



Regional Health and Business Plan

2022–2025

*Approved by the Board of Directors
June 21st, 2022*

RÉSEAU DE SANTÉ
vitalité
HEALTH NETWORK
Francophone Leader

TABLE OF CONTENTS

I. MESSAGE FROM THE PRESIDENT AND CHIEF EXECUTIVE OFFICER 2

II. DESCRIPTION OF THE NETWORK..... 3

III. GRAPHIC REPRESENTATION OF THE NETWORK..... 4

IV. BACKGROUND..... 5

V. BASIC PRINCIPLES OF SERVICE DELIVERY 6

 1. ACCOUNTABILITY FRAMEWORK 6

 2. HEALTH SYSTEM STRATEGY MAP 6

 3. VITALITÉ HEALTH NETWORK’S STRATEGY MAP 6

VI. PRIORITIES FOR 2022-2025 9

 1. STRATEGIC PLAN 9

 2. TARGETED QUALITY IMPROVEMENT PROJECTS 13

 3. UNIVERSITY MISSION AND LEARNING APPROACH OF VITALITÉ HEALTH NETWORK 13

 4. COMMERCIAL AGREEMENTS 14

 5. HUMAN CAPITAL..... 15

 6. INFORMATION TECHNOLOGY..... 15

 7. THE NETWORK’S FINANCIAL STATEMENT 16

 8. INFRASTRUCTURE AND EQUIPMENT PROJECTS 17

APPENDIX A: POINTS OF SERVICE (2021-2022).....19

APPENDIX B-1: ACTIVITY VOLUME (2021-2022).....20

APPENDIX B-2: NUMBER OF BEDS.....21

APPENDIX C: HUMAN RESOURCES PROFILE.....22

APPENDIX D: STRATEGIC SCORECARD23

APPENDIX E: FINANCIAL PERFORMANCE INDICATORS25

APPENDIX F: SUMMARY TABLE – 2020-2023 STRATEGIC PLAN26

APPENDIX G-1: COMPLETED PROJECTS WITH RECURRENT EXPENSES THAT HAVE A FINANCIAL IMPACT ON THE 2022-2023 OPERATING BUDGET27

APPENDIX G-2: PROJECTS RELATED TO APPROVED PRIORITY INITIATIVES.....28

APPENDIX H: TECHNOLOGIES.....31

ANNEXE I-1: OPERATING BUDGET FOR 2022-202532

APPENDIX I-2: EXPENSES PER PROGRAM FOR 2022-202533

APPENDIX J-1: CAPITAL BUDGET FOR 2022-202334

APPENDIX J-2: MAJOR PROJECTS AUTHORIZED FOR 2022-202334

APPENDIX J-3: EQUIPMENT \$100,000 AND OVER, AUTHORIZED FOR 2022-2023 (LETTER FROM DEPARTMENT)34

APPENDIX J-4: EQUIPMENT \$100,000 AND OVER, PLANNED FOR 2022-2027.....34

APPENDIX J-5: BUILDING IMPROVEMENTS AUTHORIZED FOR 2022-2023 (LETTER FROM DEPARTMENT)39

APPENDIX J-6: BUILDING IMPROVEMENT PROJECTS, PLANNED FOR 2023-2027.....40

APPENDIX J-7: MAJOR PROJECTS REQUESTED FOR 2023-202442

2022-2025 Regional Health and Business Plan

I. Message from the President and Chief Executive Officer

Honourable Dorothy Shephard

Minister of Health

I am pleased to submit to you the 2022-2025 Regional Health and Business Plan (RHBP) of Vitalité Health Network (the Network), as designated by the *Regional Health Authorities Act*. The Act confers on the provincial health authorities the responsibility of providing delivery and administration of health services in their respective geographic areas in the official language of the patient's choice. To this end, the health authorities must understand and determine the public's actual needs, the health priorities associated with those needs, and the resources required for the smooth operation of patient care services.

Despite two years in a global pandemic, the Network has succeeded in advancing many priorities in its 2020-2023 Strategic Plan and intends to continue on this path. The health crisis has helped accelerate the creation of new partnerships and strengthen existing partnerships at a level unequalled in our provincial health system.

The importance of clear and defined collaboration between the various partners involved in the delivery of health care has never been so evident. The roles and responsibilities of each must be well understood, as must the level of interdependence and joint responsibilities. This will make it possible to optimize the collaboration toward achieving common objectives.

As an integrated organization that functions as a network, our strength resides in our agility and our ability to mobilize ourselves quickly to move to action without delay. We want to build on this ability so that we can continue our momentum for quick strategic execution on an ongoing basis. Happy reading.

President and Chief Executive Officer

Dr. France Desrosiers

II. Description of the Network

Vitalité Health Network is a regional health authority that ensures the delivery and management of health care and services in an area covering all of northern and southeastern New Brunswick. It provides health care and services in the patients' official language of choice from its 57 points of service spread across four health zones (see the list of points of service in Appendix A). These health zones are designated as follows: Zone 1B (Beauséjour), Zone 4 (Northwest), Zone 5 (Restigouche) and Zone 6 (Acadie-Bathurst).

The range of services offered by the Network includes acute hospital care, community health centres and clinics, public health, mental health care, addiction services, long-term care for veterans, training and research. The Network also helps provide a wide range of health services to the residents of New Brunswick (see the volume of activities and bed allocation in Appendix B).

With a budget of approximately \$818 million¹, our Network serves a population of 240,877² people³. Services are delivered by a devoted and committed team of more than 7,737 employees, 542 physicians and 760 volunteers (see the human resources profile in Appendix C). Employees and physicians also have access to training programs on a regular basis.

Our Network is also supported by 10 foundations. Their significant contributions make it possible to fund several initiatives and projects for our patients. The close and special ties linking our foundations to our facilities and programs help improve the health and wellness of the public.

¹ "Including depreciation and excluding Medicare"

² "2016 Census – Statistics Canada"

³ "Population whose mother tongue is French + equal proportion of people whose mother tongue is neither French or English"

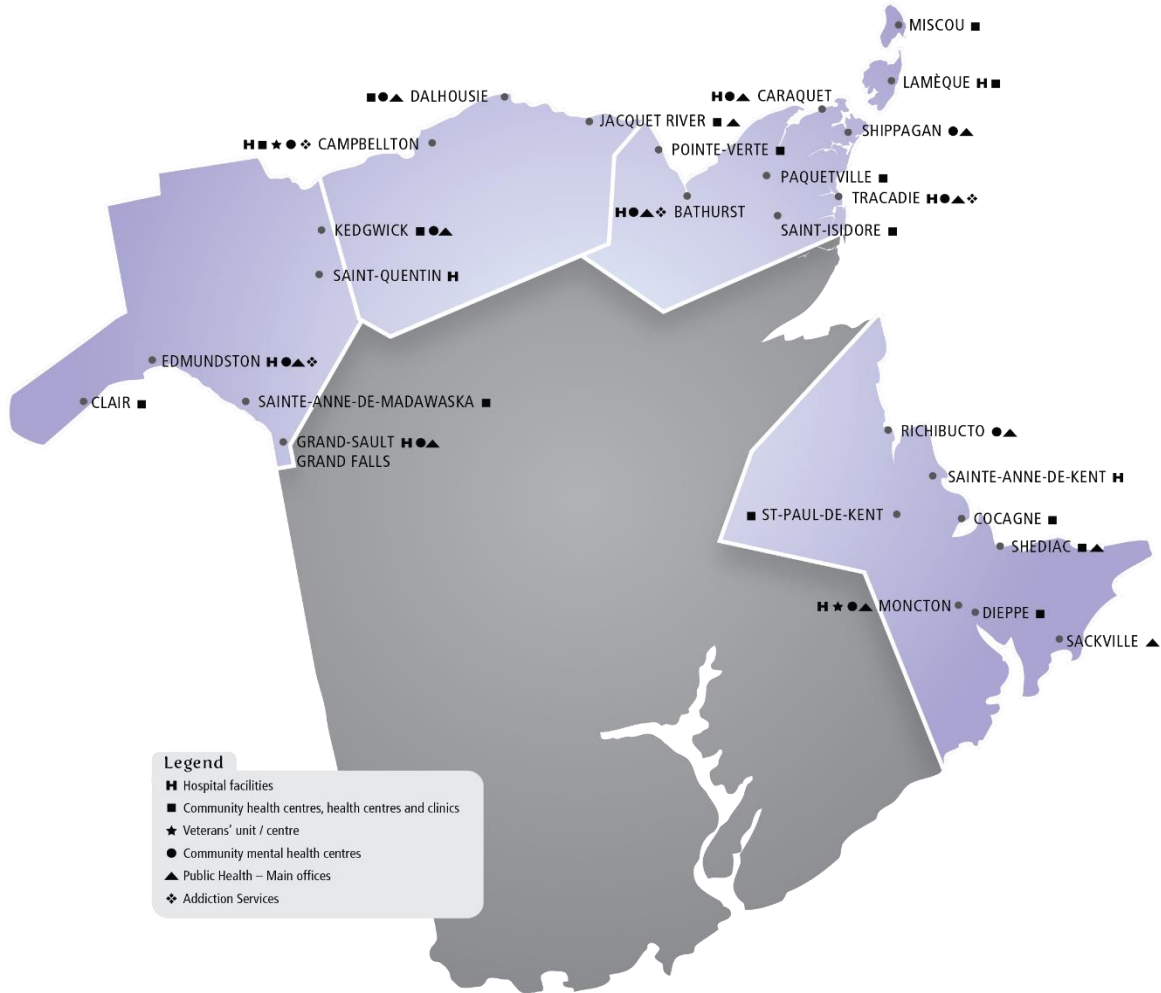
Regional Health and Business Plan 2022-2025

III. Graphic Representation of the Network

MISSION
Improve the population's health

VISION
Together, toward a healthy population

- VALUES**
- Respect
 - Compassion
 - Integrity
 - Accountability
 - Equity
 - Engagement



IV. Background

Vitalité Health Network is one of the two regional health authorities in New Brunswick established under the *Regional Health Authorities Act*. Its legal mandate confers on it a dual responsibility for the delivery and administration of health services across its designated territories in the official language of the patient's choice.

To this end, the Network must determine the health needs of the population it serves, determine the priorities in the delivery of health services to this population, and allocate the necessary resources according to its Regional Health and Business Plan (RHBP). The RHBP is developed each year under the authority of the Board of Directors in accordance with Section 32 of the Act.⁴ It contains the strategic and operational priorities that the Network will adopt for the next three years and outlines how human and physical resources will be allocated.

The Network will complete the final year of implementation of its 2020-2023 Strategic Plan. This plan was developed following a large consultation process and factors in the health needs of our communities and the financial challenges that the province faces. Coordination with the new provincial health plan will have to be ensured, although the Network's strategic plan is already largely aligned with the priorities contained in the new health plan. Follow-up on implementation of the resulting initiatives will be conducted through our operational plan.

Moreover, the strategic and operational indicators will be monitored in our strategic scorecard and in our balanced scorecard (see the full list of indicators in Appendix D). The strategic scorecard includes 24 indicators established based on our strategic plan. The scorecards will help our teams observe and measure the implementation of our objectives on a regular basis.

The 2022-2025 RHBP presents our infrastructure projects and our financial planning for the next three years.

⁴ *Regional Health Authorities Act*

V. Basic Principles of Service Delivery

1. Accountability framework

The *Regional Health Authorities Act* establishes an accountability framework between the New Brunswick health system partners (section 7(1)). The responsibilities of Vitalité Health Network toward its partners in the provincial health system are defined in the accountability framework.

2. Health system strategy map

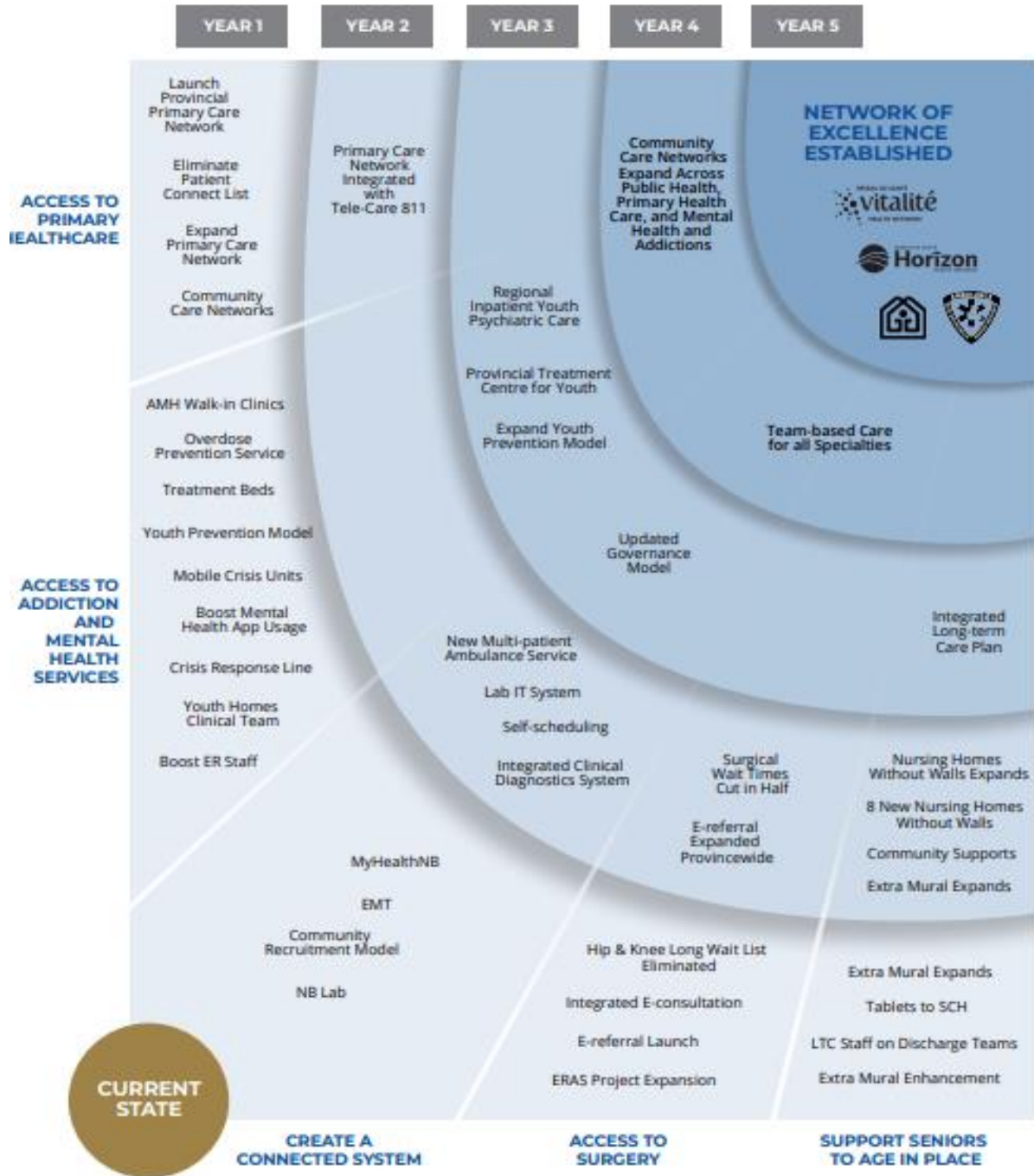
In conjunction with the accountability framework, the Government of New Brunswick presented its plan in the document entitled “Stabilizing Health Care: An Urgent Call to Action”⁵ and it includes the priority areas for action shared by the partners in question (Figure 1). The Network paid close attention to this document in developing its initiatives for the coming years.

3. Vitalité Health Network’s strategy map

Vitalité Health Network’s Strategy Map takes into account the Health System Strategy Map and the 2020-2023 Strategic Plan of Vitalité Health Network (Figure 2).

⁵ [Stabilizing-health-care.pdf \(gnb.ca\)](#)

Figure 1. Strategy Map from “Stabilizing Health Care: An Urgent Call to Action”

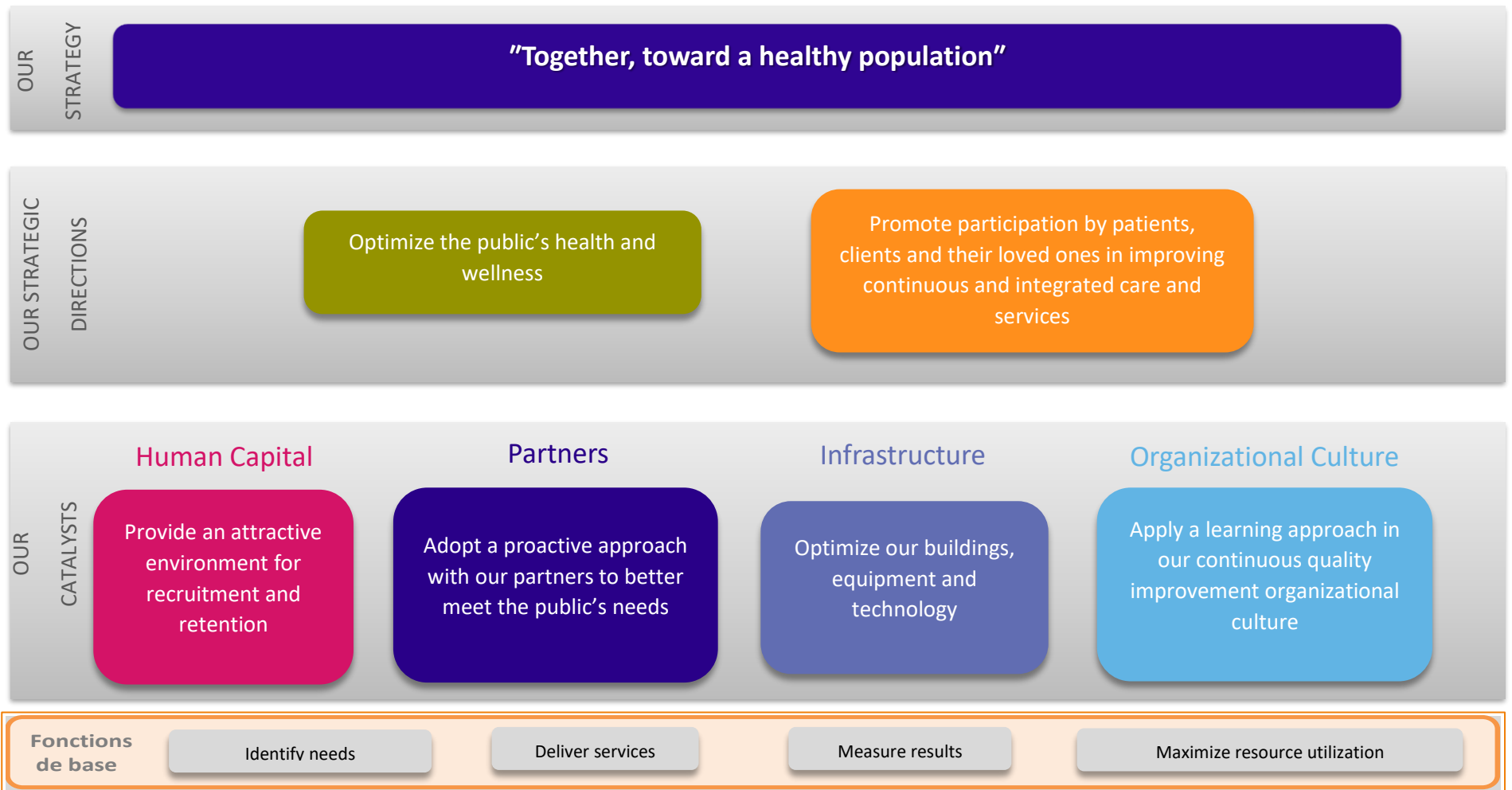


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⁶ Department of Health (2021), [Stabilizing Health Care: An Urgent Call to Action](#)



Figure 2. Vitalité Health Network 2020-2023 Strategy Map



COMMON HEALTH VISION: A HEALTHY NEW BRUNSWICK

THE NETWORK'S VALUES: respect – compassion – integrity – accountability – equity – engagement

VI. Priorities for 2022-2025

1. Strategic plan

To accomplish our mission to improve people's health, we are entering our third and final year implementing our 2020-2023 Strategic Plan. This focuses on the issues related to the health of the population and the services we provide to them, as well as four catalysts: human capital, partners, infrastructures and organizational culture. Key strategic directions and priority strategic objectives were defined for each of these issues and these catalysts, to guide our actions. The strategic priorities are thus based on the six key strategic directions adopted in the current three-year plan.

The last two fiscal years were especially tumultuous due to the COVID-19 pandemic. With its partners, Vitalité Health Network continues to work on its plan to re-establish and transform clinical services, which is incorporated into the strategic plan to maximize the system's existing capacities and capitalize on the lessons learned during the pandemic. The plan to re-establish services aims to build on research, innovation and evidence to transform and adapt health care delivery in this new pandemic reality and after the pandemic.

Moreover, given the release of the Provincial Health Plan, when we prioritized the Network's initiatives, we made sure that they focused on the five key areas of action and priority objectives of the government, to ensure that efforts are made to achieve them.

As a result, the chart below helps illustrate the initiatives prioritized in relation to the strategic directions as well as the budgetary impact associated with the objectives for the next three years. In addition, Appendix G-1 presents completed initiatives with recurring expenses that financially impact 2022-2023 budget operations, and Appendix G-2 presents the projects related to approved priority initiatives. Major information technology projects, along with cost estimates, are available in Appendix H.

Regional Health and Business Plan 2022-2025

Initiatives Identified and Budget for 2022-2025

Issue Related to the Public's Health		
Strategic direction: We will contribute to optimizing the public's health and wellness.		
Objective: Integrate mental health and wellness into all our strategies.		
Establish a continuum of mental health care.		
Strengthen the integration of mental health care and addiction services into primary health care services.		
Enhance the emergency departments' capacity to respond to the needs of people with mental health and addiction problems.		
Promote positive mental health among youth.		
Harmonize the youth mental health services clinical model.		
Issue Related to the Services We Provide to the Public		
Strategic direction: We will promote participation by patients, clients, and their loved ones in improving continuous and integrated care and services.		
2022-2023 budget: \$5,781,637	2023-2024 budget: \$6,352,323	2024-2025 budget: \$6,819,690
Objective: Provide seniors with a relevant and effective continuum of care and services.		
Provide a single entry point.		
Improve access to comprehensive geriatric assessment.		
Implement a geriatric approach.		
Identify potential ALC patients in the emergency department.		
Improve coordination between level 3 nursing homes and emergency departments.		
Prevent admissions by providing more support in the community.		
Reduce length of stay for geriatric clients.		
Objective: Improve the patient continuum of care.		
Optimize the surgical experience.		
Improve access to frontline care.		
Promote timely and rapid return home.		

Regional Health and Business Plan 2022-2025

Catalyst: Human Capital		
Strategic direction: We will provide an attractive environment for recruitment and retention.		
2022-2023 budget: \$959,816	2023-2024 budget: \$1,186,622	2024-2025 budget: \$1,186,622
Objective: Develop and implement a strategy for the wellness and retention of our teams.		
Develop a wellness strategy to improve the mental health support available and provided to health care workers.		
Adopt a strategy that will allow department managers/heads to acquire best practices in conflict resolution and emotional intelligence development.		
Revise the recognition program, develop tools to facilitate informal recognition and make them available.		
Create a program to integrate new health care workers and make them feel welcome.		
Adopt an occupational psychological health and safety policy that is clear, detailed and disseminated.		
Train managers to understand and recognize the signs of a mental disorder in their employees and to have appropriate ongoing conversations with their employees about the resources offered and available.		
Encourage a people-oriented corporate culture by promoting wellness and psychological health and safety strategies in the workplace.		
Develop a continuity process to improve the candidate's experience through all the steps.		
Catalyst: Partners		
Strategic direction: We will adopt a proactive approach with our partners to better meet the public's needs.		
2022-2023 budget: \$63,232	2023-2024 budget: \$205,248	2024-2025 budget: \$205,248
Objective: Integrate patients, clients and their loved ones as decision partners at all levels of the organization.		
Implement tools to promote the integration of patient partners within the teams.		
Continue recruiting patient experience partners (PEPs).		
Objective: Engage our partners in developing a common vision of the needs of and services to be provided to target populations.		
Conclude agreements with universities and other affiliated organizations.		
Integrate partners into the Network's initiatives.		

Regional Health and Business Plan 2022-2025

Catalyst: Infrastructure		
Strategic direction: We will optimize our buildings, equipment and technology.		
2022-2023 budget: \$2,312,731	2023-2024 budget: \$2,097,807	2024-2025: \$2,098,391
Objective: Devise and implement an information technology development and management plan.		
Continue developing the capacity of the IT sector.		
Objective: Increase virtual health care.		
Introduce virtual health care systems to improve the effectiveness of the Network.		
Objective: Continue to improve infrastructure.		
Complete the work on the new surgical suite and intensive care unit at the DGLDUHC.		
Complete the work to expand the Chaleur Regional Hospital.		
Oversee the implementation of the DGLDUHC Capital Master Plan.		
Objective: Integrate practices to reduce the ecological footprint.		
Set up a multidisciplinary team to help make environmental choices.		
Reduce fossil energy consumption.		
Catalyst: Organizational Culture		
Strategic direction: We will apply a learning approach in our continuous quality improvement organizational culture.		
2022-2023 budget: \$335,411	2023-2024 budget: \$664,387	2024-2025 budget: \$664,387
Objective: Devise and implement strategies to develop a learning culture.		
Implement a learning organization approach.		
Continue developing the three pillars of the university mission to support the learning approach: specialized and ultra specialized care, training, and research.		
Objective: Promote and improve the continuous quality improvement and patient safety culture.		
Implement the integrated quality improvement framework.		
Objective: Develop and implement a transformational strategic communication plan.		
Develop and implement a strategic plan for communications.		

2. Targeted quality improvement projects

The Quality, Safety and Patient Experience sector recently moved under a different vice-president. The new organizational chart will help establish even closer connections with the research, planning, performance and integrated quality management sectors as well as the person- and family-centred care approach. From this synergy will emerge a learning organization approach where people and families will play a larger part. The quality plan that will follow will be influenced by this philosophy, in addition to reflections from the next strategic planning process.

In the meantime, the Network will pursue the following projects that are designed to improve the quality and safety of care provided:

- Implement Medication Reconciliation (MedRec) at care transition points
- Reduce barriers to the pathway of users
- Increase the number of patient-partners who participate on teams/committees
- Reduce the number of incidents and accidents involving workplace violence

3. University mission and learning approach of Vitalité Health Network

In its strategic planning, Vitalité Health Network established that an important catalyst for achieving its strategic objectives is organizational culture. For this reason, it chose to build on the adoption of a learning approach to enrich its organizational culture of continuous quality improvement and to promote the importance of integrating research, evaluation and evidence at all levels of the organization.

The university mission is an important cornerstone for transforming the Network into a learning organization. This mission helps the organization generate, acquire and convey new knowledge to enhance the quality of its care and services as well as the health of our people.

With its partners in teaching and research, the Network plans to continue developing the pillars of its university mission through the following:

- Development of leading medical expertise in relevant specialties and ultra specialties;
- Creation of an environment that supports the next generation's learning and the continuous education of our health care workers;
- Generation of new knowledge and identification of best practices through the integration of research activities in the daily delivery of care.

Regional Health and Business Plan 2022-2025

Creation of an environment that supports learning is all the more important given that the new provincial health care plan involves the implementation of several initiatives related to the recruiting and retention of staff in our health care facilities. It also intends to create innovative and customized training programs that will require the Network to increase collaboration with the teaching institutions. For this reason, a new directorate dedicated to training and teaching partnerships will be created under the Vice-President of University Mission, Performance and Quality. The creation of a team dedicated to training and teaching partnerships will help the Network position itself better to meet the growing need in the following areas:

- Development of a larger capacity to host learners in our facilities;
- Optimization of the learner's experience, from orientation to recruiting of the next generation;
- Establishment of solid partnerships with the teaching institutions;
- Development of new agreements and maintenance and optimization of existing agreements (maximization of placement offerings withing the Network).

The Network also plans to continue integrating the learning approach across the organization by incorporating it directly into its health care and services planning exercise. The goal is to establish priorities based on the needs of patients and communities as well as the system, guided by empirical evidence, firm data, patient experience, clinical knowledge and the strategic priorities of the Network. We will draw inspiration from the experience gained in the development of the Clinical Learning Units to introduce the learning approach on a wider scale.

4. Commercial agreements

Our organization works with many partners, in particular the Atlantic Cancer Research Institute, Université de Moncton and Université de Sherbrooke. In addition, Vitalité Health Network has an agreement with the Ministère de la Santé du Québec to deliver services to the residents of Avignon.

5. Human capital

Faced with intense challenges, the human resources (HR) sector developed its own strategic planning, which is linked to that of the Network and the Provincial Health Plan. The three key directions can be broken down as follows:

1. **Attract:** In addition to developing its HR profile, the sector is preparing a management succession plan and is also reviewing the talent acquisition processes, with a view to performing better and being more appealing. In light of this work and the analysis of the external environment, the HR business partner sector wants to develop the international recruiting sector, while developing initiatives to build capacity with the current employable population;
2. **Transform:** In a context in which it is becoming increasingly difficult to fill all vacant positions, it is important to ensure the well-being of staff in the workplace. After developing a policy for a healthy and safe workplace and a wellness program, it seems necessary to continue monitoring the pulse of employees, communicate and recognize good work. To support this, Employee Experience needs to acquire a platform for communication and recognition over the coming year. In addition, to ensure employee wellness and increase the range of services provided in the Employee Health Offices, the Network plans to create an occupational health medical team to support the occupational health physician.
3. **Mobilize:** the HR sector is pursuing the development of managers' competencies and participating in the emergence of a more participative and collaborative leadership. In this sense, working on the work climate and conflict resolution remains a priority. Finally, to fully realize this objective, a small team will need to be established because at this time, a single person is looking after this component.

6. Information technology

Last December, the Board of Directors approved its 2021-2026 Five-Year Information Technology (IT) Strategic Plan.

This plan is designed to respond to the Network's current priorities and challenges in IT and outlines the path to follow so that the Network can manage and use IT as a strategic asset, in innovative ways, to improve the delivery of clinical and administrative services. More tangibly, the plan aims to improve user experience through better services with cutting-edge technologies,

Regional Health and Business Plan 2022-2025

better access to information for the population, optimization of the clinical and administrative teams' time, especially in the context of the staff shortage, decision making based on valid and factual data and monitoring of the Network's performance. The ongoing transformation of IT is a cornerstone in the development of innovative and digital projects. Recommendations from the IT strategic plan align with the priorities of the Network and the new provincial health plan.

7. The Network's financial statement

During the budget development process, various factors were considered when preparing the budgets for the 2022-2023 fiscal year. There is a 5.5 percent overall funding increase. This increase includes salary increases, inflation, a \$5M budget envelope for new initiatives related to the Regional Health and Business Plan (RHBP) as well as the addition of \$3.8M for equipment purchases.

The Department of Health will allocate funding to the Network related to the salary agreements when the new collective agreements between the government and the unions are signed.

This budget includes the reimbursement of expenses that the Department committed to honour through budget amendments for the initiatives granted as part of the budget process. The Department recognizes that Vitalité Health Network will need to continue incurring costs related to the COVID-19 pandemic. We will obtain information on the funding of these costs throughout the year, as needs are identified.

The tables in Appendix I (1 and 2) present the main categories of revenues and expenses for the next three years as well as the summary of expenses by program. The budgets for the 2023-2024 and 2024-2025 fiscal years use budget assumptions. These budgets include an increase of 2.5 percent in revenue from the Department of Health and 1.5 percent from Medicare (salaried physician recoveries). The budget envelope increase was allocated to the categories of expenses to maintain current operations and the initiatives already approved by the Department. Just like the funding related to salary agreements, the new initiatives are not part of the budget because they must be approved by the Department in advance. Starting April 2022, the Network must apply the new standard on *Asset Retirement Obligations*, which could have an impact on financial results.

8. Infrastructure and equipment projects

The Network has 57 physical facilities. The challenges of keeping physical spaces and medical equipment in good working order and developing them are not insignificant. In fact, despite the realization of major projects currently underway, a deficit in the maintenance and quality of physical facilities grows deeper every year given the gap between the budgets needed and those allocated.

The Network currently has three major construction projects underway:

1. The Chaleur Regional Hospital expansion (contract 4 of 5: \$217M). The new spaces will be delivered in January 2023 and the renovation of the existing part (contract 5) will begin in 2023 and finish in 2030.
2. Transformation of the Campbellton Centre of Excellence for Youth into the Addiction Rehabilitation Centre (\$10M). The spaces should be delivered in January 2023.
3. Preparation of the drawings and specifications for construction of a Centre of Excellence for Youth Mental Health in Moncton should begin in 2023-2024. Costs are estimated at \$17M and construction could be completed in 2025-2026.

The Network would like to establish a consistent vision for the development of its physical facilities based on service delivery. To achieve this, it is working towards implementation of clinical capital master plans for improvements in facilities where the needs identified regarding functionality and dilapidation must be addressed in priority. The DGLDUHD was identified in priority in 2018. The work plans recommended in the 2019 Clinical and Capital Master Plan are underway. Their goal is as follows:

- Develop the spaces freed up by the old surgical suite – Preparation of drawings and specifications scheduled for 2022-2023, project estimated at nearly \$6.5M;
- Build a new emergency department and new spaces for ambulatory outpatient clinics – the Functional and Technical Program will be submitted to the Department of Health in May 2022 to obtain authorization to continue the project in the preparation of drawings and specifications for construction phase;
- In 2022-2023, begin development of the Capital Master Plan (CMP) for Edmundston Hospital.

Moreover, in addition to these major projects, it is always necessary to plan and execute various maintenance, upgrading and modernization work to existing facilities in all zones of the Network.

Regional Health and Business Plan 2022-2025

The older the facilities get, the more the needs are felt to bring the physical spaces in line with the level of quality expected by new practices, new standards and updates to the laws and codes related to the safety of buildings where health care is provided.

It is also necessary to respond to the demands for additional spaces related to the development of certain community clinical programs. It should be noted that in most zones, it is no longer possible to add spaces directly to existing facilities without building expansions or renting spaces. These space needs are well known; the amount required currently exceeds 70,000 square feet. The needs are accumulating, and, in some cases, they represent a barrier to the optimization of clinical services for which development has been approved and is a priority.

The Network reviews its five-year infrastructure plan that includes specialized medical equipment annually. In 2021-2022, we received total funding of \$6.8M for the replacement of medical equipment \$5,000 and over, of which ±\$4.5M was allocated to the replacement of equipment \$100,000 and over. The 2022-2027 five-year infrastructure plan illustrates short- and medium-term needs of ±\$14M per year. For 2023, the Department allocated a capital budget of \$6.6M, which can be fully dedicated to the replacement of equipment \$100,000 and over. This is a significant increase over 2021-2022 given that the Department of Health also awarded a specific operating budget of \$3.8M for 2022-2023 for the replacement of equipment under \$100,000. This will help reduce the forecast replacement deficit to some degree.

In terms of buildings, the Network received a capital budget of \$4.8M in 2021-2022. This budget must be strictly dedicated to the work to replace architectural, mechanical and electrical components as well as telecommunications that are at or near the end of life. For 2022-2023, the Department of Health has already confirmed a budget of \$7.7M. It should be noted that the complexity of projects and the new challenges in goods manufacturing and transportation increasingly require these projects to be planned over two fiscal years.

Please refer to Appendix J (1 to 7) for details on the budget dedicated to capital investments from the Department of Health for the 2022-2025 period, as well as the forecasts over five years (Five-Year Plan).

Regional Health and Business Plan 2022-2025

Appendix A: Points of Service (2021-2022)⁷

Points of service	Beauséjour Zone	Northwest Zone	Restigouche Zone	Acadie-Bathurst Zone	Network
Number of hospitals	2	3	2	4	11
Number of veterans' units/centres	1	0	1	0	2
Number of community health centres	0	0	1	2	3
Number of health centres	1	1	1	3	6
Number of health clinics	3	2	1	0	6
Number of community mental health centres and points of service	2	3	2	4	11
Number of public health offices and points of service	4	3	3	4	14
Number of addiction services centres	0	1	1	2	4
Number of Extra-Mural Program offices	0	0	0	0	0
Total number of points of service	13	13	12	19	57

⁷ "New Brunswick Department of Health – Hospital Financial and Utilization Management System (HFUMS)"

Regional Health and Business Plan 2022-2025

Appendix B-1: Activity Volume (2021-2022)⁸

Volumes and activities	Beauséjour Zone	Northwest Zone	Restigouche Zone	Acadie-Bathurst Zone	Network
Number of admissions (excluding newborns)	7,806	5,337	2,693	6,813	22,649
Admissions – Veterans	28	0	2	0	30
Admissions – Restigouche Hospital Centre	0	0	271	0	271
Number of newborns	692	324	0	504	1,520
Number of patient days (excluding newborns)	99,462	57,524	41,755	80,918	279,659
Patient days – Veterans	11,950	0	1,667	0	13,617
Patient days – Restigouche Hospital Centre	0	0	32,278	0	32,278
ER visits	51,203	45,886	15,047	51,187	163,323
Ambulatory Care visits	138,860	97,817	46,638	110,986	394,301
Surgical cases	6,431	3,107	2,155	4,415	16,108
Dialysis treatments	42,115	4,991	2,298	15,854	65,258
Oncology clinic treatments (chemo - excluding bedside treatments)	4,600	1,769	963	3,278	10,610
Attendance days – Radiation therapy	21,256	0	0	0	21,256
Laboratory procedures	6,180,051	1,012,273	943,212	2,528,414	10,663,950
Medical imaging procedures	136,710	69,788	46,362	105,495	358,355
Attendance days – Respiratory Therapy and Pulmonary Clinic	16,706	8,403	6,757	12,193	44,059
Attendance days – Rehabilitation Services (Audiology, Occupational Therapy, Physiotherapy, Speech-Language Pathology, Recreation Therapy)	66,027	28,449	38,364	36,365	169,205
Attendance days – Therapeutic services	21,942	12,623	10,919	14,159	59,643
Consultations scheduled in community health centres	0	0	11,599	22,990	33,589
Number of children vaccinated in schools	0	0	0	0	0
Number of admissions to Healthy Families, Healthy Babies	64	46	6	3	119
Number of Healthy Toddler assessments	160	21	8	35	224
Total number of internal admissions to addiction services	0	344	142	246	732
Number of visits in health centres	29,310	6,050	3,891	18,646	57,897

⁸ "2021-2022 fiscal year - Preliminary data (Q4)"

Regional Health and Business Plan 2022-2025

Appendix B-2: Number of Beds

Facility	Maximum number of open beds allocated by the province, April 1, 2022	Acute	Rehabilitation	Chronic
Dr. Georges-L.-Dumont University Hospital Centre	302	227	25	50
Stella-Maris-de-Kent Hospital	20	20	0	0
Zone 1B	322	247	25	50
Hôtel-Dieu Saint-Joseph de Saint-Quentin	6	6	0	0
Grand Falls General Hospital	20	20	0	0
Edmundston Regional Hospital	169	113	0	56
Zone 4	195	139	0	56
Campbellton Regional Hospital	145	120	0	25
Zone 5	145	120	0	25
Lamèque Hospital	12	12	0	0
Tracadie Hospital	59	59	0	0
Enfant-Jésus RHSJ† Hospital	12	12	0	0
Chaleur Regional Hospital	215	171	0	44
Zone 6	298	254	0	44
Total	960	760	25	175

Regional Health and Business Plan 2022-2025

Appendix C: Human Resources Profile⁹

Network Profile	Beauséjour Zone	Northwest Zone	Restigouche Zone	Acadie-Bathurst Zone	Network
Number of male employees	476	209	335	335	1,355
Number of female employees	2,330	1,211	997	1,843	6,381
Number of X employees	1	0	0	0	1
Number of full-time employees	1,839	968	986	1,293	5,086
Number of part-time employees	968	452	346	885	2,651
Total number of employees (March 2022)	2,807	1,420	1,332	2,178	7,737
Number of family physicians	132	54	22	93	301
Number of medical specialists	129	39	30	54	241
Total number of physicians¹⁰ (March 2022)	261	93	52	147	542
Number of nurse practitioners	16	8	10	11	45
Number of volunteers ¹¹ (March 2022)	209	192	106	253	760
Number of vacant permanent employee positions	227	115	172	111	625
Number of vacant family/ER physician positions	3	17	12	13	45
Number of vacant medical specialist positions	14	9	12	18	53
Total number of vacant medical positions (March 2022)	17	26	24	31	98
Number of retirements	46	20	14	33	113
Number of physician retirements	3	4	1	2	10
Total number of departures (March 2022)	342	147	171	255	915
Total number of physician departures (retirements + other)	9	12	4	6	31
Number of staff members hired	675	463	279	261	1,678
Number of physicians hired	11	2	1	8	22
Average age of staff	41.3	42.4	44.06	43.6	42.64
Average age of medical staff	46	47	53	45	47

⁹ "Human Resources Department"

¹⁰ "Department of Health – New Brunswick Medicare (excluding out-of-province consultants)"

¹¹ "Volunteer Services"

Appendix D: Strategic Scorecard

Direction		Objectives	Indicators/Measures	Frequency
Issue Related to the Public's Health				
1.1	We will contribute to optimizing the public's health and wellness.	Integrate mental health and wellness into all our strategies.	Mental health patients hospitalized at least three times in one year (percentage)	Semi-annual
1.2			Hospitalization rate for ambulatory care sensitive conditions (ACSC)	Semi-annual
Issue Related to the Services We Provide the Public				
2.1	We will promote participation by patients, clients and their loved ones in improving continuous and integrated care and services.	Provide seniors with access and a relevant and effective continuum of care and services.	Hospital stay extended until home care services or supports are ready (median, in days)	Semi-annual
2.2		Improve patient access and continuum of care.	Acute length of stay (LOS) in relation to expected length of stay (LOS) – Ratio	Semi-annual
2.3			Percentage of triage level 4 and 5 ER visits	Semi-annual
2.4			Percentage of persons hospitalized after moving through the ER in the prescribed timeline of eight hours	Semi-annual
2.5			% of surgeries performed within the timelines	Semi-annual
2.6			Wait time for mental health counseling services in the community (median, in days)	Semi-annual
Catalyst: Human Capital				
3.1	We will provide an attractive environment for recruiting and retention.	Develop and implement a strategy for the wellness and retention of our teams.	Percentage of employees in the same position six months or longer	Semi-annual
3.2			Turnover rate related to voluntary departures	Semi-annual
3.3			Percentage of new hires remaining after two years	Semi-annual

Regional Health and Business Plan 2022-2025

Catalyst: Partners				
4.1	We will adopt a proactive approach with our partners to better meet the public's needs.	Integrate patients, clients and their loved ones as decision partners at all levels of the organization.	% of patient-partner positions filled	Semi-annual
4.2			Rate of patient-partners with a positive perception of their involvement in the health care system	Semi-annual
4.3		Engage our partners in developing a common vision of the needs existing and of the services to be provided to target populations.	Percentage of recommendations implemented for the community health needs assessments for which Vitalité Health Network is responsible	Semi-annual
Catalyst: Infrastructures				
5.1	We will optimize our buildings, equipment and technology.	Devise and implement an information technology (IT) development and management plan.	Percentage of completion of approved IT projects	Semi-annual
5.2		Develop virtual care.	Percentage of virtual telehealth consultations	Semi-annual
5.3		Continue to improve infrastructure.	Percentage of progress in the equipment purchase and installation process	Semi-annual
5.4		Integrate practices that support reducing the ecological footprint.	Greenhouse gas emissions (GHG)	Semi-annual
Catalyst: Organizational Culture				
6.1	We will apply a learning culture in our continuous quality improvement organizational culture.	Devise and implement strategies to develop a learning culture.	% of quality improvement projects completed	Semi-annual
6.2			Number of research projects (clinical trials, internal vs external)	Semi-annual
6.3			% of clinical trial agreements started within 90 days	Semi-annual
6.4		Promote and improve the culture of continuous quality improvement and patient safety.	Reporting rate for near-miss events	Semi-annual
6.5		Develop and implement a transformational strategic communication plan.	% satisfaction related to internal communications	Semi-annual
6.6		% satisfaction related to external communications	Semi-annual	

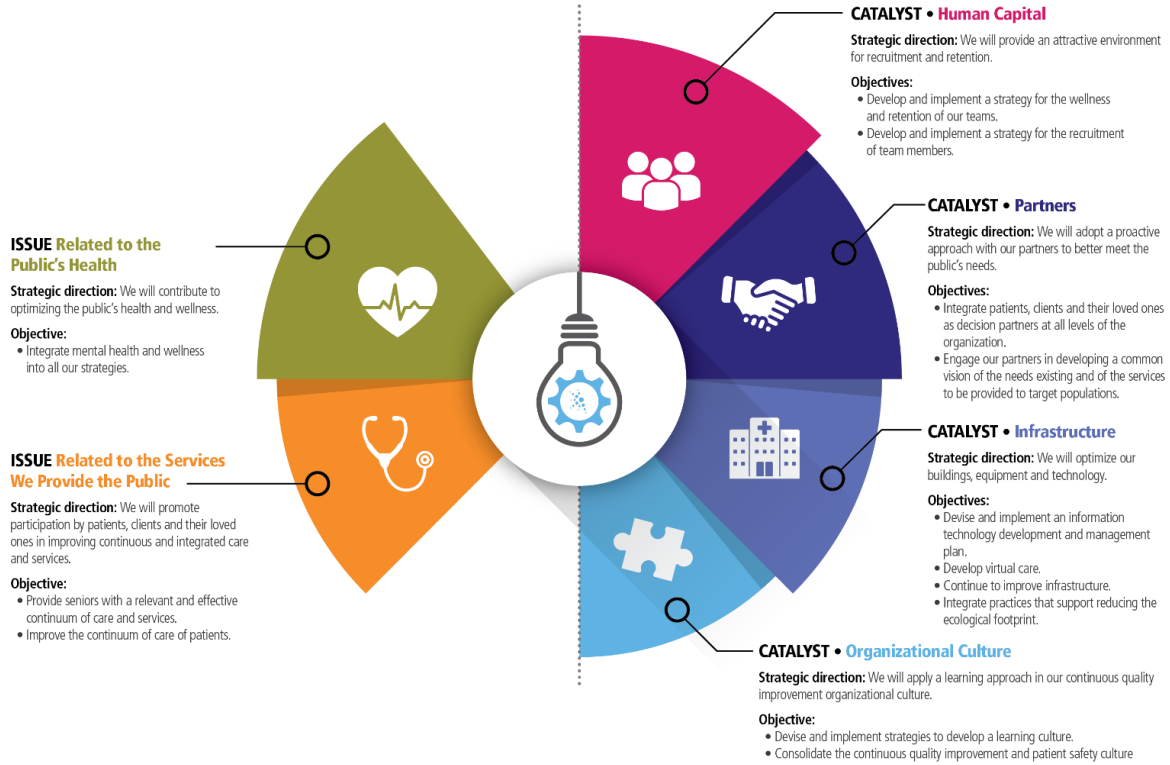
Appendix E: Financial Performance Indicators

The financial sector is in the process of reviewing the series of indicators that apply directly to financial items. Nevertheless, it was determined that the three financial performance indicators below are relevant for the contribution, in conjunction with the indicators from the strategic scorecard table to the monitoring of the objectives identified in the Regional Health and Business Plan.

Financial Performance Indicators		
Objective	Indicators/Measures	Frequency
Monitoring of budget progress of planned initiatives	Percentage of completion of monetary amounts allocated to initiatives	Monthly
Monitoring of overall performance of financial operations	Monetary gap of net operating results	Monthly
Monitoring of financial performance of human resources	Monetary gap of the operating salary and benefits budget situation	Monthly

Regional Health and Business Plan 2022-2025

Appendix F: Summary Table – 2020-2023 Strategic Plan



Regional Health and Business Plan 2022-2025

Appendix G-1: Completed projects with recurrent expenses that have a financial impact on the 2022-2023 operating budget

List of initiatives	2022-2023 budget
Clinical Services	\$498,856
Provide staff with online training in geriatrics, long-term care and medicine	\$9,000
Facility director	\$489,856
Community Services and Mental Health	\$206,757
Mini-van rental	\$11,702
Expand and continue the At Home program – Expand and increase the capacity to recruit for the At Home program	\$195,055
Medical Affairs	\$50,000
Quality audit	\$50,000
University Mission, Performance and Quality	\$193,075
Software for project management and strategic planning	\$10,740
University mission (performance improvement position and DUO Fund and Knowledge Transfer)	\$182,335
Risk Management and Business Intelligence and Chief Information Officer	\$10,185
SOMUM computerized communication software	\$10,185
Talent Acquisition and Organizational Development	\$50,000
Scholarship for HR training	\$50,000
Total	\$1,008,873

Regional Health and Business Plan 2022-2025

Appendix G-2: Projects related to approved priority initiatives

List of projects	List of initiatives	2022-2023 budget	2023-2024 budget	2024-2025 budget
Clinical Services		\$1,801,840	\$2,260,764	\$2,616,512
Introduce a mobilization program	Reduce the period of hospitalization for geriatric clients	\$905,411	\$1,045,932	\$1,045,932
Optimization of the oncology department (oncology physical therapy)	Promote a fast and supportive return home	\$241,593	\$289,911	\$289,911
Develop the concept of the geriatric day hospital in Zones 1B, 5, 4 and 6	Improve access to the comprehensive geriatric assessment	\$262,495	\$544,580	\$544,580
Develop the discharge planning teams	Reduce the period of hospitalization for geriatric clients	\$392,341	\$380,341	\$736,089
Outpatient and Professional Services / Corporate Services		\$2,572,275	\$2,389,120	\$2,500,739
PET-CT – increase the number of scanning days to meet the demand	Improve access to frontline care	\$330,386	\$330,386	\$330,386
Community pediatric rehabilitation (physiotherapist)	Improve access to frontline care	\$118,099	\$124,099	\$124,099
New standards for sterile product preparation in NB	Optimize the surgical experience	\$306,098	\$326,716	\$326,716
Relocation of Public Health - Tracadie & Caraquet	Ensure implementation of the DGLDUHC master plan	\$315,000	\$315,000	\$315,000
Antimicrobial stewardship	Improve access to frontline care	\$65,111	\$223,238	\$334,857
Optimization of oncology care by Zone 1B Professional Services	Improve access to frontline care	\$883,581	\$1,069,681	\$1,069,681
Support for patients with cochlear implant (CI)	Improve access to frontline care	\$554,000	-	-

Regional Health and Business Plan 2022-2025

Community Services and Mental Health		\$1,722,522	\$2,017,439	\$2,017,439
Single Entry Point for clients with chronic conditions and heavy service users; Include a single entry point for clients with chronic conditions	Establish a single entry point	\$610,880	\$610,880	\$610,880
Addition of human resources to school – community pediatric occupational therapy department	Improve access to frontline care	\$604,192	\$732,839	\$732,839
Ensure management of orphan patients in Zone 4 (Edmundston, Grand Falls, Clair) with the addition of three nurse practitioners. Addition of three nurse practitioners Zone 4 – management of orphan patients	Improve access to frontline care	\$336,776	\$478,664	\$478,664
Expand and increase the capacity for the PSM program	Prevent admissions by offering better support in the community	\$170,674	\$195,056	\$195,056
Training of family physicians and nurse practitioners in suicide prevention with males and development of tools to facilitate assessment of suicide risk and identification of the best management possible, given the resources available	Strengthen integration of mental health and addiction services within primary health care	-	-	-
Medical Affairs		\$176,748	\$143,248	\$143,248
System for redirecting level 4 and 5 patients at the ER	Develop virtual care	\$25,000	-	-
Reorganization of medical offices	Other projects	\$100,048	\$100,048	\$100,048
Software for privileges requests and renewals (C-MaRS)	Major information technology projects	\$51,700	\$43,200	\$43,200
Atypical or early dementia clinics	Integrate mental health and wellness into all our strategies	-	-	-
University Mission, Performance and Quality		\$398,643	\$869,635	\$869,635
Creation of an environment that supports the next generation's learning and the continuous education of our health care workers	Continue the development of the three pillars of the university mission to support the learning approach: specialized and ultra specialized care, training and research	\$335,411	\$664,387	\$664,387
Integration of patient-partners (PEP) in the Network's initiatives	Integrate the patient experience partner (PEP) into all levels of the organization	\$63,232	\$205,248	\$205,248

Regional Health and Business Plan 2022-2025

Risk Management and Business Intelligence and Chief Information Officer		\$1,820,983	\$1,639,559	\$1,640,143
Management of operations and development of the capacity of the IT sector	Implement the IT strategic plan	\$1,068,609	\$1,068,609	\$1,068,609
Planning of a new clinical information system	Major information technology projects	-	-	-
Support and maintenance for the request centralization platform - Docuscripts	Major information technology projects	\$108,374	\$38,950	\$39,534
Development of a Cybersecurity strategy and implementation of Beauceron Security	Major information technology projects	\$144,000	\$32,000	\$32,000
Infrastructures and Videoconference	Major information technology projects	\$500,000	\$500,000	\$500,000
Talent Acquisition and Organizational Development		\$959,816	\$1,186,622	\$1,186,622
Creation of an informal conflict management and resolution system for the Network	Develop a strategy that will allow department managers/heads to acquire best practices in conflict resolution and in emotional intelligence development	\$100,830	\$285,264	\$285,264
Increase the services available in the occupational medicine sector (cognitive assessment, counseling)	Train managers to understand and identify signs of a mental health illness in their employees and to have appropriate ongoing conversations with them about the resources offered and available	\$92,137	\$189,273	\$189,273
Implementation of industry best practices, development of tools for managers and provision of information recognition	Revise the recognition program, develop and make available tools to facilitate information recognition	\$356,629	\$387,258	\$387,258
Improve the staff recruiting, integration and retention process (including physicians)	Develop a continuity process to improve the experience of the candidate in all phases (interview, placement, summer job, job offer, first day of work)	\$410,220	\$324,827	\$324,827
Total		\$9,452,827	\$10,506,387	\$10,974,338

Regional Health and Business Plan 2022-2025

Appendix H: Technologies

Major information technology projects	Estimated costs 2022-2023	Estimated costs 2023-2024	Estimated costs 2024-2025
Planning of a new clinical information system	-	-	-
Support and maintenance for the request centralization platform - Docuscripts	\$108,374	\$38,950	\$39,534
Development of a Cybersecurity strategy and implementation of Beauceron Security	\$144,000	\$32,000	\$32,000
Implementation of industry best practices, development of tools for managers and provision of information recognition / Project and innovation – Implementation and use of iTacit Forms for employees and non-employees	\$80,000	\$80,000	\$80,000
Improve the staff recruiting, integration and retention process (including physicians) / Project and innovation – Implementation and use of iTacit Forms for employees and non-employees	\$165,600	-	-
Software for privileges requests and renewals (C-MaRS)	\$8,500	-	-
System for redirecting level 4 and 5 patients at the ER	\$25,000	-	-
Infrastructures and Videoconference	\$500,000	\$500,000	\$500,000

Regional Health and Business Plan 2022-2025

Annexe I-1: Operating budget for 2022-2025

Revenues	2022-2023	2023-2024	2024-2025
Revenues	728,902,934	747,041,434	765,633,396
Department of Health* Recoveries and other	725,539,985 3,362,949	743,678,485 3,362,949	762,270,447 3,362,949
Salaried physician recoveries	78,849,446	75,972,188	77,111,771
Medical education	6,369,847	6,369,847	6,369,847
Other programs	8,405,277	8,405,277	8,405,277
Veterans Health Canada Donations from foundations	7,549,055 356,222 500,000	7,549,055 356,222 500,000	7,549,055 356,222 500,000
Total revenue	818,527,504	837,788,746	857,520,291
Expenses	2022-2023	2023-2024	2024-2025
Salaries	453,578,844	462,650,421	471,903,429
Benefits	58,754,550	59,342,096	59,935,516
Physician salaries	76,726,838	77,877,740	79,045,906
Medical and surgical supplies	39,674,176	40,467,660	41,277,013
Medications	47,901,059	52,691,165	57,960,281
Other expenses	141,892,037	144,759,664	147,398,146
Total expenses	818,527,504	837,788,746	857,520,291
Operating surplus (deficit)	0	0	0
Capital revenues	10,000,000	10,000,000	10,000,000
Amortization of tangible capital assets	(31,500,000)	(31,500,000)	(31,500,000)
Provision for sick pay obligation	(1,500,000)	(1,500,000)	(1,500,000)
Surplus (Deficit)	(23,000,000)	(23,000,000)	(23,000,000)

*Includes revenue for patients

Regional Health and Business Plan 2022-2025

Appendix I-2: Expenses per Program for 2022-2025

Expenses per program	2022-2023	2023-2024	2024-2025
Clinical programs	454,123,213	466,765,614	479,927,661
Inpatient services	161,795,890	165,646,619	169,631,981
Ambulatory services	81,098,392	82,948,338	84,846,012
Diagnostic and therapeutic services	139,610,484	142,422,536	145,228,212
Tertiary services	68,449,383	72,518,402	76,931,260
Training	3,169,065	3,229,719	3,290,195
Administrative and support services	183,689,981	187,095,272	190,416,914
Support services	155,065,626	157,964,845	160,800,763
Administration and other	28,624,356	29,130,427	29,616,151
Salaried physicians	75,124,446	76,257,553	77,405,335
Other Department of Health programs	84,733,724	86,420,158	88,130,877
Mental Health - Restigouche	14,498,911	14,804,949	15,118,839
Mental Health - Hospitals	13,192,658	13,475,772	13,766,675
Addiction Services	8,522,856	8,689,695	8,858,578
Public Health	14,789,421	15,071,500	15,356,957
Community Mental Health	33,729,878	34,378,241	35,029,827
Research	3,834,607	3,909,655	3,982,944
Medical education	7,017,135	7,140,393	7,262,787
Other	10,004,397	10,200,101	10,393,773
Miscellaneous	554,522	564,870	575,414
Donations/foundations	892,714	910,365	927,072
Veterans	7,549,055	7,698,100	7,846,106
Health Canada	1,008,107	1,026,766	1,045,180
Total expenses per program	818,527,504	837,788,746	857,520,921

Regional Health and Business Plan 2022-2025

Appendix J-1: Capital budget for 2022-2023

Capital budget		Subtotal	Total
Equipment budget	Under \$100,000 – Operating	\$3,800,000	\$9,900,000
	\$100,000 and over – Capital	\$6,100,000	
Major renovations budget – Capital			\$7,700,000
Total equipment and major renovations budget			\$17,600,000

Appendix J-2: Major projects authorized for 2022-2023

Facility	Project description	Approved projects / Estimated costs
Chaleur Regional Hospital	Expansion (210,000 ft ²)	\$217M
Restigouche Hospital Centre	Transformation of the provincial Centre of Excellence for Youth into an addiction rehabilitation unit	\$10M
Dr. Georges-L.-Dumont UHC	Development of the NB Public Health Laboratory	\$10M
Vitalité Health Network – Zone 1B	Centre of Excellence for Youth Mental Health in Moncton	\$17M
Total		\$254M

Appendix J-3: Equipment \$100,000 and over, authorized for 2022-2023 (letter from Department)

Facility	Equipment	Budget price
Moncton	Oncology treatment system (phase 1 of 2)	\$800,000
Bathurst	Widefield fundus camera for angiography – Ophthalmology	\$150,000
Moncton	Urology system (fluoroscopy) – Outpatient clinics	\$410,000
Caraquet	Blood analyzer – Laboratories	\$120,000
Tracadie	Blood analyzer – Laboratories	\$120,000
Bathurst	Multipurpose radioscope	\$1,000,000
Moncton	Multipurpose radioscope	\$1,000,000
Edmundston	Multipurpose radioscope	\$1,000,000
Edmundston	Dishwasher	\$450,000
Moncton	CT-SIM replacement (\$700K, \$350,000 from Foundation)	\$350,000
Campbellton	Mobile (C-Arm) radiography – Surgical suite	\$200,000
Edmundston	Heart monitors (Phase 1 of 3)	\$1,000,000
Total		\$6,600,000

Appendix J-4: Equipment \$100,000 and over, planned for 2022-2027

Facility	Equipment (catch-up required 2022-2023)	Budget price
Edmundston	OCT-Angiography - Ophthalmology 2nd of 2 required	\$175,000
Edmundston	Hamamatsu S360 slide scanner	\$250,000
Moncton	Hamamatsu S360 slide scanner	\$250,000
Bathurst	Mammography	\$650,000

Regional Health and Business Plan 2022-2025

Facility	Equipment (catch-up required 2022-2023)	Budget price
Campbellton	Mammography	\$650,000
Edmundston	Mammography	\$650,000
Moncton	Mammography 1 of 2	\$650,000
Edmundston	C-Arm	\$240,000
Moncton	C-Arm	\$240,000
Campbellton	C-Arm	\$240,000
Bathurst	Echocardiogram machine	\$250,000
Edmundston	Zone 4 cardiac monitors (phase 2)	\$1,000,000
Total		\$5,245,000

Facility	Equipment (2023-2024)	Budget price
Moncton	Slide stainer	\$120,000
Moncton	Angiography room (GDH)	\$1,200,000
Bathurst	Nuclear medicine	\$1,200,000
Campbellton	Stationary MRI (construction 3.3 million + equipment 1.8 million)	\$1,800,000
Moncton	Digital imaging room (DR)	\$500,000
Moncton	Dishwasher - Food Services	\$700,000
Moncton	Oncology treatment system (phase 3)	\$400,000
Edmundston	Cardiac monitors (phase 3)	\$1,000,000
Total		\$6,920,000

Facility	Equipment (catch-up required 2023-2024)	Budget price
Moncton	Endobronchial Ultrasound (EBUS)	\$220,000
Moncton	Uronav Fusion Biopsy System	\$180,000
Bathurst	PACMED + PACVision + double shutter	\$390,000
Moncton	Specimen radiography machine	\$250,000
Bathurst	Bacteria identification (MALDI-TOF)	\$220,000
Bathurst	ELISA analyzer	\$140,000
Edmundston	SurePath - SlidePrep	\$110,000
SMK	DR room (SMK) (end of life 2019-20)	\$500,000
Bathurst	DR room (HBA)	\$500,000
Campbellton	DR room	\$500,000
Moncton	RT Module for GE MRI	\$60,000
Moncton	Upgrade of GE software platform for MRI	\$140,000
Moncton	CO2 surgical laser	\$100,000
Moncton	OSI (Jackson) surgery table, back surgery and urology - Fracture	\$270,000
Edmundston	Orthopedics table	\$200,000
Campbellton	Zone 5 cardiac monitors (phase 1)	\$1,000,000
Total		\$4,780,000

Regional Health and Business Plan 2022-2025

Facility	Equipment (2024-2025)	Budget price
Moncton	OCT- Angiography-Ophthalmology	\$110,000
Campbellton	PACMED	\$250,000
Campbellton	PACVision	\$175,000
Bathurst	ELISA analyzer	\$140,000
Edmundston	Slide stainer	\$120,000
Bathurst	Vision Analyzer (ABO/Rh ab)	\$110,000
Moncton	WASP (streaking)	\$265,000
Moncton	LIAISON XL	\$125,000
Bathurst	Infectious disease analyzer (Architech)	\$130,000
Bathurst	ELISA analyzer	\$140,000
Moncton	Kiestra (bacteriology automation)	\$1,000,000
Edmundston	VENTANA (immuno. stainer)	\$150,000
Edmundston	Multipurpose fluoroscopy room	\$1,000,000
Bathurst	Mobile DR	\$180,000
Bathurst	C-Arm	\$225,000
Moncton	C-Arm	\$225,000
Edmundston	Gamma Camera	\$1,200,000
Bathurst	Gamma Camera	\$1,200,000
Moncton	MRI upgrade	\$675,000
Edmundston	MRI upgrade	\$675,000
Bathurst	MRI upgrade	\$675,000
Moncton	Tray warming system	\$850,000
Bathurst	Walk-in cooler (non-refrigerated formula room)	\$100,000
Bathurst	Tray warming system	\$603,000
Moncton	Radiation oncology accelerator (1 of 3)	\$2,800,000
Moncton	Surface Guided Radiation Therapy for gating	\$500,000
Moncton	Advanced detector for radiosurgery	\$100,000
Moncton	HDR source projector (+ applicators)	\$1,000,000
Moncton	6D table for SBRT/SRS	\$350,000
Moncton	Plethysmograph	\$108,000
Edmundston	Holmium laser	\$160,000
Campbellton	Upgrade Storz system	\$100,000
Campbellton	MIS room for laparoscopic surgery – Development	\$250,000
Edmundston	Integrated #2 and 3 OR room	\$500,000
Total		\$16,191,000

Regional Health and Business Plan 2022-2025

Facility	Equipment (2025-2026)	Budget price
Moncton	CO2 laser (gynecology)	\$225,000
Edmundston	PACMED	\$250,000
Bathurst	Auto-embedding System	\$240,000
Bathurst	Barcoding System – Pathology	\$450,000
Moncton	KingFisher	\$100,000
Moncton	Cytogenomics platform	\$400,000
Moncton	BACTEC	\$120,000
Moncton	Dako Omnis (immunology)	\$110,000
Moncton	Automated hematology analyzer (Sysmex)	\$425,000
Moncton	Automated hematology analyzer (Sysmex)	\$125,000
Moncton	NGS platform update	\$900,000
Edmundston	Cell computer	\$210,000
Moncton	BEP 2000 automated serological testing system	\$150,000
Bathurst	Liquid-based cytology equipment	\$110,000
Moncton	Tissue processor	\$125,000
Bathurst	Hematology analyzer (2)	\$240,000
Car/Tra	Chemistry analyzer (2)	\$300,000
Campbellton	Mobile DR	\$180,000
Bathurst	Bone density scanner	\$100,000
Moncton	Bone density scanner	\$100,000
Moncton	PET-CT	\$2,600,000
Moncton	CT Scan	\$1,600,000
Grand-Sault	Mammography	\$650,000
Edmundston	Ultrasound (2)	\$400,000
Caraquet	DR room	\$500,000
Moncton	Portable ultrasound (2)	\$120,000
Moncton	C-Arm	\$240,000
Moncton	Radiation oncology accelerator (2 of 3)	\$2,800,000
Total		\$13,810,000

Regional Health and Business Plan 2022-2025

Facility	Equipment (2026-2027)	Budget price
Moncton	Hydrosurgery device	\$120,000
Moncton	Cytogenomics platform	\$400,000
Moncton	BACTEC	\$120,000
Moncton	Dako Omnis (immunology)	\$110,000
Moncton	Automated hematology analyzer (Sysmex)	\$425,000
Moncton	Automated hematology analyzer (Sysmex)	\$125,000
Moncton	NGS platform update	\$900,000
Campbellton	3D automated breast ultrasound (ABUS) device	\$250,000
Moncton	Mammography 2 of 2	\$650,000
Campbellton	Multipurpose fluoroscopy (end of life since 2022)	\$1,000,000
Bathurst	Ultrasound (1)	\$220,000
Moncton	Radiation oncology accelerator (3 of 3)	\$2,800,000
Total		\$7,120,000

Regional Health and Business Plan 2022-2025

Appendix J-5: Building Improvements Authorized for 2022-2023 (letter from Department)

Order	Facility	Project Description	Approved Projects/ Estimated Costs
Building Improvements Planned for 2022-2023 – Authorized by letter from the Department of Health			
1	Lamèque Hospital	Addition of a ventilation system – 2 nd financial year	\$1,295,000
2	DGLDUHC	Replacement of nurse call bell system, year 1 of 2	\$2,493,000
3	Campbellton Rehabilitation Centre	Computer switches – 2 fiscal years	\$50,000
4	Moncton Veterans	Nurse call bell system	\$20,000
5	DGLDUHC	Transitory renovation of the existing emergency unit	\$750,000
6	Grand Falls Hospital	Nurse call bell system	\$175,000
7	Edmundston Hospital	Replace window caulking	\$636,297
8	Campbellton Hospital	Replace roof #7	\$481,842
9	Edmundston Hospital	Repair chimney	\$600,000
10	Campbellton Hospital	Replacement of existing pneumatic control system with DDC system	\$950,000
11	DGLDUHC	Replace roofs no.65 and no.66	\$750,000
12	All zones	Contingency funds	\$98,986
Total 2022-2023			\$8,300,125

Facility	Equipment	Budget price
Moncton	Oncology treatment system (phase 1 of 2)	\$800,000
Bathurst	Widefield fundus camera for angiography – Ophthalmology	\$150,000
Moncton	Urology system (fluoroscopy) – Outpatient clinics	\$445,795
Caraquet	Hematology analyzer - Laboratories	\$120,000
Tracadie	Hematology analyzer - Laboratories	\$120,000
Bathurst	Multipurpose fluoroscopy	\$1,000,000
Moncton	Multipurpose fluoroscopy	\$1,000,000
Edmundston	Multipurpose fluoroscopy	\$1,000,000
Edmundston	Dishwasher	\$450,000
Moncton	CT-SIM replacement (\$700K, \$350,000 from Foundation)	\$350,000
Campbellton	Mobile X-ray (C-Arm) – Surgical Suite	\$200,000
Edmundston	Cardiac monitors (Phase 1 of 3)	\$1,000,000
Total		\$6,635,795

Regional Health and Business Plan 2022-2025

Appendix J-6: Building Improvement Projects, planned for 2023-2027

Order	Facility	Project Description	Approved Projects / Estimated Costs
Building improvements planned for 2023-2024			
1	DGLDUHC	Replacement of nurse call bell system, year 2 of 2	\$1,000,000
2	St-Quentin Hospital	Generator replacement	\$650,000
3	Tracadie Hospital	Generator replacement	\$650,000
4	Tracadie Hospital	Fire system replacement	\$500,000
5	Caraquet Hospital	Repair chimney	\$150,000
6	Bathurst Hospital	Repair two chimneys	\$500,000
7	Grand Falls Hospital	Repair chimney	\$300,000
8	St-Quentin Hospital	Replace elevator	\$750,000
9	Caraquet Hospital	Generator replacement	\$300,000
10	Edmundston Hospital	Fire alarm panel replacement	\$500,000
11	DGLDUHC (Hôtel-Dieu)	Elevator enhancement	\$900,000
12	Caraquet Hospital	Replacement of windows	\$250,000
13	Bathurst Hospital	Ventilation unit replacement	\$750,000
14	SMK Hospital	Replacement of two ventilation units	\$1,000,000
15	Bathurst Hospital	Replacement of roof nos. 16 and 19	\$375,000
16	DGLDUHC (Oncology Centre)	Replacement of roof nos. 65, 66 and 68	\$150,000
17	Campbellton Hospital	Replacement of freezer rooms	\$950,000
	Total		\$9,675,000
Building improvements planned for 2024-2025			
1	SMK Hospital	Replacement of two ventilation units – 2nd year	\$700,000
2	Campbellton Hospital	Replacement of roof no. 7	\$700,000
3	Grand Falls Hospital	Replace the nurse call bell system	\$100,000
4	Campbellton Hospital	Replacement of existing pneumatic control system with DDC system in all rooms (phase 3)	\$3,000,000
5	Edmundston Hospital	Replacement of roof no. 3	\$450,000
6	DGLDUHC	Fix the smoke control system by zone	\$1,000,000
7	DGLDUHC	Replace the water cooling loop system	\$250,000
	Total		\$6,200,000
Building improvements planned for 2025-2026			
1	Campbellton Hospital	Replace two chillers and cooling towers	\$2,500,000
2	Edmundston Hospital	Replace the underground oil tank	\$350,000
3	DGLDUHC (Oncology Centre)	Update the elevator emergency power	\$200,000
4	Edmundston Hospital	Replace four electric transfer switches	\$450,000
5	Grand Falls Hospital	Replace one electric transfer switch	\$125,000
6	St-Quentin Hospital	Replace one electric transfer switch	\$125,000
7	DGLDUHC	Replace pipes and valves (steam)	\$100,000
8	Edmundston Hospital	Upgrade two electrical substations	\$500,000
9	Lamèque Hospital	Repair chimney	\$100,000
10	Edmundston Hospital	Replace freezer rooms	\$950,000
11	Grand Falls Hospital	Replace the boiler control system	\$100,000
12	Edmundston Hospital	Replacement of roof no. 7	\$300,000
	Total		\$5,800,000

Regional Health and Business Plan 2022-2025

Order	Facility	Project Description	Approved Projects / Estimated Costs
Building improvements planned for 2026-2027			
1	Edmundston Hospital	Renovation of a negative pressure isolation room	\$300,000
2	Campbellton Hospital	Renovation of records, physician locker room and emergency spaces	\$300,000
3	Edmundston Hospital	Renovation of basement to add spaces	\$975,000
4	Edmundston Hospital	MDRD expansion renovation	\$450,000
5	Campbellton Hospital	Replacement of boiler condensate tank	\$800,000
6	Edmundston Hospital	Replacement of scavenging system	\$500,000
7	Tracadie Hospital	Repair of boilers	\$850,000
8	Tracadie Hospital	Addition of emergency generator	\$550,000
	Total		\$4,725,000

Regional Health and Business Plan 2022-2025

Appendix J-7: Major Projects Requested for 2023-2024

	Project Description	Total Estimated Cost of Projects	2022-2023 budgets required (master plan, drawings and specifications or completion)
1	Development of Capital Master Plan (CMP) for Edmundston Regional Hospital (two years)	\$50,000,000	\$500,000
2	Construction to replace mobile MRI with stationary MRI at Campbellton Hospital – requires the hiring of professionals to prepare the drawings and specifications	\$5,000,000	\$250,000
3	Redevelopment of a parking lot and access to Edmundston Hospital – drawings and specifications completed	\$3,000,000	\$3,000,000
4	Refitting to bring sterile and chemotherapy pharmacies up to standard, all zones – internal analysis completed, requires the hiring of professionals to prepare the drawings and specifications	\$12,000,000	\$500,000
5	Renovation for modernization of centralized specialized laboratories (Bathurst and Moncton) – internal analysis completed, requires the hiring of professionals to prepare the drawings and specifications	\$10,000,000	\$400,000
6	Preparation of drawings and specifications – expansion of emergency department and outpatient and ambulatory clinics at DGLDUHC – based on the 2022 FTP	\$340,000,000	\$5,000,000
	Total	\$420,000,000	\$9,650,000