

Above and Beyond Together Office of the Chief Medical Officer of Health Strategic Plan 2012 - 2015

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Message from the Chief Medical Officer of Health



It is my pleasure to present the strategic plan *Above and Beyond Together* for New Brunswick's Office of the Chief Medical Officer of Health (OCMOH).

The strategic plan represents an important step for the Office of the Chief Medical Officer of Health. In addition to articulating broad goals which serve as a foundation for our strategic priorities and key activities, this plan clearly indicates areas of focus for the next three years.

Over the last decade, expectations of the public health officials have hugely increased in all parts of our mandate to promote, protect, and

improve the health of the population. This is also true in New Brunswick. Given shrinking budgets and increased demands, it is important to plan strategically so that we can continue our current work and yet be proactive in moving forward to meet evolving needs. A division-wide planning process was used to formulate key activities and identify particular areas we want to address to strengthen our ability to have a positive impact on the health of the people of New Brunswick.

This plan recognizes that we need to think about how we do our work. Well over 95% of health-care dollars, representing nearly half of the total provincial budget, goes to the delivery of health care to individuals, usually after they become sick. Therefore, the public health community needs to show leadership and advocate for increased emphasis on upstream population based approaches. We need to continue to move away from the enjoyable and rewarding work of working with patients, to developing partnerships and relationships with organizations and communities. Sharing our knowledge, expertise and experience with those who play important roles in creating healthy people is where we need to increasingly spend our time. To do so is essential to delivering on our commitment to improve, promote and protect the health of the people in New Brunswick and influence a shift in how we, as a province, think about and plan health.

As we endeavour to promote and model a healthy population in New Brunswick, I encourage and challenge you to reflect on how you might effect change aimed at improving, promoting and protecting the health of the population...

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I am particularly proud of the values and guiding principles we have developed for the Office of the Chief Medical Officer of Health, as this was undertaken with a consultative approach with employees. The guiding principles reflect the underpinnings of public health practice and, are in line with the provincial public service values and provide an authentic way to express those values while considering the culture and uniqueness of our field.

As we endeavour to promote and model a healthy population in New Brunswick, I encourage and challenge you to reflect on how you might effect change aimed at improving, promoting and protecting the health of the population, whether it is by modifying your own health behaviors or by becoming involved within your community or various departmental committees in the establishment of robust, responsive effective public policy.

As I look back on my four years as the Chief Medical Officer of Health for New Brunswick, I believe I am more aware of the pressing public health issues facing the province's population. I am extremely proud of the work and progress we have made in such a short time. I am confident that if we make public health everybody's business and face these issues head-on, taking even small actions, we can ultimately create meaningful and sustainable change that helps our communities be healthy while helping to contain the growth in health investments.

In summary, *Above and Beyond Together* sets clear priorities and key activities that we will undertake and measure. I look forward to watching the plan unfold over the next three years as the Office continues to support the vision we all share: a healthy population in New Brunswick.

In closing, I would like to express my sincere gratitude to all those involved in the production of the strategic plan for New Brunswick's Office of the Chief Medical Officer of Health. This has truly been a team effort and a great opportunity to challenge ourselves to accomplish our vision and mission. Thank you.

Regards,

Dr. Eilish Cleary,

Chief Medical Officer of Health

Executive Summary

This strategic plan outlines the areas that the division believes need extra focus and attention over the next three years.

The theme of this strategic plan, is to cultivate the strong roots that have already been planted, and allow us to grow "Above and Beyond Together". To do this, we plan to continue improving our surveillance, assessment, and knowledge building. We want to optimize our prevention efforts related to industrial and other health hazards, unintentional injuries, and promoting food safety and healthy nutrition. Creating an action plan for children's health, improving health amongst First Nations' populations, and addressing longstanding health inequities in various sectors are areas we want to focus on. Education, advocacy, policy and program development are at the centre of this plan to build capacity in the organization and to ensure greater efficiencies down the road, while improving public health practices throughout the province in the future.

Also in the plan is a brief profile of who we are and what we do as a way to provide context and illustrate the current activities and responsibilities of the OCMOH. We refer to the extensive, ongoing work we already do, as the "givens". This interconnected work with partners and stakeholders in the N.B.'s health system will continue to be central to what we do and the key activities flowing out of our strategic priorities will be integrated over the planning period as "new work". To do this effectively and realistically, the development of new workplans must be done in consideration of the "givens" to ensure that each stream of work informs and supports the other. Thus there will be an evolving quality to the plan as outdated practices may be identified and removed while better practices are put in place.

Part of the process of developing this plan has been the clarifying of values and vision for the OCMOH which in turn informed our guiding principles and allowed us to reaffirm our goals for public health. Before the strategic priorities were explored, we went through the critical exercise of establishing and reaffirming the philosophical vision and ethical fundamentals of our mandate. This provided us with the confidence and conceptual rigour for future thinking and decision making. What follows on the next page is a flowchart that provides a synopsis of the strategic priorities, strategic objectives and key activities of the plan.

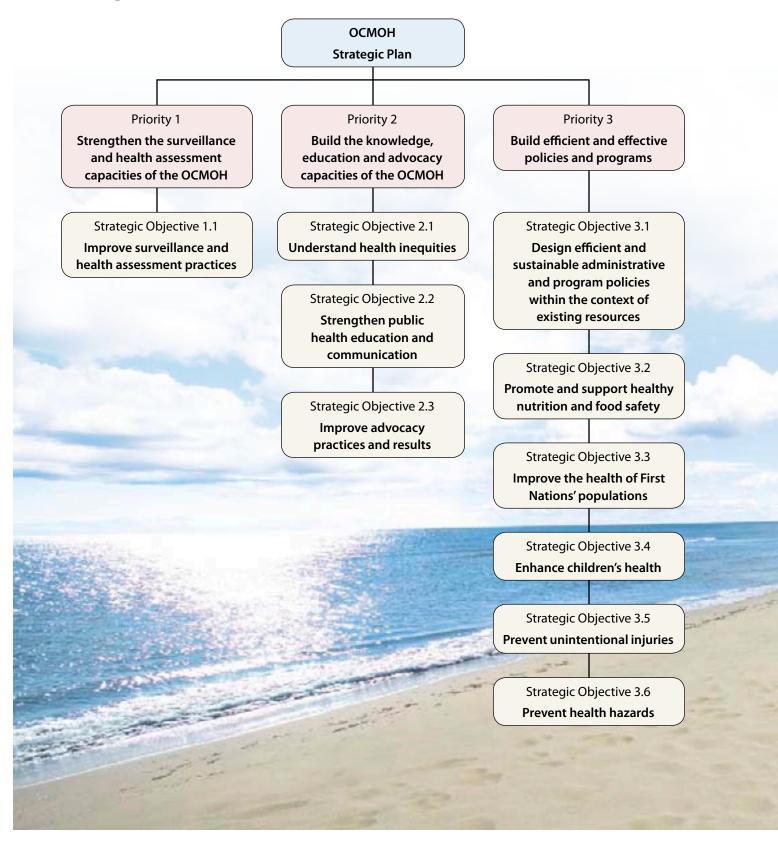
The OCMOH will strive to meet the objectives of this plan while delivering its broad mission: *To improve,* promote and protect the health of the people of New Brunswick— through collaboration, knowledge building, innovation, capacity building, and improved policies and programs.



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Strategic Plan at a Glance



Introduction

Strategic planning is an organization's process of defining its strategy, or direction, and making decisions on allocating its resources to pursue this strategy, including its financial and human resources. It is the formal consideration of an organization's future course. To determine where it is going, an organization needs to know where it stands, where it wants to go and how it will get there. Typically a strategic plan is viewed as a roadmap for determining where an organization intends to go for the next three years.

With increasing awareness of public health issues there is an increase in expectations and demands for public health staff to promote, protect, and improve the health of people in New Brunswick. The Office of the Chief Medical Officer of Health has seen substantial growth in staff and capacity to fulfill those expectations and demands. In addition, in recent years those in leadership positions have noticed the bright and energetic staff looking for direction and a common vision in public health. Now that a consistent management team has been in place for over a year and the staff is at nearly full complement, the timing is ideal to embark upon some much needed strategic planning to provide a common vision and direction for the staff.

As the strategic plan was being developed it became clear that the plan needed to be based in ethics. Ethics are as fundamental to public health practice and professionalism as is evidence-informed decision making. Public health ethics are a standard of care as well as a duty of care. These ethics embody the values and principles that guide our actions to improve, promote and protect health, and they must be relied upon — particularly in the face of uncertainty and controversy.

This plan is the result of a process that took 16 months in which discussions, dialogues and exchanges were held with both regional and central office staff. Additionally, representatives from the regional health authorities, who are also responsible for the delivery of public health programs and services, were consulted in the development of this plan. This strategic plan identifies strategic priorities, objectives to meet those priorities, and key activities the OCMOH will focus on for the next three years.



Background

Public health is defined as the organized efforts of society to keep people healthy and to prevent injury, illness and premature death. It is a combination of programs, services and policies that protect and promote the health of a population. It focuses on the entire population through work with both individuals and the community and encompasses a range of activities performed by all three levels of government (federal, provincial/territorial, and local). For public health to truly be successful and effective, it requires a broad range of individuals and organizations to collaborate in the interest of the health of the population. Work is accomplished through mutual effort by partners within both the public and private sectors. The programs, services and institutions involved emphasize the prevention of disease, the health needs of the population as a whole, and the protection of the public from risk of harmful events/exposures. Specific public health initiatives and activities may change as technology, social values and population needs evolve, however the goals of public health remain the same: to improve the health status and reduce the amount of disease, premature death and disease-produced discomfort and disability in the population.

The Office of the Chief Medical Officer of Health (OCMOH) is the division within the Department of Health responsible for the overall direction of public health. The OCMOH's scope of work is driven primarily by the specialty practice of public health, also commonly known as community medicine. Key functions include: some responsibility for communicable disease control; assessing environmental threats to human health; providing leadership in public health emergency situations; overseeing health surveillance, analysis, and reporting activities; providing expert advice on health promotion and disease prevention; and recommending and developing public health policy.

OCMOH programs and services fall under three broad categories: (1) Communicable Disease Control, (2) Public Health Practice and Population Health, and (3) Health Protection and Healthy Environments. These categories form the basis for organizational structure within the OCMOH, each serving as the lead for a defined area of public health activity. The following descriptions provide an overview of each area¹.

Communicable Disease Prevention and Control Branch

The communicable disease control (CDC) branch has responsibilities under the *Public Health Act* and is an integrated mix of programs that cover policy, surveillance, prevention and control of communicable diseases. CDC branch staff work collaboratively with internal and external partners to develop policies, standards and guidelines required to prevent, reduce the risk of, and control communicable diseases in New Brunswick. The branch provides epidemiological data and analyses to support outbreak investigations, and monitors and evaluates cases of specific communicable diseases and reportable events from influenza to zoonoses. The CDC branch also purchases, stores and distributes biologics and vaccines to prevent and control communicable diseases.

Public Health Practice and Population Health Branch

This branch is responsible for three essential areas of public health activity: public health practice, population health surveillance and population health. Public health practice includes such diverse activities as development of public health policy and standards, ongoing enhancement of professional public health skills, and facilitating communication and collaboration with stakeholders both within and outside the N.B. government. Population health surveillance includes collecting data, conducting analyses, and reporting trends concerning population health topics in N.B. to support evidence-informed decision making. Population health strategies and activities include planning and monitoring public health programs and activities aimed at improving the health of New Brunswickers, reducing health inequities among population groups, and mitigating the effects of inequities on individuals.

¹ For a better understanding of Public Health and the Office of the Chief Medical Officer of Health, please visit our website http://www2.gnb.ca/content/gnb/en/departments/ocmoh.html for a copy of An Introduction to Public Health in New Brunswick



Health Protection and Healthy Environments Branches

These branches have responsibilities under the *Public Health Act, Smoke Free Places Act, Cemetery Companies Act, Clean Water Act,* and *Natural Products Act.* Both branches work together to meet the regulatory responsibilities through an integrated mix of programs that are intended to anticipate, prevent and control adverse health effects from exposure to environmental health hazards. These hazards can be chemical, biological, radiological or nuclear in nature and are found in food (i.e., restaurants), water (i.e., drinking water), soil (i.e. radon, arsenic), or air (i.e. heat, pollution) or through a combination of exposures resulting from the built environment in which we live, work and play.

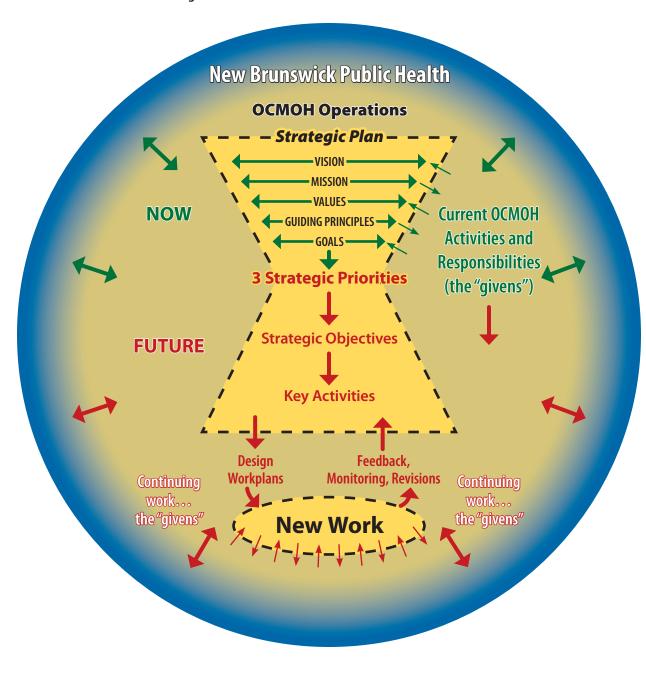
The Health Protection branch implements the environmental public health programs and requirements of the Acts and associated Regulations through environmental health promotion and education, licensing, inspection, enforcement, and investigation of potential and reported environmental health hazards and communicable diseases.

The Healthy Environments branch develops the environmental public health programs and policy and provides scientific, toxicological, medical and engineering support to the regional health protection branch staff and medical officers of health, collaborates with stakeholders on environmental public health issues, and assesses new and emerging environmental health hazards as they apply to New Brunswick.

Structure of the Plan

The main elements of this strategic plan include the vision, mission, values, guiding principles, goals, strategic priorities, strategic objectives, and key activities. It should be noted that all the elements of this plan are interdependent and the entire plan is embedded in the ongoing activities and responsibilities of the OCMOH (the "givens"). The following diagram illustrates these elements and their relationship to the current, ongoing work of the OCMOH.

A schematic view of the Strategic Plan



Beginning from the outside edges of the schematic diagram, the OCMOH exists inside the wider role of Public Health in the province of New Brunswick, the edges of which are porous as each informs and is responsive to the other. In all lines of the diagram, and especially the hourglass shape, the edges are similarly porous, as one side informs and is responsive to the other.

The yellow hourglass shape in the centre of the drawing indicates this Strategic Plan and its three year scope.

From the top of the diagram, a progression of thinking is illustrated from the broadest terms narrowed to three broad strategic priorities.² Each step down from the top of the hourglass shape indicates a focusing of conceptual thinking from broad to specific concepts that fulfills the role of informing, and supporting the goals of the OCMOH. These goals are met in large part by the current ongoing work of the OCMOH and this interactive relationship between direction and ongoing work is reflected by the porous line of the diagram through which ongoing work occurs in staff workplans in every branch of the OCMOH. Current operations are indicated in green, and future endeavours, as informed by the three strategic priorities of this plan, are indicated in red. These three priorities sit at the narrowest point in the design process and are worded in such a way as to encompass the most important work for future development of the OCMOH specifically, and by extension, Public Health throughout the province of New Brunswick generally.

From these three priorities, a list of strategic objectives and the rationale for each flows out in the bottom hourglass shape of the diagram. With each step, the degree of specifics and detail become greater as each objective is expanded into key activities that will be used to measure success of the plan over the remainder of the strategic planning period. This is where the strategic plan stops. The final level of workplans are the responsibility of each manager and their staff as they plan and integrate this new work with existing workplans, also known as the "givens."

Built into this design is a degree of reflexivity that allows cycling back and forth between the objectives and key activities, and the new work in the workplans. The strategic plan informs the design of workplans and the execution of the new work in conjunction with the continuing work of the OCMOH. This back and forth mechanism will provide feedback to allow us to monitor and revise the key activities and even the strategic objectives, as need be.

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² For the purposes of this document, a strategic priority is a broadly defined direction for future work.

Fundamentals

OUR VISION

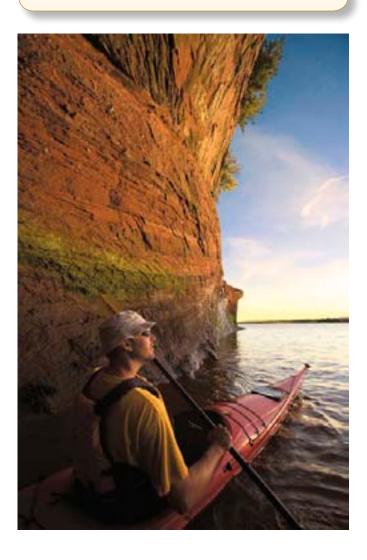
A healthy population in New Brunswick.

OUR MISSION

To improve, promote and protect the health of the people of New Brunswick.

OUR VALUES

Integrity, Courage, Healthy Workplace, Collaboration, Success and Quality Service



These values embody our beliefs and ideals about what constitutes best behavior and, consequently, influences the way we work and informs the decisions we make. For each value listed below, there follows key phrases which detail our understanding of how we commit to live our values. As the Office of the Chief Medical Officer of Health, we have agreed to embrace the following values in undertaking our work:

- Integrity: Living up to the standards or expectations of an individual's or corporate role: demonstrating fairness, honesty, hard work and accountability.
- Courage: Acting in accordance with OCMOHs goals and values, especially in the face of criticism. Exercising substantive practices of inclusion in all areas of work.
- Healthy workplace: Supporting and investing in OCMOH employee development, fostering healthy work environments, promoting work/life balance, encouraging enjoyment and enabling satisfaction at work.
- Collaboration: Supporting teamwork and continuously building collaborative work relationships with government and nongovernment partners and stakeholders.
- Success: Celebrating success by recognizing individual and team efforts and results, and highlighting public health accomplishments internally and externally.
- Quality service: Commiting to effective, efficient and equitable service.

Guiding Principles

Every organization has something unique about its identity that clearly distinguishes it from others and considers certain principles as fundamental to its direction. Our guiding principles are the foundation on which we work and determine direction. These are our guiding principles:

- Population health approach: Refers to the health of the population as measured by health status indicators and as influenced by the social determinants of health. Population health focuses on the interrelated conditions and factors that influence the health of populations during the life course; identifies systematic variation in their patterns of occurrence; and applies the resulting knowledge to develop and implement policies and actions to improve the health and well-being of those populations (Health Canada, 2001). The overall goal of this approach is to improve the health of the entire population and to reduce health inequities among groups.
- Focus on primordial and primary prevention: Primordial prevention actions and measures inhibit the emergence and establishment of environmental, economic, social and behavoural conditions, and cultural patterns of living that are known to increase the risk of disease. Primary prevention is protection of health by personal and communal efforts such as enhancing nutritional status, immunizing against communicable diseases, and eliminating environmental risks such as contaminated water supplies.
- Evidence-informed risk assessment and decision making: This principle aims at building evidence based on population health and conducting other activities to enhance accountability of Public Health's policies and programs. It focuses on improving health outcomes and the sustainability of the health system.³
- Social and Environmental Justice: Social and environmental justice is the equitable achievement of human and environmental rights. It refers to the fair treatment and meaningful involvement of all people regardless of social status with respect to the development, implementation and enforcement of environmental laws, regulations, and policies. It essentially links environment and its impact on the health of a population.

Goals

In order to achieve our mission, it was determined that we needed to articulate our overall goals, which are broad enough to encompass the roles and functions currently carried out across the entire Office of the Chief Medical Officer of Health and are central to our long-term work.

Our goals are:

- 1. To anticipate, prevent and control communicable diseases,
- 2. To prevent and respond to health hazards that pose a risk to public health,
- **3.** To generate and disseminate information on the health of the population to support evidence-informed decisions,
- 4. To build people's resilience,4
- 5. To build resilient communities and healthy environments, and
- 6. To promote a healthy OCMOH work environment and a competent workforce.

These goals will be advanced by undertaking the key activities flowing from our strategic priorities and objectives, along with the ongoing work of the OCMOH through the "givens". These goals are reflected in the table on page 17.

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³ Evidence-informed policy is critically tied, and responsive to, the context in which policies and practices will be used. "The pathway to evidence-informed policy and practice involves three active stages of progression, influenced by the policy context... 1) sourcing the evidence [adopt], 2) using the evidence [adapt], and 3) implementing the evidence [act]... Understanding how evidence informs policy and practice is critical in promoting effective and sustained public health action." (Bowen & Zwi 2005)

⁴ Resilience: "In the context of exposure to significant adversity, resilience is both the capacity of individuals to navigate their way to the psychological, social, cultural, and physical resources that sustain their well-being, and their capacity individually and collectively to negotiate for these resources to be provided in culturally meaningful ways. Resilience is more likely to occur when we provide the services, supports, and health resources that make it more likely for every child to do well in ways that are meaningful to the individual, his or her family, and the community." (Unger, M., 2012)

The Strategic Plan

Strategic Priorities, Objectives, Rationales, and Key Activities

The intent of the strategic priorities is to identify areas that will be given priority over the current three year planning period. In determining the strategic priorities and objectives the OCMOH management team initially considered factors such as risk and value. However, in the end, the key considerations were a blend of priorities within the current government (provincial and national), perceived opportunities, and public health science.

Strategic Priorities

- 1. Strengthen the surveillance and health assessment capacities of the OCMOH
- 2. Build the knowledge, education and advocacy capacities of the OCMOH
- 3. Build efficient and effective policies and programs

From each priority flows a set of strategic objectives. Each strategic objective is supported by a rationale that explains why the objective was selected. Following the objectives and rationale are the key activities which are actions to meet that particular objective.



Strategic Priority 1

Strengthen the surveillance and health assessment capacities of the OCMOH

STRATEGIC OBJECTIVES

1.1 Improve surveillance and health assessment practices.

Rationale

- To strengthen institutional capacity to guide evidence-informed public health decisions and actions
- To create a more standardized, coordinated approach within the OCMOH

Key Activities

- Provide scientific and technical leadership and strengthen partnerships in order to create more standardized and coordinated approaches to surveillance, assessment and reporting of population health, illnesses and associated risk factors in New Brunswick and its regions
- Develop an OCMOH population health assessment, surveillance, analysis and dissemination strategy
- Develop an OCMOH action plan which will improve data collection, quality, notification and surveillance processes

Strategic Priority 2

Build the knowledge, education and advocacy capacities of the OCMOH

STRATEGIC OBJECTIVES

2.1 Understand health inequities.

Rationale

- To understand the differences in health status across the NB population
- To close gaps in programs and services to address differences in health status
- To address the Canadian Ministers of Health strategic framework of the Healthy Living Strategy, that establishes the reduction of health disparities as one of its two goals

Key Activities

- Develop a conceptual discussion paper on health inequities in New Brunswick
- Determine existing gaps in programs/services

2.2 Strengthen public health education and communication.

Rationale

- To increase knowledge for individuals, institutions and the population at large about important health issues and factors influencing health, with its associated determinants
- To enhance peoples' capacity to use information to reduce risk, prevent disease, and promote health; and to enhance the well-being and quality of life of individuals within the community

Key Activities

 Develop a public health communication framework

2.3 Improve advocacy practices and results.

Rationale

 To build organizational capacity to advocate on behalf of and in partnership with New Brunswickers for improved health

Key Activities

- Review current advocacy targets and practices, and identify gaps and weaknesses
- Develop an advocacy action plan to address gaps and weaknesses
- Generate and disseminate information and evidence to enable informed discussions and action

Strategic Priority 3

Build efficient and effective policies and programs

STRATEGIC OBJECTIVES

3.1 Design efficient and sustainable administrative and program policies within the context of existing resources.

Rationale

- To support departmental priorities of ensuring sustainability and finding efficiencies
- To improve program and administrative functioning
- To support the prioritization, planning, monitoring and evaluation of public health interventions

Key Activities

- Identify current administrative policies
- Identify gaps and determine priorities
- Develop administrative policies
- Define public health roles and responsibilities
- Research and budget resources appropriately to current, expanded or new programs

3.2 Promote and support healthy nutrition and food safety.

Rationale

- To address the occurrence of non-communicable diseases and associated risk factors such as obesity
- To provide an opportunity to address healthy nutrition and food safety in a comprehensive and co-ordinated way, using a population health approach
- To create efficiencies within the OCMOH related to food safety and nutrition programs, policies and services

Key activities

- Develop a food framework
- Develop a food action plan
- Develop a Public Health nutrition framework

3.3 Improve the health of First Nations' populations.

Rationale

- To address significant inequities in the health status of NB First Nations' populations, which are nationally recognized
- To enhance the health of First Nations communities in New Brunswick by building upon existing relationships developed through work conducted in recent years between OCMOH, First Nations Inuit Health Branch and First Nations

Key Activities

- Determine gaps in provincial public health programs and services affecting the First Nations' population
- Develop an action plan to address gaps in provincial public health programs and services to First Nations people

3.4 Enhance children's health.

Rationale

- To respond to strong research evidence that supports the need to focus on early child health and development
- To align our efforts with the Public Health Agency of Canada, the World Health Organization, the United Nations Children's Fund (UNICEF), and the Organization of Economic Co-operation and Development (OECD)

Key Activities

 Develop an OCMOH framework and an action plan for healthy children

3.5 Prevent unintentional injuries.

Rationale

- To address the fact that injuries are a major cause of premature mortality and disability and are the leading cause of death for children
- To address the need for a better coordinated approach

Key Activities

 Develop a framework and an OCMOH action plan for the prevention of unintentional injuries

3.6 Prevent health hazards.

Rationale

- To better prevent and respond to known health as well as anticipate and understand potential health hazards that can affect population health associated with the built environment, industry or emerging contaminants.
- To work towards proper planning processes to prevent health hazards that can affect population health

Key Activities

- Develop a plan to work in partnership with stakeholders who are involved in transportation planning, land use and building construction decisions in order to promote a public health lens in creating built environments
- Develop a framework to integrate Health Impact
 Assessments into Environmental Impacts
 Assessments for proposed projects which have a
 potential affect on population health

Summary

The following table summarizes the strategic priorities, objectives and activities that we want to focus on over the next few years to help us achieve our vision and mission. While our vision, mission, guiding principles, and goals will remain constant, our priorities, objectives, and activities may evolve and change during the next strategic plan cycle.

Connecting the Plan to Our Goals

To understand how each key activity is tied to our fundamental goals, each goal has been coded and inserted in the second column of the table beside its relevant activity.

- 1 To anticipate, prevent and control communicable diseases,
- 2 To prevent and respond to health hazards that poses a risk to public health,
- 3 To generate and disseminate information on the health of the population to support evidence-informed decision making for policy and practice,
- 4 To build people's resilience,
- 5 To build resilient communities and healthy environments, and
- **6** To promote a healthy OCMOH work environment and a competent workforce.

	Priority 1: Strengthen the surveillance and health assessment capacities of the OCMOH.			
Strategic Objectives		Goal	Key Activities	
1.1	Improve surveillance and health assessment practices	1,2,3	 Provide scientific and technical leadership and strengthen partnerships in order to create more standardized and coordinated approaches to surveillance, assessment and reporting of population health, illnesses and associated risk factors in New Brunswick and its regions Develop an OCMOH population health assessment, surveillance, analysis and dissemination strategy Develop an OCMOH action plan which will improve data collection, quality, notification and surveillance processes 	
Pri	ority 2: Build the know	ledge, e	ducation and advocacy capacities of the OCMOH.	
Stra	tegic Objectives	Goal	Key Activities	
2.1	Understand health inequities	4, 5	 Develop a conceptual discussion paper on health inequities in New Brunswick Determine existing gaps in programs/services 	
2.2	Strengthen public health education and communication	1-6	Develop a public health communication framework	
2.3	Improve advocacy practices and results	1-5	 Review current advocacy targets and practices, and identify gaps and weaknesses Develop an advocacy action plan to address gaps and weaknesses Generate and disseminate information and evidence to enable informed discussions and action 	
Pri	ority 3: Build efficient a	nd effe	tive policies and programs.	
Stra	tegic Objectives	Goal	Key Activities	
3.1	Design efficient and sustainable administrative and program policies within the context of existing resources	1, 2, 4, 5	 Identify current administrative policies Identify gaps and determine priorities Develop administrative policies Define public health roles and responsibilities Research and budget resources appropriately to current, expanded, or new programs 	
3.2	Promote and support healthy nutrition and food safety	2, 4, 5	 Develop a food framework Develop a food action plan Develop a Public Health nutrition framework 	
3.3	Improve the health of First Nations' populations	1, 2, 4, 5	 Determine gaps in provincial public health programs and services affecting the First Nations' population Develop an action plan to address gaps in provincial public health programs and services to First Nations people 	
3.4	Enhance children's health	1, 2, 4, 5	Develop an OCMOH framework and an action plan for healthy children	
3.5	Prevent unintentional injuries	2, 3, 4, 5	Develop a framework and an OCMOH action plan for the prevention of unintentional injuries	

Next Steps

Strategic planning is a continuous process. The development and publication of a plan is only the beginning of the process to moving this strategic plan into action and to the development of key performance indicators for each of the activities. This will require the OCMOH branches to identify the responsibility it has in meeting the strategic objectives. Under the leadership of branch directors, OCMOH staff, including medical officers of health, will identify these key activities, develop key performance indicators and integrate them into annual branch workplans. The OCMOH management team will be responsible for ensuring branch workplans address the strategic activities and will design a plan to monitor the OCMOH's progress in achieving the strategic objectives. It is recognized that many of the objectives identified in this strategic plan will require collaborative action among branches. Branch workplans will need to clearly identify these shared responsibilities and ensure planning across branches has occurred as needed.

In addition, the management team will meet to evaluate the process of creating this strategic plan in order to gather insights that can inform the design and process of the next planning cycle.

Conclusion

In summary, *Above and Beyond Together*⁵ sets clear priorities for the OCMOH with key activities we are committed to undertake and measure.

This plan is about providing direction and focus to new initiatives to meet the current and future challenges of improving the population health of New Brunswickers, contributing to the sustainability of the New Brunswick health system, and influencing policy change amongst our partners.

We wish to thank all those who contributed to the development of the plan. It has been a worthwhile endeavour from which we gained knowledge of one another's gifts and gained strength as a team. We are blessed to have such a dedicated, motivated, competent and diverse workforce. It is the culture of teamwork, collaboration, group cohesion, and level of consensus that provides a strong foundation for us to continue to work together, in partnership with our stakeholders, toward realizing our vision and delivering on priorities.

We look forward to working with the OCMOH staff in the development of workplans that will bring this visionary strategic plan to life.

References

Bowen, S, and Zwi, A.B. (2005). "Pathways to 'Evidence-Informed' Policy and Practice: A Framework for Action." PloS Med 2(7): e166. Doi:10.1371/journal.pmed.0020166

Ungar, M., (2012) "What is Resilience?" Excerpt from home webpage of the Resilience Research Centre, Dalhousie University, Halifax, NS. Retrieved June 2012 at http://resilienceproject.org

⁵ You can access a copy of this Strategic Plan by going to the OCMOH website at http://www2.qnb.ca/content/qnb/en/departments/ocmoh.html