

HEALTH SERVICE QUALITY

Health System Indicators



Province
New Brunswick

System Indicators

911 Ambulance Offload Delay % 2024-2025	65.9
911 Ambulance offload average time Minutes 2024-2025	50.4
Emergency department visits levels 4 and 5 (All hospitals) % 2024-2025	51.8
Emergency department visits levels 4 and 5 (Regional hospitals) % 2024-2025	41.1
Emergency department visits levels 4 and 5 (Non-regional hospitals) % 2024-2025	65.1
Emergency department visits for mental health and substance use % 2023-2024	4.9
Average wait time from Emergency Department admission to inpatient bed Hours 2023-2024	16.6
Avoidable hospitalizations Rate per 100,000 population younger than age 75 2024-2025	367
High users of inpatient acute care services Rate per 100 patients 2024-2025	4.4

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Medical Patients Readmitted to Hospital Rate per 100 patients 2024-2025	12.4
Surgical Patients Readmitted to Hospital Rate per 100 patients 2024-2025	5.9
Obstetric Patients Readmitted to Hospital Rate per 100 patients 2024-2025	1.7
Pediatric Patients Readmitted to Hospital Rate per 100 patients 2024-2025	5.3
Repeat mental health hospitalizations % 2024-2025	11.6
Alternate Level of Care (ALC) days % 2024-2025	32.4
Alternate Level of Care (ALC) hospitalizations % 2024-2025	8.3
Length of Alternate Level of Care (ALC) stay for seniors Days 2024-2025	46.4
Alternate Level of Care (ALC) senior cases per population Rate per 1,000 population aged 65 and over 2024-2025	29.7
Hospital stay extended until home care services or supports ready Days 2024-2025	12.0

About this Table

Content and description

This table has indicators that measure shared responsibilities across different sectors in the health system and the influence of the performance of one sector on the performance of other sectors:

- Backlogs in the Emergency Department contribute to longer offloading times for ambulances;
- The lack of availability of inpatient hospital beds contribute to longer wait times for patients waiting to be admitted;
- Poor performance in primary health care and community care leads to unnecessary use of emergency and acute care services, through non-urgent visits to the emergency department, avoidable hospitalizations, emergency visits and repeat hospitalizations due to mental health and substance use, high user of in-patient acute care services and readmission to hospitals for different services;
- Lack of access to home care and long-term care services contribute to the increase in alternate level of care, and hospital stay extended until home care services are ready.

Why is it important?

These indicators help inform citizens and health system stakeholders about the quality of the health system as a whole and how different sectors affect each other. It also encourages health system stakeholders to create performance targets and make necessary improvements.

Availability of the data

The information in this data table is available for New Brunswick in general and by the seven New Brunswick health zones.

What is a Z-Score?

To facilitate the identification of areas of strengths and areas of improvement, the data table includes green and red flags that highlight the indicators where the zone performs better or worse than other zones, based on a Z-score analysis.

A Z-score is a numerical measurement that describes a value's relationship to the mean of a group of values (normal distribution of values). A Z-score is measured in terms of standard deviations from the mean. If a Z-score is 0, it indicates that the data point's score is identical to the mean score. A Z-score of 1.0 (or -1.0) would indicate a value that is one standard deviation from the mean. A Z-score of +1.282 is the cut point used to display flags that inform on health zone values that are far enough from the mean to be deemed better or worse than the average.

Caption

n/a = Not applicable / not available

S = Data suppressed due to confidentiality requirements and/or small sample size

 Above-average performance

 Below-average performance