



**New Brunswick  
Health Council**

Engage. Evaluate. Inform. Recommend.

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## **2011-2012 Business Plan**

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**April 1<sup>st</sup>, 2011**

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## I. Mandate of the NBHC

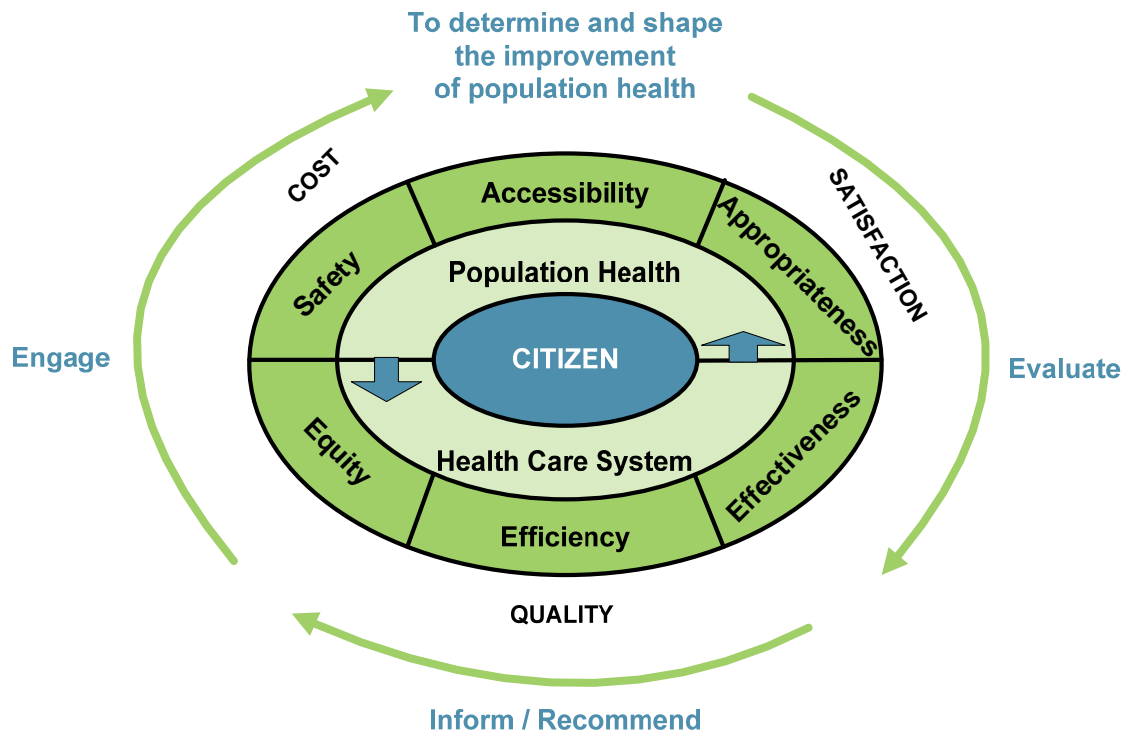
New Brunswickers have a right to be aware of the decisions being made, to be part of the decision-making process, and to be aware of the outcomes delivered by the health system and its cost. The New Brunswick Health Council will foster this transparency, engagement, and accountability by:

Engaging citizens in a meaningful dialogue.

Measuring, monitoring, and evaluating population health and health service quality.

Informing citizens on health system's performance.

Recommending improvements to health system partners.



## **II. Report on the 2010-2011 Fiscal Year**

Year Two (2010-2011) was focused on enhancing and improving models and measures for the Council's work. In addition, following Mr. Gino Leblanc's report titled *Toward an Improved Health Care System in French in New Brunswick*, our Act was modified this year to take into account the needs of the two official linguistic communities.

This year's achievements include:

### ***Population Health***

As part of its mandate, the NBHC seeks to inform the citizens of New Brunswick about their health status. The NBHC also highlights some areas of health determinants which can be influenced or improved to have a positive effect on health status. The NBHC published a report on population health and a report targeting youth in the Fall of 2010.

The following illustrate some elements of the work done:

- Tested the framework for content and reliability and validity;
- Created a new Youth Snapshot in response to the need for synthesized data for a particular group in the continuum of life cycle;
- Identified areas where different intergovernmental agencies could collaborate for data through integration;
- Geographic Information Mapping was used to enhance reports;
- Information released publicly for Population Health Snapshot in November 2010;
- Information released publicly for Youth Population Health Snapshot in December 2010;
- NBHC was recognized by CIHI (Canadian Institute for Health Information) and PHAC (Public Health Agency of Canada) for Population Health Public Reporting practices;
- Have held numerous information sessions, which represent over 1,000 stakeholders, including the public sector, citizens and presentations to schools.

### ***Care Experience***

The NBHC is required to report on the quality of our health services and on population satisfaction with health services. There are two areas of work within care experience; our surveys about the satisfaction of citizens and our Health System Report Card.

Here are the highlights of our activities with regards to these two areas:

### **(a) Our Satisfaction Survey Strategy**

- Covered one of four areas of care (acute, primary, palliative and tertiary), specifically acute care. We are planning to cover all four areas of care within a three year cycle.
- Report of acute care survey completed in June 2010.
- Survey process was accredited through Accreditation Canada; therefore, will be of value to hospitals for their accreditation process.
- Priority Matrices of all hospitals were developed and communicated to Senior Teams and others for use in prioritizing areas of importance.
- Patient Safety and Equity Reports were identified as possible areas for elaboration.

### **(b) The Report Card**

- Validated indicators chosen to reflect our quality dimensions (accessibility, appropriateness, effectiveness, efficiency, equity and safety).
- Identified additional indicators to expand and represent full spectrum of sectors of care.
- Continued to work with stakeholders in the identification of possible indicators to reflect a more balanced report card across all sectors of care.
- Increased interest in identifying relevant data by provincial departments for inclusion into next report card.
- Publicly released available and recognized indicators at the end of March 2010.
- Received interest from researchers in Saskatchewan, British Columbia and Ontario in our report card approach.
- Received request from CIHI to be a key presenter for their Data Manager Retreat on all our indicator use and challenges.
- Representing NB as a jurisdiction partner in EMR (electronic medical record) Content Standards Working Group for CIHI Primary Health Care Division.

### ***Sustainability***

The NBHC has a responsibility to inform citizens regarding the long-term sustainability of our publicly funded health services. We have noticed that citizens often react strongly and with surprise when faced with this information. For example, citizens have told us that more efforts should be expanded to better inform the population about the sustainability challenge.

The following were included in our work for the last year:

- Identified and organized financial information. This has meant working with financial information stakeholders in identifying and organizing information in new ways;

- Identified baseline cost expenditures for each indicator and successfully divided costs by sectors. Medicare services and the Department of Health Finance Services required collaboration and reconciliation between costs;
- Released the Sustainability Report publicly in May 2010;
- The focus of the report was on capacity to deliver health care services and current status of pressures or demands on health system;
- Report has served as a focus for media and was used all year long, cited nationally;
- Key researchers have been sought out during the year to test out a new approach on moving the sustainability agenda forward to better appreciate the value of our investments.

### ***Citizen Engagement***

The NBHC engaged New Brunswick citizens and health stakeholders in a discussion on what people value most regarding the provincial health system, how the system can be strengthened and what can be done to improve provincial health outcomes.

In the last year, we have done the following work:

- Delivered NBHC's first provincial citizen engagement initiative titled *Our Health. Our Perspectives. Our Solutions.* reaching out to a total of 310 New Brunswickers;
- Successfully integrated NBHC's information on population health, sustainability and general information as it pertains to the health system in a conversation guide for participants during Phase I and Phase II;
- Created database of citizens and table facilitators who want to stay in touch with the NBHC and be considered for future initiatives;
- Validated NBHC's framework for public involvement throughout initiative;
- Presented the Key Findings of the final report to the senior teams of our Health System's partners (Department of Health, AmbulanceNB, Horizon Health Network, Vitalité Health Network and FaciliCorpNB);
- Released the final report publicly and online, and shared it with all participants and key stakeholders;
- Invited to share our lessons learned with various stakeholders including the Citizen Engagement Agency of the Department of Intergovernmental Affairs;
- Used what we have heard from citizens as a key starting point to the elaboration of recommendations to the Minister of Health.

### **III. 2011-2012 Business Plan**

The work of the New Brunswick Health Council continues to be guided by the five strategic axes listed below. Furthermore, our Council was structured in four working groups; Engagement, Population Health, Care Experience and Sustainability.

Following are our five strategic axes with the respective working group appearing in parenthesis:

1. Develop and implement mechanisms to engage the population as well as other interested parties (*Citizen Engagement*)
2. To measure, monitor and evaluate the level of population health (*Population Health*)
3. To measure, monitor and evaluate health service quality (*Care Experience*)
4. To measure, monitor and evaluate the level of population satisfaction with health services and health service quality (*Care Experience*)
5. To measure, monitor and evaluate the sustainability of health services in New Brunswick (*Sustainability*)

For the next few years, updating the information for the tools we have developed will become an important part of our annual business plan. For example, updating our Population Health Snapshots (general population and youth), our Health System Report Card and continuing on our survey cycle will be an important part of our 2011-2012 Business Plan. Meanwhile, these tools are perceived as “work in progress”, and as we continue to work with various stakeholders, we will be attentive to opportunities for improvements and other initiatives in line with our mandate. Annually, we also aim to provide the Health Minister with recommendations in line with our activities.

#### **Objectives for 2011-2012**

In the year 2011-2012, our discussions will be transitioning from how to “Engage. Evaluate. Inform. Recommend.” towards identifying the key opportunities in our various areas of work.

Here are observations and proposed key deliverables for each area of our work for 2011-2012:

#### ***Population Health***

Being able to answer questions like “How healthy are we?” and “Are we getting healthier?” is important when discussing the future of our health services. New Brunswick is one of the least healthy provinces in the

country. New Brunswickers tend to die prematurely of breathing diseases, cancer, heart and stroke diseases, injuries, and suicides more often than the rest of Canadians. Some risk factors directly related to chronic disease (obesity, poor nutrition, smoking, and heavy drinking) are well above the national average. When it comes to the health of the population, our model shows key determinants of health that can be influenced by programs and policies: 10% Health Care, 40% Health Behaviours, 40% Socioeconomic Factors, and 10% Physical Environment. New Brunswick has a department dedicated to wellness and we will continue to pursue opportunities to collaborate with the department and other provincial stakeholders.

During the following year:

- We will be releasing our updated Population Health Snapshot in the fall of 2011;
- We will also release an updated version of our Youth Population Health Snapshot in the fall of 2011.

### ***Care Experience***

The NBHC is required to report on the quality of our health services and on population satisfaction with health services and health service quality. Our first NB Health System Report Card has helped highlight that we are not performing as well as the national average in areas such as access to primary care for prevention or treatment of minor health problems, prevention such as screening tests based on age related diseases or recommended clinical practice guidelines to maximize the achievement of obtaining best possible health results.

In the coming year, we will be doing the following work:

- We will be completing our Primary Care Experience Survey in the spring of 2011;
- We will have a public release of our Primary Care Experience Survey results in the summer of 2011;
- We will publicly release an update to our Health System Report Card in the summer of 2011;
- We will be working on the final stage of our three year survey cycle throughout 2011.

### ***Sustainability***

Our work has highlighted that, as a province, we are unhealthy and have areas where significant improvements are required in our health care services. When we consider the trend of increases in health care spending over the past decade, we are projecting that in five years we will be

spending an additional \$1 billion more per year. Meanwhile, we have seen no indication that this increased spending will translate in either a healthier population or improved health care services.

In our 2010 Citizen Engagement initiative, participants reacted very strongly to the sustainability challenge and clearly expressed that more must be done to inform citizens of this challenge. They recognized that the solutions involve everyone and that is why efforts are required to inform everyone.

Consequently, the NBHC's efforts will be targeted on informing citizens on not only what we are spending on health care but also link this information with what we know about the quality of our services and the health of our population (value for money).

Therefore, here are the proposed deliverables for the coming year:

- During the Spring and Summer of 2011, we will be leveraging the information we have gathered to work with our Sustainability Working Group on developing our 2011 Sustainability Report;
- In the Fall of 2011, we will publicly release our Sustainability Report;
- In the Winter of 2011-2012, our focus will shift on leveraging our "lessons learned" in order to contribute to our 2012 recommendations.

### ***Citizen Engagement***

Completing our first major initiative and leveraging its results has allowed us to not only better understand citizens overall perspective of the health system, but it also provided insight on what is important to them. They told us that having access to more health-related information was necessary in order for them to become more accountable for their own health and personal health behaviours.

We have also learned that youth can be very engaged when provided with tools that are designed specifically to meet their needs. To maximize youth participation moving forward, particular attention will be placed on initiatives that speak to youth while targeting specific locations where youth spend their time. Often, these processes are less formal than the ones used to engage the general public, but needless to say, more effective for youth engagement.

Keeping that in mind, we will:

- Continue to leverage information from the *Our Health. Our Perspective. Our Solutions.* report and share its results with interested stakeholders. For example, local governments have



expressed an interest in having us present this information in meetings with their constituents;

- We will leverage NBHC's published information on population health, care experience and sustainability to inform citizens and stakeholder, starting in the Spring of 2011;
- The Engagement Working Group will develop a proposal for citizen engagement to be brought to Council in the Fall of 2011.

### ***Inform***

We are progressing well in enhancing our public profile; the media response to our recent publications has been excellent. We are implementing effective communication tools and procedures to inform the public and other related authorities of our work. These tools will include marketing campaigns for our upcoming initiatives and the use of social media.

During the following year:

- We will continue to leverage the release of new information and reports from the Council to increase our media profile. We will also leverage opportunities for speeches and presentations across the province before various groups from students to health stakeholders and municipalities;
- We will continue to develop our web site as our main information distribution tool for the public. It is part of a communication approach that also includes social media: the NBHC now has a Facebook page and a Twitter account that will be used to support our initiatives;
- We now publish a quarterly electronic newsletter called Perspectives. It is distributed electronically and available on our website. We expect that readership will increase with each edition;
- We will further increase awareness of our brand and initiatives through marketing campaigns. The first one will be promoting our Primary Care survey to ensure we achieve our citizen participation target;
- Finally, we will benefit from the on-going support of our ad hoc Working Group on Communications as we progress through the year.