Department of Health

ANNUAL REPORT
2024-2025

New Nouveau Brunswick

Department of Health

ANNUAL REPORT 2024-2025

Province of New Brunswick
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TRANSMITTAL LETTERS

From the Ministers to the Lieutenant-Governor

Her Honour The Honourable Louise Imbeault
Lieutenant-Governor of New Brunswick

May it please your Honour:

It is my privilege to submit the annual report of the Department of Health, Province of New Brunswick, for the fiscal year April 1, 2024, to March 31, 2025.

Respectfully submitted,

Honourable Dr. John Dornan, MD, FRCP, MBA
Minister of Health

Her Honour The Honourable Louise Imbeault
Lieutenant-Governor of New Brunswick

May it please your Honour:

It is my privilege to submit the annual report of the Department of Health, Province of New Brunswick, for the fiscal year April 1, 2024, to March 31, 2025.

Respectfully submitted,

Honourable Robert K. McKee, K.C.
Minister responsible for Addictions and Mental Health

From the Deputy Minister to the Ministers

Honourable Dr. John Dornan
Honourable Robert K. McKee, K.C.

Sirs:

I am pleased to be able to present the annual report describing operations of the Department of Health for the fiscal year April 1, 2024, to March 31, 2025.

Respectfully submitted,

Eric Beaulieu
Deputy Minister

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MINISTER OF HEALTH'S MESSAGE

It is my pleasure to present the 2024–2025 annual report for the Department of Health.

Our government is committed to delivering meaningful change and shaping a brighter future for New Brunswick. A key part of this effort is strengthening our health care system, which is why we're taking bold, strategic steps to improve access, enhance quality, and ensure it is more resilient and responsive to the needs of New Brunswickers.

The challenges we face are significant. An aging population, increasing rates of chronic disease, and a shortage of health care professionals continue to place pressure on our system.

But we are responding with determination and collaboration.

The Department of Health—working closely with our partners—has made meaningful progress.

Through 2024-2025, the Department of Health took meaningful steps to improve access to essential health services for New Brunswickers. In November 2024, amendments to Regulation 84-20 under the *Medical Services Payment Act* expanded Medicare coverage to include surgical abortions performed outside hospitals, removing a significant barrier to care. This change reflects our commitment to ensuring timely, equitable access to reproductive health services across the province.

Public Health New Brunswick continued to strengthen its immunization programs by expanding access to publicly funded vaccines. The RSV vaccine was introduced for individuals aged 60 and older living in long-term care facilities, as well as for patients in hospital rehabilitation units and rehab centres. A new pneumococcal vaccine was made available for adults aged 65 and older and for children and, in response to a provincial outbreak of whooping cough, pertussis-containing vaccines were made available at community pharmacies.

Enhancements to emergency medical services and workforce support have also been a priority.

In partnership with the Department of Health, Ambulance New Brunswick positioned a third air ambulance on Grand Manan, improving emergency response capacity in the region. New guidelines were developed to support standardized care by advanced care paramedics during inter-facility transfers, initially benefiting Grand Manan patients and now extended province-wide.

To address staffing challenges in high-demand and underserved areas, particularly rural communities, the department funded 173.10 full-time equivalent positions through Hard-to-Recruit Nursing Incentives, totaling $1.76 million. These targeted efforts have provided immediate relief, improved retention, and contributed to long-term workforce stability across both Horizon and Vitalité Health Networks.

There is still much to do. We are moving towards a system that is more collaborative, more accessible, and more patient centered. We are learning, growing, and adapting—always with the goal of improving the quality of life for everyone in our province.

I am deeply grateful to the staff of the Department of Health, our health networks and partners, and especially our front-line staff for their unwavering commitment to this work. Their dedication is making a real difference in the lives of New Brunswickers and together, we are laying the foundation for lasting improvements that will benefit generations to come.

I look forward to building on our progress in the year to come.

Honourable Dr. John Dornan, MD, FRCP, MBA
Minister of Health

MINISTER RESPONSIBLE FOR ADDICTIONS AND MENTAL HEALTH SERVICES' MESSAGE

As Minister responsible for Mental Health and Addictions, I'm proud to share this year's annual report, showcasing the progress we've made in strengthening care across New Brunswick.

This past year has brought substantial progress, reflecting our commitment to a more compassionate, accessible, and community-focused system.

In July 2024, the department successfully launched the new Prescription Monitoring Program (PMP) province-wide, marking a significant advancement in the safe prescribing and use of monitored drugs such as opioids, stimulants, and sedatives.

This program equips clinicians with real-time alerts, interactive dashboards, peer feedback reports, and task delegation tools to support informed decision-making at the point of care. The PMP is a key initiative in promoting responsible prescribing practices and enhancing patient safety across New Brunswick.

The Department of Health also made important progress in mental health care by revising the process for assessing, treating, and transporting seriously mentally ill individuals under the *Mental Health Act*.

Led by the Psychiatric Patient Advocate Services Branch, this work ensures care is delivered in the least restrictive and least intrusive manner possible, respecting the dignity and rights of patients while improving coordination between facilities.

These updates reflect our ongoing commitment to compassionate, patient-centered mental health services.

I want to thank the dedicated frontline workers, all of our partners and also the staff at the Department of Health for their unwavering dedication and their relentless commitment that recognize the potential every individual has. Those efforts are helping to transform lives and strengthen communities throughout New Brunswick.

Together, we are building a system rooted in connection, continuity, and community. And together, we will continue to move forward, ensuring that every person has access to the care and support they need to thrive.

Honourable Robert K. McKee, K.C.
Minister responsible for Addictions and Mental Health Services

DEPUTY MINISTER'S MESSAGE

On behalf of the Department of Health, I am pleased to present the annual report for the 2024–2025 fiscal year, covering the period ending March 31, 2025.

This report outlines the work undertaken over the past year as we continue to navigate the challenges facing New Brunswick's health care system. The Department remains steadfast in its role of planning, funding, and monitoring the health system to ensure it meets the needs of all New Brunswickers.

We are committed to ensuring that people receive the right care, in the right place, at the right time. To make progress, we have focused on improving access to primary care, reducing surgical wait times, and expanding mental health and addictions services.

Throughout the year, we have worked closely with partners across the health care system to address staffing shortages and foster supportive environments for health care professionals.

Like other jurisdictions across Canada and around the world, we continue to face pressures within the system. However, through collaboration with regional health authorities, EM/ANB, the New Brunswick Nursing Home Association and key stakeholders such as the New Brunswick Medical Society, and the Nurses Association of New Brunswick, we have made meaningful progress.

Together, we are building a health care system that is better staffed, more accessible, and responsive to the needs of New Brunswickers.

Eric Beaulieu
Deputy Minister

GOVERNMENT PRIORITIES

Delivering for New Brunswickers

The priorities the Government of New Brunswick (GNB) has focused on represent the stories and solutions we hear from residents across the province. Our goal is to make a difference and enhance the quality of life for everyone in the province we proudly call home. Together, we are learning, growing, adapting, and discovering new and transformative ways of doing business. GNB is focused on taking the necessary steps to move our priorities forward, and work is being done more efficiently and effectively every day. New Brunswickers are resilient, creative and compassionate people, and by working collaboratively, we can create the brighter future we all deserve. GNB is prioritizing partnerships, and trusting and empowering the people and organizations on the ground working most closely with New Brunswickers to achieve results.

Priorities

GNB is focused on creating a brighter future for all New Brunswickers. To make progress towards this vision, several priorities have been identified within the following areas:

- Health care
- Affordability and housing
- Education
- The economy
- Environment
- Trusted leadership

We invite you to explore the commitments we have made within each priority area, as well as updates on our achievements and the metrics we use to measure success. For more information, visit: gnb.ca/accountability.

HIGHLIGHTS

During the 2024-2025 fiscal year, the Department of Health focused on these government priorities:

- The new Prescription Monitoring Program (PMP) was implemented provincially in July 2024. The PMP focuses on monitored drugs such as opioids, stimulants, and sedatives, and supports clinicians at the point of care with monitored drug alerts, dashboards, peer feedback reports, and task delegation.
- In November 2024, the department brought forward the changes required to improve access to abortion services by amending Regulation 84-20 under the *Medical Services Payment Act* to expand Medicare coverage to surgical abortions performed outside hospitals.
- The *Health Facilities Act* came into force, creating opportunities for improved access to minor surgical procedures.
- Public Health New Brunswick expanded the publicly funded vaccine program. The RSV vaccine was made available to those aged 60 years and older living in long-term care, rehabilitation patients in hospital, and rehab centres. A new pneumococcal vaccine was made available for adults aged 65 years and older and children.
- To assist in the management of the provincial outbreak of whooping cough, the vaccine to protect against pertussis was made available at community pharmacies and work was undertaken to have the vaccine to protect against measles available in pharmacies early 2025-26 fiscal year.
- Wastewater surveillance was expanded to 11 sites province-wide, providing valuable information on the spread of respiratory illnesses.
- The New Brunswick Cancer Network, in collaboration with Pallium Canada, expanded access to quality palliative care training opportunities in New Brunswick's health care system.
- Ambulance New Brunswick, in partnership with the Department of Health, positioned a third air ambulance on Grand Manan. The Ambulance and Transport Services Branch established guidelines to support enhanced, standardized care by advanced care paramedics when moving patients between facilities. These guidelines were initially applied to Grand Manan patients and extended to the entire province for land ambulance.
- The Psychiatric Patient Advocate Services Branch completed the revision of the process respecting the principles under the *Mental Health Act* for the least restrictive and least intrusive assessment, treatment, and transportation of seriously mentally ill individuals between facilities.
- In fiscal year 2024–2025, 173 full-time equivalent (FTE) positions were funded, totaling $1.76 million, through Hard-to-Recruit Nursing Incentives to support registered nurses and nurse practitioners in high-demand and underserved areas, particularly rural sites. These targeted incentives play a critical role in providing immediate staffing relief, enhancing retention, and maintaining competitiveness in a tight labor market. By addressing workload pressures and ensuring flexible coverage, the program also contributes to improved staff morale and long-term workforce stability across both Horizon (82.1 FTEs) and Vitalité Health Network (91 FTEs).

PERFORMANCE OUTCOMES

The information below outlines some of the department's priorities and how we measured our performance.

Outcome #1: Connecting More People with Primary Health Care

The 2021 New Brunswick Health Plan, *Stabilizing Health Care: An Urgent Call to Action*, focuses attention on stabilizing and rebuilding New Brunswick's health care system to be more citizen-focused, efficient, accountable, inclusive, and service-oriented. Strong primary health care ensures that citizens can get the health care they need when they need it and in the right place by the right provider.

Why is it important?

Many people across New Brunswick are currently waiting for access to a family doctor or nurse practitioner, which is causing strain on emergency departments and walk-in clinics while negatively impacting people's wellbeing. Access to primary health care 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.

Overall Performance

In New Brunswick, 77 per cent of citizens have a primary care provider, either a family doctor or a nurse practitioner, and 34.2 per cent of citizens have access to their provider within five days (2024 edition of the Primary Care Survey, New Brunswick Health and Senior Care Council).

Initiatives or projects undertaken to achieve the outcome

The Department of Health, in collaboration with health care partners and communities across the province, continued work on several initiatives to improve access to primary care with innovative new approaches.

NB Health Link

NB Health Link is the provincial wait list for New Brunswickers without a primary care provider (family doctor or nurse practitioner), replacing Patient Connect NB. It also offers people from the wait list access to a team of health care professionals who can care for them until they can secure a permanent primary care provider. The program offers the same services that a patient would receive if they were on the roster of a family practice, including treating many common medical conditions, prescribing medications, ordering tests, and making referrals for specialized care. NB Health Link clinics can be found in every zone of the province. Patients who are registered with NB Health Link, as well as those who are waitlisted, are all on the list to be permanently matched with a care provider. Those registered with NB Health Link have access to the program's network of physicians and nurse practitioners while they wait to be permanently matched, while those who have been waitlisted will have access to the program's services once registered with NB Health Link. NB Health Link is working with the regional health authorities, the New Brunswick Medical Society, and many others in the health system to increase their capacity and therefore offer services to as many patients as possible who are registered for services. As of March 31, 2025, there were 64,618 patients registered with the NB Health Link program, with an additional 50,125 patients on the wait

list for a total of 114,743 patients. In fiscal year 2024-2025, 13,085 patients were matched to a permanent doctor or nurse practitioner.

Expanded Role of Pharmacists

The department continues to implement a program that began on October 1, 2021, where pharmacists are publicly funded to assess symptoms and prescribe medication for a variety of common ailments. This initiative gives eligible New Brunswick residents access to treatment at participating pharmacies without needing to attend a doctor's office or after-hours clinic. As of March 31, 2025, pharmacists were funded for 12 services and common ailments and had treated or provided service some 207,145 times:

SERVICES/COMMON AILMENTS	2024-2025
Urinary Tract Infection (UTI)	10,819
Prescription Renewal	181,036
Contraception	1,843
Shingles (Herpes Zoster)	1,495
Cold Sore (Herpes Labialis)	2,345
Eczema	773
Dermatitis	705
Mild Acne	645
Impetigo	442
GERD	957
Lyme Disease	735
Conjunctivitis	5,350
TOTAL	**207,145**
MONTHLY AVERAGE	**17,262**

The Pharmacy Care Clinic pilot project which began as a 12-month pilot in August 2023 concluded in February 2025. The project saw pharmacists at six community pharmacies provide chronic disease medication management for diabetes, chronic obstructive pulmonary disease (COPD), asthma and cardiovascular disease (CVD), as well as assessing and prescribing for Group A Strep, using point of care testing when needed.

Following a comprehensive, independent evaluation of the pilot project, the Department of Health has chosen to focus on integrating community-based pharmacists into collaborative care teams, or family health teams, and primary care provider practices for chronic disease management.

For the year ending March 31, 2025, the pharmacists in these clinics had provided services for the following conditions during the 2024-25 fiscal year:

SERVICES/COMMON AILMENTS	2024-2025
Asthma	78
COPD	28
Cardiovascular Disease	1,222
Diabetes	644
Strep A	1,686
TOTAL	**3,658**

eVisitNB

Since January 2022, New Brunswickers with a valid Medicare card can access virtual primary care services through eVisitNB at no charge. 302,824 services were offered by eVisitNB in the 2024-2025 fiscal year.

Family Medicine New Brunswick

In an effort to support primary care physicians' transfer from solo to team-based practice, funding enhancements were introduced for the Family Medicine New Brunswick (FMNB) program in July 2023, including overhead and electronic medical record support, block funding for integration of nursing and nurse practitioners, funding for allied health professionals, and an after-hours premium.

The new incentives led to an increase during the 2024-2025 fiscal year from 11 teams to 20 teams and from 56 physicians to 84 physicians joining the program**.**

As of March 31, 2025, a total of 101,944 patients were rostered to an FMNB practice, up from the starting point of 53,678 patients at the end of fiscal year 2023-2024. In addition, the program has seen an:

- Increase of nurse practitioners working with FMNB teams from 1 to 6
- Increase of nurses working with FMNB teams from 22 to 29
- Increased access to allied health services – from 3 teams providing access to 8 allied health professionals to 9 teams providing access to 26 allied health professionals

The graphic below offers the number of FMNB teams per location.

LOCATION	NUMBER
Bathurst	1
Edmundston	2
Fredericton	5
Harvey	1
Minto	1
Miramichi	1
Moncton	1
Oromocto	1
Perth-Andover	1
Rothesay	3
Saint Andrews	1
Sussex	1
Woodstock	1

Primary Care Transformation

In the 2024–2025 fiscal year, a total of $13 million was allocated to the Vitalité Health Network to support the co-creation and expansion of local family health teams.

Key developments include:

- Team Expansion: The number of family health teams increased from 12 at the start of the fiscal year to a projected 26 teams by March 2025.
- Provider Growth:
    - Physicians and nurse practitioners: Increased to 156 FTEs, up from 64
    - Registered nurses and licensed practical nurses: Increased to 78 FTEs, up from 36
    - Allied Health Professionals (AHPs): Increased to 6 FTEs, up from 3
- Approximately 154,145 patients were attached to family health teams, which includes an additional 28,000 new patients rostered.
- Access Improvements:
    - 7 teams offer access to a third next available appointment within five days
    - 5 teams provide after-hours access.

An investment of $8 million was directed to Horizon Health Network to enhance primary care services in three priority communities: Sackville, Sussex, and an expansion of the Brookside Clinic in

Fredericton. Approximately 9,937 patients are now attached to those three sites. Along with encouraging a shift toward family health teams, Horizon has made investments to their existing 46 community health centres to improve access to primary care.

Outcome #2: Improve Access to Addiction and Mental Health Services

As stated in the provincial health plan, the *Inter-Departmental Addiction and Mental Health Action Plan – Priority areas for 2021–2025* recognized the need for improving access and matching individuals to appropriate addiction and mental health care. This plan established a framework to guide and align initiatives and priorities, as well as to foster increased collaboration among our stakeholders and partners in the delivery of addiction and mental health services.

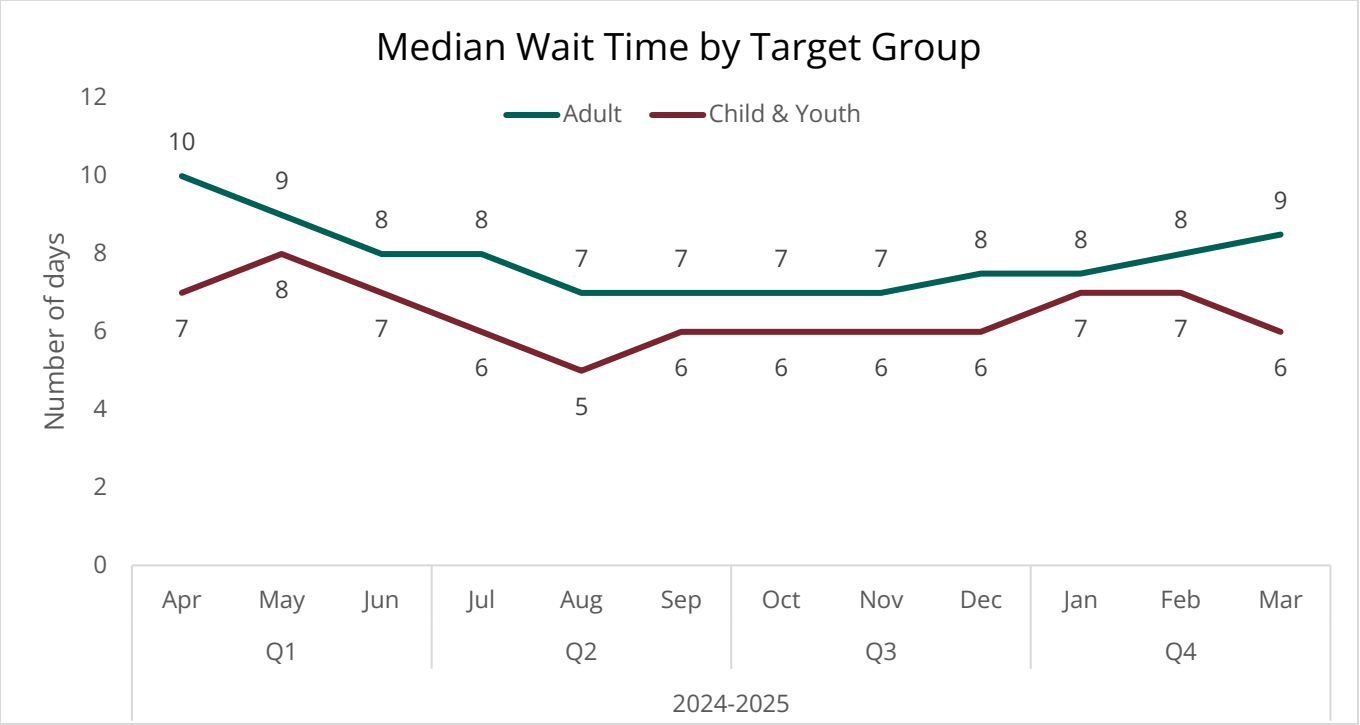
Why is it important?

The *Inter-Departmental Addiction and Mental Health Action Plan* indicated that over the previous five years there was a 16 per cent increase in demand for addiction and mental health services (9 per cent for adults and 33 per cent for youth). Wait times for new high-priority addiction and mental health referrals were on the rise, with less than 50 per cent of high-priority cases receiving treatment within national benchmarks. This, coupled with an estimated 51 per cent of New Brunswickers identified as being at risk of developing negative mental health impacts because of the unprecedented COVID-19 pandemic, suggests that the need for services will continue to climb.

Overall Performance

The department introduced several resources to improve access, leading to the following results:

- The open access service of *One-at-a-Time Therapy* significantly reduced median wait times in all community addiction and mental health settings for both adults and children/youth. By adding 16 new clinical lead positions and 36.5 new frontline providers, regional health authorities have maintained or improved access to services, achieving a median wait time of seven days for adults and six days for children and youth by the end of fiscal year 2024-2025. *One-at-a-time Therapy* is an addition to the continuum of care as a low-barrier, on-demand service, and is designed to be available in a person's time of need.



- The NB Addiction and Mental Health Helpline, 1-866-355-5550, was officially launched in July 2023. This service provides 24 hours a day, seven days a week crisis response services, psychosocial support and navigation to addiction and mental health services to New Brunswickers. Since the launch of the helpline, it has received more than 50,000 calls and over 13,000 referrals were made to government or community services. Of the specific urgent crisis related calls, 83 per cent were diverted from the emergency departments by addressing the crisis and working collaboratively with Addiction and Mental Health Mobile Crisis Services.

- Since 2021, 18 new positions have been added to Mobile Crisis Services to ensure access to services across the province and to further support citizens experiencing an addiction and or mental health crisis. Mobile Crisis Teams consist of addiction and mental health clinicians who provide assessments, specialized interventions, stabilization and direct linkages to outpatient services and outreach services for clients and families experiencing important emotional distress relative to addiction and mental health. A total of 1,611 interventions were conducted in partnership with police and RCMP (province-wide) in 2024 with an average of 77 per cent of crises that were managed in the community, thus preventing an emergency department visit or a police apprehension.

- Investments in resources and services were made in emergency departments to enhance response for individuals experiencing addiction and or mental health crisis. A total of 70 positions have been added to ensure 24-hour coverage. Results have demonstrated a 13 per cent reduction in mental health and addiction patient visits to the emergency department between 2020 and 2024.

- Major efforts were made to improve access to addiction services. The concurrent live-in treatment centres at Ridgewood and the Centre for Hope and Harmony have undergone

significant transformation of their facilities and with their service delivery to better align with best practices and population needs. These programs now provide comprehensive treatment for individuals experiencing concurrent substance use and mental health disorders.

- Outpatient withdrawal management (OWM) services were also introduced in the province of New Brunswick, which builds on existing addiction treatment services like the Opiate Agonist Treatment (OAT) programs by introducing alternative approaches to service delivery for individuals in New Brunswick experiencing harm related to alcohol. This new service has started being implemented in Edmundston, Tracadie, Fredericton, and Moncton. The service will continue to be implemented in other health zones in 2025-2026.

Integrated Youth Services

The province has established community and philanthropic partnerships for the funding, development, and implementation of NB Youth Wellness Hubs. Seen internationally as a promising practice model for service provision, this approach holistically provides health, social, wellbeing, educational, and cultural services in one youth friendly location. New Brunswick is part of a national federation which serves as a community of practice in support of this pan-Canadian movement. Led by the Canadian Mental Health Association of New Brunswick, foundational support teams have been established and sites and their respective partner organizations have been identified, with the three initial sites providing services to 261 unique youth via a total of 513 visits during Q4.

First Nations Initiatives

The Department of Health is partnering with other GNB departments to collaborate with all First Nations communities in the co-creation of Indigenous-led multidisciplinary teams to serve children and youth. These community-based teams are customized in composition and care model to meet the specific needs of each community. Implementation is at various stages across the province with several communities having reached full implementation of teams whose members are currently providing direct services. So far, more than 200 First Nations youth have received these newly available services provided in a culturally appropriate manner. The Department of Health has also engaged the services of an Indigenous psychiatrist on a long-term basis to provide virtual psychiatry services to Indigenous youth throughout the province, not only adding a cultural component, but also directly impacting access to this service. 156 psychiatric consultations were provided within a 12-month period.

Community Partners

The province engages many community organizations in order to leverage existing skills and expertise to provide a variety of services to reach the most New Brunswickers possible. Some of these include direct counselling services, Atlantic Wellness, Partners for Youth Connect, Accès Santé Jeunesse, and peer support and mentor programs such as YouTurns and Access Open Minds Elsipogtog. Establishing partnerships not only directly impacts access but also enhances the continuum of supports and services.

Planet Youth New Brunswick

Planet Youth is a cross-sector substance use-prevention program that incorporates the Icelandic Prevention Model. This model has contributed to a decrease in drug and alcohol use among young

people in Iceland and other countries around the world. Since 2022, New Brunswick has committed to implementing Planet Youth as a five-year pilot project in four initial locations: Woodstock, Saint John, Kent County, and the Acadian Peninsula.

A major component of the model is the administration of a survey that collects data from local youth about their substance use habits and their interaction with the following environments: school, leisure, peer, family, and community. Community coalitions use this data to plan and develop action plans that aim to reduce risk factors and build protective factors that influence the prevalence of substance use among youth.

The first Planet Youth survey was implemented in pilot site communities in February 2023 and the second in April 2025. Some common themes emerged across the four sites, including increasing accessibility to leisure activities for youth. Community coalitions are currently incorporating 2025 survey data into a revised action plan that will be implemented over the coming year. An evaluation is underway to examine key indicators for success including implementation fidelity and examination of influential policy environments on youth substance use. This evaluation will inform recommendations on the future of Planet Youth in New Brunswick.

Outcome #3: New Brunswick has a sustainable health and long-term care workforce to meet health system needs

Recruiting and retaining nurses, physicians, allied health professionals, and long-term care workers remains a top priority for New Brunswick. To guide this work, the province is developing a collaborative health and long-term care workforce strategy that provides the foundation and roadmap for long-term change. The strategy focuses on strengthening retention, growing the talent pipeline, and improving recruitment practices through innovative and coordinated approaches that reflect the evolving needs of New Brunswickers. Furthermore, as Canada's only officially bilingual province, ensuring equitable access to services in both English and French remains a guiding principle of workforce planning and recruitment efforts.

Strengthening collaboration and shared commitment among key stakeholders remains essential to achieving success both now and in the future.

By fostering and maintaining strong partnerships with employers, unions, regulators, and all levels of government—municipal, provincial, and federal—the goal is to sustain a unified approach that supports health care recruitment and retention efforts.

Work is also underway to improve access to health workforce data across sectors. Enhanced data sharing and forecasting models will strengthen planning, support evidence-based decision-making, and ensure strategies remain responsive to evolving workforce needs.

Why is it important?

All provinces and territories continue to report shortages in health human resource (HHR) supply. The effect of the pandemic, coupled with population growth and rising demand for services, have increased strain and workload across the system.

In addition, barriers to gaining access to primary care and long-term care in an efficient manner, are also reflective of the historic increase in the province's population growth. Attaining over 800,000

individuals who chose New Brunswick as their place to study, live, work, and play has further fueled the urgent speed of the effort.

New Brunswick must continue to be open to pivot, be competitive, and remain innovative as the future workforce is constantly evolving. It must also stay true to its values in being human centred in its approach to sustaining and showcasing our vibrant and diverse communities.

Overall Performance

New Brunswick has made significant strides toward strengthening its health and long-term care workforce through strategic recruitment, retention, and training initiatives. The Talent Recruitment Division's mandate is designed to address current shortages and future needs and must involve broad collaboration, innovative approaches, and targeted actions. Below are key achievements and initiatives undertaken by the division to support the province's health system.

Events & Outreach

- Co-hosted over 300 recruitment and candidate engagement events across New Brunswick, Canada, and internationally, in collaboration with provincial partners and employers.

Physician Recruitment

- Recruited 170 physicians (64 net new), exceeding the initial target of 120.
- Introduced 4 new specialty residency seats (1 Internationally Trained Physician Family Medicine seat, 2 Family Medicine seats in Miramichi (rural stream), and 2 additional Integrated Family Medicine / Emergency medicine seats).

Incentives & System Enhancements

- 154 recruitment incentives allocated to physicians in fiscal year 2024–2025:
    - General Practitioners: 49
    - Emergency Room Physicians: 11
    - Specialists: 94
- Clinical Assistant roles expanded:
    - 27 started in 2024–2025
    - 3 additional in April 2025

Medical Student Engagement & Training

- Awarded 60 bursaries through the Summer Observership/Research Program to 1st and 2nd year medical students (Vitalité & Centre de formation médicale du Nouveau-Brunswick [CFMNB]).
- In 2025, 53 medical students completed their undergraduate training:
    - Dalhousie Medicine New Brunswick: 29 graduates
        - 43% entered Family Medicine residencies
        - 57% pursued other specialties
    - CFMNB: 24 graduates

- 42% entered Family Medicine residencies
- 58% pursued other specialties

Clinical Assistants

Internationally trained physicians are being integrated into New Brunswick's health system through the clinical assistant licensing pathway. Clinical assistants work under the supervision of licensed physicians, providing medical care and support in hospitals, clinics, and other clinical settings. Their responsibilities can include assisting in surgeries, conducting patient assessments, and participating in on-call rotations. In 2024–2025, the Talent Recruitment Division supported the recruitment and retention of 27 net new clinical assistants across the province.

Practice Ready Assessment

The Practice Ready Assessment New Brunswick program (PRA-NB) provides an alternate route to licensure for internationally trained physicians in family medicine offered through the College of Physicians and Surgeons of New Brunswick with the support of GNB and the collaboration of multiple provincial and national partners.

PRA-NB allows eligible physicians who have completed their medical training and practiced independently abroad to participate in a clinical field assessment over a period of 12 weeks, which evaluates if they have the knowledge, skills and suitability to provide safe care for patients in the province. The program is offered in both English and French, allowing candidates to take part in the assessment in one of the official languages of the province.

PRA-NB is part of the Medical Council of Canada (MCC) National Assessment Collaboration (NAC) PRA group, joining eight other participating provinces. Provincial PRA programs and the MCC collaborate on the NAC's pan-Canadian framework to develop and maintain common standards and materials for delivering and administering practice-readiness assessments. This pan-Canadian collaboration ensures internationally trained physicians experience fair and comparable assessments across Canada.

With funding support from the Talent Recruitment Divison, 10 internationally trained physicians successfully completed the assessment in 2024-2025 and are now practicing in New Brunswick.

Recruitment of nurses

Government's efforts to support the recruitment and training of nurses included:

- Expediting the registration process for nurses working across Canada to ensure nurses working in other jurisdictions can work in our province sooner.
- Continuing to work on implementing an expedited process for the registration and licensing of internationally educated nurses.
- Establishing the *Step Up to Nursing* learning model to help produce more LPNs and RNs. The initiative is a workplace-based, wage-supported learning model where participants work part-time in the health care system while completing one of two program streams: from personal support worker (PSW) to LPN, or from LPN to RN.
- Establishing navigation services for internationally educated nurses.
- Increasing the number of seats for bridging programs that help LPNs apply directly to a Bachelor of Nursing program.
- Doubling the seats in the University of New Brunswick's master's program for nurse practitioners from 10 to 20.

- Expansion of the nurse practitioner program at the Université de Moncton from part-time to full-time and increasing the number of annual graduates from three to 12.
- Officially launching Beal University's Bachelor of Science in Nursing program at Horizon's Sackville Memorial Hospital in January 2025, enhancing educational partnerships with Beal University and Oulton College.

Long-Term Care

Government efforts to support the recruitment, retention, and training of long-term care professionals included:

- Implementation of Candidate Profile Bank using BlackBerry Workspaces Tool
    - Launched a curated platform for Long-Term Care (LTC) employers to access pre-screened international candidates eligible for RN, LPN, and RA roles, now used by 55 per cent of employers across the sector.
    - Ongoing development of information sessions and support tools to enhance employer engagement.
- Strategic Recruitment Initiatives
    - Initiated a new regional and national strategy to attract talent for LTC roles.

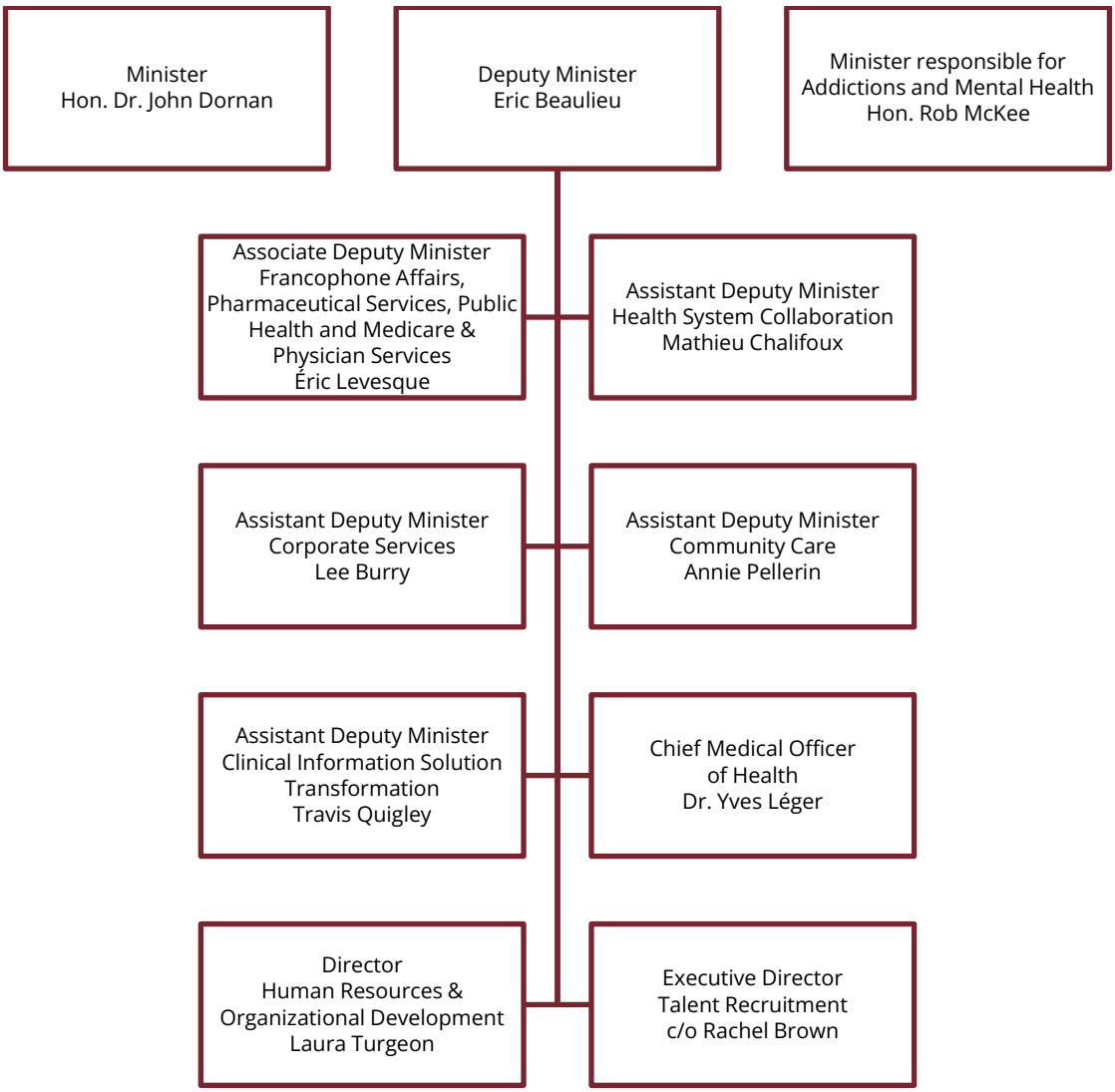
International Recruitment

- Celebrated the graduation of 10 PRA candidates, the first cohort of its kind in Canada, all now practicing family medicine in New Brunswick.
- In 2024-2025, over 350 job offers were made to candidates on international missions, including:
    - 34 accepted job offers for nurses and resident attendants to work in long-term care from the Philippines Mission in March 2025.
    - 24 accepted offers for nurses and personal support workers to work in long-term care and Vitalité Health Network from the Destination Canada France Mission in February 2025.
    - 30 accepted offers for paramedics from the United Arab Emirates and Qatar Mission in February 2025.
    - 65 accepted offers for nurses and resident attendants to work in long-term care from Morocco and Tunisia, in September 2024.
    - 69 accepted offers for nurses to work at Vitalité Health Network from Morocco from two missions in 2024-2025.
- Expanded into three new international markets: Indonesia, Singapore, and Tunisia.
- Negotiated a Memorandum of Understanding (MOU) with the Indonesian government.
- Over 800 clients enrolled in the Internationally Educated Nurse Funding Program, supporting international candidates entering the NB health care system.

OVERVIEW OF DEPARTMENTAL OPERATIONS

The mission of the Department of Health is to keep people healthy, prevent illness, and provide timely and appropriate health services. This is accomplished by empowering employees, health professionals, and partners to transform the system to focus on the health and well-being of New Brunswickers.

High-Level Organizational Chart



DIVISION OVERVIEW

FRANCOPHONE AFFAIRS, PHARMACEUTICAL SERVICES, PUBLIC HEALTH, AND MEDICARE & PHYSICIAN SERVICES

Overview

The **Francophone Affairs, Pharmaceutical Services, Public Health and Medicare & Physician Services Division** has oversight of public health programs and services. It likewise oversees activities related to pharmaceutical services, as well as Medicare and Physician Services. The division also ensures the delivery of quality health services in both official languages to all New Brunswickers.

The **Pharmaceutical Services Branch** manages two publicly funded drug programs: the New Brunswick Prescription Drug Program and the New Brunswick Drug Plan. It is responsible for the development and delivery of pharmaceutical policies, programs and services; sets strategic direction and policies for publicly funded drug programs and initiatives; and manages and monitors drug program-related agreements. The branch also provides consultative services to other divisions of the department.

The **Medicare and Physician Services Branch** plans, develops, implements, and oversees activities related to Medicare Registration and Eligibility, Medicare Insured Services, and Physician Remuneration.

The **Public Health Branch** is responsible for the direction of public health programs working collaboratively with the Office of the Chief Medical Officer of Health, the regional health authorities and other government and non-government partners. Its core functions are health protection, disease and injury prevention, surveillance and monitoring, health promotion, public health emergency preparedness and response, and population health assessment. The PH Branch consists of three units:

- The **Prevention and Control Unit** focuses on prevention of communicable diseases, as per the *Public Health Ac*t, injuries, problematic substance use and related harms and works with OCMOH to provide incident command for provincial communicable disease outbreaks. The unit oversees the publicly funded vaccine program including supply and distribution.
- The **Well-being, Legislation and Standards Unit** supports the development of legislation, policy, and programs that protect health and promote population health and well-being. Program areas include substance use prevention, food safety, health equity, healthy growth and development, and One Health.
- The **Operations and Support Unit** supports the business operations and logistics required for the execution of the New Brunswick Immunization Program. This includes the management of the Public Health Information Solution, the Vaccine Operation Centre, and the Provincial Vaccine Scheduling System. The unit also provides health information support and program support to other Public Health units and assists in the development of policy and programs.

HEALTH SYSTEM COLLABORATION

Overview

The **Health System Collaboration Division** has oversight of programs and services across the continuum of acute health care within the two regional health authorities and for services delivered by EM/ANB Inc. The division also oversees the Health Emergency Management Branch as well as the Psychiatric Patient Advocate Services Branch.

The **Acute Care Branch** provides oversight of hospital operations, working with the regional health authorities on the planning and delivery of acute health care services and related provincial programs, including Trauma NB, the NB Heart Centre and Perinatal NB. The branch is directly responsible for the New Brunswick Cancer Network, which manages an evidence-based strategy for all elements of cancer care, including prevention, screening, treatment, follow-up care, palliative care, education and research.

The **Home Care Branch** is responsible for the Extra-Mural Program (EMP) – one component of the services offered by EM/ANB Inc. EMP is a provincial home health care program with a mission to provide a comprehensive range of coordinated health care services for individuals of all ages for the purpose of promoting, maintaining or restoring health within the context of their daily lives, and to provide palliative services to support quality end of life care for individuals with progressive life-threatening illnesses. The branch also supports other out-of-hospital and home-based care programs, including residential hospice services.

The **Ambulance and Transport Services Branch** supports the delivery of safe, appropriate ambulance services by EM/ANB Inc. This is accomplished through planning, funding and monitoring of the ambulance system and includes consideration of the types and numbers of vehicles that are staffed across the province, including land and air ambulances and specialty transport and support units. The branch also sets standards, completes ambulance inspections, and provides medical direction for ambulance services.

The **Health Emergency Management Branch** ensures that the Department of Health is prepared for major events affecting the health care system, ensuring comprehensive internal preparedness, mitigation, response, and recovery efforts that are aligned and connected with emergency management activities within the health care system and with other sectors of government.

The **Psychiatric Patient Advocate Services Branch** is legislated under the *Mental Health Act* to offer advice and assistance to persons who are detained involuntarily due to serious mental illness. Responsibilities include informing patients of their rights, representing the patient's interests at tribunal and review board hearings and ensuring that the *Mental Health Act* and the rights of patients are always respected.

CORPORATE SERVICES

Overview

The **Corporate Services Division** is dedicated to advancing strategic priorities and operational excellence. It oversees key branches including Strategy and Priority Management, Innovation and eHealth, Shared Analytics, Corporate Support and Infrastructure, Financial Services, Policy and Legislation, and Federal-Provincial-Territorial Relations and Atlantic Collaboration. This division plays a crucial role in driving the department's mission by integrating strategic oversight, innovative solutions, and collaborative efforts across these essential areas.

The **Strategy and Priority Management Branch** supports strategic planning and alignment within the department and across the health system. It leads the implementation and management of departmental and provincial priorities while driving strategic planning, performance measurement, and continuous improvement. It also leads engagement efforts among internal staff, external partners and stakeholders in the work of the department.

The **Innovation and eHealth Branch** is responsible for the overall strategic alignment, design, implementation, and support of corporate system-wide digital solutions and services to achieve optimal health system performance. The branch focuses on digital health solutions, prioritizing quality care for all citizens of New Brunswick and promoting clinical value in the delivery of eHealth solutions to citizens, clinicians and administrators within New Brunswick's health care system. The branch provides expertise in the areas of innovation, digital health strategy and planning, enterprise architecture, IT project management, change management and business solutions support, to ensure the successful delivery of digital health solutions.

The **Shared Analytics Branch** supports the Departments of Health and Social Development in achieving their strategic goals of high-quality data and data systems, conducting statistical and quantitative analyses, creating explanatory and predictive models, and evaluating machine learning and AI algorithms. These actions foster evidence-based decision-making in the planning, management, and accountability of the health care system and the Department of Social Development's operations**.**

The **Corporate Support and Infrastructure Branch** includes three primary functional units. The Health Facility Planning Unit is responsible for the planning and design of additions, expansions, and renovations to New Brunswick's health establishments. The Departmental Services Unit oversees departmental procurement, contract management, security, vehicle management and communication services. Lastly, the branch is also responsible for privacy, records and information management and third-party liability, which recovers health care costs associated with personal injury claims caused by negligent acts.

The **Financial Services Branch** is responsible for budgeting and financial reporting within the department. Its duties include reviewing budget proposals, preparing budget submissions and quarterly statements, and forecasting revenues and expenditures. The branch also conducts physician audits, performs financial analyses, and supports other branches with costing and strategic financial advice.

The **Policy and Legislation Branch** serves as a support for the department in developing the public policies that underpin programs and operations and develops public legislation related to health. The branch prepares responses to requests under the *Right to Information and Protection of Privacy Act* and coordinates appointments to the agencies, boards and commissions within the

responsibility of the department. The branch supports the ministers in meeting obligations to the Legislative Assembly and its committees, provides legislative oversight of private health professions, and manages ministerial correspondence. Finally, the branch coordinates requests for legal opinions and acts as a point of contact for litigation and human rights complaints involving the department.

The **Federal-Provincial-Territorial Relations and Atlantic Collaboration Branch** is the department's lead for intergovernmental relations with the federal government and other provinces and territories. The branch supports the ministers and deputy minister in advancing New Brunswick's priorities at health ministers' meetings and council of deputy ministers' meetings. The branch collaborates with Atlantic colleagues to identify potential opportunities for the advancement of Atlantic priorities as identified by ministers and deputy ministers. The branch is responsible for providing New Brunswick's input to the federal government's *Canada Health Act* annual report.

COMMUNITY CARE

Overview

The **Community Care Division** has oversight of community health care programs and services for primary health care and addictions and mental health services. The division ensures the delivery of services in community to all New Brunswickers.

The **Addiction and Mental Health Services Branch** is responsible for the planning, funding and monitoring of provincial Addiction and Mental Health Services and works collaboratively with the two regional health authorities, who are responsible the operations and delivery of the services. Services are aligned on a broad continuum of substance use and mental health supports and services. The Addiction and Mental Health Services Branch also works collaboratively with a wide variety of community agencies who provide various forms of substance use and mental health supports.

The **Primary Health Care Branch** is responsible for the following three units: Community Health and Chronic Disease Management, Strategy and Innovation and Healthy Aging. It is the focus point for community-based initiatives with a strong emphasis on chronic disease prevention, management and primary health care renewal.

TALENT RECRUITMENT

Overview

In August 2024, the Health Human Resources Division expanded its mandate formalizing its efforts in becoming a centralized provincial team, known as the **Talent Recruitment Division**. In serving four departments being Health, Social Development, Education and Post-Secondary Education Training and Labour. This division plays a crucial role in ensuring that New Brunswick has a well-staffed and empowered bilingual workforce, delivering quality health care, long-term care and education to New Brunswickers.

The division focuses on strategic workforce planning, including the recruitment and retention of health care professionals, long-term care, teachers, and allied health professionals for school districts by creating a collaborative environment with key stakeholders. Additionally, the division supports the integration of internationally educated health professionals and ensures the ongoing development and sustainability of a skilled workforce to meet the needs of all New Brunswickers.

The **Workforce Planning Unit** is responsible for planning an integrated human resources workforce that meets the evolving needs of the health, long-term care, and education sectors. This unit monitors the supply and demand of its workforce, identifies emerging trends, and ensures that all professions operate at their full scope of practice with the right skill mix. They develop and implement resource strategies, as well as address training requirements and continuing professional development needs.

The **Recruitment and Attraction Unit** holds a prominent provincial role in promoting, attracting, and recruiting health and educational professionals locally, regionally and nationally. With a focus on coordination and collaboration across all sectors, this unit spearheads efforts in generating leads, creating a positive candidate experience, and establishing connections to wrap-around services and community networks. They also develop and promote a unified branding and marketing approach to showcase the health care, long-term care, and teaching opportunities in New Brunswick, emphasizing the province's unique value proposition.

The **International Recruitment, Services, and Programs Unit** provides comprehensive support to both internationally educated health professionals and internationally trained teachers (IEHPs/ ITTs) and employers as they navigate the credentialling and immigration process. This unit takes a proactive role in the recruitment of IEHPs and ITTs, developing, executing, and evaluating international recruitment missions. Furthermore, they oversee various programs designed to facilitate IEHPs' transition into equivalent roles within the province, ensuring their successful practice.

CLINICAL INFORMATION SOLUTION TRANSFORMATION

Overview

The **Clinical Information Solution Transformation Branch** oversees the comprehensive overhaul, improvement, and consolidation of clinical information solutions within hospitals. This involves enhancing access to data across facilities, zones, and regions by standardizing workflows, integrating new technologies, and ensuring regulatory compliance to optimize patient care and data management. This will be achieved by consolidating many disparate hospital information systems into one provincially consolidated clinical information solution.

The branch collaborates with clinicians, nursing, and allied health professionals, and is partnering with regional health authorities and Service New Brunswick to identify improvements and implement best practices. It focuses on standardization, change management, and continuous performance evaluation to meet the health system's evolving needs and support clinical decision-making, patient safety, and operational efficiency.

OFFICE OF THE CHIEF MEDICAL OFFICER OF HEALTH

Overview

The **Office of the Chief Medical Officer of Health** (OCMOH) oversees the Preventative Medicine Branch (led by the Deputy Chief Medical Officer of Health) as well as the Epidemiology and Surveillance Branch (led by the Chief Epidemiologist). The division supports creating a healthy, resilient, and flourishing population in New Brunswick by monitoring the trends in vaccination and diseases reportable under the *Public Health Act*; supporting the identification and response to disease outbreaks as well as other issues of concern for public health; and providing subject matter expertise to the Public Health Branch to support the development, implementation and monitoring of public health programs and services.

HUMAN RESOURCES AND ORGANIZATIONAL DEVELOPMENT

Overview

The **Human Resources and Organizational Development Branch** provides support and services to management and staff to increase organizational effectiveness and to maximize performance through our people while supporting the strategies and goals of the department. It is responsible for workforce planning, recruitment, classification, employee and labour relations, health and safety, official languages, employee recognition, human resources strategy and programs, as well as some classification and labour relations functions in support of Part III.

FINANCIAL INFORMATION

	BUDGET (000s)	ACTUAL EXPENDITURES(000s)
Francophone Affairs, Pharmaceutical, Physician and Community Services	1,400,860	1,451,422
Health System Collaboration	2,238,268	2,476,322
Corporate Services	59,682	54,129
Addiction and Mental Health Services	233,542	232,567
Health Human Resources	14,654	12,444
Clinical Information Solution Transformation	12,895	9,501
Office of the Chief Medical Officer of Health	4,790	3,959
Human Resources and Organizational Development	868	834
Total	**3,965,560**	**4,241,178**

SUMMARY OF STAFFING ACTIVITY

Pursuant to section 4 of the *Civil Service Act*, the Secretary to Treasury Board delegates staffing to each Deputy Head for his or her respective department. Please find below a summary of the staffing activity for 2024-2025 for the Department of Health.

NUMBER OF PERMANENT AND TEMPORARY EMPLOYEES AS OF DEC. 31 OF EACH YEAR		
EMPLOYEE TYPE	**2024**	**2023**
Permanent	348	343
Temporary	75	74
TOTAL	423	417

The department advertised 39 competitions, including 31 open (public) competitions and 8 closed (internal) competitions.

Pursuant to sections 15 and 16 of the *Civil Service Act*, the department made the following appointments using processes to establish merit other than the competitive process:

APPOINTMENT TYPE	APPOINTMENT DESCRIPTION	SECTION OF THE *CIVIL SERVICE ACT*	NUMBER
Specialized Professional, Scientific or Technical	An appointment may be made without competition when a position requires: • a high degree of expertise and training • a high degree of technical skill • recognized experts in their field	15(1)	1
Equal Employment Opportunity Program	Provides Indigenous peoples, persons with disabilities and members of a visible minority group with equal access to employment, training and advancement opportunities.	16(1)(a)	2
Department Talent Management Program	Permanent employees identified in corporate and departmental talent pools, who meet the four-point criteria for assessing talent, namely performance, readiness, willingness and criticalness.	16(1)(b)	9

APPOINTMENT TYPE	APPOINTMENT DESCRIPTION	SECTION OF THE *CIVIL SERVICE ACT*	NUMBER
Lateral transfer	The GNB transfer process facilitates the transfer of employees from within Part 1, 2 (school districts) and 3 (hospital authorities) of the Public Service.	16(1) or 16(1)(c)	8
Regular appointment of casual/temporary	An individual hired on a casual or temporary basis under section 17 may be appointed without competition to a regular properly classified position within the Civil Service.	16(1)(d)(i)	22
Regular appointment of students/ apprentices	Summer students, university or community college co-op students or apprentices may be appointed without competition to an entry level position within the Civil Service.	16(1)(d)(ii)	0

Pursuant to section 33 of the *Civil Service Act*, no complaints alleging favouritism were made to the Deputy Head of the Department of Health and no complaints were submitted to the Ombud.

SUMMARY OF LEGISLATION AND LEGISLATIVE ACTIVITY

BILL #	NAME OF LEGISLATION	DATE OF ROYAL ASSENT	SUMMARY OF CHANGES
29	*An Act Respecting Cannabis Control* https://www.legnb.ca/content/house_business/60/3/bills/Bill-29.pdf	June 7, 2024	This Bill improves overall enforcement of the *Cannabis Control Act* and limits the unlicensed sale and distribution of cannabis.
30	*An Act to Amend the Tobacco and Electronic Cigarette Sales Act* https://www.legnb.ca/content/house_business/60/3/bills/Bill-30.pdf	June 7, 2024	This Bill improves compliance with the *Tobacco and Electronic Cigarette Sales Act* and restricts young New Brunswickers' access to tobacco, smoking products and electronic cigarettes.

The acts for which the department is responsible may be found at: https://laws.gnb.ca/en/bycategory/cs?categoryId=departmentId&itemId=health.

SUMMARY OF OFFICIAL LANGUAGES ACTIVITIES

Introduction

The Department of Health continues to recognize its obligations under the *Official Languages Act* and is committed to delivering services in both official languages.

Focus 1

Ensure access to service of equal quality in English and French throughout the province:

- The department continues to ensure new employees are oriented on the Language of Service policy and guidelines at the time of hire.
- Linguistic profiles continue to be updated and reviewed to ensure the department maintains its ability to provide services in both official languages.

Focus 2

An environment and climate that encourages, for all employees, the use of the official language of their choice in their workplace:

- The department continues to ensure new employees are oriented on the Language of Work policy and guidelines at the time of hire.
- The department uses simultaneous interpretation and/or bilingual presentations for larger departmental meetings.
- The department informs new employees of tools that are available to enable them to work efficiently in the official language of their choice.
- The department promotes different activities and resources for employees to practice their second official language.

Focus 3

Ensure that new and revised government programs and policies took into account the realities of the province's official language communities:

- The department continues to collaborate with the *Société Santé et Mieux-être en français du Nouveau Brunswick* through their action networks which focus on the organization of services, training and research as well as community-led actions to foster healthy communities.
- The department continues to provide correspondence to the public in the official language of their choice and ensures all new program and policy information is communicated and accessible in both official languages.

Focus 4

Ensure Public Service employees have a thorough knowledge and understanding of the *Official Languages Act*, relevant policies, regulations, and the province's obligations with respect to official languages:

- New employees continue to be required to complete the Language of Service and Language of Work eLearning modules.
- Employees were reminded of their obligation to make an active offer of service in both official languages when interacting with the public.

Conclusion

The department continues to work on meeting its obligations under the *Official Languages Act* and related policies and to ensure its ability to provide services to the public in both official languages.

SUMMARY OF RECOMMENDATIONS FROM THE OFFICE OF THE AUDITOR GENERAL

Section 1 – Includes the current reporting year and the previous year.

NAME AND YEAR OF AUDIT AREA WITH LINK TO ONLINE DOCUMENT	RECOMMENDATIONS
	TOTAL
2024-2025 Mental Health Trust Fund No. 9 – Department of Health and Finance and Treasury Board	1
2023-2024 – COVID-19 Pandemic Response – Department of Health	7

IMPLEMENTED RECOMMENDATIONS	ACTIONS TAKEN
No recommendations have been implemented to date.	N/A

RECOMMENDATIONS NOT IMPLEMENTED	CONSIDERATIONS
Take action to develop and implement a comprehensive plan to use the funds as per the terms of the trust. This plan should include regularly updating Department of Finance and Treasury Board on progress with Trust programs and cashflow requirements to ensure resources are effectively utilized, outcomes are achieved, and adjustments can be made as needed to optimize impact.	A comprehensive plan is currently in the process of being developed to ensure proper use of the funds per the terms of the trust. As part of this plan, the Department of Health will provide regular updates to the Department of Finance and Treasury Board.

RECOMMENDATIONS NOT IMPLEMENTED	CONSIDERATIONS
Executive Council Office ensure the Department of Justice and Public Safety, in collaboration the Department of Health: • undertake an After-Action Review to evaluate the provincial response to the COVID-19 pandemic. • incorporate lessons learned into an updated provincial pandemic emergency plan; and • create and implement a schedule to regularly test and update the provincial pandemic emergency plan.	The GNB COVID-19 after-action review is in progress. An organizational structure has been established; a vendor has been engaged.
Develop, monitor, and report on established key performance indicators. Targets should be regularly reviewed for ongoing relevance and revised accordingly.	The Department of Health agrees with the need to monitor and report on key performance indicators. The department will be participating in GNB's after-action pandemic review which will aim to update the provincial pandemic plan based on the lessons learned from the COVID-19 pandemic, including recommendations from this report.
Increase data-systems capacity to adequately monitor test inventory during a pandemic to ensure supply meets demand.	The Department of Health agrees with the recommendation. The department will be participating in GNB's after-action pandemic review which will aim to update the provincial pandemic plan based on the lessons learned from the COVID-19 pandemic, including recommendations from this report.
Provide clear targets to support the decision-making process when moving between various phases of a staffing crisis action plan. This should form part of an up-to-date pandemic plan.	The Department of Health agrees with the recommendation. The department will be participating in GNB's after-action pandemic review which will aim to update the provincial pandemic plan based on the lessons learned from the COVID-19 pandemic, including recommendations from this report.

RECOMMENDATIONS NOT IMPLEMENTED	CONSIDERATIONS
Review the efficacy of the critical care nursing initiative to determine if it accomplished its intended objectives and note any future improvements should the need arise again	The Department of Health agrees on the need to assess all programs, such as the critical care nursing initiative to ensure they meet their intended purpose.
Develop a contingency plan, as part of its business continuity planning, that outlines back-up procedures for key personnel, both at the department and regional levels.	The Department of Health agrees with this recommendation. The department will update its business continuity plan based on the lessons learned from the COVID-19 pandemic.
Ensure: • decision criteria are established and consistently applied for any process which may result in exceptions for adherence to mandatory orders. • rationale used for decision-making for exemptions is well-documented	The Department of Health agrees with the recommendation. The department will be participating in GNB's after-action pandemic review which will aim to update the provincial pandemic plan based on the lessons learned from the COVID-19 pandemic.

Section 2 – Includes the reporting periods for years three, four and five.

NAME AND YEAR OF AUDIT AREA WITH LINK TO ONLINE DOCUMENT	RECOMMENDATIONS	
	TOTAL	IMPLEMENTED
Ambulance Services – 2020	20	6
Electronic Medical Records Program – 2020	7	7

REPORT ON THE *PUBLIC INTEREST DISCLOSURE ACT*

As provided under section 18(1) of the *Public Interest Disclosure Act*, the chief executive shall prepare a report of any disclosures of wrongdoing that have been made to a supervisor or designated officer of the portion of the public service for which the chief executive officer is responsible. The Department of Health received no disclosures of wrongdoing in the 2024-2025 fiscal year.