



2024-2025 Business Plan

**Presented to the Minister of Health
November 4, 2024**

I. Our statutory mandate

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 and long-term care system and its cost.

The New Brunswick Health Council (NBHC) will foster this transparency, engagement, and accountability by:

- Engaging citizens in a meaningful dialogue for the purpose of improving health and long-term care service quality;
- Measuring, monitoring, and evaluating population health and health and long-term care service quality;
- Informing citizens on our health and long-term care system's performance;
- Recommending improvements to the Minister of Health and the Minister of Social Development.

Effective September 1, 2023, the *New Brunswick Health Council Act* was amended and is now the *New Brunswick Health and Senior Council Act*. Our mandate was inspired by the Section 3 of the *New Brunswick Health and Senior Council Act*, which defines the objects and purposes of the Council as follows:

- (a) to promote the improvement of health and long-term care service quality in the Province;
- (b) to develop and implement mechanisms to engage the citizens of New Brunswick in meaningful dialogue for the purpose of improving health and long-term care service quality in the Province;
- (c) to measure, monitor and assess population health and health and long-term care service quality in the Province;
- (d) to identify effective practices for the improvement of health and long-term care service quality in the Province;
- (e) to evaluate strategies designed to improve health and long-term care service quality in the Province;
- (f) to assess citizen satisfaction with health and long-term care services and health and long-term care service quality in the Province;
- (g) to investigate matters respecting the health and long-term care system that are referred to it by the Minister of Health and the Minister of Social Development;
- (g. 1) to assist and support the Department of Health, the Department of Social Development, EM/AND Inc. and the regional health authorities in the use of analytic tools and methods for health and long-term care system improvements;
- (g. 2) to produce comparable and actionable data and provide statistical analysis and information for policy and program development;
- (g. 3) to support the academic and research sector by disclosing information in accordance with sections 43 and 43.1 of the *Personal Health Information Privacy and Access Act*;
- (g. 4) to support patient-centric change and improvements in health and long-term care data governance;

- (h) to provide recommendations to the Minister of Health and the Minister of Social Development with respect to any of the activities described in paragraphs (a) to (g.4);
- (i) to take into account the particular needs of the two official linguistic communities in the exercise of the activities referred to in paragraphs (a) to (h); and
- (j) to carry out any other activities or duties as may be authorized or required by this Act or as the Lieutenant-Governor in Council may direct.

II. Business plan deliverables for 2024-2025

The NBHC has a dual mandate: to report publicly on the performance of the provincial health and long-term care system, and to engage citizens in the improvement of health and long-term care service quality.

How the NBHC fulfills this mandate has evolved significantly since 2008. Initially, the lack of generally accepted indicators within the province pertaining to population health and health and long-term care service quality led to the NBHC's decision to set up care experience surveys to produce standardized data. Subsequently, the use of population health and health and long-term care service quality information prepared by the NBHC grew within the province. This is particularly true for communities and not-for-profit organizations in helping them identify priority areas and indicators for monitoring the impact of their initiatives.

In recent years, the NBHC has invested efforts in improving access to this information; we now have a data reporting tool on our website which enables users to find and consult all our indicators. In 2024-2025, in addition to building on the above-mentioned work, the NBHC's work will be greatly influenced by GNB's provincial health plan as well as by the recently announced amendment to the *New Brunswick Health Council Act* which became the *New Brunswick Health and Senior Care Council Act* on September 1, 2023.

GNB's provincial health plan *Stabilizing Health Care: An Urgent Call to Action* was released in November 2021. This plan tasks the NBHC with the responsibility to report quarterly on health system progress. As part of this responsibility, the NBHC will be producing quarterly status reports on the deliverables announced in the plan. This is an opportunity to increase the level of accountability on how the health system is improving. The plan also tasks the NBHC with establishing a Patient Voices Network and with collaborating with health system organizations on finding key performance indicators.

As for the amendment to the NBHC Act, it represents an important change that expands the role of our organization in data analysis and gives us new responsibilities that are currently under the Department of Health and the Department of Social Development. The amendment was voted into a law in December 2022 and took effect on September 1, 2023. The details of this change are still being defined. Discussions and preparations will be needed to ensure the transition can be as successful as possible. This includes preparing for the onboarding of additional resources, reviewing the structure of the organization, and preparing agreements. The amendments to the NBHC Act are an opportunity that aims to increase the use of data to guide investment and system decisions.

In the following sections of our business plan, we have structured our work in two key areas:

- A. Performance Measurement
- B. Public Participation

Timelines for deliverables are presented by quarter as follows:

- Q1 – April to June 2024
- Q2 – July to September 2024
- Q3 – October to December 2024
- Q4 – January to March 2025

A – PERFORMANCE MEASUREMENT

Acute Care Survey

1. Data Analysis and Synthesis We will finalize the production and validation of all indicators needed for our public reporting, which includes results at the geographic and demographic levels. This work started in the preceding fiscal year.	Q1
2. Knowledge Production We will analyze the results of the survey and develop key observations.	Q1
3. Knowledge Mobilization We will identify our audience, choose the appropriate communication strategies to communicate our key observations and messages, and create knowledge mobilization materials.	Q1
4. Public Reporting We will publicly report our key observations and communicate survey results to our targeted audiences.	Q3

Home Care Survey

5. Close Data Collection We will complete the data collection phase, which began in the previous fiscal year.	Q1
6. Data Analysis and Synthesis We will produce and validate all indicators needed for our public reporting, which includes results at the geographic and demographic levels.	Q2-Q3
7. Knowledge Production We will analyze the results of the survey and develop key observations.	Q3
8. Knowledge Mobilization We will identify our audience, choose the appropriate communication strategies to communicate our key observations and messages, and create knowledge mobilization materials.	Q3

Primary Care Survey – 2023 edition

9. Data Analysis and Synthesis We will finalize the production and validation of all indicators needed for our public reporting, which includes results at the geographic and demographic levels. This work started in the preceding fiscal year.	Q1
10. Knowledge Production We will analyze the results of the survey and develop key observations.	Q1
11. Knowledge Mobilization We will identify our audience, choose the appropriate communication strategies to communicate our key observations and messages and create knowledge mobilization materials.	Q1
12. Public Reporting We will publicly report our key observations and communicate survey results to our targeted audiences.	Q1

Primary Care Survey – 2024 edition

13. Planning and technical preparation We will evaluate previous survey learnings, create a project plan which includes the strategy and timeline, review the questionnaire, prepare the sampling, as well as select a research firm.	Q1-Q2
14. Data Collection We will administer the 2024 edition of our Primary Care Survey after completing the necessary consultation with stakeholders.	Q3-Q4
15. Promotional Campaign We will promote the data collection of the 2024 edition of the survey.	Q3
16. Data Analysis and Synthesis We will begin the production and validation of all indicators needed for our public reporting, which includes results at the geographic and demographic levels. This work will continue in the following fiscal year.	Q4
17. Knowledge Production We will begin the analysis of the survey results as well as the development of key observations. This work will continue in the following fiscal year.	Q4

Population Health Survey – 2025 edition

18. Planning and technical preparation A long-term strategy will be developed to ensure a sustainable, efficient, and effective approach to collecting and reporting population health and primary health care experience data at the community level.	Q1-Q4
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Student Wellness and Education Survey – 2023-2024 Edition

19. Knowledge Production We will analyze the results of the survey and develop key observations.	Q1-Q2
20. Knowledge Mobilization We will identify our audience, choose the appropriate communication strategies to communicate our key observations and messages and create knowledge mobilization materials.	Q1-Q2
21. Public Reporting We will publicly report our key observations and communicate survey results to our targeted audiences.	Q3

Student Wellness and Education Survey – 2024-2025 Edition

22. Planning and technical preparation We will evaluate previous survey learnings, engage with stakeholders to identify themes and review the questionnaire, create a project plan which includes the strategy and timeline, as well as select and engage with a research firm.	Q1-Q2
23. Data Collection We will administer the Student Wellness and Education Survey in the fall of 2024, targeting students from grades 4 to 12 and parents of students from kindergarten to grade 5.	Q3
24. Promotional Campaign We will promote the data collection of the 2024-2025 edition of the survey.	Q3
25. Data Analysis and Synthesis We will produce and validate all indicators needed for school and public reporting, which includes results at the geographic and demographic levels.	Q3-Q4
26. School Reports We will prepare the school-level indicators and send reports to all participating schools.	Q4

Data Production

27. Boundaries Review In January 2023, the Local Governance Reform took effect, modifying the geographic boundaries of local governments throughout the province. The health zone boundaries have been modified in 2023 in the provincial laws as well. In the upcoming year, we will assess the impact of those changes on the NBHC community and health zone boundaries.	Ongoing
28. Strategic measurement and reporting on health service quality To ensure the production of strategic observations pertaining to health service quality, the NBHC will collaborate with stakeholders to find the most meaningful and relevant indicators to inform decisions. This will lead to a revised set of indicators for health service quality public reporting.	Ongoing
29. Measurement and reporting of primary care human resources The NBHC will report on the findings of the exercise undergone in 2023-2024 around “Measurement of Primary Care Human Resources” and will build on the outcomes of the project to produce reliable indicators, and measures and strategic observations on the number and distribution of family physicians in New Brunswick.	Ongoing

Provincial Health Plan

30. Reporting on the status of Provincial Health Plan deliverables We will publicly report on the status of the deliverables identified in the provincial health plan.	Each quarter
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B - PUBLIC PARTICIPATION

31. Analysis of the public participation landscape A comprehensive review will be undertaken to better understand existing citizen engagement initiatives within health service organizations and among community stakeholders. This review will encompass ongoing and upcoming projects, as well as environmental factors such as the Provincial Health Plan and the newly assigned responsibilities for regional service commissions.	Q2
32. Identification of public participation opportunities Leveraging the results of our public participation landscape review, as well as data from NBHC surveys, key observations, and health service quality measures, we will identify strategic opportunities for conducting citizen engagement initiatives.	Q3
33. Implementation of public participation initiative Upon selecting an initiative, we will decide on the best engagement approach and conduct sessions with citizens.	Q4

Strategic Communications

34. Implementation of Strategic Communications Framework Over the past two years, the NBHC has developed a Strategic Communications Framework. In the upcoming year, the NBHC aims to integrate the various strategies outlined in this framework across its communication platforms and activities, encompassing social media, the website, and the monthly newsletter.	Ongoing
35. NBHC stakeholder analysis The NBHC is committed to fostering strong relationships with a diverse range of stakeholders. To enhance communication, engagement, and collaboration, we will conduct a stakeholder analysis. This mapping process will involve identifying key individuals, groups, communities, organizations, and health system partners, categorizing them based on their interactions with our work and their areas of interest. By understanding our stakeholders' perspectives and needs, we can more effectively tailor our communication strategies and initiatives.	Q4