

# Vitalité Health Network 2024-2029 Public Health Strategic Plan

Evolution of Our Public Health





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# A word from management and the associated regional medical officers of health

It is with great pleasure that we present the Vitalité Health Network 2024-2029 Public Health Strategic Plan, entitled **Evolution of Our Public Health**. This plan is designed to position us better to face current and future challenges and to meet the growing needs of our population while ensuring the wellness of our teams.

The lessons learned from the fight against COVID-19 have led us to review our priorities. In addition, the report published in 2021 by Dr. Tam, **A vision for TRANSFORMING Canada's public health system**, leads us to think about

possible changes to realize the vision of this report. Our strategic planning is the result of analysis, research and valuable consultations with our Public Health

teams and our various local and regional partners. Our focus is on the following three main directions: Communication, Collaboration-Partnership and Resources.

Our health care system must change to cope with the growing burden of services to be provided and an aging population. Public Health at Vitalité Health Network wants to keep its sights on promoting and protecting the health of the population while focusing on disease and injury prevention.

Public Health plays an important role in helping to create environments in which it is easy to make healthy choices. The Evolution of Public Health initiative will continue this advocacy for healthy communities. Its carefully considered and strategic actions to promote health, with both communities and partners, inspire

positive change that supports health.

It is important to create a society in which everyone has access to equitable health services. A society in which preventive measures are a priority to reduce the burden of disease. A society in which communities have the knowledge and resources they need to adopt a healthy lifestyle and achieve optimal health.

Collaboration between health service providers, implementation of evidence-informed interventions, harnessing of technology for health promotion, and advocacy for policies that promote health equity are strategic measures that will help build strong, resilient communities.

Finally, this tool aims to call on everyone to work together to develop environments that are safe, foster health, and support healthy lifestyles for the entire population.



# Our purpose

In the spring of 2022, in the wake of the COVID-19 pandemic and armed with the lessons learned from it, Vitalité Health Network Public Health undertook a review on the necessary means to respond rapidly in the event of other disasters, while continuing to contribute to improving the population's quality of life.

## Our vision

**Working together for a healthier population!**

## Our mission

**To protect and promote health and prevent illness and injury within our population by collaborating with various partners.**

## Our strategic directions

**Resources**

**Collaboration-Partnership**

**Communication**

## Our essential functions



## Our programs





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# Public Health's essential functions

According to Dr. Tam's 2021 report, *A Vision to Transform Canada's Public Health System*, Public Health has six essential functions:

**Promotion:**

Working collaboratively with communities and other sectors to understand and improve health through healthy public policy, community-based interventions, public participation, and advocacy or action on determinants of health.

**Surveillance:**

Collecting health data to track diseases, the health status of populations, and determinants of health trends, in order to promote health, prevent and reduce the impact of disease, and monitor health inequities.

**Health protection:**

Protecting the population from infectious disease, environmental threats, and unsafe water, air, and food.

**Population health assessment:**

Understanding the health of communities, specific populations, and the determinants of health to create better services, policies, and research to identify the most effective interventions.

**Disease and injury prevention:**

Promoting safe and healthy lifestyles to prevent illness and injury and reducing risk of infectious disease outbreaks through investigation and preventive measures.

**Emergency prediction, preparedness and response:**

Planning for natural or human-made disasters to minimize serious illness and death and responding to emergencies while minimizing societal disruption.

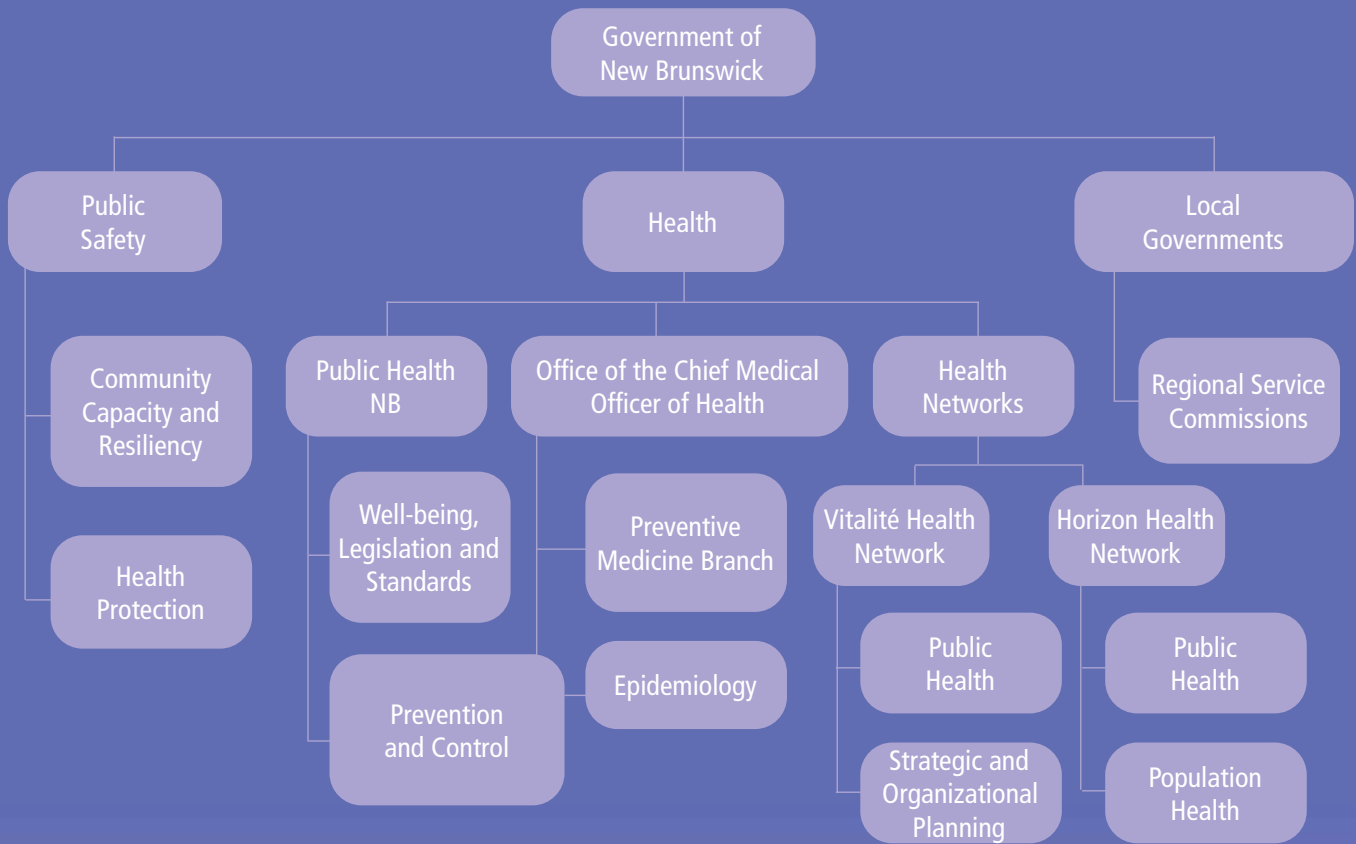
# Government of New Brunswick common community development definitions

Common definitions allow us to move more effectively and collectively toward the impacts desired through community development. They were developed using a determinants of health lens.



**COMMUNITY DEVELOPMENT**  
Community development is a comprehensive approach grounded in principles of empowerment, equity, human rights, inclusion, social justice, self-determination and collective action. In practice, community development considers community members to be experts in their lives and communities, and values community knowledge and wisdom. Community development is led by community and supported by governments and organizations at every stage: from identifying issues and analyzing them, to deciding on, implementing, and evaluating actions. Community development has an explicit focus on the redistribution of power to address the causes of inequality and disadvantage with the goal of having healthier, and more.

# Public Health in New Brunswick



In New Brunswick, essential public health functions are carried out by more than one organization, in a complex structure that requires close collaboration and fluid communication between different agencies. According to Dr. Tam's report, public health governance is an essential component in the development of public health. The organizational chart above shows the structure of the key public health stakeholders in New Brunswick. According to the websites of these agencies, their respective mandates are as follows:

### Community Safety:

- The Community Capacity and Resiliency Branch is responsible for aligning government and community efforts to recover from the extensive impacts of COVID-19 and to build resilience to future crises and disasters. Some of Vitalité Health Network's Public Health community development advisors work in this sector as seconded employees.
- Health Protection Services protect the public from health hazards, maintain healthy environments and reduce the incidence of disease in the areas of food safety, environmental health, recreational and institutional sanitation, water quality, emergency preparedness and communicable disease control.

### Health:

- Public Health NB is responsible for the overall direction of public health programs in the province and works in collaboration with the regional health authorities (RHAs) and other government and non-government health service providers.
  - The Well-being, Legislation and Standards Branch supports creating a healthy, resilient and flourishing population in New Brunswick through legislation, policy and collaboration with partners to protect health, promote well-being and support one health and actions on climate change.
  - The Prevention and Control Branch supports creating a healthy, resilient and flourishing population in New Brunswick through policy, standards and collaboration within the department, across GNB and with external partners to prevent communicable disease, non-communicable disease, injury, problematic substance use and related harm, and provide incident command for provincial outbreaks.
  - The branch is also the business owner of the Public Health Information Solution and oversees the publicly funded vaccine supply and distribution.
- The Office of the Chief Medical Officer of Health and the Epidemiology and Surveillance Branch supports creating a healthy, resilient and flourishing population in New Brunswick through monitoring the trends of diseases reportable under the *Public Health Act* and vaccination; supporting response to disease outbreaks; and providing subject matter expertise and evidence to inform planning, development and evaluation of public health programs and services.

- Vitalité Health Network is a regional health authority that delivers and manages health care and services in an area covering all of northern and southeastern New Brunswick. The only francophone-managed organization of its kind in the country, the Network has nearly 60 points of service across its territory and provides a range of health care services to the public in the official language of their choice.

- The Network's Public Health Department puts New Brunswick Public Health programs into action.
- The Strategic and Organizational Planning Department is responsible for ensuring that the community health needs assessment process is carried out and that the needs identified are taken into account in the organizational planning cycle.

- Horizon Health Network operates 12 hospitals and more than 100 medical facilities, clinics and offices throughout New Brunswick, focused on delivering quality and safe care to patients, clients and their families.

- The Horizon Health Network Public Health Department puts New Brunswick Public Health Programs into action.
- The Population Health Department transforms systems, builds capacity and empowers communities to improve population health and promote health equity. This department is also responsible for Community Health Needs Assessments.

### Environment and Local Government:

The white paper entitled "Working together for vibrant and sustainable communities" establishes a renewed system of local governance for New Brunswick, notably by expanding the role of Regional Service Commissions (RSCs) in the area of community development. The RSCs are called upon to bring together key partners and stakeholders in their region to examine the current landscape of community development, identify existing goals, actions and plans, and establish a coherent vision and plan for regional community development that will focus attention on key issues.



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# Public Health Programs

## Health Promotion

**“Health Promotion”** involves working on various initiatives, according to the health priorities and needs identified by communities. Health Promotion team members use an ecological approach to plan, implement and evaluate evidence-based strategies with the aim of improving the health status of a target population in collaboration with a range of partners.

It is important to keep in mind that health promotion is also the key goal of all Public Health programs. Whether implementing initiatives, working with families, promoting breastfeeding and healthy eating, vaccinating the public or preventing the spread of communicable diseases, all Public Health staff share the common goal of promoting the health of New Brunswickers. The vision of health promotion guides the operationalization of the programs established by New Brunswick Public Health.

## Sexual Health

The Sexual Health Program is a New Brunswick Public Health program available through the two health networks, namely Vitalité Health Network and Horizon Health Network. Using a comprehensive population health approach, the mandate of the program “is to improve, support and maintain the healthy sexuality of the targeted clientele in New Brunswick.” . (Government of New Brunswick, 2021).

### **The program has three goals:**

- 1) Reduce unwanted teenage pregnancies;
- 2) Reduce sexually transmitted and blood-borne infections;
- 3) Promote and protect the sexual health of New Brunswickers at all stages of life.

These goals are an integral part of Vitalité Health Network’s health priorities.

### Healthy Learners in School Program (HLSP)

This program targets Kindergarten to Grade 12 students. According to the program guide (OCMOH, 2015), the goals of the HLSP, which are based on the four pillars of the Comprehensive School Health Framework, are that the school community:

1. Create healthy, supportive and safe learning environments;
2. Acquire knowledge, skills and experience that build competencies in taking action to improve health and wellness;
3. Build partnerships and access services to advance school health and wellness;
4. Develop and support practices and policies that promote health and wellness.

Within Vitalité Health Network, this program is operationalized by members of the health promotion team, in conjunction with the Department of Education and Early Childhood Development, school districts, learning specialists, school staff, and stakeholders in the various settings where children and youth are found.

### Nutrition

The Nutrition Program has several components supported by the New Brunswick Public Health Nutrition Framework for Action in order to create healthy environments, to promote healthy eating, and to prevent disease. These components include actions to counter food insecurity, promote breastfeeding and ensure healthy child development.

### Baby-Friendly Initiative (BFI)

The BFI is a quality improvement framework aimed at protecting, promoting and supporting breastfeeding. This quality improvement framework consists of ten steps to successful breastfeeding, as well as of the International Code of Marketing of Breast-Milk Substitutes, and subsequent resolutions from the World Health Assembly. The BFI was launched by the World Health Organization (WHO) and United Nations Children's Fund (UNICEF) in 1991 and was adopted in New Brunswick in 2006. In Public Health, several BFI committees and working groups work to protect, support and promote breastfeeding, including a regional committee, working groups and community committees. Community committees are made up of several community partners and are responsible for delivering activities in the community. Specific provincial working groups also tackle education on breastfeeding, promotion, and monitoring of breastfeeding statistics. All these committees and working groups are supported and supervised by the BFI Regional Coordinator.

### Immunization

The Immunization Program provides vaccines to target groups to protect them against diseases. The New Brunswick Immunization Program provides vaccines through routine, high risk and communicable disease response programs. Safe and effective vaccines, legislation, policies, standards and competent providers are the cornerstones of the program. Immunization Program nurses:

- Provide advice on immunization and vaccines;
- Monitor immunization requirements for children in licensed daycare centres and children entering school;
- Facilitate other vaccinators' access to tools and resources;
- Control and coordinate reporting of adverse events following immunization.

### Communicable Diseases

The Communicable Disease Program also plays a critical role in preventing and controlling diseases, thus promoting the health of the population. Communicable Disease Program nurses:

- Follow up with individuals with communicable diseases, inform them about preventive measures, and track people with whom they have been in contact;
- Follow up with contacts of individuals with communicable diseases and inform them about the required screening and treatments;
- Consult and collaborate with health care providers and other health care professionals;
- Raise awareness, inform and advise individuals or groups on preventing and controlling communicable diseases.

### Healthy Families, Healthy Babies (HFHB)

The Healthy Families, Healthy Babies Program offers prenatal services that foster healthy pregnancy, and postnatal services that promote the healthy development of children from birth to age two, while supporting and guiding families. Services include screening, home visiting, provision of nutritional supplements, and referral to other services. The program is directly aimed at reducing health risks for children targeted as at risk for physical and psychological developmental delays.



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## Methodology

In the spring of 2022, at the end of the COVID-19 pandemic, our Public Health teams were beginning to emerge from a major pandemic and our teams were gradually resuming their usual activities. Our reality had evolved, and we had learned to work differently thanks to the addition of technological tools to facilitate communication between our teams. We didn't want to lose the impetus to change things and go back to our old ways.

**Strength, Weakness, Opportunity and Threat (SWOT)** activities were conducted with all our employees to understand their perception of our department. These activities, in preparation for the accreditation survey held in 2022, enabled us to understand our current situation and gave us some ideas for improvement.

This was followed by a series of seven projects, between 2022 and 2024, to assess the human resource requirements needed to offer our essential programs, increase the efficiency of our programs and evaluate how to better adapt to the post-pandemic reality. The following methodology illustrates how our teams drafted

the strategic plan, not the details of the seven projects that have brought us to this point.

First, we formed the Evolution of Public Health project committee, with representatives from each profession, zone and program. The purpose of the first face-to-face meeting was to familiarize ourselves with the concepts of upstream work in public health and to start the strategic planning.

1. River activity. The purpose of this activity was to determine whether the tasks performed by Public Health are upstream, midstream or downstream. This terminology is drawn from Dr. Tam's 2021 report. The aim of our evolution of public health project is to strike a balance between upstream, midstream and downstream interventions. To achieve a balance, we need to know the current status of our interventions.
2. The project team carried out a SWOT activity (*see results in Appendix A*).

The members of the Evolution project carried out the river activity in each zone with all employees during the fall. The aim of this activity was to familiarize all our teams with the concepts of upstream public health work. The tasks and results of this activity were categorized on a whiteboard. (Appendix B)

To ensure that our strategic plan meets the needs of our population, the Evolution project team held consultations with its partners. A process was established to carry out similar consultations in each zone (Appendix C). The aim of these consultations was to gather our partners' perceptions of our services and the improvements they feel should be made.

At the same time, a request was made to the Vitalité Health Network research team to conduct a literature review to identify best practices in terms of organizational structure.

During a face-to-face team meeting, the members of the Evolution project team compiled the feedback gathered from the partners. The most frequent elements were inserted into a SWOT grid. We then inserted into this grid the results of the first SWOT exercise done at the first meeting to capture our own results. All the comments were then grouped by theme. We compared our results with the findings from the literature and with Dr. Tam's 2021 report. The exercise identified the following three main directions and their objectives:

#### a. Collaboration-Partnership

- i. Increase collaboration and support with community organizations and between government departments to avoid overlap of services and programs
- ii. Improve access to health care services, including our services
- iii. Increase Public Health's presence in the community

#### b. Resources

- i. Ensure investment to support the various Public Health programs
- ii. Ensure the availability of sufficient human resources with a wide range of expertise

#### c. Communication

- i. Increase public communications
  1. On health topics
  2. On societal issues
  3. To increase the visibility of our services and programs
  4. To explain our mandate and role
- ii. Have our own corporate image
- iii. Clarify and publicize the roles of the various actors in public health (networks vs. government departments).



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# Collaboration-Partnership

**GENERAL OBJECTIVE:** Ensure an efficient structure that fosters collaboration and partnership between Public Health and communities.

Collaboration-Partnership is an important strategic orientation for Public Health, because population health is complex and depends on a range of factors that do not all fall under the health umbrella but also encompass education and the economy, to name but a couple.

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## OBJECTIVE 1:

Ensure the participation of partners from various sectors.

### Why was this direction chosen?

The factors that influence health are numerous, complex and interrelated. Those working in public health are aware of the importance of collaborating with partners from various sectors to enrich our understanding of the health issues affecting populations.

During consultations, partners expressed the wish for Public Health to turn to them more, to seek them out more to understand an issue and work on it.

It is important to know and recognize the essential contribution of our partners. This would make it possible to leverage the diversity of knowledge and expertise from the scientific sector, the field and professional sectors, drawing on their expertise, resources and approaches.

### Initiatives

- Develop a formal structure to better coordinate actions between Public Health and partners, to maximize the use of resources.
- Set up partner evaluation and feedback mechanisms to monitor progress.
- Evaluate the impact of interventions implemented in collaboration with partners.
- Adjust approaches based on the results of our evaluations and lessons learned.

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## OBJECTIVE 2:

Collaborate with research and training institutions.

### Why was this direction chosen?

There are many areas of knowledge in the health sector, and they are constantly evolving. The most recent reports tabled by the Chief Public Health Officer of the Public Health Agency of Canada recommend the use of evidence for best practice in public health. Drawing on these recommendations, Public Health must establish practices that enable it to access this knowledge quickly and in a

timely manner, so that its decisions are informed by evidence. We would like to see Public Health continue to work closely with the people generating knowledge, so it can be kept informed rapidly. This close collaboration will also shape the type of research carried out, as well as the research themes. Similarly, Public Health should continue to work with training institutions to ensure that human resources in health have a better grasp of the health issues with which they are dealing.

### Initiatives

- Continue to work with the university community through various initiatives.
- Improve collaboration with colleges and universities to offer public health work placements or other learning opportunities.
- Enhance collaboration with the research community to facilitate projects addressing public health issues.

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## OBJECTIVE 3:

Collaborate in project planning and implementation.

### Why was this direction chosen?

Consultations with partners revealed the specific realities of the communities and zones and the need to understand their issues to find innovative solutions. A global and systemic approach that takes populations and their context into account is essential. This approach must be applied systematically.

Human and financial resources are limited. Labour shortages are widespread. Budgets are streamlined. Resources are too scarce for some services to be overlapping while others are lacking. To avoid the risk of overlap, it is important to be aware of all the services offered, both outside and inside the health sector. We need to coordinate and collaborate to work together more efficiently to serve our populations and offer them the full range of services. New solutions need to be explored to ensure that the same problems do not recur. Innovation is the key!

### Initiatives

- Join forces with communities to take action on the factors that improve everyone's health.
- Use the tools of the ecological approach to ensure optimal collaboration with the various partners as soon as public health issues are identified.
- Review existing service maps to foster links between partners, both internal (Vitalité Health Network) and external, to avoid overlap of services and to develop missing services.



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#### **OBJECTIVE 4:**

Increase Public Health's presence in the community.

##### **Why was this direction chosen?**

During consultations, Public Health partners indicated that, too often, Public Health is slow to react to an issue or problem. Public Health does not exert enough of an influence in support of community mobilization and engagement.

It is important for Public Health to be present at various forums. This presence will help restore confidence in Public Health and its image. This will also help it stay on top of current and emerging issues. It will then be in a better position to act in a timely manner and provide leadership that mobilizes people.

##### **Initiatives**

- Establish a communication plan to inform partners of Public Health's role and responsibilities.
- Ensure that Public Health has a presence in a number of strategic locations in the community, including the school community and seniors' community.

##### **Measures**

- Satisfaction levels of our key partners
- Do we have the right partners at the table?
- Have we involved partners in a timely manner?
- Percentage of deadlines met
- Compliance rate with the ecological approach

# Resources

## GENERAL OBJECTIVE:

Ensure the availability of the human and financial resources needed for Public Health.

Human and financial resources are an important strategic orientation for Public Health to support its essential functions of surveillance, prevention, promotion and protection.

## OBJECTIVE 1:

Ensure investment to support the various Public Health programs.

### Why was this direction chosen?

- During consultations, we heard that Public Health does not have a large enough presence in the community.
- During consultations, we heard that Public Health does not consult sufficiently with communities.
- Current budgets and infrastructures do not allow us to offer consultations and be present in the community.
- Our current communication methods don't meet everyone's needs. This creates inequity in terms of access to information (e.g., print vs. electronic resources).
- Our programs are offered to a very specific clientele and are not universally accessible.

### Initiatives

- Obtain subsidies for communities to offer projects.
  - Possibility of community committees applying for grants (to become recognized non-profit organizations in New Brunswick). Funds are needed for this process.
- Build infrastructures adapted to community work, with the necessary resources to ensure everyone's safety.
  - Explore the possibility of integrating the premises of integrated service networks to deliver Public Health services closer to communities
  - Meeting rooms
  - Technological equipment (e.g., hybrid meeting facilitation, Smart Board, etc.)
- Budget for meeting facilitation (room rental, snacks, equipment, etc.)
- Budget for educational resources / printed promotional materials
- Budget for one-off projects with specialized human resources based on community needs

**Example:** Project manager, contract staff, etc.

- Offer universal services in various forms to prenatal and postnatal clientele, and evaluate opportunities for collaboration with other sectors to maximize our services..

### Measures

- Public Health budget increase
- Adapted infrastructures for community work
- Delivery of universal services to prenatal and postnatal clients



## OBJECTIVE 2:

Ensure the availability of sufficient human resources with a wide range of expertise.

### Why was this orientation chosen?

- The teams expressed that they feel overloaded and have to look after several programs.
- Employees are expected to be experts in several fields.
- Upstream work is insufficient, and one of the factors contributing to this shortcoming is the lack of varied and sufficient expertise.
- The shortage of nurses is leading us to rethink the way we deliver our services.
- In the face of threats, our current structure does not give us the flexibility to adapt and act in a timely manner.
- Training budgets do not allow for adequate training of our employees.



## Initiatives

- Revise the organizational structure of the programs based on the reality of the different zones to reduce the number of programs assigned per employee. Here are some possible solutions:
  - Consider the possibility of regionalizing certain processes for the communicable disease program.
  - Reduce the number of programs assigned to each RNCA
  - Take into account the work that needs to be done upstream in our programs (CD, IMM, HFHB, BFI) in terms of human and financial resources
- Assign human resources based on community needs and available community resources, not just on volume. This will enable us to increase our presence in the community to meet all needs across the entire life continuum.
  - Offer Public Health programs by integrated service network community:
    - Health Promotion, include at least the following team:
      - Community Development Advisor
      - Promoter
      - Dietitian
      - Other health professional based on the needs of each community
    - Baby-Friendly Initiative, offered by the promotion team with support from the HFHB program team
    - Immunization
  - Explore the possibility of offering pediatric vaccination on the premises of local family health teams.
  - School immunization under the responsibility of Public Health but supported by the Primary Health Care Integrated Network team (LPN, RN) / Mental Health and by the addition of casual employees as needed.
    - HFHB: assign program employees to Primary Health Care Integrated Network territories.
- ◆ Advocate for lactation consultants in each Primary Health Care Integrated Network, who collaborate with the promoter - see home-based possibilities.
- Standardize administrative support positions while taking into account the needs of the zones. Provide the Public Health team with communications advisors, experts in training and knowledge mobilization, and specialists in public health policy.
- Evaluate what professional can be added to the HFHB team to support the addition of universal services for prenatal and postnatal clients.
- Have the support of designated employees from the following sectors:
  - Research
  - Performance, project management
  - Communications
- Ensure the ongoing development of our staff's skills across all our programs. For example:
  - BFI
  - Project management
  - Etc.
- Recognize the BFI as a separate program from Public Health.
  - Ensure that there is a BFI officer for each zone. This officer would be responsible for representing the zone at regional discussions and conveying the information to their local teams.
  - Assign local human resources to the BFI program according to the needs of each zone.
- ◆ Advocate for the addition of a regional BFI coordinator in primary health care and the mother-child sector.

## Measures

- Have an optimized CD team
- Reduce the number of programs per RNCA
- Offer immunization, promotion, BFI and HFHB programs by Primary Health Care Integrated Network community
- Have a functional structure for offering the Baby-Friendly Initiative in the Primary Health Care Integrated Network
- Have a specialized regional team to support our teams' training needs

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# Communication

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## GENERAL OBJECTIVE:

### Improve Our External Communications

*Communication is an important strategic orientation for Public Health to support its essential functions of surveillance, prevention, promotion and protection. The aim is to improve the use of interpersonal, organizational and media communication strategies to better inform and have greater influence over individual and collective decisions that support health improvement.*

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## OBJECTIVE 1:

Affirm our position in the health care network and in communities and increase our visibility

### Why?

Consultations revealed that Public Health does not have a strong enough presence in the communities and on the ground and does not consult the communities sufficiently. It was also noted that Public Health is poorly understood and its role poorly defined. Public Health, its programs and what it can provide to the various stakeholders in the community are not well known among organizations.

Work is therefore needed to clarify and promote its mandates, roles and programs to the public.

### Initiatives

- Establish a “map” of Public Health in New Brunswick, specifying the roles of each stakeholder (department/regional health authorities, research/CHNA, Primary Health Care Integrated Network, learning communities, etc.), and make it known.
- Define the role and responsibility of Public Health professionals in various initiatives.
- Ensure media coverage: press releases, interviews in various media (radio, newspaper, Vitalité Health Network Facebook, television).
- Create and feed our social networks (Facebook, Instagram, etc.) by zone.
- Develop a public health awareness campaign, organize conferences, meetings, annual days, etc.
- Set up a regular media event with the general public to discuss public health issues.
- Highlight our programs and achievements in our communications.
- Develop our own internal campaigns and communication tools.
- Publish articles in This Week and on the Vitalité Health Network website.

- Defend our mandates within the health network (in relation to the communications, research and translation departments).
- Be involved with community partners on a continuous basis.
- Develop a unique identity: logo, slogan, vision, mission, promotional material, etc.

### Measures

- Have increased the number of articles and interviews in all internal and external media
- Have evaluated public awareness and knowledge of our programs and corporate brand through surveys and a consultation process with partners in five years’ time
- Have improved our relations with the research and communications departments
- Have improved our relations in the community, which will know the role and mandate of Public Health

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## OBJECTIVE 2:

Establish and make better use of our expertise and combat health misinformation

### Why?

During consultations, our partners indicated that the community is poorly informed about health issues. In addition, since the pandemic, there has been a loss of public confidence in Public Health services, which can lead to misinformation in the health field.

Our current communication methods don’t meet the health education needs of all community members. Public Health must therefore improve its communication with the public to convey its knowledge and expertise and thus combat health misinformation.

### Initiatives

- Support our partners and act as a consultant.
- Get involved and collaborate with communities (networking, consultations, representation on advisory committees such as municipalities, school districts, etc.), assert our leadership in certain issues.
- Promote Public Health’s expertise in the various programs both publicly and internally.
- Promote Public Health’s expertise in our various communications: press releases, interviews with various media, zone Facebook pages, articles on the Vitalité Health Network website, media kits, etc.
- Make appropriate and frequent use of the media to share our knowledge.



### Measures

- Have obtained recognition of the role of Public Health professionals from partners
- Greater Public Health involvement in community committees
- Increase in the number of media appearances by Public Health experts

### OBJECTIVE 3:

Improve our ability to communicate to have greater influence

#### Why?

Consultations revealed that our current communication strategies do not meet everyone's needs. We must step up our presence in the media and our influence in the community to improve the health of our populations.

To achieve this, we need to increase human resources in communications and develop skills in the use of different communication tools.

#### Initiatives

- Learn to write and format written documentation: create pamphlets, bookmarks, fact sheets and posters, and upload content to the Vitalité Health Network website and make the site easier to navigate. Thus, learn how to use Canva, WordPress, Publisher, etc.
- Learn how to create and use different platforms (Facebook, Spotify, YouTube, etc.) to share our information.
- Learn how to use smartphones and tablets to record podcasts and videos.
- Encourage staff to learn communication techniques for conducting interviews - basic techniques (flow, expression, tone, animation, etc.).
- Develop a communications plan aligned with the objectives of

Vitalité Health Network and the Government of New Brunswick.

- Improve communication methods related to data collection: increasing the number of participants, mobilization, individual or group interviews, surveys of various kinds, etc.
- Choose communication methods adapted to the target audience: literacy level, age, culture and language.
- Learn to defend our positions in advocacy campaigns.
- Acquire marketing skills (i.e., the ability to promote and sell services).

#### Measures

- Staff will be better trained and more confident to collaborate on various media and content productions.
- Public Health will be able to use basic communication tools and convey information in a wide range of media.
- The Public Health team will have acquired new resources and expertise to improve its communications.
- Public Health will be more present in the media.
- The public will be more aware and better educated, informed and mobilized on health issues.
- Behavioural changes will be observed and the population will be healthier.

# Rollout plan

Here is the rollout plan to implement the initiatives and projects set out in the strategic plan of the evolution of Public Health.

	Description	Start date	End date
<b>Initiative 1</b>	<b>Build infrastructures adapted to community work with the necessary resources to ensure everyone's safety.</b>	<b>July 2024</b>	<b>December 2027</b>
<b>Initiative 2</b>	<b>Revise the organizational structure of the programs based on the reality of the different zones to reduce the number of programs assigned per employee.</b>	<b>July 2024</b>	<b>March 2026</b>
Project 2.1	Explore the possibility of having a regional team for the communicable diseases program, including the promotion-prevention component.	October 2024	September 2025
Project 2.2	Reduce the number of programs assigned to each RNCA.	October 2024	December 2024
Project 2.3	Assign human resources per Primary Health Care Integrated Network communities based on community needs and available community resources, not just on volume.	October 2024	September 2025
Project 2.4	Develop a BFI structure as a separate program from Public Health.	October 2025	December 2025
Project 2.5	Offer universal services in various forms for the prenatal and postnatal population and evaluate opportunities for collaboration with other sectors to maximize our services.	October 2025	March 2026
Project 2.6	Develop a hiring process for ad hoc projects with specialized human resources based on community needs.	April 2025	June 2025
<b>Initiative 3</b>	<b>Communicate the role and responsibilities of Public Health.</b>	<b>July 2024</b>	<b>March 2026</b>
Project 3.1	Develop a unique identity: corporate image, logo, slogan, vision, mission, promotional material.	July 2024	September 2024
Project 3.2	Establish a communication plan to inform partners of Public Health's role and responsibilities.	July 2024	September 2024
Project 3.3	Establish a "map" of Public Health in New Brunswick; specify the roles of each (department / health authorities, research/CHNA, Primary Health Care Integrated Network, learning communities).	July 2024	September 2024
Project 3.4	Develop a public health awareness campaign and organize conferences, meetings, annual days, etc.	January 2026	March 2026
<b>Initiative 4</b>	<b>Partnership development</b>	<b>April 2026</b>	<b>September 2026</b>
Project 4.1	Develop formal commitments with community partners to better coordinate actions between Public Health and partners to maximize the use of resources.	April 2026	June 2026
Project 4.2	Set up partner evaluation and feedback mechanisms to monitor progress and assess the impact of this collaboration.	July 2026	September 2026

	Description	Start date	End date
<b>Initiative 5</b>	<b>Community mobilization / learning community</b>	<b>October 2024</b>	<b>March 2026</b>
Project 5.1	Review maps of existing services to foster links between partners, both internal (Vitalité Health Network) and external, to avoid duplication of services and to develop missing services.	October 2024	December 2024
Project 5.2	Join forces with communities to take action on the factors that improve everyone's health by ensuring that Public Health has a presence in a number of strategic locations in the community, including the school community and with seniors.	October 2025	March 2026
<b>Initiative 6</b>	<b>Ensure ongoing skills development for our employees in communications.</b>	<b>October 2026</b>	<b>September 2027</b>
Project 6.1	Learn to write and format written documentation: create pamphlets, bookmarks, fact sheets and posters, and upload content to the Vitalité Health Network website and make the site easier to navigate. Therefore, learn to use Canva, WordPress and Publisher.	October 2026	September 2027
Project 6.2	Learn how to create and use different platforms (Facebook, Spotify, YouTube) to share our information (podcasts and videos).	January 2027	March 2027
Project 6.3	Encourage staff to learn communication techniques for conducting interviews; learn basic techniques (flow, expression, tone, animation).	January 2027	March 2027
Project 6.4	Improve data collection methods: increase the number of participants, mobilization, individual or group interviews, surveys of various kinds.	April 2027	June 2027
Project 6.5	Learn to defend our positions in advocacy campaigns.	July 2027	September 2027
Project 6.6	Acquire marketing skills (the ability to promote and sell services).	October 2026	December 2026
<b>Initiative 7</b>	<b>Implement communication methods.</b>	<b>January 2027</b>	<b>September 2027</b>
Project 7.1	Create and feed our social networks (Facebook, Instagram) by zone.	January 2027	March 2027
Project 7.2	Develop a communication plan aligned with the objectives of Vitalité Health Network and GNB.	July 2027	September 2027
Project 7.3	Choose and implement communication media adapted to the target audience: educational resources in different formats, literacy level, age, culture and language.	April 2027	June 2027
Project 7.4	Set up a regular media event with the general public to discuss public health issues.	January 2027	March 2027

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# Appendix A | Strategic Planning Activity

The following strategic planning is based on the book *Intégrer la stratégie dans votre organisation* (2016) by Vanessa Haché.

1. Future headlines icebreaker activity. Participants are asked to create a fictitious article on the achievements of Public Health that would appear on the front page of l'Acadie Nouvelle in five years' time. Participants share their article with the group.
2. Participants are divided into small groups, according to each program, to take part in a [World Café](#) (link in French) activity with three themes.

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## Theme 1: Public Health's mandate - Who benefits from our services?

1

- What are the community needs in our field of activity?
- What necessary resources does our community currently lack?
- What resources does Public Health lack?
- What does Public Health, our culture, look like?
- What are our daily or frequent challenges?

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## Theme 2: Public Health partners

2

- Are there other organizations where our clients can seek a similar service? Are there other similar organizations?
- Who are our partners? Who do we collaborate with?
- How do we differ from other organisations?
- Why do people choose our organization over others?
- What are people in our community, in our sector and in the media saying about Public Health?
- What can Public Health do that others cannot?

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## Theme 3: Why Public Health is needed

3

- Why does Public Health exist?
  - What are our strengths? What benefits do we bring to the community?
  - What would happen if Public Health disappeared tomorrow? Imagine our city, our region, our country or even the world without Public Health. What would that look like?
  - What fears do you have for the future of your field of activity?
  - What does success mean for Public Health?
  - What would allow us to say, "mission accomplished"?
-

3. Participants are asked to insert the answers obtained during the World Café activity into a table with the following scale: Strengths; Weaknesses; Possibilities/Opportunities; Challenges/Threats.

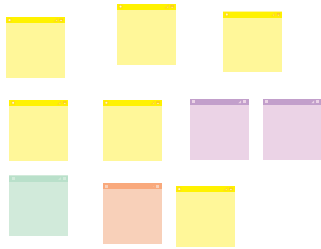
The answers are compiled in the table below.

Strengths	Weaknesses	Possibilities/Opportunities	Challenges/Threats
Population in good physical and mental health in a healthy environment (4 votes)	Communication (6 votes)	Improve the health of the population: promotion, prevention, protection, education, observation, portraits (4 votes)	Access to primary health care (5 votes)
Control of communicable diseases (2 votes)	Lack of varied expertise (6 votes)	People taking charge of their own health (2 votes)	Social and economic factors: housing and food (5 votes)
Promoting and being visionary about equity (2 votes)	Skills development (6 votes)	Prevention, early action (2 votes)	Lack and complexity of developing health promotion policies (5 votes)
Teamwork, inclusiveness, partners, trusting relationships (2 votes)	Managing the influence of technology in relation to email, Teams and meeting overload, restoring balance (4 votes)	No existing inequity (2 votes)	Lack of human resources for upstream work (4 votes)
Promotion, prevention and protection of the population (2 votes)	Restoring balance (4 votes)	Nurse practitioner (1 vote)	Social and economic needs (4 votes)
Raising public awareness about healthy lifestyles (2 votes)	Lack of support for breastfeeding (3 votes)	eVisitNB / NB Health Link (1 vote)	Lack of communications resources (3 votes)
We are committed to the health and well-being of the population (1 vote)	Funds for initiatives (3 votes)	People living better, healthier lives (1 vote)	Qualified person in promotion, development, program evaluation, communications and research (2 votes)
Population health, prevention, protection, improving health and living conditions for the population	Several programs scattered among our resources (2 votes)	Communities, general population (1 vote)	Outbreaks, pandemics
Laboratories, pharmacies, schools, correctional centres, mental health	Culture/Reaction (1 vote)	Under development	Mom/baby risk factors, adult high-risk behaviour
Importance of the community, knowledge of needs, responses and actions to meet community needs	Communities don't know Public Health (1 vote)	Physician and nurse practitioner offices, walk-in clinics, primary health care	Deterioration in people's health, increase in mortality and hospitalization rates
Education, teaching and support	Many individualized services (1 vote)	Department of Education, medical officer of health (MOH), cities, municipalities, school districts, RSC	Sick population, decline of the health care system, socio-economic factor
Rallying, leading, serving the population	Newcomers, diversity, unsuitable approaches	Library, Education, Department of Social Development	Not having the tools or resources needed to respond to the high diversity of the population
Accessibility	Public transportation	Increase in funding	Lack of resources, budget deficit to meet needs
Collaborative work and team of experts, research-based work	Lack of workforce to do more promotion	Family Resource and Community Health Centre	Lack of investment in Public Health, make sure our roles are clearly defined
Willingness to fill gaps	We do more prevention than promotion	OBS, prenatal and postnatal clinics	Decline in quality of life and life expectancy, increase in CDs
Trust, credibility, relationships, not-for-profit activities, structure, mandate, population-based approach, expertise	Visibility	Framework for action for the BFI program, IBCLC (lactation consultant)	Abolition of programs and services
Variety of expertise, passionate team, understanding of health determinants		Various professional services: occupational therapy, physio, audiology	Stable revenue
Expertise in immunization, HFHB, communicable diseases, case and contact management		Pregnant persons, vulnerable children and adolescents, young families, preschoolers	Loss of control over the health of our population
Collaboration with partners, raising awareness of equity issues		Content expert, misinformation	Specialist in inequities
Knowing where to direct people most of the time		Reduce disease, increase and maintain health	
Reducing pressure in hospitals		Changing culture	

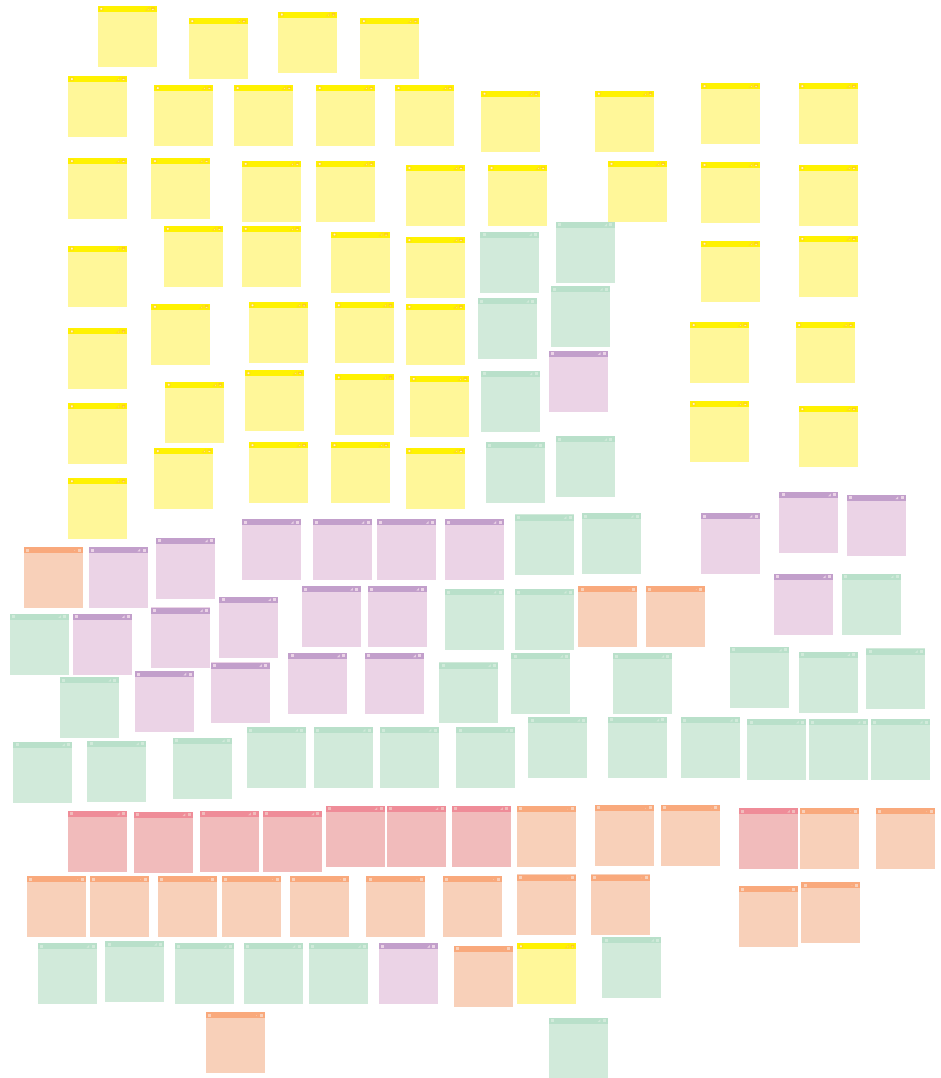
Legend: ● 6 votes ● 5 votes ● 4 votes ● 3 votes ● 2 votes ● 1 vote

# Appendix B | River Activity

## Upstream



## Midstream



## Downstream

# Appendix C | Consultation with partners

## Process:

Consultations will be held at the regional, local and internal levels of Vitalité Health Network and Horizon Health Network (Zone 1). The final project team will form smaller consultation teams for regional and provincial partners, and for internal sectors of Vitalité Health Network. Below are the steps for local consultations. Consultations to be completed by the end of February 2024.

- Create a work team in each zone.
- Identify the partners to be consulted in each respective zone. See list below:
- The team will choose the methods used for the following:
  - Focus group or World Café;
  - Survey;
  - Individual telephone interview.
- Use the **questions** below;
- In the invitation, send the questions to be discussed;
- The work team organizes meetings and carries out the consultation;
- The work team records the responses that received votes in the table on the project's Teams that lists strengths, weaknesses, possibilities/opportunities, challenges/threats.

## Questions:

1. In your opinion, is Public Health perceived as a key actor in improving the health of the population? Why?
2. When do people in your sector usually turn to Public Health?
3. In your opinion, what actions are being taken by Public Health to protect and improve the health of the population?
4. In your opinion, what changes could Public Health make to better fulfill its mandate?

## Organizations consulted

### Zone 1

- District scolaire francophone Sud
- Kent Family Resource Centre
- Famille et petite enfance francophone Sud
- Social Development
- Équipe d'accueil et d'établissement des nouveaux-arrivants – CAFI
- Family and Early Childhood, Anglophone East
- Early Childhood Family Resource Centre of Westmorland-Albert (Centre de ressources familiales à la petite enfance de Westmorland-Albert Inc.)
- Communauté rurale de Beausoleil
- Heart and Stroke Foundation of New Brunswick
- Southeast Regional Service Commission
- Université de Moncton, School of Nutrition
- Community Development, Horizon Health Network
- Université de Moncton, Public Administration and Health Services Management Department
- Regional Resilience Committee – Justice and Community Safety
- Village of Memramcook
- City of Moncton
- Community Outreach Program, YMCA
- Rexton food bank

### Zone 4

- District scolaire francophone du Nord-Ouest
- Northwest Regional Service Commission
- Social Development
- Université de Moncton, Edmundston campus
- Haut-Saint-Jean Library
- New Brunswick Housing Corporation
- Agence de la petite enfance
- Collège communautaire du Nouveau-Brunswick
- Centre de ressources pour nouveaux arrivants

### Zone 5

- Anglophone School District
- Social Development
- St-Joseph Community Health Centre in Dalhousie
- Regional Service Commission
- Eel River Bar Band Health Centre
- Restigouche Multicultural Association
- Restigouche Resource Centre for Parents

### Zone 6

- Department of Education and Early Childhood Development (DEECD)
- Director of the Centre de ressources familiales de la Péninsule acadienne
- General Manager of APRSC
- First Nations
- Chaleur Regional Service Commission
- Director of Administrative and Financial Services, DSFNE
- Chaleur Family Resource Centre
- Pabineau First Nation (nurse)
- Népisiguit Family Services

## Regional

- Canadian Mental Health Association
- Société Santé et Mieux-Être en français du NB
- Horizon Health Network
- NB Lung
- Vitalité Health Network
- Communautés et loisir Nouveau-Brunswick
- New Brunswick Health Council
- Université de Moncton
- Association francophone des aînés du Nouveau-Brunswick
- Economic and Social Inclusion Corporation
- Canadian Mental Health Association
- New Brunswick Public Health
- Department of Education and Early Childhood Development
- Mouvement acadien des communautés en santé du Nouveau Brunswick
- Centre de formation médicale de l'Université de Moncton
- Association francophone des parents du Nouveau-Brunswick
- Crown Corporation of the Government of New Brunswick















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