

North American COVID-19 Policy Response Monitor: New Brunswick

July 10, 2020

What is the North American COVID-19 Policy Response Monitor?

The North American COVID-19 policy monitor has been designed to collect and organize up-to-date information on how jurisdictions are responding to the crisis. It summarizes responses of health systems as well as wider public health initiatives. The North American policy monitor is an offshoot of the international COVID-19 Health System Response Monitor (HSRM), a joint undertaking of the WHO Regional Office for Europe, the European Commission and the European Observatory on Health Systems and Policies. Canadian content to HSRM is contributed by the North American Observatory on Health Systems and Policies (NAO).

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1. Preventing transmission

This section includes information on key public health measures that aim to prevent the further spread of the disease. It details how jurisdictions are advising the general public and people who (might) have the disease to prevent further spread, as well as measures in place to test and identify cases, trace contacts, and monitor the scale of the outbreak.

1.1 Health communication

On March 1, New Brunswick's Premier, Blaine Higgs, released the province's first statement on COVID-19, informing residents that while the province had no confirmed cases, they were taking the appropriate precautions to lower the risks for individuals in the province (New Brunswick, 2020e). The Premier stated that they were having daily briefings with Public Health and Emergency Measures Organization leaders to receive updates and communicate about a preparedness plan. On March 5, an update on COVID-19 was released by the acting Medical Officer of Health, Dr. Cristin Muecke, outlining steps to follow during this pandemic as further outlined in Section 1.3 (New Brunswick, 2020f). On March 11, the province's Chief Medical Officer of Health (CMOH), Dr. Jennifer Russel, announced New Brunswick's first presumptive case of COVID-19 (New Brunswick, 2020j).

On March 23, the provincial government established an information line and email that could be used to address health related questions, compliance with the new state of emergency or any other COVID-19 concerns (New Brunswick, 2020ab, p. 23). Workplace safety concerns should be addressed to <u>WorkSafeNB</u> (WorkSafe NB, 2020).

On March 30, the Office of the CMOH (Public Health) announced the first community transmission case in the province (New Brunswick, 2020ak). Updates on new cases continue to be provided through provincial daily news releases, and social media (Twitter & Facebook). Other jurisdictional information and public advice is being issued on the dedicated COVID-19 section of the provincial website (New Brunswick, 2020b).

On June 29, the provincial government announced a new online dashboard to provide people living in the province with access to information on COVID-19 (New Brunswick, 2020bw). The dashboard provides information on the number of active cases, deaths, hospitalizations as well as tests by age group. It also provides information on health zones, healthcare facilities and points of entry for the province.

1.2 Physical distancing

Physical distancing is recommended for all individuals living in the province of New Brunswick (New Brunswick, 2020m). The province's public health advice defines physical distancing as "2 metres (6 feet) between individuals, unless wearing a community face mask" (New Brunswick, 2020a). On March 12, the Government of New Brunswick recommended that individuals in the province begin to practice social distancing measures including avoiding shaking hands, practicing proper hygiene (including hand hygiene), avoiding and discouraging sleeping in common areas, increasing social distancing (two metres), eliminating self-serving buffet style eating, encouraging people who are ill or those with high-risk medical conditions to not attend gatherings, and ensuring that event organizers have arrangements in place to safely isolate and transport people who become ill (New Brunswick, 2020m).



The province later included the use of face coverings in their prevention efforts. Announced on June 5, face coverings are required in all buildings open to the public, except for children under the age of two and those unable to wear face coverings due to medical issues (New Brunswick, 2020bp).

Schools, childcare facilities and youth camps

On March 13, the Government of New Brunswick announced that all public schools across the province would be closed for two weeks, effective March 16 (New Brunswick, 2020p). Following this, on March 16, the province's CMOH recommended that childcare providers close, except for those providing services to service workers (New Brunswick, 2020t). On March 19, as a result of the province declaring a state of emergency, all colleges, universities and private schools were also required to close to students (New Brunswick, 2020x). On April 2, the provincial government announced that schools would not be reopening to students and that school calendar would not be extended (New Brunswick, 2020an). In an effort to ensure continued education for students, the Department of Education and Early Childhood Development stated that sectors were developing delivery plans and support materials (New Brunswick, 2020an). Students between kindergarten and Grade 12 were asked to dedicate between an hour and two and a half hours per day to completing home learning options (New Brunswick, 2020an).

Public and private gatherings

On March 9, the Government of New Brunswick stated that older adults and people who have certain chronic medical conditions should start to minimize attendance at crowded gatherings and mass events (New Brunswick, 2020g). Following this, on March 12, the Government of New Brunswick announced social distancing measures in an effort to reduce the spread of COVID-19, including recommending that any non-essential mass gatherings of 150 or more people be cancelled as well as encouraged amateur sports leagues or social gathering activities such as dance and theatre to consider suspending non-essential activities (New Brunswick, 2020m).

Non-healthcare businesses and services

On March 16, the CMOH recommended that the provincial government allow employees to work from home wherever feasible and encouraged private sector companies to do the same (New Brunswick, 2020t, p. 16). In this announcement, the Office of the CMOH (Public Health) also asked restaurant owners to limit the number of customers to 50 per cent capacity in dining areas (New Brunswick, 2020t, p. 16). On March 17, following this recommendation, all non-essential government services were shut down (New Brunswick, 2020s).

On March 19, when the state of emergency in the province was declared, various restrictions for businesses and other services were implemented under the new declaration (New Brunswick, 2020x). These restrictions reduced food and beverage businesses to be reduced to take-out and delivery services only, all lounges and social facilities to stop admitting patrons, all swimming pools, spas, saunas, waterparks, gymnasiums, yoga studios, dance studios, rinks and areas, tennis courts soccer and baseball fields, climbing walls, escape rooms, ski hills, golf courses, arcades, amusement centres, pool halls, bowling alleys, casinos, cinemas, libraries, museums, zoos, aquariums, barbers, hair stylists, esthetics service providers, sugar bush operations, and theatres or other live performance venues will stop admitting members of the public. As well, retail stores were required to stop admitting patrons, except grocery stores, pharmacies and other essential services (New Brunswick, 2020x). Following this, on March



20, it was announced that some Service New Brunswick centres would reopen on March 23, for essential services only (New Brunswick, 2020z). However, on March 28, it was announced that Service New Brunswick locations would close April 1 to in-person services, except essential services by appointment (New Brunswick, 2020ah). The decision came after Service Canada closed centres nationally.

Outdoor facilities

On March 13, all planned events at provincial parks were suspended until further notice. At the time, the decision affected the three parks open during the winter months including, Mont Carleton, Mactaquac and Sugarloaf (New Brunswick, 2020o). Following this, on March 19, the Government of New Brunswick announced that they would be closing all provincial parks (New Brunswick, 2020w).

On March 27, the provincial government announced that all school playgrounds and playgrounds associated with public housing facilities would close (New Brunswick, 2020ag), which were closed province-wide on April 3 (New Brunswick, 2020ap).

Healthcare facilities

On March 19, the emergency order required health services to cease operations unless the services provided were to address essential care or a healthcare emergency. As well, all unregulated health services providers were required to close (New Brunswick, 2020x).

Long-term care facilities

On March 11, the first restrictions for visitors in long-term care (LTC) were announced. These restrictions applied to anyone who had travelled outside the country from entering a LTC facility 14 days after they had returned to Canada (New Brunswick, 2020k). On April 14, the Government of New Brunswick published guidance for LTC facilities, outlining control measures including prohibiting all non-essential visitors from entering facilities (New Brunswick, 2020au). Other control measures outlined in this document include: limiting access points to single entry to the facility, training all staff and visitors on compliance with putting on and wearing masks, conducting active screening of employees at entry to the facility, requiring staff to self-monitor for new signs or symptoms, etc.

On May 11, was new rules were announced for visiting patients near end-of-life in hospitals, nursing homes and hospices (New Brunswick, 2020bh). Two visitors per patients are allowed to visit, one at a time and visitors will be required to maintain physical distancing, leave the room when staff are conducting procedures, monitor themselves for symptoms and refrain from visiting if symptoms appear, and follow facility rules regarding infection control (New Brunswick, 2020bh).

Other settings

On March 17, correctional institutions were closed to public access (New Brunswick, 2020u, p. 17).

1.3 Isolation and quarantine

The provincial guidelines recommend that individuals should self-monitor if they have no symptoms, and may have been exposed to COVID-19 in the past 14 days or were in close contact with older adults or people who are medically vulnerable or have been asked to do so by the local public health authority (New Brunswick, 2020i). Self-monitoring means monitoring for symptoms and avoiding crowded places and increasing personal space from others when possible (New Brunswick, 2020i). The guidelines also



state that a person must self-isolate if they have been diagnosed with COVID-19; are awaiting COVID-19 test results; have been told by public health that they may have been exposed; or have two or more of the symptoms listed on the provincial website (New Brunswick, 2020i). According to the <u>guidelines</u>, self-isolation means staying at home, monitoring symptoms, avoiding contact with others, and following local public health authority advice.

As mentioned in section 1.1, the acting Medical Officer of Health, Dr. Cristin Muecke, outlined steps to follow during this pandemic on March 5 (New Brunswick, 2020f). These measures included restrictions for all travelers returning to the country from anywhere in the world, requiring them monitor themselves and their children for symptoms for 14 days (see section 6.2 for more information about travel restrictions and guidance) (New Brunswick, 2020f). If symptoms such as fever, cough or difficulty breathing arise they should self-isolate immediately, contact Tele-Health at 811 or their health care provider, describe symptoms and travel history accurately and in detail, and follow instructions of the health care professional (New Brunswick, 2020f). If individuals are not experiencing flu-like symptoms they are considered safe to go to work, school, to participate in activities and their communities, and to socialize (New Brunswick, 2020f).

1.4 Monitoring and surveillance

The province of New Brunswick uses the case definition for COVID-19 in accordance with the Public Health Agency of Canada (PHAC) (Saint John Regional Hospital, 2020a).

Screening and surveillance

As of March 24, a probable case of COVID-19 is defined as a person with fever (over 28 degrees Celsius) and/or new onset of cough, and who meets the COVID-19 exposure criteria, and whose laboratory test is inconclusive, negative or positive but not confirmed by the National Microbiology Laboratory (NML) (Saint John Regional Hospital, 2020a).

A memo released on March 26 outlined surveillance measures for COVID-19, recommending that any symptomatic health care worker or staff working in health care facilities be tested regardless of travel history (New Brunswick, 2020af). As well, in hospitals, including emergency rooms (ER), a maximum of 5 sentinel specimens per hospital must be labelled sentinel ER swabs and be from patients who present to emergency departments with fever or cough but no exposure history (New Brunswick, 2020af).

Screening at hospitals also takes place across the province. On the Saint John Regional Hospital's website, the patient flow pathway for patient screening is outlined, including signage outside the building, screening from a Registered Nurse (RN) upon entry, and clear indication about how patients who are showing symptoms of COVID-19 will be separated from other patients in the hospital emergency department (Saint John Regional Hospital, 2020b). The website outlines the questions that will be asked of individuals at each state of this process.

Contact tracing

According to the Saint John Regional Hospital, a close contact is defined as, "a person who provided care for the patient, including healthcare workers, family members or other caregivers, or who had other similar close physical contact or who lived with or otherwise had close prolonged contact with a probable



or confirmed case while the case was ill" (Saint John Regional Hospital, 2020a). In a news release published on March 15, the Premier stated that the province was conducting active contact tracing by regional public health officials (New Brunswick, 2020q).

Projections and modelling

On April 9, the provincial government released modelling showing various scenarios and the impact of actions by the government (New Brunswick, 2020as). The projections indicated that with no public health measures in place the province could have up to 5,600 deaths, however, with measures in place the number of deaths could range from 550 to 1,750. The province confirmed that they were using the modelling to prepare for various scenarios. As of July 21, the province reported 2 COVID-19 deaths (New Brunswick, 2020bw).

1.5 Testing

Residents of New Brunswick are advised to use the online <u>self-assessment tool</u> to help determine if they should be tested for COVID-19 (New Brunswick, 2020b). The assessment tool was launched in the province on March 21 (New Brunswick, 2020m). After completing the self-assessment tool, residents can contact their primary care provider or call 811 for guidance on getting tested.

Assessment centres

The regional health authorities have opened community assessment centres to allow those who have been identified as high risk to be tested without going to an Emergency Department (New Brunswick, 2020t). They are appointment based and all appointments are made through Tele-Care 811 (New Brunswick, 2020t). Assessment centres are currently set up in Moncton, Saint John, Miramichi, Fredericton and Upper River Valley (Horizon Health Network, 2020a). On May 29, the government announced that additional mobile testing centers would be set up at Campbellton Memorial Regional Civic Centre and the Inch Arran Arena. Individuals must call Tele-Care 811 or health care professional to schedule an appointment (New Brunswick, 2020bl). Public health officials are beginning to establish mobile testing the affected communities and are urging health-care workers to refrain from working in multiple locations to reduce risk of transmissions (New Brunswick, 2020bh).

Testing criteria

The initial symptom list for testing included a fever above 38 degrees Celsius, a new cough or worsening chronic cough, sore throat, a runny nose and headache (New Brunswick, 2020at). On March 27, the Government of Nova Scotia announced they would be expanding testing criteria to cover healthcare workers who have not travelled but have developed a new cough, fever or shortness of breath (New Brunswick, 2020ag). On April 28, testing criteria were expanded again to include new symptoms of new onset of fatigue, a new onset of muscle pain, diarrhea, loss of sense of taste or smell, and in children, purple markings on the fingers or toes (New Brunswick, 2020bc).

Laboratory and testing capacity

On March 11, when the first presumptive case of COVID-19 was announced, diagnostic testing was conducted at the Dr. Georges-L. Dumont University Hospital Centre's (DGLDUHC) laboratory in Moncton and additional confirmation testing was conducted at the NML in Winnipeg, Manitoba (New Brunswick, 2020j).



On March 24, it was announced that the DGLDUHC laboratory could conduct final confirmation of any tests completed in New Brunswick, without sending them to the NML in Winnipeg (New Brunswick, 2020ac). In the government update released on March 25, the CMOH confirmed that testing at the laboratory was meeting the existing and anticipated demand (New Brunswick, 2020ad).

On April 2, the Government of New Brunswick announced that the province had received a donation from the Saint John Regional Hospital Foundation's COVID-19 emergency fund to upgrade testing and purchase equipment (New Brunswick, 2020ao). The investment helped seven regional health authorities access test results faster.

Test results and reporting

On April 21, the Government of New Brunswick announced a new secure portal (<u>MyHealthNB</u>) for individuals to access COVID-19 test results. The CMOH in the province stated that this will enable quicker access to test results (New Brunswick, 2020ax). Cases are reported according health zones in the province, for example, Zone 1 being the Moncton and South-East Area of the province (NBHC, 2020)

2. Ensuring sufficient physical infrastructure and workforce capacity

Infrastructure and workforce capacity are crucial for dealing with the COVID-19 outbreak, as there may be both a surge in demand and a decreased availability of health workers. This section considers the physical infrastructure available in the jurisdiction and where there are shortages, it describes any measures being implemented or planned to address them. It also considers the health workforce, including what jurisdictions are doing to maintain or enhance capacity, the responsibilities and skill-mix of the workforce, and any initiatives to train, protect or otherwise support health workers.

2.1 Physical infrastructure

Health system capacity

In an effort to free up hospital capacity, on March 17, the Government of New Brunswick government announced that they were introducing an "urgent nursing home placement process" to move 65 individuals currently receiving alternative levels of care in hospital to nursing homes around the province (New Brunswick, 2020u).

According to the projections released April 9, the province had 82 intensive care unit (ICU) beds ready for COVID-19 patients, and 200 acute care beds (New Brunswick, 2020as). The projections indicated that the hospital bed capacity was sufficient for New Brunswick's cases at the time and predicted that the province would only see a shortage if the cases rose as they did in Northern Italy. Since then, the number of cases in the province has decreased (New Brunswick, 2020ax).

Medical equipment and supplies

On April 1, Premier Blaine Higgs announced that he is confident that the province has the medical needs to address the needs of the current pandemic, and advised that to maintain resources they must be used appropriately (New Brunswick, 2020am). However, a memo from the Department of Health to all medical practitioners in the province on March 10, indicated that while the New Brunswick Diagnostic Virology Reference Centre had stockpiled kits, their stock was depleted and there were insufficient resources to



replenish it (New Brunswick, 2020h). This memo directed healthcare workers to limit the collection of samples for respiratory infections (such as influenza) where the test results would not influence clinical care, and instead prioritize testing for COVID-19.

According to news releases, the province has experienced a shortage of COVID-19 tests since the beginning of the pandemic in the province (Jones, 2020). According to a statement by the Premier, in early April the province was just days away from running out of testing supplies, despite having very low testing rates compared to other provinces in Canada (Jones, 2020). The Premier called on the federal government to distribute tests to the province to achieve a "fairer distribution" of tests being distributed across the country (Jones, 2020).

On May 8, the province announced that they would be developing a website that will have a list of suppliers who are able to sell personal protective equipment (PPE) to individuals and private industry (New Brunswick, 2020bg). As well, on the provincial website there is a Strategic Procurement page with information on how to sell PPE to the Government and businesses in the community as well as where to purchase PPE (Service New Brunswick, 2020).

2.2 Workforce

Workforce training

The Government of New Brunswick has published setting-specific COVID-19 guidance for primary care providers in a community setting, community pharmacies, homecare workers, LTC facilities, and adult residential facilities (New Brunswick, 2020d).

Workforce support

In an effort to provide support to healthcare workers, on March 16, the Government of New Brunswick announced that facilities providing childcare services would remain open to support essential service workers (New Brunswick, 2020r). Information for essential service workers on how to access child care services is now available through the Department of Education and Early Childhood Development's <u>Parent</u> <u>Portal</u> or by calling 1-833-221-9339 (New Brunswick, 2020r). As well, on March 20, the government announced that essential workers will not be required to pay double fees for child care services, meaning that the department will cover the costs of emergency child care if essential workers need to pay to reserve a space at their usual child care facility (New Brunswick, 2020y). For those families that are paying for a spot in a facility that has closed and not laid off its workers, they will not be required to pay for emergency child care facilities provided by the government (New Brunswick, 2020y).



3. Providing health services effectively

This section describes approaches for service delivery planning and patient pathways for suspected COVID-19 cases. It also considers efforts by jurisdictions to maintain other essential services during periods of excessive demand for health services.

3.1 Planning services

On March 20, Vitalité Health Network, which is one of two health authorities in New Brunswick, announced new measures to be implemented in their facilities to safeguard staff and patients through the use of screening methods and PPEs (Vitalite Health Network, 2020).

Prioritized reduction of services

In the process of provincial reopening, on May 8, the province announced that it would be resuming electives surgeries and non-emergency health services. This includes dental, physiotherapy, optometry, and massage therapy services (New Brunswick, 2020bg).

Additionally, as of May 11, the Horizon Health Network began resuming priority elective surgeries throughout the province. Priority was said to be given to those with cancer or high acuity and that services would be provided by appointment only with COVID-19 testing done prior to the appointment date (Horizon Health Network, 2020b).

On May 28, the emergency department at Campbellton Regional Hospital closed due to the increased risk of COVID-19 infection. Non-urgent and elective surgeries were put on hold at this facility and all emergency patients were redirected to Chaleur Regional Hospital (New Brunswick, 2020bk).

3.2 Managing cases

On April 13, the government announced that steps to ensure the continued safety and security of nursing home patients is ensured by implementing some protocols. No visitors of any kind, advanced screening processes for staff prior to entering the facilities (temperature and verbal screening), instructing staff and on-site physicians to treat in the home and minimize transfer to hospitals, and ongoing training for staff in the proper use of PPEs and direct patient contact (New Brunswick, 2020at).

The Extra-Mural Program (EMP), the provincial home healthcare program for individuals who might otherwise require hospitalization (New Brunswick, n.d.), has continued to operate throughout the COVID-19 pandemic. The government of New Brunswick announced on April 15 that the EMP is participating in efforts to reduce the risk of spreading the virus by providing care remotely (when possible) and screening patients and employees (New Brunswick, 2020av).

EMP professionals and Ambulance New Brunswick helped mitigate the Manoir de la Vallee LTC home outbreak by assisting with the coordination of care for residents with regional staff from the Department of Social Development, Department of Health, and Vitalite Health Network (New Brunswick, 2020bm). On June 8, the government outlined that it has isolated the wing in Manoir de la Vallee which was the source for the outbreak, and has tasked additional staff and equipment to help deal with containment. The Pandemic Task Force has also put in extra measures to ensure that staff movement within the home is limited (New Brunswick, 2020bq).



3.3 Maintaining essential services

Health services and virtual care

On March 17, the Department of Health has decided to allow 811 health-care professionals to provide virtual services through secure video for routine prescription renewals and follow up health advice. Over the phone services are available as well (New Brunswick, 2020u).

On March 25, the government in partnership with Red Cross has established a help line (1-800-863-6582) to assist those in isolation. This service will provide a wide range of services and is available to residents and visitors (New Brunswick, 2020ad).

Pharmaceutical services and supply

On March 18, the province announced that pharmacies will provide patients with a 30-day supply of medication to ensure stable and continued supply. Unnecessary requests or stockpiling of medication could create shortages and is not advised (New Brunswick, 2020v).

Effective March 21, people registered under New Brunswick's public drug plans will only be required to pay the initial co-payment on a prescription fill or refill. This means that payment will only be required for the first 30-day fill of a 90-day prescription, and not thereafter (New Brunswick, 2020aa).

On April 23, the government announced that they would be removing the 30-day limit on some prescription medication where risk of shortages would not be a factor. This means that pharmacies will be able to dispense some prescription medications that require more than a 30-day use all at once. However, this will not apply to all prescription medication and is subject to change (New Brunswick, 2020ay).

Mental health and addictions services

On March 17, psychiatrists have also been authorized to administer services virtually via secure chat (New Brunswick, 2020u). On June 25, the government encouraged all New Brunswickers to contact their local Community Mental Health or Addiction Services offices should they require their services. The New Brunswick branch of the Canadian Mental Health Association (CMHA) is providing live webinars, resources, videos, and other services on their website for public use. The CHIMO Helpline is available for immediate crisis intervention province-wide, available 24/7 (1-800-667-5005) (New Brunswick, 2020bu).

Services for subpopulations and Indigenous communities

On March 18, homeless shelters began reinforcing safe hygiene practices, including constant handwashing between clients and regular thorough cleaning of the shelters. Most shelters are operating at or near capacity but plans have been made to create temporary accommodations for possible COVID-19 positive clients (New Brunswick, 2020v).

On June 25, the government reminded people that The Hope for Wellness Helpline (1-855-242-3310), is offering mental health and crisis intervention services to all Indigenous people (New Brunswick, 2020bu).

Services for seniors and LTC services

On March 17, on the recommendation of the Department of Social development, 65 individuals were moved from hospital beds to nursing homes to receive alternative levels of care. This is done in an effort



to ensure that seniors are receiving the quality of care they need and to allow for more bed capacity in hospitals to address more serious illnesses (New Brunswick, 2020u).

Other essential services

On March 23, Service New Brunswick (SNB) centres across the province reopened for essential services only that cannot be completed online or by phone. A full list of services is available on the SNB <u>website</u> (New Brunswick, 2020aa).

Announced on March 28, and effective immediately, in-person services at SNB were suspended until April 1 (New Brunswick, 2020ai). On June 4, SNB centres in Sussex and Tracadie began to take appointments for in-person services that could not be provide virtually or over the phone (New Brunswick, 2020bo). On July 1, the government announced that all SNB centres are expected to open on July 13. Most services can still be accessed online despite the reopening (New Brunswick, 2020bx).

4. Paying for services

Adequate funding for health is important to manage the excess demands on the health system. This section considers how jurisdictions are paying for COVID-19 services. The subsection on health financing describes how much is spent on health services, where that money comes from, and the distribution of health spending across different service areas. The section also describes who is covered for COVID-19 testing and treatment, whether there are any notable gaps (in population coverage and service coverage), and how much people pay (if at all) for those services out-of-pocket.

4.1 Health financing

The provincial 2020-21 budget of CA\$10.2 billion was announced on March 13. This money will be available to the health system and public service in response to the COVID-19 outbreak (New Brunswick, 2020n).

Testing and research financing

On April 2, the province received a donation from Saint John Regional Hospital's Foundation's COVID-19 fund to upgrade testing throughout the province and purchase new equipment. Regional health authorities will have the ability to receive CVOID-19 results faster (New Brunswick, 2020ao).

Medical equipment and supply financing

On April 1, the government of New Brunswick announced that PPE financing will be available from the federal government's initial funding budget of CA\$2 billion for various medical supplies; however the exact amount that will be made available to New Brunswick was not announced (New Brunswick, 2020am).

On April 2, the government announced that with funds Saint John Regional Hospital Foundation's COVID-19 emergency fund, it would purchase two portable Extracorporeal Membrane Oxygenation Life Support Systems to help treat victims of COVID-19 (New Brunswick, 2020ao).



Workforce financing

On April 15, the government of New Brunswick announced that it would be exploring options to increase the salaries of essential workers, including those employed at LTC facilities making less than CA\$2,500 per month (New Brunswick, 2020av). Details were later announced on May 20, where the government proposed a new monthly top-up program for front-line workers to compensate them with an extra CA\$500 for 16 weeks. This applied to sectors that deal with childcare facilities, home support, special care homes and community residences, homes shelters and food banks, outreach and transition homes. Payments will occur every four weeks (New Brunswick, 2020bi).

Health services, mental health, and virtual care financing

On May 20, United Way planned to donate the proceeds from a t-shirt fundraiser to mental health initiatives in New Brunswick (New Brunswick, 2020bi).

Other financing

On March 29, the government announced that applications for the 2020 Low-income Seniors' Benefit would become available on April 1. The benefit will provide CA\$400. To be eligible, a person must have received federal funding from the umbrella of the *Old Age Security Act* in the past (New Brunswick, 2020aj).

4.2 Entitlement and coverage

In order to receive access to healthcare with the province, residents are required to be insured under New Brunswick Medicare. Residents must undergo a three-month waiting period before they can receive coverage. International or domestic students who are enrolled in classes, and posses a valid Canadian Immigration Document are also covered (New Brunswick, 2020ca). The province of New Brunswick will, for the remainder of the COVID-19 pandemic, cover the costs associated with care of individuals who are not insured or who do not meet the criteria for coverage under Medicare. This is done in an effort to ensure everyone seeks the appropriate medical attention during the COVID-19 pandemic (New Brunswick, 2020c). The government has extended the expiration dates of health cards until July 31, until otherwise announced (FCNB, 2020).

5. Governance

The governance of the health system with regard to COVID-19 relates to pandemic response plans and the steering of the health system to ensure its continued functioning. It includes emergency response mechanisms, as well as how information is being communicated, and the regulation of health service provision to patients affected by the virus.

5.1 New Brunswick's pandemic response plan

On March 1, the Premier announced that he will be conducting daily meetings with Public Health and Emergency Measures Organization leaders to receive updates on the COVID-19 situation in New Brunswick and on the emergency preparedness plan for the province (New Brunswick, 2020e).



On March 12, shortly after the first presumed case of COVID-19 in the province, a new cabinet committee on the novel coronavirus was established with a focus on providing leadership, coordination and preparedness in response to the pandemic (New Brunswick, 2020I). At the end of March, the province announced that its pandemic operational plan was being revised to meet the needs of New Brunswick and to handle the increase in COVID-19 cases (New Brunswick, 2020al). A subsequent announcement on April 1 stated that the state of emergency will be enforced with fines ranging from CA\$292.50 to CA\$10,200 for those not complying with emergency laws (New Brunswick, 2020am).

On April 6, the province announced the creation of The Pandemic Task Force that will have decisionmaking authority over the health-care system, both regional health authorities, primary care, and LTC systems (New Brunswick, 2020aq).

5.2 New Brunswick's framework for reopening

On April 21, the province first announced the making of New Brunswick's recovery plan (New Brunswick, 2020ax). On April 24, the government announced its plan to re-open the province (New Brunswick, 2020az). The Recovery Guidance document was released shortly after on April 26 that outlines the colour-coded health alert levels for reopening social and economic services. This document will outline public health measures for all services during the first phase, including businesses, educational facilities, health-care system, recreational activities, and cultural events (New Brunswick, 2020ba).

The colour-coded alert levels will allow health care experts to monitor the situation in New Brunswick and base their decisions on evidence from the province. At any time, restrictions may be reintroduced if the province is at risk for resurgence of COVID-19 (New Brunswick, 2020az). The timeline of the recovery plan and details about each level, based on the <u>New Brunswick provincial website</u>, are presented below:



Red level: prior to April 29, 2020

The Red level focuses on flattening the curve and containing the virus as quickly and efficiently as possible. There is no reopening scheduled for this level (New Brunswick, 2020az).

Orange level: began April 29, 2020

The Orange level intends to create a balance between reopening the province while preventing a resurgence of COVID-19. On April 29, the province began transitioning to this level based on the evidence from the past six weeks of lockdown and restrictions (New Brunswick, 2020az). This level also brought about the resumption of elective surgeries and limited reopening of businesses and services (New Brunswick, 2020bg).



Yellow level: began May 22

The Yellow level aims to further reopen social and economic services once control over transmission of the virus has been established (New Brunswick, 2020az).

On May 22, the government announced its plan to transition the province to this level (New Brunswick, 2020bj). The transition began on June 5 in all areas of New Brunswick, except the Campbellton region (Zone 5) which will remain Orange (New Brunswick, 2020bn).

On May 27, the Campbellton region of New Brunswick, designated Zone 5, will be transitioning from Yellow to Orange as a flare of COVID-19 cases erupts (New Brunswick, 2020bh). Orange level restrictions now apply in this jurisdiction until further notice (New Brunswick, 2020bh). On June 24, the region of Campbellton has announced that it will begin transitioning back to Yellow phase on June 26, after the state of emergency order is set to be renewed for the province (New Brunswick, 2020bt). On June 26, 2020, the government announced that the region of Campbellton alongside the rest of the regions in the province have successfully transitioned to the next level of reopening, Yellow (New Brunswick, 2020bv).

Green level (date to be determined)

The Green level represents the return to normalcy after a vaccine becomes available or more information becomes available as to how we can protect people from the virus.

Category	Dates and Relevant Notes
Schools, childcare facilities and youth camps	Students in post-secondary education: May 8 All regulated child care centres: May 19 (New Brunswick, 2020bg)
Non-essential businesses and services	Museums, galleries, libraries, restaurants, malls: May 8 (New Brunswick, 2020bg). Swimming pools, saunas, waterparks, gyms, dance studios, rinks and indoor recreational facilities, pool halls and bowling alleys: May 29 with limited capacity (New Brunswick, 2020bj). Churches, swimming pools, saunas, waterparks, rinks, indoor recreational facilities and organized sports: June 19 with maximum occupancy (New Brunswick, 2020bs). All remaining businesses: June 26 (New Brunswick, 2020bs).
Public and private gatherings	Two-household bubbles: April 24 (New Brunswick, 2020az). Gathering of 50 or less: May 29 (New Brunswick, 2020bj). All organized sports: June 19 (New Brunswick, 2020bs). Concerts and festivals: December 31 (New Brunswick, 2020az).
Outdoor facilities	Golf course, driving ranges, recreational fishing and hunting: April 24 (New Brunswick, 2020az). Day camps and ATV trails: May 8 (New Brunswick, 2020bj). Overnight camps: June 19 (New Brunswick, 2020bs)

Table 1. Overview of key re-openings



Long-term care facilities	One visitor (two if support is required): June 19 (New Brunswick, 2020bs).
Mobility and travel	Carpooling: April 24 (New Brunswick, 2020az). Travel between Atlantic Provinces: July 3 (New Brunswick, 2020bt).

6. Measures in other sectors

Many measures beyond the immediate scope of the health system are being taken to prevent further spread of the virus. This section contains information on many of these areas, including border and travel restrictions and economic and fiscal measures, among others.

6.1 State of Emergency

On March 19, the provincial government declared a state of emergency under the authority of the *Emergency Measures Act* (New Brunswick, 2020x). Since then the state of emergency has been extended eight times for a period of 14 more days, including extensions on April 16 (New Brunswick, 2020aw), April 30 (New Brunswick, 2020bd), May 14 (New Brunswick, 2020aw, p. 19), May 28 (New Brunswick, 2020bk), June 11 (New Brunswick, 2020br), June 26 (New Brunswick, 2020bv), and July 9 (New Brunswick, 2020by).

6.2 Border control, mobility, and travel restrictions

Provincial travel advice is available on the <u>provincial website</u> and outlines important notices, guidance on travelling outside Atlantic Canada and travelling into New Brunswick, as well as border management protocols.

Internal travel

In an effort to reduce the spread of COVID-19, various measures have been implemented for public transportation across the province. For example, Fredericton Transit increased cleaning, implemented signage on buses to advise passengers to exercise safe social distancing, restricted capacity to a maximum of 9 passengers and effective June 29, require masks on all transit systems (Fredericton, 2020).

External travel

On March 1, Premier Blaine Higgs announced that travellers who are returning to New Brunswick need to monitor their symptoms and should call Tele-Care before going to a hospital or doctors office (New Brunswick, 2020e). On March 9, a new update stated that people arriving from Iran or the Chinese provinces of Hubei should isolate for 14 days regardless of symptoms (New Brunswick, 2020g). As mentioned in Section 1.3, all travelers returning to the country from anywhere in the world must now monitor themselves for symptoms for 14 days (New Brunswick, 2020f).

On March 25, the Government of New Brunswick announced that restrictions would be implemented for travellers arriving from outside the province, requiring interprovincial travellers to isolate for 14 days (New Brunswick, 2020ad). According to the announcement, travellers entering from Quebec, Prince Edward Island and Nova Scotia will be stopped and contact information as well as intended destinations would be collected (New Brunswick, 2020ad).



On April 28, the provincial government announced that they would be restricting temporary foreign workers from entering the province (New Brunswick, 2020bc). In the same announcement, rules were set out for post-secondary students entering and leaving the province. According to the new rules, students from outside the province may enter the province for a period of not more than 24 hours to remove belongings from their student residence, and if they decide to stay longer, the 14-day isolation rule applies. Students leaving the province to remove belonging from a student residence in another province must also self-isolate for 14 days (New Brunswick, 2020bc). On May 29, temporary foreign workers were allowed to enter the province under strict public health guidance, including a 14 day isolation period (New Brunswick, 2020bj).

On June 24, the provincial government announced that effective July 3, residents of the Atlantic provinces can travel within the four provinces without being required to self-isolate (New Brunswick, 2020bt). A new <u>pre-travel registration website</u> was announced on July 9 that will help travelers verify that they have meet the health screening criteria before they enter the province (New Brunswick, 2020bz).

6.3 Economic measures

Public financial support

On March 24, the Government of New Brunswick announced that they would provide a one-time income benefit to workers and self-employed people who have lost their job due to COVID-19 (New Brunswick, 2020ac). The CA\$900 benefit was administered through the Red Cross and aimed to bridge the time in between when people lost their jobs and when they would receive federal benefits. This payment will begin on April 2, 2020 (New Brunswick, 2020ag). As of April 7, 2020, over CA\$20 million has been paid out towards the income benefit (New Brunswick, 2020ar).

On April 3, the Government of New Brunswick announced The Emergency Bridging Fund for Vulnerable Post-Secondary Students to support students affects by the impacts of the COVID-19 pandemic. Students will be provided a one-time payment of CA\$750 (New Brunswick, 2020ap)

On May 20, the Government of New Brunswick announced they had sent a written request to the federal finance minister outlining a program to provide a monthly top-up of CA\$500 for 16 weeks for front-line workers in various sectors including: early learning and childcare facilities, home support, special care homes, community residence and group homes, homeless shelters and food banks, and domestic violence outreach and transition homes. Workers must earn CA\$18 or less to be eligible (New Brunswick, 2020bh). Amendments were made to the program on July 14 to include private sector home care support workers and early learning and childcare enhanced support workers who provide direct client care (New Brunswick, 2020cb).

Sectoral and business financial support

On March 18, 2020, the federal government announced their CA\$27 billion in direct support to Canadian workers and businesses with the Premier of New Brunswick to determine what role the province will play in this support (New Brunswick, 2020v). Following this, on March 26, the Government of New Brunswick announced they would be investing up to CA\$25 million for small businesses to provide loans up to CA\$200,000 (New Brunswick, 2020ae). As well, another CA\$25 million would be invested in working



capital for medium-sized to large employers to help businesses facing difficulties because of COVID-19 (New Brunswick, 2020ae)

On April 21, 2020, the government announced that it would be increasing support for non-profit organizations through the Community Investment Fund, providing grants from CA\$500 to CA\$10,000 (New Brunswick, 2020ax).

The Government of New Brunswick has also committed to deferring loan and interest repayments for up to six months on a case-by-case basis (New Brunswick, 2020u). As well, if a business did not pay taxes by the deadlines on May 31, penalties would be reviewed to see if the penalty can be waived due to financial challenges (New Brunswick, 2020u).

Maintaining the supply of food and essential goods

In various provincial news releases, including one on March 18, the government assured residents that the Department of Social Development was working with food banks, soup kitchens, and agencies such as Meals on Wheels, to ensure the continued provision of services (New Brunswick, 2020v). The provincial government also committed to providing additional financial support to these organizations if they experienced an influx of new clients (New Brunswick, 2020v), however, further details about the funding support have not been released.

6.4 Maintaining services for schools and businesses

Internet service and connectivity support

In an effort to promote social connectivity, on May 6, the provincial government announced a new Special Projects program to help fund online artistic and cultural performances (New Brunswick, 2020be). Through the program, artists can receive up to CA\$2,000 for an artistic presentation on social media (New Brunswick, 2020be).

On May 6, the government also announced home learning supports for students through a CA\$860,000 investment in 1,000 iPads with data plans, 500 laptops and 300 MiFi Hubs to support home learning for students (New Brunswick, 2020bf).

Home education support

On April 27, the Government of New Brunswick announced a partnership with the University of New Brunswick, St. Thomas University, Mount Allison University and the Université de Moncton to help grade 12 students start post-secondary studies by offering distance learning courses (New Brunswick, 2020bb).

Outreach and volunteer services

On April 30, the government announced that "WorkingNB" services, including counselling for career or training opportunities, are available to any employer or job-seeker in the province looking for support (New Brunswick, 2020bd). As well, on this date, the government announced that starting May 4 a new virtual job-matching platform would be launched (New Brunswick, 2020bd). The platform will connect people in the province with position that are usually filled by temporary foreign workers (New Brunswick, 2020bd). On May 11, the provincial government confirmed that there had been over 500 positions posted on the site, with 367 job seekers with active accounts applying for these positions (New Brunswick, 2020bh).



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Appendix A: List of Acronyms and Abbreviations

CMHA	Canadian Mental Health Association
СМОН	Chief Medical Officer of Health
DGLDUHC	Dr. Georges-L. Dumont University Hospital Centre
EMP	Extra-Mural Program
ER	Emergency room
ICU	Intensive care unit
LTC	Long-term care
NB	New Brunswick
PPE	Personal protective equipment
SNB	Service New Brunswick



Appendix B: Key Sources

COVID-19 Self- Assessment	https://www2.gnb.ca/content/gnb/en/departments/ocmoh/cdc/content/r espiratory_diseases/coronavirus/coronavirusexposure.html#/app/sympto m-checker/guides/399/what-to-do
Education and Early Childhood Development: Parent Portal	https://www.nbed.nb.ca/parentportal/en/
Horizon Health Network	https://en.horizonnb.ca/
MyHealth NB	https://myhealth.gnb.ca/
New Brunswick Government Website	https://www2.gnb.ca
Registering Travel into New Brunswick	https://www2.gnb.ca/content/gnb/en/corporate/promo/travel- registration.html
Self-Isolation Guidance for Asymptomatic Individuals	https://www2.gnb.ca/content/dam/gnb/Departments/eco- bce/Promo/covid-19/self-isolation_guidance_travelers_into_nb-e.pdf
Vitalite Health Network	https://www.vitalitenb.ca/
WorkSafe NB	https://www.worksafenb.ca/

The views expressed by the authors are not intended to represent the views of the North American Observatory on Health Systems and Policies.



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About NAO

The North American Observatory on Health Systems and Policies (NAO) is a collaborative partnership of interested researchers, research organizations, governments, and health organizations promoting evidence-informed health system policy decision-making.

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