Stabilizing Health Care: An Urgent Call to Action
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The Call To Action

Health care in the province of New Brunswick is in crisis. Citizens are waiting a long time for tests and surgeries, hospitals are experiencing unexpected closures, and staff shortages are common. The pandemic is adding significant pressure. Action must be taken immediately to stabilize the system and prevent further deterioration of services. It will take everyone working together to bring about the changes that are urgently needed.

The Government of New Brunswick held a comprehensive public engagement process in the spring. This feedback is valued and has positively influenced this action plan.

It is clear that health care in New Brunswick is a collection of silos that often operate independently. People, technology and information are not connected in the ways they need to be to focus on the citizen and deliver better services to New Brunswickers.

Health care must evolve. Over the last two years, the New Brunswick response to the pandemic has demonstrated speed and innovation in making improvements. There are many success stories to build upon, but this can only be done if there is a clear mission, open mindset, and involvement of stakeholders.

This plan sets forth very specific action areas and timelines for improvements. It identifies the most significant initial challenges that, when addressed, will ensure the stability of the system in the near-term, and positions further actions in the years ahead to heal the health-care system and support citizens in preventing disease and illness. Ultimately, this plan is the foundation for building a healthier New Brunswick. This plan also identifies the enablers of continuous improvement – fundamental operating practices surrounding people, technology, funding and governance – which must be fixed if there is to be real transformational change.

This plan is fast moving and achievable. It requires all stakeholders to be very deliberate about the direction and pace. Success depends upon a new kind of collaboration. Every community, health-care facility, volunteer, health-care professional, and department staff member has an important role to play – and this is the collective call to action.

Significant action needs to be taken to build a health-care system that is citizen-focused, accessible, accountable, inclusive, and service-oriented for all New Brunswickers – and it must start now.
What Can New Brunswickers Expect?

This plan will guide progress over the next five years. The first two years are critical for success to establish an appropriate foundation for progress and momentum. With that in mind, this plan outlines very specific actions and timelines for change that must take hold. These actions are fundamental to position the health-care system for even more advancements in Years 3 – 5.

Starting now through the next two years, the following will be accomplished.

1. Fully address the wait list for access to primary health care,
2. Eliminate long-waits (over a year) for hips and knees surgery, and reduce surgical wait times by 50 per cent,
3. Empower New Brunswickers to proactively manage their health with access to their own health information through MyHealthNB,
4. Create a centralized referral process for New Brunswickers to choose where to get a specialized service,
5. Improve wait times for adult high-priority addiction and mental health services by 40 per cent, which means that the number of cases that receive service within 10 days will increase from 35 per cent to 50 per cent,
6. Modernize laboratory services for standardized testing and faster results,
7. Launch easy self-scheduling for diagnostic tests like blood work and x-rays,
8. Extend services to older adults living in their homes to ensure that seniors can age in place with access to appropriate supports and services,
9. Enhance the clinical care provided in Special Care Homes.

Guiding Principles

These principles will guide the work of this action plan with all stakeholders.

With citizens for citizens
Services are designed, implemented, delivered and reviewed with citizens.

Transparency
Citizens will understand public health services that are available to them at the local, regional and provincial level as well as those that are offered outside of the province.

Rapid improvement focus
Health-care system improvements will be done quickly without striving for perfection.

A system that is connected
All services are linked to enable citizens to move from service to service with ease.

The right health care
Citizens will receive the right care at the right time at the right location by the right provider.

Inclusive
Citizens will experience an inclusive health-care system that respects differences, including official languages, culture, gender and sexual identity, age and ability.
Action Plan: Building on Success

A series of improvements and actions will be introduced that are designed to stabilize the health-care system and position it for long-term sustainability. In the last two years, New Brunswick has demonstrated that innovations in health care can be very effective at bringing improved service to citizens. Major gains are being made, including:

• Opening three new nurse practitioner clinics that when fully deployed will offer 18,000 New Brunswickers access to primary care,
• Referred over 37,000 new patients from the Patient Connect NB wait list to physicians for care,
• Significantly reduced hips and knees surgery wait times, resulting in a 50 per cent reduction in the number of people waiting longer than a year,
• The first addiction and mental health walk-in service opened in Campbellton that successfully provided care to 162 citizens without appointments in the first six weeks of operation,
• Introduced reimbursement for pharmacists to assess, treat, and prescribe for minor ailments, beginning with urinary tract infection treatments and prescription renewals,
• Improved access to virtual appointments with high adoption rates among physicians and citizens,
• Created a new, effective and efficient online system providing self-booking for vaccines.

5 Action Areas

This plan outlines five specific areas for action and identifies key enablers to success.
Strong primary health care is critical to ensuring that citizens can get the health care they need at the right time and in the right place by the right provider. It is fundamental to helping citizens and their families better manage health conditions and to reducing pressures on more expensive and resource-intensive acute care service.

New Brunswick faces many challenges including long wait lists, an outdated model for primary health care, and aging physicians. Today, approximately 40,000 citizens are on the Patient Connect NB list. The list is evergreen and will be further challenged near-term as New Brunswick physicians age and over time as the province pursues new population growth. Further complicating service levels is the fact that New Brunswick is operating with an outdated model of solo practitioners. Almost 42 per cent of New Brunswick’s doctors work in a solo practice, meaning they have no one to cover for them when they are on call, resting after an overnight shift in the emergency department, on vacation or even when they are sick. This is the second highest rate in the country. About 35 per cent of New Brunswick’s family doctors will be eligible for retirement within five years and younger physicians entering practice are interested in working in teams with enriching peer learning opportunities.

This action plan emphasizes an evolution to team-based care and combining upstream public health activities with primary health care and addiction and mental health services so that no matter where a citizen enters the system – be it a call to 811, visiting a community health centre, going to the emergency department, contacting Public Health or Addiction and Mental Health Services, or contacting a pharmacist – they will be welcomed, accepted and be connected to the right care they need.

**IN THE NEXT 24 MONTHS NEW BRUNSWICKERS WILL SEE:**

**FISCAL**

**Q4 2021-22** Citizens without a family doctor or nurse practitioner who need access to primary care services will be able to register to a new provincial Primary Care Network and receive services. This provincial clinic will become their temporary home for primary care until they are matched with a permanent provider. It will offer both in-person and virtual appointments as well as a single electronic medical record for everyone.

**Q2 2022-23** The Patient Connect NB List will have been completely eliminated and replaced by the New Brunswick Primary Care Network where anyone without a doctor or nurse practitioner in the province will be able to access a family doctor or nurse practitioner in a timely manner while they wait for a longer-term placement with a local community clinic or a primary care provider.

**Q3 2022-23** The New Brunswick Primary Care Network will start offering appointments with a wide range of health professionals, including mental health practitioners, pharmacists and more, becoming a true interdisciplinary model.

Community health services will be re-organized into care networks that will make it easier for New Brunswickers to get access to the services that they need. These care networks will consist of both virtual care and in-person care with clear criteria for what is appropriate depending upon the citizen’s needs. Community leaders will participate in the work to build the networks and they will include regional health authority resources, primary care providers and non-governmental organizations. This collaborative approach will make better use of scarce human resources, promote population health and reduce emergency department visits. The health system will work with communities to address identified gaps in services.

**Q1 2023-24** The New Brunswick Primary Care Network model, which will offer telephone, virtual and in-person access to the right healthcare provider at the right time, will integrate with Tele-Care 811 and provide seamless access to a wide-range of health services across the New Brunswick population, including for those who already have a family doctor or nurse practitioner but cannot see them in a timely manner.
Access to Surgery

New Brunswick’s population is aging, with nearly 20 per cent more seniors than the rest of Canada. This gap is expected to grow and based on current projections, nearly one-third of New Brunswick’s population will be over the age of 65 by the late-2030s. As citizens age, the number of procedures for hip replacements, knee replacements, and cataract surgeries have been on the rise.

As more procedures are needed, and staff shortages persist, New Brunswick has been falling behind national timelines for hip and knee replacement surgeries. In New Brunswick, only 47 per cent of citizens receive a hip or knee replacement within six months from the time the orthopedic surgeon agrees to operate. On average, 72 per cent of Canadians receive the surgery within six months of being referred. However, in the last year, excellent progress has been made on improving hip and knee surgery wait times with a 50 per cent reduction in those waiting for over a year. Learnings will be scaled to ensure the backlog from the pandemic is cleared completely and that improvements continue to be made.

IN THE NEXT 24 MONTHS NEW BRUNSWICKERS WILL SEE:

FISCAL

Q4 2021-22  The Enhanced Recovery After Surgery (ERAS) project will be implemented for colorectal surgery patients in Moncton, and hip and knee replacement surgery patients in Saint John. This builds on a successful prototype in the Chaleur region resulting in standardized care before, during and after surgery and helps patients get back on their feet quicker while shortening hospital stays and reducing surgical complications.

Q1 2022-23  As part of a pilot project, primary care providers will be able to electronically refer citizens to orthopedic specialists who will get to choose the next available specialist in their zone or can wait for a specific surgeon.

Citizens will receive faster access to specialist care through an integrated e-consultation system implemented for physicians provincewide. This full-scale implementation will build upon a successful prototype that has been underway since 2018 that has allowed doctors and nurses to ask specialists for advice about patients via the electronic health record. The project showed that 67 per cent of face-to-face consultations with specialists can be avoided, cutting wait times and travel times for patients.

Q3 2022-23  The list of citizens waiting more than a year for hip and knee replacement surgery will have been eliminated and no one will wait more than a year for the service.

Q3 2023-24  The electronic referral process pilot launched in April 2022 will be expanded from orthopedic surgery to other specialties provincewide.

Surgical wait times will be cut in half and citizens will have better access to high quality surgical services.
Create a Connected System

Too many New Brunswickers are getting lost and frustrated trying to navigate the many silos of health care. Over the next 24 months this plan will deliver tangible changes that begin to create a connected system. New Brunswickers deserve a more seamless experience – from having clarity around which services they can access with and without referrals, to undergoing tests for bloodwork and diagnostic imaging.

During the pandemic, New Brunswick implemented technology to communicate with citizens and coordinate self-bookings of vaccinations – in just a matter of weeks. New insights were gained about laboratory services and how to test people closer to their homes, transport specimens throughout the province quickly with an efficient turnaround time for results and make results available online for citizens in a timely manner. These successes must be built upon to stabilize health care and start the shift to a preventative health-care model that is supported by healthy communities and empowered citizens.

IN THE NEXT 24 MONTHS NEW BRUNSWICKERS WILL SEE:

FISCAL

Q3 2021-22  A New Brunswick laboratory will be designated as New Brunswick's public health laboratory. This lab will ensure citizens receive a more standardized and streamlined process for collection, as well as access to more timely results.

Q1 2022-23  Communities and providers will become official partners in recruitment for a variety of roles from physicians and nurses to psychologists and mental health counsellors and additional professional roles. Community recruitment teams will be supported with a new grant program that will be created to help rural communities in particular develop promotional materials to support this effort.

Q2 2022-23  Ambulance New Brunswick will re-introduce the emergency medical technician (EMT) profession. They will work in collaboration with primary care paramedics (PCP) and advanced care paramedics (ACP) to ensure more ambulances are on the roads, leading to better response times and ultimately better health outcomes for citizens requiring emergency care.

Q3 2022-23  Building on the success of MyHealthNB during the pandemic, citizens will have access to vaccination status, medication profiles, and other lab results through the MyHealthNB portal.

Q1 2023-24  New Brunswick’s laboratories will become part of an integrated clinical diagnostic laboratory system with strong transportation links between facilities. Citizens will still be able to have their laboratory samples collected close to home and results will continue to be provided in a timely manner.

Q3 2023-24  New Brunswickers will be able to schedule their own diagnostic tests like blood work and x-rays at any place the service they need is available. This will give citizens more control over when and where they receive their tests, promote more timely access to services and help address transportation challenges.

A bilingual, integrated laboratory information system will be introduced. This will support efforts to provide New Brunswickers with digital access to their health information and reduce repeated tests and improve collaboration throughout New Brunswick’s health system.

Ambulance New Brunswick will introduce new multi-patient vehicles to their fleet allowing them to increase service levels for non-emergency transfers for patients across the province. This will result in more timely services for citizens who are hospitalized or in long-term care and who are waiting for a specialist appointment, diagnostic test or necessary surgery in another region of the province.
Over the past five years, the demand for addiction and mental health services has increased 16 per cent. Requests from adults are up nine per cent, while youth service needs are up 33 per cent. As a result of increased demand, wait times for new high priority referrals have increased and less than 50 per cent are currently receiving treatment within national benchmarks. At the same time, 51 per cent of New Brunswickers have indicated they are at risk of developing negative mental health impacts due to the social isolation, stress, and economic impacts of the unprecedented COVID-19 pandemic. All data suggests the need for supports and services will continue to climb.

Earlier this year the Government of New Brunswick released the *Inter-departmental Addiction and Mental Health Action Plan Priority areas for 2021-2025*. That plan is based on a client-centric stepped care model that moves along a continuum from promotion of population health and prevention services all the way up to higher intensity and specialized services. The plan is actively being implemented and over the next 24 months will deliver significant improvements.

**IN THE NEXT 24 MONTHS NEW BRUNSWICKERS WILL SEE:**

**FISCAL**

**Q3 2021-22**  
Walk-in services will be introduced in the province’s 14 addiction and mental health clinics.

An overdose prevention service will be implemented to help people with substance use disorders.

**Q1 2022-23**  
Additional beds will open in Campbellton for individuals who need treatment for their mental illness and a substance use disorder.

A new, five-year pilot project designed to prevent youth substance use will launch in several communities provincewide. As part of the project, community and health promotion partners will work together to identify solutions based on key factors that are proven to prevent substance use. Each community’s response will be unique to its specific needs.

The mobile crisis unit will be expanded to further support citizens experiencing an addiction or mental health crisis, and ensure they receive crisis intervention.

New Brunswick recently launched a suite of online mental health services, based on the success of the Bridge the gApp initiative in Newfoundland and Labrador. This addiction and mental health website is designed for adults and for youth and will be further promoted provincewide to increase utilization rates by 20 per cent and provide a timely alternative to traditional services.

**Q2 2022-23**  
A new provincial phone service will be implemented to ensure addiction and mental health crisis response services are available 24 hours a day, seven days a week.

**Q3 2022-23**  
Young people with complex needs who are living in therapeutic foster homes and group homes throughout New Brunswick will have access to a clinical consultation team who will work with the youths, their families and the homes to have a common plan in place to help the individual.

Mental health staff will be working in emergency departments across the province so that people experiencing addiction or mental health crisis receive more timely support through an established mental health-care team and co-ordinated follow-ups with community services.

* Details on participating communities are contained in the Government of New Brunswick report *Inter-departmental Addiction and Mental Health Action Plan Priority areas for 2021-2025*
Support Seniors to Age in Place

New Brunswick seniors value their independence, yet in recent years, more seniors are admitted to hospital beds, away from their homes and loved ones. Currently, almost one in three hospital beds are occupied by seniors who could be experiencing a better quality of life and receiving services tailored for their stage of life and specific needs. The average stay in a nursing home is three years in New Brunswick, double the national average. Within 10 years, over 28 per cent of New Brunswick’s population will be over age 65. Action must be taken now to improve services and supports to seniors both in their homes and in the community.

This action plan will place priority on making it easier for seniors to access social services, primary care providers, the Extra-Mural Program and community support organizations, giving seniors rapid access to the health and social supports they need to live as independently as possible for as long as possible – regardless of their residence. These initiatives are in addition to existing programs that are currently supporting seniors to age in place.

**IN THE NEXT 24 MONTHS NEW BRUNSWICKERS WILL SEE:**

**FISCAL**

**Q3 2021-22**
Eleven special care home sites will partner with the Extra-Mural Program to provide enhanced clinical services to seniors in their homes, including use of technology for routine follows up so that seniors don’t have to leave their home when not necessary.

**Q1 2022-23**
Long-term care staff will join the discharge teams in at least 10 hospitals to ensure that seniors are being transitioned back to their homes with appropriate plans for their ongoing care.

Tablets will be provided to special care homes (currently in use in nursing homes) to connect seniors with loved ones and address loneliness.

**Q3 2022-23**
An additional 10 special care homes will partner with the Extra-Mural Program to provide enhanced clinical services.

**Q1 2023-24**
A further additional 10 special care homes will partner with the Extra-Mural Program to provide enhanced clinical services.

Nursing homes that currently provide support to seniors in the community will be supported to increase the type as well as level of services they provide, helping to combat social isolation and ensuring seniors understand what supports and services are available to them.

Building upon the original pilot project of four nursing homes participating in the Nursing Homes Without Walls project, eight new service locations in rural New Brunswick will begin to provide additional services and supports to seniors.

**Q3 2023-24**
An additional eight service locations in rural New Brunswick will offer services and supports to seniors based on the Nursing Homes Without Walls concept.
**Enablers**

This action plan is designed to begin to immediately deliver improvements that citizens can see and experience. It will only be successful if current ways of working change, namely around people, technology, funding and governance. These are critical building blocks to ensuring a better system longer-term – a system that can continue to grow, improve and be maintained for all New Brunswickers.

The following enablers and corresponding actions must begin to take hold in the coming six to 12 months to ensure the viability of this action plan.
Ensuring there are enough human resources to provide care to New Brunswickers now and in the future requires both transformation and investment. New Brunswick has serious shortages in health-care workers, and is competing not just with neighbouring provinces, but around the world for health-care talent.

About 35 per cent of New Brunswick's family doctors will be eligible for retirement within five years and these doctors will be replaced by younger physicians seeking a greater work-life balance than their predecessors, which includes carrying smaller patient loads than physicians in decades past. This presents a difficulty in a province already challenged to attract and retain physicians, particularly in rural New Brunswick where approximately 72 per cent of physician vacancies exist. This is further intensified in rural francophone New Brunswick, where 85 per cent of Vitalité's vacancies reside.

The current shortage of nurses and other health-care providers predates the pandemic, but the pandemic has made it worse, leading to burnout and early attrition. Currently, over 32 per cent of registered nurses are over the age of 55, with seven per cent over the age of 65.

New Brunswick must be innovative in the following areas:

Recruitment and training – Government will work with New Brunswick's health-care professional regulatory bodies and its post-secondary institutions on three specific goals: developing innovative education and clinical training models; shorter training programs combined with experiential learning; and speeding up the recognition of the foreign qualifications of health professionals trained abroad. The New Brunswick Medical Society will become partners in the province's medical recruitment and retention efforts.

Health, safety and wellness strategy for health-care workers – New Brunswick's health-care providers want to work in a healthy and safe environment. The regional health authorities, EM/ANB and the Department of Health will work together on a strategy to reduce workplace violence, recognize employee efforts and promote greater wellness throughout the health-care system. A safe and healthy work environment will improve employee satisfaction, attract new workers and keep them longer.

Utilize non-traditional providers more in different ways – New Brunswick will increasingly utilize a variety of non-traditional providers to give citizens more timely access to services. These providers will be based in the province, as well as outside of the province to expand the talent pool and leverage virtual appointments. Non-traditional providers include, but are not limited to, massage therapists, reflexologist, chiropractors, dieticians, counsellors, life coaches, and cognitive behavioral therapists.

Reinvigorate volunteer network – The volunteer network in hospitals has weakened in recent years and has been made even more challenging due to the pandemic and additional screening barriers. New Brunswick will actively recruit a strong volunteer network to support our health-care staff and add to the community connections and supports for citizens across the province, particularly our aging citizens and those in rural New Brunswick where health-care shortages are significant.

Standardized roles – Provincewide standardized roles for health professionals will be established to enable more consistent work practices and to ensure that the right people are doing the right job while operating at the full scope their license allows. Other provinces that have established standardized roles, such as Nova Scotia's collaborative care model, realize a more efficient use of resources by optimizing the role of the registered nurse and licensed practical nurse, introducing new roles for assistive support, and strengthening the role of support service staff. Clarified roles for everything from acute bedside care in surgical units to housekeeping for infection control allow every member of the health-care team work to their full potential and contribute to citizen-centric care.

Funding – Funding barriers will be assessed to identify opportunities to support more New Brunswick students seeking to enter into the health-care professions.
Patients and providers are calling for greater use of technology to streamline the day-to-day operations of the health-care system and allow them to be active participants in their care. New Brunswick must be aggressive in the implementation of technology to address waste and inefficiency, and also pave the way for a more integrated health-care system for patients and providers.

**Digital access to personal health information** – Improvements will make it easier for New Brunswickers to take care of their health by bringing services as close as the click of a mouse or the swipe of a smartphone. Citizens will have digital access to personal health information to improve the knowledge of their health, increase confidence in their ability to manage their conditions, and to give them the ability to have more informed discussions with their doctors.

**Virtual services** – Phone and video consultations have worked effectively over the last year, with high adoption rates by both citizens and health-care providers. Virtual care will be expanded to other providers to give citizens flexibility and added access to services, including:
- to allow seniors to stay in their homes for routine check-ups,
- to support citizens pre- and post-surgery,
- to offer online addiction and mental health counselling,
- to provide specialty services.

**Innovative technologies to improve health outcomes** – The health system will aggressively pursue the adoption of technology enabled solutions such as:
- Wearables and home-based monitoring technologies to support patients in their homes and seniors aging in place longer,
- Clinical decision-support AI applications and new surgical tools such as robotic assisted surgery,
- Home-grown innovation by partnering with small and medium enterprises while leveraging tried and tested solutions from around the world. In many cases, these solutions will also help optimize our human resource utilization while creating better care experiences for our citizens.

**Funding**

Health-care costs are rising and will continue to climb into the foreseeable future. In the last provincial budget, allocations to health care increased by 5.2 per cent or $156 million, including $65 million for COVID-19 response. Over the last three years, costs have risen by 10 per cent or $260 million. Long-term care funding is approximately $587 million this year, with an annual growth rate of four to five per cent. Rising service costs, coupled with old and aging infrastructure, requires a clear prioritization, as well as a predictable and flexible multi-year funding model that allows for targeted investment over time in critical areas.

**Allocation model** – Specific guidance will be provided for New Brunswick’s health-care system that defines how much funding the province should be allocating. This will be based on current needs and projected population trends.

**Bridge funding** – A bridge-funding model will be established that clearly identifies the requirements between today’s ‘as is’ funding compared with the improved services and supports as outlined in this plan.

**Trials and rapid improvement projects** – Flexible funding must be made available for trials and pilot projects allowing health-care experts to implement rapid improvements in critical areas and make a positive difference for citizens faster.
Governance

A strong governance model will be required to deliver on this plan and to ensure proper alignment and accountability going forward. Currently, there are various bodies that are responsible for different parts of health-care delivery and a need for greater and consistent citizen engagement on a more regular basis.

**Making change happen** – A Health System Action Task Force will be created in January 2022 to ensure a consistent and coordinated approach to health system transformation. The task force will be accountable to the Ministers of Health and Social Development. Key stakeholders will be involved including from the New Brunswick Health Council, New Brunswick Medical Society, and the New Brunswick Nurses Union.

- **Formal review of governance** – Stakeholders from the various groups that currently govern standards, day-to-day operations, and performance reporting will identify the most effective model going forward. This includes the Department of Health, Department of Social Development, the regional health authorities, the New Brunswick Health Council and EM/ANB Inc.

- **Accountability** – For the first time, the regional health authorities will be provided with an accountability framework that describes the roles of ministers and regional health authorities and specifies responsibilities each has towards the other within the provincial health system.

  The New Brunswick Health Council will collaborate with the Departments of Health and Social Development, the regional health authorities, EM/ANB and Service New Brunswick in the finalization of key performance indicators that will be used to hold the system accountable for its progress. Starting in April 2022, the council will provide quarterly reports on the system's progress.

**Patient voices** – Through the public consultation process, it was very apparent that the authentic patient voice has not been as prominent as it should be to support patient-centric change and improvements. Advocacy groups have the means and the channels to communicate with government, but New Brunswick citizens don't often have an easy way to share ideas and input. A Patient Voices Network will be established through the New Brunswick Health Council to provide citizens with an opportunity to be engaged in matters that impact their health care.

**Five-year vision** – This two-year action plan builds on our pandemic success and will stabilize New Brunswick's health care system. Achieving these critical goals will put our system in a healthier place for further change and innovation.

Our vision for health care extends beyond the two-year timeframe in this document and reflects the priorities of New Brunswickers. By 2026, New Brunswick's health system will have transformed into a network of excellence that emphasizes healthy people living in healthy communities. When they are sick, New Brunswickers will be connected to the high-quality care they need in a timely way. Every community, health-care facility and government department will have a role to play and will understand their role in the greater network. Communities and individuals will feel more informed and will be engaged in the health-care system in a consistent and meaningful way.

At the end of this action plan, the provincial health plan will become an evergreen document, renewed annually and the specific actions shared with New Brunswickers.
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