

The 2024 Pre-Budget Health Stakeholder Forum Report

Recommendations to Stabilize
& Transform New Brunswick's
Health Care System

March 12, 2024

Developed Collaboratively by
New Brunswick Health Care Professionals





New Brunswick
Medical
Society

Société
Médicale
NB
du Nouveau-Brunswick



**NURSE PRACTITIONERS
OF
NEW BRUNSWICK**



**INFIRMIÈRES PRATICIENNES
DU
NOUVEAU-BRUNSWICK**



**NB LUNG
POUMON NB**

NBASW  **ATTSNB**



**Heart & Stroke
Cœur+AVC**

New Brunswick / Nouveau-Brunswick



College of Psychologists
of New Brunswick
Collège des psychologues
du Nouveau-Brunswick

NBAOT
NEW BRUNSWICK ASSOCIATION OF
OCCUPATIONAL THERAPISTS



AENB
ASSOCIATION DES ERGOTHÉRAPEUTES
DU NOUVEAU-BRUNSWICK



New Brunswick
**UNION
SYNDICAT**
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 **CAMRT-ATL**



**Canadian
Cancer
Society**

**Société
canadienne
du cancer**

Priorities & Recommendations at a Glance



Priority 1: Re-engage with health care professionals to support informed and transparent decision-making.

Recommendations:

- 1.1 Reinstatement of the practice of a true pre-budget consultation with health care professionals and conduct it annually.
- 1.2 Create regular opportunities for representatives of all health care professions to engage in meaningful collaboration with the Health System Collaboration Council, providing a clear and accessible path for consultation and a forum to bring forward concerns.
- 1.3 Remove politics from decision-making within the health care system by nominating an apolitical Health System Collaboration Council Chair instead of the Minister of Health. Publish all meeting agendas, minutes and materials.
- 1.4 Reintroduce the practice of consultation and advanced notice for health stakeholders impacted by government decisions to rebuild engagement and collaboration in the sector.

Priority 2: Create and scale multidisciplinary team-based primary care clinics across the province to ensure primary health care access to all New Brunswickers.

Recommendations:

- 2.1 Launch a large-scale, flexible infrastructure and operational funding program to spur the creation and transformation of at least 50 primary care clinics under the Patient Medical Home Model in both rural and urban areas in the 2024-25 fiscal year.
- 2.2 Launch a health care system mapping project to develop a patient-centric navigation service like [Social Supports NB](#) or expand this service to encompass primary health care navigation.
- 2.3 Continue to support improvements to legislation and regulations governing health professions in close consultation with impacted health care professionals.
- 2.4 Invest in improved administrative support for clinicians in acute, primary care and long-term care practices so health care professionals are not wasting valuable time on paperwork.

Priority 3: Prioritize the respect and retention of health care professionals to ensure continuity of service.

Recommendations:

- 3.1 Invest in remuneration, incentives and benefits to ensure New Brunswick's offerings are competitive with those of other Canadian provinces to stabilize the current situation.
- 3.2 Present job offers to all New Brunswick students in high-demand health care fields of study and medical residency programs. Work with the regional health authorities to enhance orientation and mentorship programs for new hires.
- 3.3 Adopt tuition, tax or student loan forgiveness models tied to returning to work in New Brunswick for health care professionals.
- 3.4 Continue to build better pathways for international graduates and health care professionals to practise in New Brunswick.



Priority 4: Prioritize healthy living and preventative care.

Recommendations:

- 4.1 Provide a comprehensive nutritional school food program, along with appropriate in-school support from a permanent team of allied health professionals (i.e., dietitians, psychologists, school nurses, social workers, occupational therapists, etc.).
- 4.2 Invest in new and existing programs, including exercise and physical education programs; mental health education on topics such as bullying and stress management; and education about the detrimental impacts of smoking and vaping.
- 4.3 Create additional partnerships and provide meaningful funding to local governments and non-profits to develop new infrastructure and programs that promote healthy behaviours throughout society, and particularly within the education system.

Priority 5: Fix the root causes of issues in the long-term care system.

Recommendations:

- 5.1 Immediately invest in permanent patient discharge teams that operate on an acute care schedule (seven days per week) in every region of the province.
- 5.2 Explore solutions to promote improved governance, collaboration and break down silos between long-term care and regional health authorities.
- 5.3 Invest in an expanded home care program, working collaboratively with long-term care stakeholders.
- 5.4 Create additional affordable long-term care options for New Brunswickers.

Priority 6: Invest in the digital transformation of the health care sector.

Recommendations:

- 6.1 Commit to fully funding Electronic Medical Records (EMR) systems for every primary care provider in New Brunswick.
- 6.2 Commit to fully funding the implementation of a province-wide clinical information system within New Brunswick hospitals.
- 6.3 Invest in resources to support the rapid expansion of the MyHealthNB portal and integration with a province-wide information system to catch up with the modern world.
- 6.4 Invest in an online database for professional practice reports and health program data to allow health care stakeholders to make objective, data-driven decisions.

Introduction

New Brunswick's health care system is in a state of crisis. Our system was already fragile before the COVID-19 pandemic, and while health care professionals continue to strive to deliver the best possible care to patients, they are unable to fully meet the needs of New Brunswickers **without immediate action** from the provincial government.

On January 18, 2024, in the absence of government-led consultation, the New Brunswick Medical Society (NBMS) and New Brunswick Nurses Union (NBNU) took the initiative to host a Pre-Budget Health Stakeholder Forum in Fredericton, NB. The event brought together representatives from various New Brunswick health care organizations, representing approximately **25,000 health care professionals**, within and outside of the regional health authorities, including those in allied health or clinical support roles.

The forum provided each of New Brunswick's three major political party leaders with an opportunity to share their platform and vision for health care. Premier Blaine Higgs, leader of the Progressive Conservative Party; David Coon, leader of the Green Party; and Susan Holt, leader of the Liberal Party each delivered a presentation and participated in a Q&A.

After hearing from the party leaders, forum attendees were invited to bring forward their unique perspectives and discuss their top priorities to address issues in New Brunswick's health care sector. Together, the group has

identified **six priority areas and accompanying recommendations** that require government focus and investment in the upcoming budget and beyond. If implemented, these initiatives will both **stabilize and transform** New Brunswick's health care system. While some recommendations will require long-term planning and investment, others could be actioned right away, leading to a noticeable impact in the immediate future.

We all know that **New Brunswickers need better access to quality health care**. Our health care professionals have demonstrated that they are eager to **work collaboratively**, explore **innovative new approaches** and **work hard** to help build a better, stronger system for everyone.

Now, we are calling on the provincial government to **listen**, take **accountability** and **put these recommendations into action**.



Priority 1: Re-engage with health care professionals to support informed and transparent decision-making.

In recent years, New Brunswick health care professionals – especially those in less visible roles, such as allied health or clinical support functions – **have not been properly consulted by the provincial government** on key decisions that impact the health care system, including the development of the provincial budget. The professionals who work within the system and keep it afloat each and every day have been left out of these vital conversations and their perspectives and insights have not been considered. **This needs to change.**

Health care professionals have always understood and are in full agreement that **the health care system must put patients first** – they do so every day; however, the needs of **the people working within that system must be taken into account** as well. Ignoring their voices, realities and the expertise they can provide is not acceptable.

During the Pre-Budget Health Stakeholder Forum, which was organized as a reaction to the lack of government-led consultation, all three political leaders spoke of the importance of engaging health care professionals in system-wide changes. Now, we need to see this focus on engagement in action.

Recommendation 1.1: Reinstate the practice of a true pre-budget consultation with health care professionals and conduct it annually

While health care professionals appreciate that the provincial government has established a Health System Collaboration Council to encourage greater collaboration between New Brunswick’s regional health authorities, there is not a clearly identified approach in place to engage with this body.

Recommendation 1.2: Create regular opportunities for representatives of all health care professions to engage in meaningful collaboration with the Health System Collaboration Council, providing a clear and accessible path for consultation and a forum to bring forward concerns.

Further, the council is currently chaired by the Minister of Health, making it subject to political influence.

Recommendation 1.3: Remove politics from decision-making within the health care system by nominating an apolitical Health System Collaboration Council Chair instead of the Minister of Health. Publish all meeting agendas, minutes and materials.

The provincial government must be more transparent in its decision-making processes, demonstrating accountability to health care professionals when implementing major changes. Health stakeholders must be made aware of decisions that will impact their work and have the opportunity to share feedback before changes are actioned.

Recommendation 1.4: Reintroduce the practice of consultation and advanced notice for health stakeholders impacted by government decisions to rebuild engagement and collaboration in the sector.





Priority 2: Create and scale multidisciplinary team-based primary care clinics across the province to ensure primary health care access to all New Brunswickers.

The current primary health care system does not meet the needs of New Brunswickers.

As of January 2024, 23,000 people were registered on the waiting list for NB Health Link, and there are many other New Brunswickers without a primary care provider who are not on the list. **More patients than ever are forced to visit emergency departments** for issues that could be addressed by a primary care provider if they had access, leading to untenable wait times and overcrowding. Ancillary impacts of this situation include growing frustration and declining trust in the health care system among patients, clients, families and residents. These sentiments are then taken out on those working on the frontlines.

Health care professionals agree that the system is broken, but they are not responsible for the current state and design of the system, nor can they address its issues without provincial government intervention. **The current state is the result of a series of short-sighted decisions by provincial governments over decades**, up to and including the present, consistently favouring a focus on the acute care sector instead of preventative and primary care options. It is a sign of a broken system when hospitals become the front door to address primary physical and mental health care concerns. Instead, we need to create and open the right doors across the province. If implemented properly, clinics can help patients navigate available services, get referrals to other services, access care to address their physical and mental health, and reduce the need for emergency department visits.

The provincial government's strategy of blaming administrators or health care professionals for issues in the primary health care system is grossly misdirected and very disrespectful, especially considering the expertise and ability of these roles to positively impact health care reform. More importantly, this approach will

not encourage the collaboration and trust required to fix a generation of under-investment in this sector.

All New Brunswick health care professionals are trained to work in teams and want to collaborate in their respective practices. Our province needs **proper, government-funded, effective and nimble primary care clinics** that include professionals beyond just physicians, nurses and nurse practitioners, such as occupational therapists, dietitians, physiotherapists, pharmacists, psychologists, social workers and more, in addition to family physicians, to meet the **unique primary care needs** of different communities. Health care professionals went into their field to provide care – not to become health care entrepreneurs. The onus is on the public health care system to create the infrastructure for the valuable service they provide.

These clinics must have the **autonomy to determine the services and operating environment** required to meet local residents' primary care needs, decided in collaboration with their home community and the Health System Collaboration Council. **Innovative approaches** are needed to find space for these vital practices. This includes building on existing private and public spaces. There are **successful examples across Canada** of provincial governments providing comprehensive program and financial support to team-based care within the Patient Medical Home model in private practices led by clinicians; non-profit community clinics with shared governance models; and regional health authority-led and staff clinics.



Priority 2: Continued

For more than 20 years, the provincial government has said that creating primary care clinics is a priority, but these clinics will not appear without real investment in programs, infrastructure and supports.

Recommendation 2.1: Launch a large-scale, flexible infrastructure and operational funding program to spur the creation and transformation of at least 50 primary care clinics under the Patient Medical Home Model in both rural and urban areas in the 2024-25 fiscal year.

Another serious concern is that many New Brunswickers do not know how to navigate the health care system and are unaware of some of the primary and preventative care services available to them. There is an opportunity for the Department of Health to support improved patient navigation of the health care system, helping to reduce the impact on emergency departments.

Recommendation 2.2: Launch a health care system mapping project to develop a patient-centric navigation service like [Social Supports NB](#) or expand this service to encompass primary health care navigation.

Considering the strain on the health care system, it is vital that the right care is provided by the right professionals, working to their full scope of practice. To enable this, health care professionals require spaces where they can work to their full scope, as well as legislation that keeps pace with their needs and that of their patients. Legislative changes should always be made in concert with the professionals who are impacted.

Recommendation 2.3: Continue to support improvements to legislation and regulations governing health professions in consultation with impacted health care professionals.

Health care professionals are trained to deliver quality care to their patients, but are spending significant portions of their time on tasks such as record-keeping and administrative work. This is time that could be focused on caring for more New Brunswickers.

Recommendation 2.4: Invest in improved administrative support for clinicians in acute, primary care and long-term care practices so health care professionals are not wasting valuable time on paperwork.





Priority 3: Prioritize the respect and retention of health care professionals to ensure continuity of service.

New Brunswick health care professionals are passionate about the important work they do and go **above and beyond expectations** every day to care for their patients despite the many challenges they face in their workplaces. Unfortunately, they have not received **the appreciation and respect they deserve** from the provincial government in recognition of their dedication. This growing issue has only gotten worse since the COVID-19 pandemic, when health care professionals **showed up and put their own lives** on the line to keep New Brunswickers safe.

Many health care professionals have understandably **reached a breaking point**. They are leaving the province in search of opportunities to deliver quality care in different jurisdictions where they are **properly acknowledged and fairly compensated** for their hard work. Others are experiencing burnout and are choosing to leave the health sector entirely to pursue new careers in different fields.

New Brunswick cannot rebuild its health care system by continuing to disrespect and ignore the insight provided by frontline health care professionals while also offering some of the lowest wages in the country. While recruitment will always be important, the provincial government must immediately turn its focus to retaining the talented and experienced professionals already working in the health care system in New Brunswick and give them **compelling reasons to continue on their career paths in this province while ensuring they feel valued and respected**. We cannot effectively recruit new staff when our existing health care professionals keep leaving the system because they are not sufficiently incentivized to stay. **Without frontline health care providers and the roles that support them, there is no health care system.**

We are losing New Brunswick talent because compensation is not competitive, even compared with our closest neighbours in the Atlantic provinces. The provincial government must invest in retention; otherwise, we will continue to lose our health care professionals to other provinces and jurisdictions that are willing to invest

as a sign of respect. We need to invest in retention incentives for all of our health care professionals instead of private for-profit agencies employing travel nurses from other provinces.

Recommendation 3.1: Invest in remuneration, incentives and benefits to ensure New Brunswick's offerings are competitive with those of other Canadian provinces to stabilize the current situation.

We need to do more to ensure New Brunswick students and medical residents feel that there is a place for them in our public health care system, with the potential for a productive and fulfilling career in a supportive work environment.

Recommendation 3.2: Present job offers to all New Brunswick students in high-demand health care fields of study and medical residency programs. Work with the regional health authorities to enhance orientation and mentorship programs for new hires.

To combat the rising cost of living and other economic challenges, new graduates and health care professionals from New Brunswick need to be incentivized to return to the province to work in our health care system.

Recommendation 3.3: Adopt tuition, tax or student loan forgiveness models tied to returning to work in New Brunswick for health care professionals.

We also need to continue building on current plans that are underway to attract health care professionals from other jurisdictions by ensuring New Brunswick is perceived as an appealing place to work and grow a career.

Recommendation 3.4: Continue to build better pathways for international graduates and health care professionals to practise in New Brunswick.



Transform

Priority 4: Prioritize healthy living and preventative care.

New Brunswickers **need proactive investment, education and information about wellness** to support their long-term physical and mental health and enable them to make positive, healthy choices. Investing in holistic preventative health care from a young age within the education system – starting in early childhood education/kindergarten and continuing through the end of high school – will help New Brunswickers grow and age more healthily. While the results of this investment will not be immediate, it will ultimately have a major impact on **reducing the future costs and strain** on our health care system.

The creation of a universal healthy food program in our schools would have a massive impact on the current and future health of New Brunswickers. While the provincial government committed to introducing a food program by the 2022-23 school year, it has not been implemented to date. Providing all children with equal access to proper nutrition and helping them build healthy eating habits that will serve them throughout their lifetime is essential. Introducing this public policy has the real potential to change our province's trajectory. In every modern jurisdiction outside of North America, it is a given that healthy nations provide good, nourishing food in schools for all their pupils. They do not leave it up to economics, chance or programs of last resort. New Brunswick has the opportunity to be a leader by providing this much-needed service.

Recommendation 4.1: Provide a comprehensive nutritional school food program, along with appropriate in-school support from a permanent team of allied health professionals (i.e., dietitians, psychologists, school nurses, social workers, occupational therapists, etc.).

Further, the provincial government must prioritize investment in new and current programs, delivered by health care professionals, that address some of the most pressing issues that are affecting the health of young people today, and which will lead to continued long-term strain on the health care system if not addressed immediately.

Recommendation 4.2: Invest in new and existing programs, including exercise and physical education programs; mental health education on topics such as bullying and stress management; and education about the detrimental impacts of smoking and vaping.

Recognizing that health care and education professionals are at capacity, the provincial government should explore partnerships with local governments and non-profit organizations such as Heart & Stroke NB, the Canadian Cancer Society, NB Lung, the Canadian Mental Health Association and others to develop new infrastructure and educational programs focused on holistic preventative health care for children and youth.

Recommendation 4.3: Create additional partnerships and provide meaningful funding to local governments and non-profits to develop new infrastructure and programs that promote healthy behaviours throughout society, and particularly within the education system.

Investment in these areas today will lead to a significant **reduction in acute care costs in the future**, laying the foundation for a better health care system for future generations of New Brunswickers as well as a sustainable health care budget. Most importantly, a greater focus on preventative care for everyone will contribute to a **healthier and more vibrant population**.





Transform

Priority 5: Fix the root causes of issues in the long-term care system.

New Brunswick is **lacking when it comes to consistent oversight and collaboration** of the hand-offs between long-term care and the broader health care system. This siloed approach means that currently, the Department of Health does not have a fulsome picture of everything unfolding within the long-term care system and vice versa. Partners are not always equipped with the information needed to inform data-driven decision-making.

Before tackling the larger systemic issues, the provincial government must begin by simply ensuring that administrative and bureaucratic delays are addressed.

Recommendation 5.1: Immediately invest in permanent patient discharge teams that operate on an acute care schedule (seven days per week) in every region of the province.

This issue is impeding the provincial government from fully addressing the high number of alternative level of care (ALC) patients in New Brunswick hospital beds and leading to system issues in the continuity of care for our most vulnerable populations. Further, this issue affects patient access to the entire health care system and is a key contributor leading to crowded emergency departments. It is vital that long-term care stakeholders break down silos and collaborate, including the departments of Social Development and Health, regional health authorities, the Extra-Mural Program, Medavie Health Services and community-based organizations.

Recommendation 5.2: Explore solutions to promote improved governance, collaboration and break down silos between long-term care and regional health authorities.

Many seniors – including a number of ALC patients – could age in place safely and affordably in their own homes with access to proper support and care. Recent Canadian Institution for Health Information (CIHI) data shows that in 2022-23, 13 per cent of new long-term care residents in New Brunswick could potentially have been cared for at home, instead of taking up a bed in a long-term care facility.¹ Long-term care is a continuum that must include community care, which includes provincial government support for informal caregivers, as well as investment in and promotion of home care, transportation and community-based services. Considering our province's rapidly aging population and the lack of infrastructure in our hospitals and long-term care facilities to adequately care for our seniors, we must find ways to ensure robust home care services are widely available and affordable.

Recommendation 5.3: Invest in an expanded home care program, working collaboratively with long-term care stakeholders.

Finally, the most obvious answer to address this pressing issue is to build and staff more long-term care beds and ensuring they are accessible and affordable to the people who need them as soon as possible. We have been pretending this problem can be solved through other solutions for far too long, and we are falling short as a result. We must apply the precautionary principle and plan ahead to ensure we have enough beds to meet our needs.

Recommendation 5.4: Create affordable long-term care options for New Brunswickers.

¹<https://yourhealthsystem.cihi.ca/hsp/inbrief#!/indicators/082/new-long-term-care-residents-who-potentially-could-have-been-cared-for-at-home>





Transform

Priority 6: Invest in the digital transformation of our health care sector.

Health care professionals and their patients must have **immediate access to patient records to ensure quality, efficient and safe care** that takes everyone's medical history into consideration. The benefits of making this information accessible through a digital system will include significant time savings for health care professionals, improved care for patients and greater access to data to help support future workforce planning within the health care sector.

New Brunswick health care professionals recognize that it will take significant time and investment to implement a clinical information system that works seamlessly and is adopted provincewide and appreciate that the provincial government has identified this project as an important area of focus. **Progress on this initiative must be accelerated today** to transform the health care system on a long-term basis.

It is a little-known fact among the general public that family doctors and nurse practitioners who are not salaried employees must pay out-of-pocket for a large share of the installation and ongoing cost of their Electronic Medical Record (EMR) system. This burden is not placed on other clinicians who work within the public system. Addressing this inequality is the perfect place to start in building a more modern health care system.

Recommendation 6.1: Commit to fully funding Electronic Medical Records (EMR) systems for every primary care provider in New Brunswick.

Replacing the clinical information system that supports regional health authorities across the province is an initiative that is now more than a decade overdue. This project has been delayed time and time again because of the provincial government's unwillingness to invest. Without a clinical information system, clinicians are unable to connect to provincial systems and provide the best possible integrated care to their patients.

Recommendation 6.2: Commit to fully funding the implementation of a province-wide clinical information system within New Brunswick hospitals.

Our health care system is falling far behind other sectors when it comes to technology, and we need to catch up as quickly as possible. New Brunswick health care professionals support the ongoing expansion of the MyHealthNB portal, which will eventually integrate data from the provincewide information system to make personal records accessible to all New Brunswick patients.

Recommendation 6.3: Invest in resources to support the rapid expansion of the MyHealthNB portal and integration with a province-wide information system to catch up with the modern world.

Currently, nurses and other health care professionals submit paper reports detailing situations where they are unable to meet their professional standards. The data is not tracked, making it difficult for health care stakeholders to fully understand when and where issues are arising and subsequently address them. Stakeholders also need access to open data associated with the performance of new and existing initiatives and programs to inform future decisions about our health care system.

Recommendation 6.4: Invest in an online database for professional practice reports and open data on health programs to allow health care stakeholders to make objective, data-driven decisions.



Conclusion

New Brunswick health care professionals are united in their desire to deliver better health care to New Brunswickers, but they cannot do it alone. Representatives from 17 of New Brunswick's health care organizations agree that the priorities and recommendations in this report are the necessary first steps to **stabilize and transform** our health care system, leading to both immediate and long-term impacts. Now, the provincial government needs to step up with funding, resources and infrastructure to **take action on these key priority areas**:

1. Re-engage with health care professionals to support informed and transparent decision-making.
2. Create and scale multidisciplinary team-based primary care clinics across the province to ensure primary health care access to all New Brunswickers.
3. Prioritize the respect and retention of health care professionals to ensure continuity of service.
4. Prioritize healthy living and preventative care.
5. Fix the root causes of issues in the long-term care system.
6. Invest in the digital transformation of the health care sector.

New Brunswick health care professionals look forward to the opportunity to **work closely in partnership with the provincial government** during the 2024-25 fiscal year and beyond to help advance these vital priorities, for the sake of all New Brunswickers today and into the future.



Key Initiatives and New Investments

Through a decade of belt-tightening in our health care sector, New Brunswick has clearly reached a breaking point. All things being equal, we currently invest over \$1 billion less than our neighbour Nova Scotia and we are second-to-last in the country when it comes to per capita public health care spending to support our health care system and workforce. This data does not even account for our current population boom, which added more citizens who need access to our system.

We are so broken that we handed over more than \$100 million in 2023 to private-sector travel nurses to patch the system together. We have left the system with little hope, as 40 per cent of New Brunswick physicians are considering scaling back their practices due to the current working conditions. Health care professionals in general are regularly crying out for help.

It's time to get serious. These recommendations will not come close to catching New Brunswick up with the rest of the country – they only represent a five per cent increase, year over year, to the provincial budget – but following through on these proposed initiatives would demonstrate that the provincial government is listening and is ready to move on from a decade of financial austerity to invest in the future of our province.

1.

Keeping the Lights On.

Re-engage with health care professionals to support informed and transparent decision-making.

- \$150M increase to account for normal inflation, which is estimated at 4% for the sector.
- This standard increase is a core requirement for a system that has the dubious honour of being the least funded in Canada following several years of shortfalls.
- This simply keeps the lights on for the system as it is today, paying for necessary maintenance and current salaries for the workforce as it stands.
- There is no major investment required – only goodwill.

2.

Team-Based Care.

Create and scale multidisciplinary team-based primary care clinics across the province to ensure primary health care access to all New Brunswickers.

- \$50M to support the required improvements to space, infrastructure, administrative supports, allied health salaries and ongoing operational costs of at least 50 new team-based clinics across our province.
- \$20M to hire at least 250 additional non-clinical employees within the health system to provide additional support to our health care professionals to expand their capacity to treat and see more patients. All clinicians are currently spending too much time doing paperwork.

3.

Human Resource Stabilization.

Prioritize the respect and retention of health care professionals to ensure continuity of service.

- \$32M to offset inflation and match the primary care stabilization funding given to primary care providers in other comparable jurisdictions, pending the renewal of our remuneration models.
- \$90M to recognize and stabilize the nursing workforce in alignment with other neighbouring jurisdictions.
- \$50M to recognize and stabilize all other health care professionals supporting our system every day and ensuring they are aligned with neighbouring jurisdictions.
- \$20M to catch up with the rest of the country with respect to remuneration tied to clinical teaching as we seek to support more training for health care professionals in our workforce. In some areas, New Brunswick health care professionals are paid a fifth of what other Atlantic provinces pay for the same responsibilities.

4.

Healthy Living and Preventative Care

Prioritize healthy living and preventative care.

- \$50M to ensure that we feed every school child in the province nutritional meals when they are learning. This investment is intended to grow to \$100M per year, or \$5 per school day per child. It would likely be offset by federal investments in this space.
- \$10M for a healthy communities fund to support preventative care initiatives in communities across the province.

5.

Long-Term Care

Fix the root causes of issues in our long-term care system.

- \$8M to support the additional work hours required to support seven-day per week discharge teams in each regional health authority region and ensure our hospitals remain available for acute care patients.
- \$20M per year in support of community initiatives that provide additional support and options for home care.
- One-time capital investment of \$160M to create another 500 long-term care beds and \$37.5M yearly to operate them

6.

Digital Transformation

Invest in the digital transformation of the health care sector.

- \$5M to fully subsidize the cost of Electronic Medical Record software for 800 primary care providers in New Brunswick.
- \$50M per year over 10 years to modernize the hospital information systems.
- \$5M to establish an Office of Digital Health Services within the Department of Health to lead all major transformation in that sector.

Financial Requirements Overview

1. Keeping the Lights On	\$150M
2. Team-Based Care	\$70M
3. Human Resource Stabilization	\$192M
4. Healthy Living and Preventative Care	\$60M
5. Long-Term Care	\$65.5M + \$160M Capital Investment
6. Digital Transformation	\$60M
TOTAL	\$597.5M

(\$400M short of the \$1B investment needed to catch up with Nova Scotia, but a start)



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