹

The major causes of illness and death in developed countries like Canada are chronic diseases, including cancer, heart disease and diabetes. Management of these diseases is a costly and often life-long process.

This is a very real challenge in New Brunswick, where 70 per cent of the senior population has at least one chronic condition² and the province’s fastest growing demographic is aged 65 or older. The CIHI statistics state that New Brunswickers exceed the Canadian average in smoking rates, adult obesity rates, unhealthy alcohol use, diabetes, heart and respiratory disease.

² Health Council of Canada, Canadian Community Health Survey, 2012
# A Blueprint for Sustainability

Every rebuilding project requires a blueprint that guides the involved partners in their work. Each partner reads the plan to understand how their work and expertise contributes to the bigger picture.

Rebuilding Health Care Together: The Provincial Health Plan 2013-2018 is the Government of New Brunswick’s plan to guide the delivery of health services in the province. It brings the many health renewal efforts together into a single picture that will move the province’s health-care system from a 20th Century model structured around providers and facilities to a more modern approach focused on patients living healthy lives in their communities. New Brunswickers will be supported by top-quality, more accessible health professionals and will receive, when necessary, services in innovative hospitals whose performance is measured and acted upon.

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## The Foundation

Every structure requires a solid base upon which everything else is built. This is also the case with New Brunswick’s health-care system.

The work to rebuild health care in New Brunswick will be based on stakeholder input and feedback received from the public during nine public engagement sessions, a commitment to sustainable budgets, the introduction of performance excellence and measurement and a move to evidence-informed decision-making using health intelligence.
Stakeholder Input and Public Engagement

For the first time in history, the New Brunswick health-care system’s most important stakeholders – its clients and patients – were given an opportunity to contribute to the development of the provincial health plan. These consultations were led by the Minister of Health and co-ordinated by the New Brunswick Health Council (NBHC). A summary of the consultation process is contained in Appendix B of this document and all of the responses and ideas received were compiled into a “What Was Said” report that is available on the NBHC’s web site.

In addition to the public consultation, excellent written submissions were provided to the Minister by professional associations and community groups. These are available on the Department of Health’s web site.

New Brunswick’s First Nations communities spoke of the impact their history has had on the health status of Aboriginal persons. Cultural competence is integral to helping health system personnel work effectively with First Nations patients.

Sustainable Budgets

Since 2010, the Government of New Brunswick has been taking significant steps to control spending growth in health care. For the last two years, all the system’s partners have been working to improve accountability through performance measurement, achieve multi-year budget reductions and improve resource management.

These administrative changes have not compromised patient care and have had significant results. The rate of growth for 2012-13 is 1.6 per cent. In 2013-14, the New Brunswick Government is targeting a zero per cent growth rate in health-care.

Performance Excellence Process

Reducing the cost of health care can bring financial sustainability to our system, but these changes must be made in smart, efficient ways if they are to be clinically sustainable.

Horizon Health Network was one of the first six early adopters in the New Brunswick government’s Performance Excellence Process, which is a results-oriented, long-term approach to doing business. The Department of Health is actively engaged in the Performance Excellence Process and is working with FacilicorpNB and Vitalité Health Network to have it implemented throughout the system.

In health care, performance excellence can save money and reduce waste while increasing the quality of care and patient satisfaction.
Health Intelligence

Being able to predict future demands on our system and the financial impacts of these demands will be an important part of the health-care system’s move to performance-based management. The Department of Health manages a wealth of data about what services have been offered to New Brunswickers, the outcomes of care and the associated expenditures. Health intelligence will turn this data into information that can be used to predict and forecast what will happen next and support evidence-informed decision-making.

Rebuilding Our Health

Health providers working in Public Health, primary health care and in community-based services are essential parts of the system as the services they deliver contribute to improved health status.

Shifting the focus from hospital-based care to preventative interventions and primary health care has been linked to improved overall health. A system focused on primary health care and population health is also more likely to produce better health outcomes and greater patient satisfaction.

This was well recognized in the consultations associated with the development of this plan. The need for New Brunswickers to live healthier lifestyles and a desire to improve access to health care at the community level was an important topic at all of the sessions held and there was substantial agreement in the input received from citizens, stakeholder organizations, the New Brunswick Health Council and the regional health authorities. This input also aligned with the planning underway on several key initiatives already announced by the Government of New Brunswick.

Better Access to Patient-Focused Care

The Primary Health Care Framework for New Brunswick provides a strategic plan to renew the delivery of primary health care in New Brunswick. The research is clear: New Brunswick must build multi-disciplinary teams that will provide residents with timely access to primary health care and coordinated support and treatment from other health professionals such as nurses, dieticians, counselors and respiratory therapists. A team approach will allow for the development of an integrated and holistic treatment plan to combat chronic disease and obesity.
Primary health care initiatives announced to date include:

- Four Community Health Needs Assessments
- Family health teams
- Patient Connect NB – a registry for New Brunswickers without a family doctor
- Salaried physician monitoring system

The Government is also working to prevent and manage chronic disease in the province. A Comprehensive Diabetes Strategy for New Brunswickers has been released that has provided funding for insulin pumps to children with diabetes and a variety programs and online tools have been released for patients and health professionals.

In addition, the regional health authorities will plan and implement a Congestive Heart Failure Management Strategy.

The Action Plan for Mental Health in New Brunswick 2011-2018 similarly emphasizes putting clients at the centre of care through mental-health promotion, changes in service delivery in all sectors, the early identification of mental illness, effective intervention, and working to shift the stigma of mental illness.

Many New Brunswick government departments are involved in the implementation of the action plan and an update was recently released.

Mental Health Action Plan initiatives announced to date include:

- Implementing early psychosis intervention services provincially
- Additional community-based beds for youth
- Two pilot projects stressing an integrated approach to program delivery for children and youth
- $2.2 million in funding for action plan initiatives

Better Access to Necessary Medications

Many New Brunswickers can’t afford the medications they need to keep them healthy. Some require access to basic medications to treat chronic diseases that can keep them healthier and prevent serious illness and unnecessary costs to the health-care system. Other New Brunswickers need access to one very expensive (catastrophic) drug.

The Government of New Brunswick is developing a new prescription drug insurance plan which will help prevent New Brunswickers from experiencing financial hardship because of prescription drug costs.
More Services at Home

Home health care is an excellent example of integrated, patient-focused health care. It is cost-effective and often a preferable form of care for many New Brunswickers, particularly seniors and those requiring palliative care.

The Extra-Mural Program can provide improved access to appropriate health care. The Extra-Mural Program already provides a variety of acute and supportive care services in home and other non-facility based settings. The department and the regional health authorities will place extra emphasis on the program and have partnered to develop clear actions and targets to improve the Extra-Mural Program's effectiveness, efficiency and reach.

Currently a number of seniors throughout the province wait in hospital beds for placement in long-term care facilities, placing pressure on the system to serve acute care patients requiring hospitalization.

The New Brunswick government has announced the creation of over 1,000 new beds for both nursing homes and special care homes to help alleviate this pressure on the hospital system.

In addition, the departments of Social Development, Healthy and Inclusive Communities, and Health are partnering in the development of the Home First initiative. Home First will help seniors age well at home and avoid unnecessary hospital admissions or premature placement in long term care facilities.

Healthier Population

Public Health is critical to keeping people healthy by examining the needs of the population as a whole; emphasizing the prevention of disease, injury and premature death at the population level; and protecting the public from the risk of harmful events and exposures.

A number of initiatives will strengthen surveillance and health assessment capacities to improve the effectiveness of existing programs and create new programs, while keeping the public and decision-makers abreast of emerging health needs. Particular emphasis will be placed upon the prevention of unintentional injuries, promoting food safety and healthy nutrition. An action plan for children's health, improving health amongst First Nations' populations and addressing longstanding health inequities in various sectors are all areas of interest for Public Health.

The Regional Health Authorities will also undertake initiatives to strengthen cultural sensitivity among RHA staff and help ensure that citizens in First Nations communities receive high quality, culturally appropriate services.

Cancer screening saves lives through early diagnosis and treatment. The New Brunswick Cancer Network will work with primary health care practitioners and the regional health authorities to implement organized and targeted cancer screening programs for cervical and colon cancer in addition to the province's successful breast cancer screening program.
Rebuilding Our System

Building a sustainable health-care system requires a strong vision and commitment to excellence. All New Brunswickers have a right to health-care services in their language of choice. These services must be safe, of quality, and with enough patient volume to make it financially viable and maintain clinical expertise.

The Department of Health and the Office of Health System Renewal are working together to optimize the delivery of clinical services province-wide, from primary care to tertiary care. This will require New Brunswick's health-care services to be planned and designed in an integrated way with consideration given to New Brunswick's small, largely rural population, its status as Canada's only officially bilingual province and its centralized planning, funding and associated functions.

Principled Decision-making

The following principles will be applied to all decisions as New Brunswickers work together to rebuild our health-care system:

1. Quality

An increasing body of evidence supports that patient outcomes improve as volume increases. Better outcomes in high-volume hospitals have more to do with a greater institutional proficiency with all aspects of care than a reflection of a physician's skill.

2. Efficiency

An efficient health-care system avoids the unnecessary duplication of services and makes the best use of available human and financial resources.

3. Access

When determining whether appropriate access is being provided to a service, the following must be given consideration: whether the target population is receiving the service in question; how long a wait is required; what distance must be traveled to obtain this service; whether the service is provided in the official language of choice.
4. Clinical sustainability

Clinical sustainability is related to the volume of services provided and to the health-care human resources available. A clinically sustainable service typically requires four or five physicians in one specialty to ensure a program is available 24 hours per day, seven days per week, 365 days per year, without significant disruption. An adequate volume of patients is also necessary for the physicians and other providers to maintain their skills.

In addition, it must be recognized that many health-care services are interdependent and these services must also be sustainable. For example, services such as trauma rely upon several sustainable programs to deliver high quality care (e.g. general surgery, orthopedic surgery, internal medicine, neurosurgery, etc). This concept is most often referred to as clustering of services.

Benchmarking

People naturally measure their success against the performance of their peers. Businesses measure their market share. Students compete for the best grades. Athletes measure their best times and goals scored.

We can and should measure performance in health care. The Office of Health System Renewal has undertaken a benchmarking process to determine how well New Brunswick’s hospitals are performing contrasted with other, similar facilities across the country and how favourably they compare to each other.

Services in New Brunswick hospitals are being measured to improve their quality and efficiency. This process allows system administrators and health professionals to see what is being done well in New Brunswick and how those lessons and innovations can be applied to other services. It also promotes a deeper understanding of why other services might be less efficient and how that can be addressed.

Equitable Delivery of Services

The Government of New Brunswick is committed to providing all New Brunswickers with the high-quality health-care services they deserve and they need without any linguistic barriers. A five-year Action Plan for the Equitable Delivery of Services has been announced.

The action plan consists of a list of new or expanded services in all regions of the province that are designed to address genuine gaps in New Brunswick’s health-care system. It fulfills the provincial government’s commitment to improve distribution of services to the francophone population across New Brunswick.
In the future, new services will only be added to New Brunswick’s health-care system if they are in keeping with the principles of financial and clinical sustainability, safety, quality and adequate patient volumes. If a new service is added or a service is extended, it will be provided where possible in the health authority not currently offering it.

**A Strong Vision**

Just as a home requires a strong roof to protect the family living inside, the provincial health plan needs a strong vision to protect it and ensure its success. *Rebuilding Health Care Together: The Provincial Health Plan 2013-2018* provides vision and guidance to a health-care system preparing for a significant demographic shift so that the system can be kept sustainable for future generations. In this work, our health professionals and system administrators will be supported by technology, the seven design principles, and an understanding that a greater integration of services is necessary, while embodying a spirit of co-operation that will deliver health-care reform.

**Connected by Technology**

New Brunswick’s health providers are connected to each other using a comprehensive information technology network known as the electronic health record (EHR). The EHR contains clinically relevant information such as patient visits to hospitals, diagnostic imaging reports and laboratory results.

The next phase in the evolution of the provincial EHR is the implementation of electronic medical records for physician offices and a drug information system/prescription monitoring program.

The electronic medical record will allow family doctors to collect patient information electronically and to view the information collected in the provincial health record. The New Brunswick government is working with the New Brunswick Medical Society to implement electronic medical records for physicians.

The drug information system will track a patient’s medication history and monitor prescriptions for more accurate prescribing and increased patient safety. The prescription monitoring component of this system will assist with early identification of patients at risk for addiction, and provide alerts or tools to manage double doctoring, prescription fills from multiple pharmacies and excessive quantities of narcotic drugs. The New Brunswick Pharmacists’ Association is involved in this project.
Greater Integration and Co-operation

New Brunswickers must work together to address the province’s health-care challenges, rebuild personal health and design a system that will sustain everyone for generations to come. New Brunswick’s health-care providers must also work together, so that the system is integrated, affordable, and reflects the key principles described earlier.

Throughout the consultation process, New Brunswickers recognized that developing an integrated, province-wide network of services in which people can work and be served in their language of choice was key to ensuring the sustainability of our health-care system.

Each aspect of New Brunswick’s health-care system must be examined as part of a provincial picture, understanding its role and the effect that particular service has on the rest of the system.

Acute care is increasingly specialized and smart decisions need to be made to ensure their quality, safety and efficiency. The province must invest strategically in technology to keep pace with the times while making sure services are both accessible and affordable.

It is also important to have integrated teams of health care providers and to allow health professionals to work to their full scope of practice.
Rebuilding Health Care Together

Building a long-term sustainable, effective and efficient health-care system will require the participation of every New Brunswicker.

New Brunswickers must work together to address the province’s health care challenges, rebuild personal health and design a system that will sustain everyone for generations to come. New Brunswick’s health care providers and administrators must also work together, so that the system is integrated, affordable, and reflects the key principles described earlier.

A firm commitment to transparency and accountability is integral to the success of this plan. Throughout the consultation process, system stakeholders and New Brunswickers said that they wanted a detailed plan to achieve the goals as opposed to a high-level articulation of a strategic vision. Accountability and monitoring of projects was emphasized and transparency was considered to be critical as those consulted want to follow the plan’s progress.

As a result of this recommendation, a list of key initiatives for the health system will be published each spring on the department’s web site (www.gnb.ca/health) that will outline the strategic activities the health partners will undertake in support of the provincial health plan. The first year’s list is included as Appendix A of this plan.

Please refer to the department’s web site (www.gnb.ca/health) for other information relating to the plan.

Your Input is Important!

If you would like to share your views on the provincial health plan or offer suggestions on opportunities for improving New Brunswick’s health-care system, you can do so by email at Health.ConsultationSante@gnb.ca.
Appendix A:  
Rebuilding is Already Underway  
Year 1 Initiatives

The New Brunswick Government has already launched several initiatives to help rebuild the province’s health care system.

We describe those initiatives in the table below, along with a description of the health partners responsible for them.

The Government will also update this list annually starting in 2014, and provide regular status reports on the progress of each initiative.

This list of initiatives shows the key priorities for the Department of Health and the Regional Health Authorities (RHAs) to be completed during the 2013-2014 fiscal year. A status report on these initiatives will be provided following the fiscal year end, accompanying a similar list of initiatives describing work to be completed in 2014-2015. Work on multi-year initiatives will only be highlighted in the fiscal year in which they are planned to conclude.

<table>
<thead>
<tr>
<th>Provincial Health Plan Initiative Description</th>
<th>Rebuilding our Health</th>
<th>Rebuilding our System</th>
<th>Lead</th>
<th>Provincial Health Plan Design Principle(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sustainable Budget:</strong> The Department of Health will achieve the DH budget targets provided by Government.</td>
<td>☑️</td>
<td>☑️</td>
<td>Department of Health, Horizon Health Network, Vitalité Health Network, FacilicorpNB</td>
<td>Efficient, Equitable</td>
</tr>
<tr>
<td><strong>Administrative and Organizational Efficiencies:</strong> Partnering in some instances with the Office of Health System Renewal, the Department and the RHAs will undertake a number of projects to increase the health system’s efficiency and accountability, to streamline administration, and to adopt health innovations.</td>
<td>☑️</td>
<td>☑️</td>
<td>Department of Health, Horizon Health Network, Vitalité Health Network, FacilicorpNB</td>
<td>Effective, Efficient, Safe, Clinically Sustainable</td>
</tr>
<tr>
<td><strong>Drug Program for Uninsured New Brunswickers:</strong> The Department will complete a series of key steps this year leading towards the introduction of a drug plan for uninsured New Brunswickers.</td>
<td>☑️</td>
<td></td>
<td>Department of Health</td>
<td>Access, Appropriate Range of Services, Equitable</td>
</tr>
<tr>
<td><strong>Equitable Distribution of Services:</strong> The Department of Health and the regional health authorities will undertake the elements of the 5-Year Action Plan for the Equitable Distribution of Health Services scheduled for a 2013-14 implementation (i.e. provincial bariatric services, improvements to oncology, rheumatology, child psychiatry, designation of teaching hospitals).</td>
<td>☑️</td>
<td>☑️</td>
<td>Department of Health, Vitalité Health Network, Horizon Health Network</td>
<td>Access, Appropriate Range of Services, Equitable, Effective</td>
</tr>
<tr>
<td><strong>Home First:</strong> The Departments of Health, Social Development and Healthy and Inclusive Communities will partner to bring a new philosophy, vision and action plan for aging care in New Brunswick to Government for consideration. When implemented this will allow more seniors to remain in their homes and communities, with better outcomes for seniors and significantly lower costs for Government.</td>
<td>☑️</td>
<td>☑️</td>
<td>Department of Social Development</td>
<td>Access, Appropriate Range of Services, Efficient, Effective</td>
</tr>
<tr>
<td>Provincial Health Plan Initiative Description</td>
<td>Rebuilding our Health</td>
<td>Rebuilding our System</td>
<td>Lead</td>
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<tr>
<td>Mental Health Action Plan: The Department and Regional Health Authorities will undertake a number of initiatives from the Mental Health Action Plan improving program standards and waiting times, developing new staff training, expanding capacity respecting vulnerable citizens and youth.</td>
<td>✔️ ✔️</td>
<td>Department of Health, Horizon Health Network, Vitalité Health Network</td>
<td>Access, Appropriate Range of Services, Effective, Clinically Sustainable</td>
<td></td>
</tr>
<tr>
<td>Primary Health Care - Diabetes: As part of the Diabetes Strategy, the Department will finalize development of a model for high-risk foot care, and renew and restructure diabetes education programs for patients. RHAs will work to implement the Provincial strategy targeted for 2013-14.</td>
<td>✔️ ✔️</td>
<td>Department of Health, Horizon Health Network, Vitalité Health Network</td>
<td>Access, Appropriate Range of Services, Effective, Efficient, Safe, Clinically Sustainable</td>
<td></td>
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<tr>
<td>Colon Cancer Screening: In year one, the department will initiate the first phase of a provincial colon cancer screening program.</td>
<td>✔️ ✔️</td>
<td>Department of Health</td>
<td>Access, Appropriate Range of Services, Effective, Efficient, Safe, Clinically Sustainable</td>
<td></td>
</tr>
<tr>
<td>Primary Health Care - Chronic Care: RHAs will plan and implement aspects of a Congestive Heart Failure (CHF) Management Strategy.</td>
<td>✔️ ✔️</td>
<td>Horizon Health Network, Vitalité Health Network</td>
<td>Appropriate Range of Services, Effective, Efficient, Safe, Equitable, Clinically Sustainable</td>
<td></td>
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<tr>
<td>Clinical Services Methodology: The Department will renew a methodology to ensure the clinical sustainability and quality of clinical services, including an implementation plan.</td>
<td>✔️</td>
<td>Department of Health</td>
<td>Access, Appropriate Range of Services, Effective, Efficient, Safe, Clinically Sustainable</td>
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<tr>
<td>Clinical program delivery model: Reflecting their own priority areas (e.g. appropriate classification of beds, and developing staffing mixes to meet patient needs), RHAs will undertake initiatives to improve clinical program delivery.</td>
<td>✔️ ✔️</td>
<td>Horizon Health Network, Vitalité Health Network</td>
<td>Appropriate Range of Services, Effective, Efficient, Safe, Equitable, Clinically Sustainable</td>
<td></td>
</tr>
<tr>
<td>Benchmarking: RHAs will undertake initiatives within the Office of Health System Renewal led Benchmarking Review.</td>
<td>✔️</td>
<td>Horizon Health Network, Vitalité Health Network, FacilicorpNB</td>
<td>Appropriate Range of Services, Effective, Efficient, Clinically Sustainable</td>
<td></td>
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<tr>
<td>Promote Healthy Lifestyles: Regional health authorities will expand use of the Ottawa model to support Smoking Cessation.</td>
<td>✔️ ✔️</td>
<td>Horizon Health Network, Vitalité Health Network</td>
<td>Access, Appropriate Range of Services, Effective</td>
<td></td>
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<tr>
<td>Primary Health Care - Unattached Patient Registry: The Department will establish and phase-in the implementation of a registry of New Brunswickers without a primary health care provider.</td>
<td>✔️</td>
<td>Department of Health</td>
<td>Appropriate Range of Services, Effective, Efficient</td>
<td></td>
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<tr>
<td>Diagnostic Imaging Initiatives: Regional Health Authorities will standardize diagnostic processes and standardize Medical Resonance Imaging (MRI) wait times.</td>
<td>✔️</td>
<td>Horizon Health Network, Vitalité Health Network</td>
<td>Access, Appropriate Range of Services, Efficient, Safe, Clinically Sustainable</td>
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<tr>
<td>Primary Health Care - Electronic Medical Records: Partnering with the NB Medical Society, the Department will establish Electronic Medical Records in team-based care settings to help provide high quality primary health care.</td>
<td>✔️</td>
<td>Department of Health</td>
<td>Effective, Efficient, Safe</td>
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<tr>
<td>Provincial Formulary: The Department of Health and the Regional Health Authorities will continue to implement a model for single drug formulary.</td>
<td>✔️</td>
<td>Department of Health, Horizon Health Network, Vitalité Health Network</td>
<td>Appropriate Range of Services, Efficient, Safe, Equitable, Clinically Sustainable</td>
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<tr>
<td>Stratex: Working with partners, the Department of Health will develop a measure of the proportion of budget aligned with strategic priorities.</td>
<td>✔️</td>
<td>Department of Health</td>
<td>Appropriate Range of Services, Efficient</td>
<td></td>
</tr>
<tr>
<td>Provincial Health Plan Initiative Description</td>
<td>Rebuilding our Health</td>
<td>Rebuilding our System</td>
<td>Lead</td>
<td>Provincial Health Plan Design Principle(s)</td>
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<tr>
<td>Support Services: RHAs will review the delivery model of support services (e.g., environmental services, food service).</td>
<td></td>
<td></td>
<td>Horizon Health Network, Vitalité Health Network</td>
<td>Efficient, Safe</td>
</tr>
<tr>
<td>Human Resources Management: RHAs will undertake a series of initiatives to improve human resources management processes (e.g. staff scheduling, sick time management, employee wellness program).</td>
<td></td>
<td></td>
<td>Horizon Health Network, Vitalité Health Network, FacilicorpNB</td>
<td>Efficient, Safe, Effective</td>
</tr>
<tr>
<td>Dictation/Transcription: RHAs will implement voice recognition software initiatives in diagnostic and medical care sectors to improve dictation/ transcription turn around times.</td>
<td></td>
<td></td>
<td>Horizon Health Network, Vitalité Health Network</td>
<td>Effective, Efficient</td>
</tr>
<tr>
<td>Drug Information System: The Department of Health will continue development of the Drug information System (DIS) / Prescription Monitoring Program (PMP), leading toward implementation in 2014-15. The PMP component will assist with early identification of patients at risk for addiction, and provide alerts/tools to manage double doctoring, prescription fills from multiple pharmacies, and excessive quantities of narcotics and controlled drugs.</td>
<td></td>
<td></td>
<td>Department of Health</td>
<td>Access, Appropriate Range of Services, Safe, Efficient</td>
</tr>
<tr>
<td>First Nations: RHAs will undertake initiatives to strengthen partnerships with First Nations communities, enhance cultural sensitivity among RHA staff, and help ensure that citizens in First Nations communities receive high quality, culturally appropriate services.</td>
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<td></td>
<td>Horizon Health Network, Vitalité Health Network</td>
<td>Access, Appropriate Range of Services, Safe, Equitable</td>
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<tr>
<td>Spiritual Care: Vitalité Health Network will standardize training programs for volunteers to help ensure a consistent and holistic approach to the provision of spiritual care to patients.</td>
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<td></td>
<td>Vitalité Health Network</td>
<td>Appropriate Range of Services, Equitable</td>
</tr>
</tbody>
</table>

The Government of New Brunswick’s *Performance Excellence Process* (PEP) ensures that the strategic activities of Departments and Agencies align with Government of New Brunswick priorities and objectives, are tracked with key performance indicators, and are completed in a timely way. Each of the initiatives highlighted in this table is drawn from broader lists of actions approved by
The Provincial Health Plan 2013-2018

Government and monitored through PEP.

Appendix B: Consultations

Health care cannot be rebuilt in isolation. The Department of Health has a legislated mandate to consult about the development of the provincial health plan with the regional health authorities, and in the past, traditional health system stakeholders have also been engaged. For the first time, for this plan, the department also engaged its most important stakeholders: New Brunswickers.

In June and July 2012, the Minister of Health, accompanied by Department of Health staff and the New Brunswick Health Council (NBHC), conducted an extensive provincial health plan consultation process. The consultation team traveled the province holding open sessions in nine New Brunswick municipalities. An additional session was held with New Brunswick’s First Nation communities in September 2012.

“More public forums like this to address issues that could make health care more efficient. Many people are afraid to speak their minds but meetings like this would make people more comfortable sharing their concerns.”

Participant, Bathurst

As not all New Brunswickers could attend one of the public consultation sessions, a web page was created to gather submissions from all New Brunswickers. Between the public sessions and the online consultation, thousands of submissions were received, ranging from a short comment or question submitted by an individual citizen to full briefs from health system stakeholders. Overall, the response was tremendous and many excellent suggestions were put forward for consideration.

Those who work in the health system are acutely aware of the challenges New Brunswick is facing. The government felt strongly that this information should be shared with all New Brunswickers so that New Brunswickers could provide meaningful input to the provincial health plan.

A video which succinctly provided the facts and outlined the realities facing the province was played at the beginning of each consultation session. Those who participated in the consultation sessions said that the video is essential viewing for all New Brunswickers. It is available on the Rebuilding Health Care Together page of Department of Health’s website (www.gnb.ca/health) and those who
were unable to attend a public session are encouraged to watch it.

**What Was Said**

The NBHC coordinated the public consultation sessions and provided an excellent report to the Minister of Health outlining “what was said”. Thousands of responses and ideas were received, many of which touched upon the same themes, including:

- New Brunswick is largely rural and appropriate community care needs strengthening.
- Acute health care is increasingly specialized and technological and must be centralized to ensure quality, safety and efficiency. The province must invest strategically in technology to keep pace while keeping care affordable.
- Doing more of the same will not produce change.
- Professional work must evolve – for instance, working in integrated teams and to full scope of practice. Funding models should be reviewed. Through this evolution, health workers will be more efficient and effective, and New Brunswickers will have more appropriate access.
- Navigation is needed to assist patients, their caregivers and families, and even health professionals, in moving effectively through the health system and accessing the most appropriate care options at any time.

**Input from Stakeholders**

In addition to the public consultation, excellent written submissions were provided to the Minister by professional associations and community groups. These may be accessed on the Department of Health’s website ([www.gnb.ca/health](http://www.gnb.ca/health))

**First Nations**

New Brunswick’s First Nations communities spoke of the impact their history has had on the health status of Aboriginal persons. Cultural competence is integral to helping health system personnel work effectively with First Nations patients. Programs and tools to assist with navigation of the health system were identified as a priority. Indeed, navigation of the system was flagged as a key system deficiency in all the public engagement sessions. This will be addressed in this plan, along with several other key initiatives for First Nations.

“Need for more dialogue/better relationship with health authorities – to know what needs are/what resources exist/what resources are missing?”

Participant- First Nations consultation, Oromocto