

New Brunswick | Conseil de la santé Health Council | du Nouveau-Brunswick

Annual Report

2022-2023



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How to cite this document: New Brunswick Health Council, 2022-2023 Annual Report

Cette publication est disponible en français sous le titre : Conseil de la santé du Nouveau-Brunswick, Rapport annuel 2022-2023





July 21, 2023

The Honourable Bruce Fitch Minister of Health Province of New Brunswick

Dear Minister:

It is my privilege to submit the annual report on behalf of the New Brunswick Health Council for our fifteenth fiscal year beginning April 1, 2022 and ending March 31, 2023.

Respectfully submitted,

Roger Léger Chair

July 21, 2023

Mr. Roger Léger Chair New Brunswick Health Council Moncton, New Brunswick

Dear Mr. Léger:

I am pleased to be able to present the annual report describing the operations of the New Brunswick Health Council for its fifteenth fiscal year, 2022-2023.

Respectfully submitted,

Stephan Dobidhan Q

Stéphane Robichaud Chief Executive Officer





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Message from the Chair and the Chief Executive Officer

We are pleased to present the 2022-2023 edition on the New Brunswick Health Council (NBHC). The following content provides an overview of accomplishments pertaining to our 2022-2023 Business Plan deliverables. These deliverables were inspired by our multi-year strategic plan as well as the 2021 Provincial Health Plan.

In the summer of 2022, the provincial government announced several changes in leadership of provincial organizations. Since these changes, the new leadership has gradually been establishing its own direction. Reporting on the performance of the provincial health system and engaging citizens in the improvement of health service quality requires a collaborative approach with publicly funded health service organizations and stakeholders involved in provincial health policies.

In the Fall of 2022, the NBHC learned of intended changes to its legislation. As more information was shared on intentions of the proposed changes, NBHC Council members welcomed the increased focus on the aging population and the recognition that more resources were required to improve the preparation of decision support information. Council members were encouraged by the intention to build on NBHC's current mandate. Meanwhile, Council members hope to soon be included in conversations on the proposed changes to ensure a successful transition.

Once again, the NBHC benefited from citizens' support of its surveys. The survey results are highly valued by those who work on health services planning and policies. We are grateful to all citizens that have taken the time to answer our surveys. We are also proud of the work undertaken by NBHC staff and Council members over the past year.

Roger Léger Chair

Stéphane Robichaud Chief Executive Officer





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 system and its cost. The NBHC will foster this transparency, engagement and accountability by:



Engaging citizens in a meaningful dialogue for the improvement of health service quality



Measuring, monitoring and evaluating population health and health service quality



Informing citizens on health system's performance



Recommending improvements to the Minister of Health







Council

Members

Roger Léger Chair Dieppe

Susan Harley Vice-Chair Rothesay

Harry Doyle Secretary / Treasurer Lower Coverdale Ann Collins Fredericton

Madeleine Dubé Edmundston

Gail Bremner Saint John

Diane Carey Tracadie-Sheila Cindy Howe Burton

James Lamkey Miramichi

Jasmine Murchison-Perley Fredericton

Anna Riordon Dalhousie

⊖ Executive Committee

Roger Léger Chair Harry Doyle Secretary-treasurer Madeleine Dubé Member

Susan Harley Vice-Chair Ann Collins Member

.

Susan Harley Chair Diane Carey

Harry Doyle

James Lamkey

Jasmine Murchison-Perley

Gail Bremner

Working Group – Performance Measurement

Working Group – Public Participation

Ann Collins Chair

Madeleine Dubé

Cindy Howe

Roger Léger

Anna Riordon



Team

Stéphane Robichaud Chief Executive Officer

Reem Fayyad Executive Director, Performance Measurement

Nay O'Leary Executive Director, Citizen Engagement

Simon Potvin Executive Director, Planning & Operations

Michel Arsenault Manager, Data and Analytics Brenda Bossé Project manager (From August 29, 2022)

Monique Brideau Analyst, Citizen and Community Engagement (From September 12, 2022)

Meriam Choukri Administrative Assistant (From July 15, 2022)

Mariane Cullen Executive Administrative Assistant

Danielle Doucet Research Analyst (From August 29, 2022) **Steve Langen** Data Analyst

Karine LeBlanc Gagnon Information Analyst

Angela Nash Lead Analyst Indigenous Research and Policy

Patricia Rosselet Manager, Health and Research Analysis

Philippe Rousselle Information Analyst

Rana Sughayar Research Analyst (From August 22, 2022)

Lise Gallant Project Coordinator (From May 2, 2022, to June 30, 2022)

Monique Landry Hadley Administrative Assistant (Until April 21, 2022) Monica Lavoie Research Coordinator (Until April 8, 2022)

Véronique Manuel Research and Policy Analyst (Until June 3, 2022) Candice Pollack Executive Director, Citizen Engagement (Until March 2, 2023)

9

Surveys

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Home Care Survey

Home care is a range of health and support services received at home that help citizens achieve and maintain optimal health, well-being and functional ability. In New Brunswick, there are two types of publicly funded home care services:

- The Extra-Mural Program (EMP) provides home health care services. Extra-Mural services are provided by health professionals such as nurses, physiotherapists, occupational therapists, and others to citizens who have a range of illnesses, injuries, chronic (long term) conditions or palliative (end of life) care needs.
- Home support services (HSS) provides support for activities of daily living for citizens who have a range of illnesses, injuries, chronic (long term) conditions or palliative (end of life) care needs. Home support services are provided by home support workers, who help with tasks such as housekeeping, meal preparation, bathing, laundry, and more.

Citizens should be given the opportunity to express their opinions about the home care services they receive in New Brunswick. The New Brunswick Health Council's Home Care Survey asks recipients of these services about their experiences with several key dimensions of quality home care such as safety, provider/client communication, clients and family-centred care, overall satisfaction with services, and equity based on preferred language of service.

This province-wide survey is conducted every three years and provides important information about the quality of services to funders of home care, health support organizations delivering home care, and citizens receiving home care. The NBHC also uses the information from the Home Care Survey to populate information at the health zone levels in its Health Service Report Card.

Deliverable

Continue Standardization and documentation of indicators – 1st quarter

With the goal of improving the accessibility of NBHC indicators, each edition of the survey cycle is leveraged for establishing a standardized approach to how indicators are organized. As a result, it will be easier for users to view indicators on our website, undertake comparisons between geographic locations and explore trends over time.

Comments: This work was successfully completed and leveraged for our online data tool.

Public reporting – 1st quarter

Based on key observations from the analysis of the results, and the communications plan, targeted campaigns will be undertaken to highlight key findings from the survey conducted in 2021.

These campaigns will also contribute to increasing awareness about the work of the NBHC and the information available on its website.

Comments: The results were publicly released on August 30th. Briefing notes and infographics highlighting key observations were prepared and distributed. Webinars on the survey findings and on how to access them from our website were delivered to stakeholders. We also had 10 media interviews following the release of the results.

Completed

Status



Primary Health Survey

The NBHC developed a shorter version of the Primary Health Survey to provide annual data on citizens' use and experiences with primary health care services in the province as well as in their health zones. This survey (Primary Care Survey) allows the NBHC to provide timely data to help inform the Provincial Health Plan.

The Primary Care Survey is conducted annually and aims to better understand citizens' use and experiences with primary health care services in New Brunswick and in their health zones. The 2022 Primary Care Survey was conducted in New Brunswick from October 2022 to January 2023 and was completed by 5,013 participants aged 18 and over. In this survey, New Brunswickers are asked about various aspects of primary health care services, including the delivery of care, experience with using services, and satisfaction levels. Additionally, participants were asked about their health status, barriers in accessing care, and their use and experience with virtual care consultations. The NBHC also uses this information to populate information at the NBHC communities and health zone levels in its various tools such as the Health Service Report Card and the Population Health Profiles.

 Comments: All technical preparation was completed as planned. Survey administration – 2nd and 4th quarter We will work with a firm to conduct the 2022 edition of the survey. Comments: Survey administration was completed by February 13th. 	ompleted
 2022, we will amend the questionnaire. We will also prepare all the necessary information needed for the administration of the survey. Comments: All technical preparation was completed as planned. Survey administration – 2nd and 4th quarter We will work with a firm to conduct the 2022 edition of the survey. Comments: Survey administration was completed by February 13th. All phone calls were completed by January 31st. Additional time was provided for those who expressed wanting to complete the survey 	ompleted
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	ompleted
Begin result analysis – 4 th quarter	
We will begin the analysis of the survey results. This work will continue in the 2023-2024 fiscal year.	\bigcirc
 Comments: The work has begun on preliminary results analysis with a priority on Provincial Health Plan measures pertaining to timely access and the percentage of citizens having a provider. Public release of results and key messages is expected for June 2023. 	progress



Hospital Acute Care Survey

The NBHC conducts the Hospital Acute Care Survey to evaluate the quality of hospital care provided to New Brunswick patients who have at least one overnight stay in an acute care setting in the province. The survey is completed every three years by over 6,000 citizens in New Brunswick.

The purpose of this survey is to inform citizens about the quality of hospital care in our province, and to help decision-makers plan for health system improvements in a hospital setting. The Acute Care Survey asks New Brunswickers about their overall experience during their hospital stay, as well as the quality of care they received based on the six dimensions of quality care outlined in the *New Brunswick Health Council Act*. The NBHC also uses the information from the Acute Care Survey to populate information in the Health Service Report Card.

Deliverable

Survey technical preparation – 1st and 4th quarter

With the goal of improving the accessibility of NBHC indicators, each edition of the survey cycle is leveraged for establishing a standardized approach to how indicators are organized. As a result, it will be easier for users to view indicators on our website, undertake comparisons between geographic locations and explore trends over time.

In the 1st quarter, we will consult with the two RHAs on the survey approach and to consolidate the preparations for the survey.

In the 4th quarter, we will review the questionnaire used for the Acute Care Survey to ensure it covers the appropriate areas of care.

Comments: Questionnaire review has been completed and validated by both RHAs. Currently, work is focused on formatting the online version of the survey with selected survey firm.

Preparations for survey administration – 4th guarter

We will work with RHAs to prepare for the survey administration which will occur in 2023-2024.

Comments: Research firm has been selected. The survey is expected to be administered from June to November 2023. Preparations are underway for obtaining the list of discharged patients.



Status





Student Wellness Survey

The New Brunswick Student Wellness Survey is a provincial survey that aims to understand and report on several aspects of students' wellness. Students are asked about their social and emotional development, mental health, physical health, substance use, and experiences at school and in the community.

The Student Wellness Survey is conducted in collaboration with the Government of New Brunswick Department of Health – Public Health, and the Department of Education and Early Childhood Development. Three versions are prepared:

available results.

- 1. Children in grades 4 and 5,
- 2. Youth in grades 6 to 12,
- 3. Parents of children in kindergarten to grade 5.

The information from the N.B. Student Wellness Survey is used at the NBHC communities and health zone levels to support the public reporting of population health.

This year, the first iteration of annual K to 12 online surveys was rolled out. Specific deliverables are the following:

2021 edition of New Brunswick Student Wellness Survey – Grades 6 to 12

Deliverable Status Public reporting – 1st quarter Survey reports will be sent to the schools that participated in the 2021 edition of our survey. Based on key observations from the analysis of the results, and the communications plan, targeted campaigns will be undertaken to highlight key findings from the provincial-level results of the survey. These campaigns will also contribute to increasing awareness about the work of the NBHC and the information available on its website. **Comments:** Reports were completed and distributed as planned. Completed Knowledge mobilization activities took place, including our media activities from September 21st. There has been a solid response to the release, in addition to having follow-up media activities leveraging the survey results and infographics. A presentation was delivered to the Center of Excellence on Health, which further promoted the results with teachers and students. All web-related work has been completed pertaining to publicly



2022 edition of New Brunswick Student Wellness Survey – Grades K to 12

Deliverable	Status
Survey technical preparation – 1 st quarter We will consult with stakeholders in the education system (including schools, districts, and sectors) to prepare for the full transition towards the annual cycle of data collection from all grades. Discussions with the Francophone sector in EECD will explore the opportunity and logistics of integrating the NBSWS with other surveys they conduct. We will review the questionnaire(s) for the parents of children in kindergarten to grade 5.	Completed
Survey administration – 2nd to 3rd quarter We will administer the 2022 edition of our survey. This edition will be the first to target all grades (from K to 12) in the same year.	
 Comments: The administration was completed as expected. 99% of schools participated in the surveys (Grades 4-5 and 6-12). A survey was sent to parents of children from grades K to 5. At 12%, the response rate of parents was lower than previous cycles (55-60%). Work with stakeholders is underway to try to identify ways to ensure a higher parent response rate is future surveys. 	Completed

Public reporting – 4th quarter

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Based on key observations from the analysis of the results, and the communications plan, targeted campaigns will be undertaken to highlight key findings from the survey. These campaigns will also contribute to increasing awareness about the work of the NBHC and the information available on its website.

Survey reports will be sent to the schools that participated in the 2022 edition of our survey. We will also publicly report provincial-level results.

Comments: Validation of the results is completed. School and district level reports will be sent in April 2023.



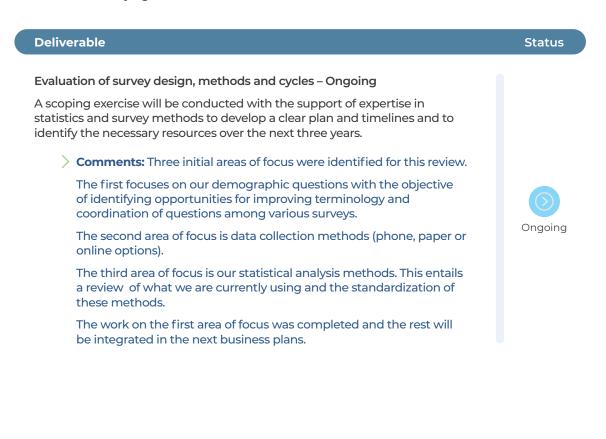




Overall Surveying Approach

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Parallel to our ongoing surveying work described above, we began a multi-year review and evaluation of our surveys that will take until 2025. This will leverage lessons learned from a decade of surveying as well as from consultations with stakeholders.





External Indicators

The NBHC collects, calculates, organizes and stores more than 250 indicators from external sources (federal, provincial, regional and local) to support its public reporting efforts to measure, monitor and inform on health service quality and population health at the provincial, zone and community levels.

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Building on the work we did in 2021-2022 to standardize and streamline data management processes, we continued to improve processes to enhance access to and manage the data from all external sources. Besides the regular data captured from federal sources, a process is to be developed for regular data collection from provincial sources and RHAs. This will enable the Council to actively fulfil the role identified in the provincial health plan. It will also respond to the NBHC strategic goal around "Value Proposition."

Deliverable	Status
Develop and propose stakeholder network concept to steering group to obtain buy-in – 1^{st} and 2^{nd} quarter	
To initiate and coordinate the establishment of core measures for public reporting on health service quality and population health, we will propose a network of stakeholders to the steering group tasked to oversee the provincial health plan. This will ensure alignment and commitment to timely access to the data NBHC requires for public reporting.	
Comments: We continue to raise the need to work on indicators around the provincial health plan pillars and propose approaches with health system stakeholders.	Ongoing
We have proposed an initiative that would require close collaboration from indicator-related individuals from each health system organization. The proposal would aim to be completed by September of 2023.	
Develop value-based selection criteria – 2 nd quarter	
Comments: Propose and consult to arrive at agreed criteria to guide the strategic selection of indicators aligned with NBHC's strategic direction and the provincial health plan.	Ongoing
	• • • • • • • • • •
Establish and improve data management processes and documentation of indicators – 1^{st} to 4^{th} quarter	
Review current documentation for external indicators and create reference documents for all areas of calculating indicators and making them accessible through our website.	Ongoing
Comments: Work has been initiated and will be underway during the next fiscal year.	



Health Service Quality

The New Brunswick Health System Report Card is an interactive tool prepared by the New Brunswick Health Council that contains indicators of performance organized by sectors of care/services in the province. Currently, the Report Card provides a grade score for the primary health sector, the acute care sector, and the supportive/specialty care sector.

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Each sector of care is graded at a provincial and health zone level according to the NBHC dimensions of quality in health care services. These dimensions include:

- Accessibility: Health care is accessible when individuals can get the care they need in the right place, at the right time, and in the official language of their choice.
- **Appropriateness**: Health care is appropriate when the services that are provided are relevant to a person's needs and based on accepted standards of care.

- Effectiveness: Health care is effective when the services provided achieve the results desired by the individual and their care provider.
- Efficiency: Health care is efficient when the services provided achieve the results desired by the individual and their care provider in a cost-effective way.
- Safety: Health care is safe when services are set up to avoid or minimize potential risks to the patient and their broader community.

At the provincial and zone levels, the Report Card framework has proven to be an effective tool for identifying priority areas for health service quality improvement. As the access to standardize local level indicators improves at the service organization or community level, so does the ability to appreciate variability in health service quality outcomes across the province.

Deliverable Status Review the Health Service Quality Report Card - 1st to 3rd quarter In 2021-2022, we began reviewing the methodology of the Health Service Quality Report Card but had to put the exercise on hold as stakeholders who were needed for the review were busy with pandemic-related challenges. In 2022-2023, we will resume this methodology review which is aimed at ensuring that the tool uses the best available indicators and that they are organized in a way that maximizes their use for health service quality improvement. Ongoing This will build on value-based selection criteria and consulting with a relevant stakeholder network. **Comments:** Work is linked to the network proposal. The consultation/survey of stakeholders aims to validate which currently available indicators could serve for performance improvement efforts and identify areas of focus for new indicators.

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Deliverable

Publicly release updated version of Health Service Quality Report Card – $1^{\rm st}$ and $4^{\rm th}$ quarter

After the methodology review is completed, we will ensure the collection of the necessary data and indicators and will release an updated version of the tool.

Comments: Updates with most recent indicators were completed in October and communicated to health system stakeholders.

We anticipate leveraging the data in upcoming quarterly Provincial Health Plan reports.



Status

Provincial Health Plan

The New Brunswick Health Council has a mandate to report publicly on the performance of the health system. As part of our public reporting obligations, the NBHC will be releasing quarterly progress reports along with contextual information regarding the Action Areas under the Provincial Health Plan, "Stabilizing Health Care: An Urgent Call to Action". In January 2023, the NBHC released contextual information on Access to Primary Health Care. The release included a primer highlighting some of the key observations relevant to access to primary health care, an infographic and a promotional campaign.

Access to Surgery

In 2021-2022, the NBHC gave particular attention to the quality dimension of accessibility - in particular, timely access to surgeries. We successfully initiated with stakeholders (the Surgical Access registry at the Department of Health) a regular process of collecting quarterly measures about access to major surgical procedures by zone. This year, we built on the accessed information to publicly report on a quarterly basis citizen-centered information. This will help inform the Provincial Health Plan's strategic action area "Access to surgery".



Report on surgical wait times - each quarter

We will develop a tool to publicly present and share indicators on access to surgical procedures on a quarterly basis.

Key observations will be highlighted accordingly.

Comments: A document has been developed offering an update on wait time results, and the content is being validated with stakeholders.

Access to Addictions and Mental Health Services

The NBHC has frequently informed on the evolving population health needs related to addictions and mental health services for youth and adults. Our reports have contributed to the development of the Interdepartmental Action Plan for Addictions and Mental Health Services, and our indicators were integrated in the measurement framework proposed to monitor the implementation of the action plan. This year, we compiled a core set of measures and indicators about the need and quality of addictions and mental health services. We also developed an approach to publicly report on those measures on a regular basis by leveraging the internal and external sources of indicators we organize. This helped to inform on the Provincial Health Plan's action area "Access to addiction and mental health services".

DeliverableStatusReport on addictions and mental health services - each quarterWe will develop a tool to publicly present and share indicators regarding the
need for quality addictions and mental health services.Comments: This work also involves those leading the Provincial
Health Plan initiatives.The goal is confirming an initial base of indicators and identifying
areas requiring priority attention from a measurement perspective.



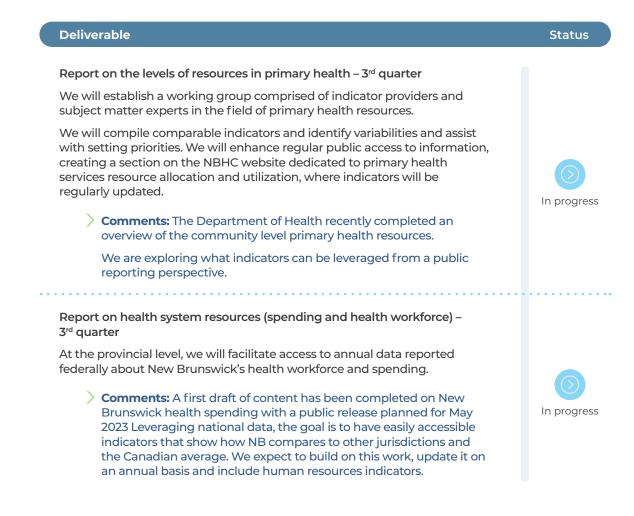
Status



Resources

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There are many opinions regarding the current challenges facing health services and there are also many solutions being proposed. Meanwhile, there is a generalized lack of understanding pertaining to actual resource levels, their usage and variation across health zones and communities. All of this underlines a need for better understanding how resources are distributed. The Provincial Health Plan identified resources (people, technology and funding) as key enablers.





Population Health

Many factors influence how well and how long we live. Having access to housing, employment, education, adequate health services, and safe communities, for example. Our behaviours when it comes to healthy eating, physical activities, and sleep can also influence how healthy we are.

The Population Health Model used by the NBHC provides an overview of how all these factors fit together. The model starts by showing the important role policies and programs have on the determinants of health. The determinants of health are grouped into four categories, each with various levels of influence on health. The model also includes citizens' involvement in their own health and well-being as well as external factors that can influence the health of the population. Together, they lead to a population's health outcome, demonstrating how long and how well we live. This Population Health Model has facilitated the identification of provincial level priorities, as well as the identification of indicators at the health zone and NBHC community level. When it comes to informing positive change, initiatives based on local level indicators appear to have a much stronger influence on generating population health improvement.

In 2022-2023, we continued to improve our public reporting of population health indicators to be more strategic, citizencentered and interactive. We also leveraged the opportunity for alignment with the provincial health plan and equip health system stakeholders to better understand the local and regional population health needs and plan services accordingly.

Deliverable

Publicly release community-level observations – 2nd quarter

With the goal of improving the accessibility of local information, we developed in 2021-2022, observations for each of the NBHC's 33 communities and 7 health zones.

In 2022-2023, we will make these observations public, aimed at those who are working on improving population health in their communities.

Comments: The material was completed and released. The NBHC also organized an information session for all provincial MLAs on October 26th to increase awareness of this product.

A knowledge mobilization strategy included media release and social media content over several months.



Status



Status

Review population health indicators used at zone and community levels -2nd and 3rd quarter As part of broader efforts to improve the ability to visualize indicators on

the NBHC website, the NBHC leveraged the new revamped and improved tool developed for the population health snapshots that presents annual population health measures at the zone level to establish in consultation with stakeholders a core set of indicators to understand population health needs at zone and community level.

This will build on a value-based selection criteria and consulting with a relevant stakeholder network.

Comments: Work has been initiated pertaining to physical environment indicators and will continue in the next year.

Publicly release updated version of Population Health Snapshot – $\mathbf{4}^{\mathrm{th}}$ quarter

After ensuring the collection of the necessary data and indicators, the NBHC will release an updated version of the tool.

This campaign will also contribute to increasing awareness about the work of the NBHC and the information available on its website.

Comments: Online indicators have been updated.

Publicly release updated community data - 4th quarter

After ensuring the collection of the necessary data and indicators, the NBHC will release an updated version of the data tables.

Comments: Updates of Population Health Profiles information for the NBHC communities and health zones is a continual process. With the current website structure, data can be updated in an ongoing manner as it is ready for public dissemination.







Public Participation & Awareness

The New Brunswick Health Council has a dual mandate – report publicly on the performance of the health system and engage citizens in quality improvement of health services.

To effectively engage citizens in health service quality improvement initiatives, the NBHC aims to inform New Brunswickers on the current quality of services they receive, as well the population health in their communities, health zone, and province. An improved understanding of the health care needs and experiences at a community level will support citizens in N.B. to make informed decisions about their health and the care services they receive.

During the year, the NBHC leveraged a key opportunity from the Provincial Health Plan. This opportunity was the establishment of The Patient Voices Network. The PVN is a forum whereby New Brunswick citizens were invited to share their experiences and voice their opinions on specific components of the health care system.

The 2022-2023 edition of the Patient Voices Network used qualitative research methods to explore the topic of virtual access to primary care services. As part of the initiative, we organized various engagement activities in the different health zones. The engagement activities include online sessions, focus groups and one-on-one interviews with patients and health care providers. The results of what we heard during those engagement activities will be summarized in a citizen brief that will be publicly shared and presented to the stakeholders and people of influence within the health care system in the context of a Health Innovation Lab.

Deliverable

Initiate the establishment of the Patient Voices Network - 1st and 2nd quarter

In collaboration with health service organizations, the NBHC will work on identifying citizens willing to share their experiences with health services for the purpose of quality improvement.

These efforts will also aim to improve the use of the unsolicited experiences shared by citizens with patient advocates and quality assurance representatives of publicly funded health service organizations.

Comments: Virtual sessions were completed with 45 participants in seven sessions. Five focus groups were held, and the rest are underway. There have been 38 participants in the focus groups to date.

Contribute to initiatives for the participation of community leaders in the reorganization of community health services – 3^{rd} and 4^{th} quarter

In collaboration with health system stakeholders, the NBHC will work on the production of information and mechanisms aimed at effectively engaging community stakeholders in the planning and monitoring of health services.

Comments: New web searching capabilities for indicators is leveraged for presentations in each of the health zones to various types of stakeholders.

Lists of zone level stakeholders are in development. Efforts for a coordinated approach with health service organizations are ongoing.



Status



Ongoing



Communications

The New Brunswick Health Council has a dual mandate – report publicly on the performance of the health care system and engage citizens in quality improvement of health services.

Over the years, the NBHC has produced a large amount of data and information on health service quality, population health and the performance of the health system. As with all information, its potential value and usage is linked to how effectively it is communicated to citizens and the various stakeholders we interact with. In 2022-2023, we worked on putting together a strategic framework to better structure and guide our communications activities. We also published regular articles on our website to increase our output of analysis.

Deliverable

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Initiate work on a Strategic Communications Framework - 2nd to 4th quarter

Improving communications is one of four strategic priorities identified in our Strategic Plan 2022-2025.

The first part of improving communications will be developing a framework that provides the structure and guidance for all NBHC communications activities. Our framework will be inspired by the World Health Organization Strategic Communications Framework for effective communications.

Comments: The logic model for the framework was completed and approved by the Council earlier in the year.

Currently, the focus is on the development of personas to improve how stakeholders are defined for communications efforts.

Surveys are being sent to approximately 400 individuals representing citizens, communities, and health system stakeholders. The aim is to strengthen our understanding of how they prefer to be engaged.

We are now expecting to have the framework completed by the end of April 2023.

Publish articles on our website on a regular basis - 1st to 4th quarter

We will regularly write and publish articles on our website, focusing on explaining key findings related to health service quality and population health. We will promote these articles on social media.

> **Comments:** We have developed content pertaining to health spending that will soon be published. We are also preparing for the launch of a newsletter that enable individuals to sign up to receive monthly information regarding our releases and related information.



Status





First Nations Health Project

Since 2017, the NBHC has been collaborating with First Nations health representatives and Indigenous Services Canada to improve access to health and health service quality data for First Nations communities. Along the way, health system stakeholders and First Nations representatives have been engaged in improving access to indicators on Indigenous People and capacity building within First Nations communities. The project also includes developing an Indigenous led governance framework to ensure alignment with the First Nations Principles of ownership, control, access, and possession. New Brunswick is lagging behind other Atlantic provinces in implementing effective collaborative approaches with First Nations communities. The project is perceived by many as a valuable enabler in identifying effective collaborative approaches.

Deliverable

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Improving access to data - ongoing

The project has helped to create a network of health services representatives from each First Nations community. There is a need to improve access for these communities to indicators pertaining to the health of their people and the quality of health services received. Year-end discussions have helped identify priority areas of focus for the coming year.

The project has helped create a network of health service representatives from each First Nations community. There is a need to improve access for these communities to indicators pertaining to the health of their people and the quality of health services received. We will also leverage opportunities for knowledge production from our survey data about the Indigenous populations.

Comments: The NBHC undertook a recruitment process to fill the position of Lead Analyst Indigenous Research/Policy. This position has been filled, and work is underway to build relationships in each Indigenous community across New Brunswick.

The lead analyst is reaching out to indigenous and non-indigenous stakeholders to hear about their data needs and determine how the NBHC can provide the needed data. Work is also underway with Provincial and Federal entities to further these deliverables.

The lead analyst also sits on committees and working groups to identify and develop resources and tools to support the Council in being a culturally safe organization. The lead analyst is identifying and developing resources and tools to support Council staff in providing quality data for Indigenous Peoples, families, and communities.

The lead analyst worked in collaboration with other staff at the Council to decolonize verbiage, present a two-eyed seeing lens, and reviewing data before it is disseminated to communities.

Status





Deliverable

Community engagement - ongoing

The COVID pandemic has impacted the ability for interaction with communities. Nevertheless, participation in monthly calls has remained strong. In addition to continuing calls, we will monitor the pandemic guidelines and initiate in-person contact as it becomes possible.

The Covid pandemic has impacted the ability for interaction with communities. Nevertheless, participation in monthly calls has remained strong. In addition to continuing calls, we will monitor the pandemic guidelines and initiate in-person contact as it becomes possible.

Comments: Monthly collaborative calls were suspended while NBHC completed the recruitment process.

The lead analyst is mindful of the trauma people have experienced during the pandemic and the continued health situation in N.B., as well as the trauma they may have experienced in the past. The analyst focuses on how words can be helpful, not harmful, when engaging First Nation communities. Trust is not built overnight, neither are agreements to work together, however, continued work on and making the required pivots as necessary to ensure she is servicing the citizens of New Brunswick.

The lead analyst has planned in-person visits to each community to have conversations with decision makers, health, education, and leadership. In the objective of encouraging more participation in our Student Wellness survey, our Primary Health survey, etc. The lead analyst is also facilitating engagement with Indigenous individuals, Elders and organizations while distributing relevant information and opportunities during her visits.

Ongoing work with the communications team at the NBHC is underway to provide information through all our social media channels. The lead analyst will be visiting communities to further develop working relationships with them and the NBHC.

Engaging each community to gather information through the NBHC's Patient Voices Network initiative will also be a priority to ensure First Nations representation.





Deliverable

Capacity Building – Ongoing

Those involved in First Nations communities' health services are aware of the challenges in not only accessing but also in the use of indicators for improving services. Several short- and long-term strategies are being explored in an effort to increase capacity in the use of First Nations health and health service quality indicators. For example, training opportunities have been identified and their delivery will contribute to strengthening capacity.

Those involved in First Nations communities' health services are aware of the challenges in not only accessing but also in the use of indicators for improving services. Several, short- and long-term strategies are being explored to increase capacity in the use of First Nations health and health service quality indicators. For example, training opportunities have been identified and their delivery will contribute to strengthening capacity.

Comments: Work is underway to create Indigenous infographics/ fact sheets. This will be sent to all Indigenous communities in N.B. reaching Indigenous people on and off reserve.

A key priority is the development and/or review of strategies, plans, policies, presentations and resources to ensure inclusiveness and considerations for Indigenous cultural safety.

An interactive map will be developed for all the First Nations, Inuk, and Metis of New Brunswick; People will be able to use this map to find locations and contact information for Indigenous communities, health centres, Friendship Centres, Métis Associations, hospitals, and the Aboriginal Patient Liaisons at each hospital.

A cultural safety training will be offered to communities and the staff of NBHC through the Sanyas Indigenous Cultural Safety training.





Status

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Recommendations to the Minister of Health

As part of its legislated mandate, the NBHC can provide recommendations to the Minister of Health with respect to lessons learned from its work on performance measurement of the health system. There have been many lessons learned in association with the engagement mechanisms and evaluation work of the NBHC since 2008. These learnings have not only benefited Council members and staff, but also stakeholders throughout the province with either an influence or an interest in health service quality improvement. The learnings cover a broad number of topics and activities. Therefore, to develop an annual focus, the NBHC also looked at the issues and priorities which are currently engaging

the health system and use the intersection of these two elements to choose a topic for the upcoming year's recommendations.

Formulating recommendations to the Minister of Health, based on lessons learned through its work, is part of the NBHC legislated mandate. Over the years, having an approach that would ensure an effective response to the NBHC recommendations has been a challenge. The provincial health plan, which recognizes a role for the NBHC regarding quarterly accountability, represents an opportunity to strengthen this important part of the NBHC mandate.

Deliverable

Provincial Health Plan accountability

Leveraging the provincial health plan's quarterly accountability requirements, the NBHC will have the opportunity to share its observations and recommendations with the Minister of Health. The plan deliverables are scheduled for two consecutive fiscal years. Accordingly, the NBHC will be able to also consider year-end recommendations for each year.

Comments: The provincial government announced significant changes to the work of the NBHC. The intention was first mentioned in the Throne Speech of October 25th. Amendments to the NBHC Act were approved prior to the Christmas break.

We have developed a presentation to validate the intent of the changes. This was first presented to the Council and validated by the Deputy-Minister. We have since been sharing the material with leadership within the health system.





Status

Annual Report Pursuant to the *Public Interest Disclosure Act*

It is my pleasure to present the Annual Report pursuant to the Public Interest Disclosure Act with regards to the activities of the New Brunswick Health Council during its fifteenth fiscal year, 2022-2023.

Section 3 of the Act applies to the following wrongdoings in or relating to the public service:

- a) an act or omission constituting an offence under an Act of the Legislature or the Parliament of Canada, or a regulation made under an Act
- b) an act or omission that creates a substantial and specific danger to the life, health or safety of persons, or to the environment, other than a danger that is inherent in the performance of the duties or functions of an employee
- c) gross mismanagement, including of public funds or a public asset
- d) knowingly directing or counselling a person to commit a wrongdoing described in paragraphs (a) to (c)

In accordance with Section 18, Report about Disclosures, Public Interest Disclosure Act, I confirm that the New Brunswick Health Council did not receive any disclosures regarding any wrongdoings. Hence no investigations were required.

Respectfully submitted,

Stéphane Robichaud Chief Executive Officer



Financial Statements 2022-2023

NEW BRUNSWICK HEALTH COUNCIL

Financial Statements

March 31, 2023





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INDEPENDENT AUDITOR'S REPORT

To the Directors of New Brunswick Health Council

Opinion

We have audited the financial statements of New Brunswick Health Council (the organization), which comprise the balance sheet as at March 31, 2023, and the statement of revenues and expenses for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the organization as at March 31, 2023, and the results of its operations and its cash flows for the year then ended in accordance with the Canadian Public Sector Accounting Standards.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are independent of the organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matter

The budget figures are provided for comparative purposes and have not been subject to audit or review procedures. Accordingly, we do not express any opinion regarding budget figures.

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Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the organization's financial reporting process.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

A further description of our responsibilities for the audit of the financial statements is included in the appendix of this auditor's report. This description, which is located at page 4, forms part of our auditor's report.

Bourque Richard Boutot

Bourque Richard Boutot P.C. Inc. Chartered Professional Accountants

Dieppe, New-Brunswick June 13, 2023



APPENDIX TO INDEPENDENT AUDITOR'S REPORT

Description of the Auditor's Responsibilities for the Audit of the Financial Statements

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the organization to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.



NEW BRUNSWICK HEALTH COUNCIL Statement of Revenues and Expenses Year Ended March 31, 2023

	Budget	2023	2022
Income			
Grants - New Brunswick Department of Health Other revenues (Schedule A)	\$ 2,425,300 512,042	\$ 2,294,711 379,741	\$ 1,809,684 342,082
	 2,937,342	 2,674,452	2,151,766
Expenses			
Administrative expenses Communication expenses Research and Consulting Board of Directors Human Ressources Operating expenses	 80,500 356,400 664,042 152,000 1,637,000 47,400 2,937,342	 55,588 315,334 461,344 157,343 1,642,538 42,305 2,674,452	 45,270 358,332 223,293 142,114 1,343,622 39,135 2,151,766
Excess of revenues over expenses	\$ -	\$	\$ -

NEW BRUNSWICK HEALTH COUNCIL Balance Sheet March 31, 2023

Assets	2023	2022
Current assets Cash Accounts receivable	\$ 400 588,565	\$ 400 520,328
	\$ 588,965	\$ 520,728
Liabilities		
Current liabilities Accounts payable Deferred income	\$ 456,709 132,256	\$ 473,936 46,792
	\$ 588,965	\$ 520,728

On behalf of the Board Director u û Director



1. Statutes of incorporation and nature of activities

The New Brunswick Health Council (the Council) was established on September 1, 2008 under the New Brunswick Health Council Act and is considered a government organization. Its goals are to promote and improve the performance of the health system in New Brunswick.

2. Significant accounting policies

The financial statements are prepared by management in accordance with the Canadian Public Sector Accounting Standards for government organizations of the CPA Canada Handbook and include the following significant accounting policies

Revenue recognition

Revenues are recorded on the accrual basis of accounting as the funded expenditures are incurred. Any amount received in excess of recorded expenditures is accounted for as deferred revenue.

Use of estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and the amounts recognized as revenues and expenses for the periods covered. Actual results may differ from these estimates.

Capital assets

Capital assets purchased with government funding and under a \$100,000 threshold are fully amortized in the year of acquisition in accordance with government guidelines. Capital assets over the \$100,000 threshold are capitalized and amortized based on the estimated useful life.

3. Defined benefit pension plan

The Council, through a multi-employer plan sponsored by the Province of New Brunswick, offers a defined benefit pension plan to its employees. The pension expense for the year is \$183,467 (\$123,104 in 2022)

The New Brunswick Investment Management Corporation is the investment manager for the pension assets of members of the Public Service.

4. Cash flows

No statement of cash flows was prepared since the information on cash flows is available from other financial statements and related notes.

5. Contingency

The Council does not have any insurance coverage. Her Majesty the Queen in right of the Province has assumed responsibility for interests and risks of the Council in lieu of such insurance as permitted in the New Brunswick Health Council Act.

6. Economic dependence

The Council is financed almost solely by the New Brunswick Department of Health.

NEW BRUNSWICK HEALTH COUNCIL
Additional Information
Year Ended March 31, 2023

	Budget	2023	2022
Schedule A - Other revenues			
Indigenous Service Canada Public Health	\$ 232,042 280,000	\$ 99,741 280,000	\$ 125,893 216,189
	\$ 512,042	\$ 379,741	\$ 342,082







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